

**NEBRASKA INVESTMENT FINANCE AUTHORITY**  
**APPLICATION FOR LOW-INCOME HOUSING TAX CREDIT**

**A. INSTRUCTIONS AND CERTIFICATION**

The undersigned applicant hereby makes application to the Nebraska Investment Finance Authority (“NIFA”) for a reservation of federal low-income housing tax credits (“LIHTC”). Applications must be submitted to NIFA no later than 5:00 p.m. on the last day of the application cycle as described in NIFA’s LIHTC Allocation Plan. For each application submitted, NIFA must receive an original and two copies. Each copy of the application must be standard two-hole-punched at the top and all exhibit numbers must be clearly identified by tabs. Failure to submit the required tabbed copies will result in the application being returned to the applicant without NIFA’s review. The original application package must have an original signature. Certain items in the application package (architect’s drawings, oversized maps, brochures, etc.) need not be reproduced. The application may be clipped or banded for delivery purposes but should not be bound. If the application is submitted via facsimile, an original and copies must follow. The application must be filled out completely, with all questions and spaces completed. If a question does not pertain to your project, insert “N/A” in the answer space.

The undersigned hereby certifies that the information set forth in this application and in any exhibits in support thereof is true, correct and complete. The undersigned understands that any misrepresentation may result in cancellation of an LIHTC reservation or allocation. The undersigned also agrees that NIFA may request additional information to evaluate this application:

\_\_\_\_\_  
Project Owner/Developer Signature

\_\_\_\_\_  
Date

**B. PROJECT OVERVIEW**

**1. PROJECT NAME AND LOCATION**

Project Name \_\_\_\_\_

Project Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_

Provide a complete legal description and label it “*Exhibit 1.*”

**2. TYPE OF LIHTC REQUESTED**

\_\_\_\_\_ New Construction without Federal Subsidy

\_\_\_\_\_ New Construction with Federal Subsidy

\_\_\_\_\_ Rehabilitation without Federal Subsidy

\_\_\_\_\_ Rehabilitation with Federal Subsidy

Acquisition/Rehabilitation without Federal Subsidy       Acquisition/Rehab with Federal Subsidy  
 Acquisition/Rehabilitation with a 10-year waiver       Tax-Exempt Bond Financing Allocation

- (a) Will the project owner receive any federal, state or local subsidy/assistance?  YES     NO  
 (If "YES," provide a detailed description of the type of subsidy the project will receive and attach it as "*Exhibit 2.*")
- (b) Does this project provide a lease-purchase option to qualified tenants?  YES     NO
- (c) Please state the date of the most recent sale or transfer of the building(s). \_\_\_\_\_
- (d) Was rehabilitation work greater than 25% of the building's adjusted basis performed by the previous owner in the last 10 years?  YES     NO
- (e) Was the building occupied or suitable for occupancy at the time of purchase?  YES     NO
- (f) If the building is a single-family detached residence, was it used by the previous owners as their principal residence during the past 10 years?  YES     NO
- (g) Is the project located in a qualified census tract? (See list on page 20F).  YES     NO

County \_\_\_\_\_

Census tract number \_\_\_\_\_

### 3. LIHTC SET-ASIDE CATEGORIES

- (a) Applicant is requesting LIHTC from one of the following categories:
- For Profit
  - Non-profit
- (b) Applicant is requesting LIHTC from the following categories:
- Urban (MSA)
  - Rural (not in an MSA)
- (c) Applicant is requesting LIHTC under the Crane Program:
- YES
  - NO

#### 4. MINIMUM SET-ASIDE ELECTION

Pursuant to IRC Section 42(g)(1)(A) and (B), the term “qualified low income housing project” means any project for residential rental property if the project meets the requirements of subparagraph (A) or (B), whichever is elected by the taxpayer. Please select one of the following set-aside categories:

- 20-50 test: (A) Project meets the requirements of this subparagraph if 20% or more of the residential units in such project are both rent-restricted and occupied by individuals whose income is 50% or less of the area median gross income.
- 40-60 test: (B) Project meets the requirements of this subparagraph if 40% or more of the residential units in such project are both rent-restricted and occupied by individuals whose income is 60% or less of the area median gross income.

#### 5. RENT FLOOR ELECTION

**Rent Floor Election**—The project owner elects the gross rent floor in IRC Section 42(g)(2)(A) to take effect as indicated below (check one only):

- On the date of NIFA’s initial allocation of LIHTC.
- On the placed-in-service date of the building(s).

#### C. OWNER/DEVELOPER INFORMATION

Please note that NIFA reserves, commits and allocates LIHTC to partnerships, limited liability companies, corporations and individuals. Reservations, commitments and allocations of LIHTC are non-transferable, and any change in ownership of the project requires NIFA’s approval. NIFA verifies project ownership through closing documents, warranty deeds and title reports. NIFA reserves the right not to reserve LIHTC for any project, regardless of ranking/scoring, if NIFA determines, in its discretion, that the project does not further the purposes and goals of NIFA. For purposes of this determination, the information taken into account includes, but is not limited to, comments of officials of local governmental jurisdictions and the owner/developer prior experience and performance with NIFA’s and other states’ LIHTC programs. The prior performance of the project’s owner/developer includes, but is not limited to, progress made with previous LIHTC reservations, project compliance and payment of monitoring fees.

**1. APPLICANT/OWNERSHIP INFORMATION**

- (a)  The applicant is a current project owner and anticipates retaining ownership.
- The applicant is the project developer and will be part of the final ownership entity.
- The applicant is the project developer and will not be a part of the final ownership entity.
- Other: (Provide a detailed explanation of the ownership entity to be formed and label it “*Exhibit 3.*”)

(b) Project Ownership Name (LIHTC recipient) \_\_\_\_\_

Applicant Name \_\_\_\_\_

Use exact legal name(s)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number (\_\_\_\_) \_\_\_\_\_ Facsimile Number (\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_

- (c) Have you ever sold or transferred LIHTC to a new ownership entity prior to placing the buildings in service or within a year thereafter?  YES  NO

If “YES,” provide the full details of the transfer, as “*Exhibit 3(a)*,” including the name and address of the new entity, and a contact person; also provide the project’s name, address and development number, and the date of the transfer(s).

- (d) Indicate the project’s ownership entity below: (For items followed by an asterisk, include a copy of the articles of incorporation, bylaws, partnership agreement, operating agreement and other relevant materials regarding legal status as “*Exhibit 4.*”)

Federal I.D. Number: \_\_\_\_\_

- |  |   |
|--|---|
| <input type="checkbox"/> Limited Partnership*                | <input type="checkbox"/> Non-profit organization*   |
| <input type="checkbox"/> Corporation*                        | <input type="checkbox"/> Limited Liability Company* |
| <input type="checkbox"/> Individual (SSN ____ - ____ - ____) | <input type="checkbox"/> Other (specify) _____      |

- (e) Provide the following information regarding the general partner(s), managing member(s) or principal owner(s):

_____	_____	_____ %
Name	Telephone Number	Ownership Interest
_____	_____	_____ %
Name	Telephone Number	Ownership Interest
_____	_____	_____ %
Name	Telephone Number	Ownership Interest

If necessary, provide an additional page labeled as “*Exhibit 5.*”

Does the ownership entity currently exist?  YES  NO

If “NO,” provide an estimated date for formation of the ownership entity: \_\_\_\_\_. NIFA requires that materials regarding the ownership entity be provided upon its formation.

**PLEASE NOTE THAT THE OWNERSHIP ENTITY MUST BE FORMED, AND THE FEDERAL TAX I.D. NUMBER ESTABLISHED, PRIOR TO THE ISSUANCE OF A CARRYOVER ALLOCATION OR IRS FORM(S) 8609.**

**2. CONTACT INFORMATION**

**Note:** *Up to* the placed-in-service date for the project, NIFA will mail all correspondence and notifications to the contact person listed in Section 2(a) below.

- (a) Contact person **during** the application/allocation process will be:

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number (\_\_\_\_) \_\_\_\_\_ Facsimile Number (\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Participatory Role (e.g., sponsor, consultant, etc.) \_\_\_\_\_

**Note:** *After* the placed-in-service date for the project, NIFA will mail all correspondence and notifications to the contact person listed in 2(b) below. Unless otherwise authorized by this contact person in writing, all communication with applicant/owner shall be conducted through the contact person. The contact

person's statements, representations and/or other information shall be deemed to be that of the applicant/owner. Furthermore, no information shall be released (other than information released to the IRS and other federal and state agencies or departments) without prior consent of the contact person.

(b) Contact person **after** the project is placed in service will be:

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number (\_\_\_\_) \_\_\_\_\_ Facsimile Number (\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Participatory Role (e.g., sponsor, management agent, owner, etc.) \_\_\_\_\_

### 3. THE DEVELOPMENT TEAM

(a) NIFA must be satisfied that those who will own or operate the project are familiar with and are prepared to comply with the requirements of the LIHTC program. At the time the application is filed, the applicant must be either the owner or developer of the project.

(i) If the applicant is the developer of the project, the applicant/developer must disclose whether it intends to sell or transfer the project before the LIHTC is claimed. If a sale or transfer of the project is anticipated, describe the disposition plan and timing for such disposition and attach as ***Exhibit 6.*** Failure to report this information may result in forfeiture of the LIHTC reserved or allocated to the project.

(ii) Describe the degree of control the project developer will retain in managing the project and attach as ***Exhibit 7.***

(b) Provide the full name of the firm and/or individual, street address, city, state, zip code, telephone number, facsimile number and the name of a contact person for each individual listed below and attach as ***Exhibit 8.***

- (i) Developer
- (ii) Architect
- (iii) Management Agent/Company (Federal I.D. Number \_\_\_\_\_)
- (iv) Consultant (if any)
- (v) Engineer
- (vi) General Contractor

- (vii) Project Attorney
- (viii) Syndication Firm (if any)
- (ix) Project Accountant
- (x) Bond Trustee

- (c) The applicant must disclose any and all relationships with others involved in the project (financial interests or family ties). Attach a description of any such relationships as “*Exhibit 8(a).*”
- (d) The applicant must disclose the names and addresses (including corporate officials, where applicable) of all parties that have a significant role in the project. These parties include, but are not limited to: accountants, architects, engineers, financial consultants and any other consultants, management agents, the general contractor and all subcontractors whose aggregate contract will exceed 10% of the cost of development (exclusive of the acquisition of land). Attach a description of any such relationships as “*Exhibit 8(b).*”

**D. PROJECT CHARACTERISTICS**

**1. SITE INFORMATION**

- \_\_\_\_\_ Total number of buildings in project
- \_\_\_\_\_ Number of stories in the tallest building
- \_\_\_\_\_ Total number of units in project
- \_\_\_\_\_ Total number of LIHTC units in project
- \_\_\_\_\_ Percentage of LIHTC units in project
- \_\_\_\_\_ Total net rentable square footage in project
- \_\_\_\_\_ Total square footage for LIHTC units
- \_\_\_\_\_ Total Square Footage of the project
- \_\_\_\_\_ Percentage of floor area for LIHTC units
- \_\_\_\_\_ Total site area (land) to be used in project

(a) Percentage of floor area used for commercial space \_\_\_\_\_%

(b) Will the project owner require a manager/maintenance unit?  YES  NO

(c) Project structure will be one of the following:

- |                                 |                                     |
|---------------------------------|-------------------------------------|
| _____ Multifamily residential   | _____ Single-room occupancy         |
| _____ Single-family residential | _____ Fourplex                      |
| _____ Congregate care facility  | _____ Other (please describe below) |
| _____ Elderly housing           |                                     |
| _____ Duplex                    |                                     |

(d) Have any of the buildings in the project been condemned or are uninhabitable?  YES  NO

(e) Has the project received an allocation of LIHTC in a previous year?  YES  NO

If "YES,"

(i) State the year and the project's development number \_\_\_\_\_

(ii) Building(s) Identification Number(s) (ex.: NE-01-00xxx) \_\_\_\_\_

(iii) Are the buildings being purchased held by an institution that acquired the property through foreclosure?  YES  NO

If "YES," provide the name of the financial institution foreclosing on the property and the date of foreclosure: \_\_\_\_\_

\_\_\_\_\_

(f) Will the project involve relocation of any tenants?  YES  NO

If "YES," attach a detailed description of the proposed relocation assistance you intend to provide to the tenant as "**Exhibit 9.**"

(g) Attach a legible location map(s) and four pictures of the site taken from each direction as "**Exhibit 10.**"

(h) Provide a city location map and show the location of the project attached as "**Exhibit 11.**"

(i) Control of the project site is evidenced by (must check one) (NOTE options/contracts to purchase must be valid for 90 days beyond the submitted application dead line):

- \_\_\_\_\_ Deed
- \_\_\_\_\_ Purchase Contract
- \_\_\_\_\_ Exercise of Eminent Domain Action
- \_\_\_\_\_ Option

Expiration date of option or purchase contract: \_\_\_\_\_

Name of Seller: \_\_\_\_\_

Address of Seller: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: ( ) \_\_\_\_\_ Facsimile Number: ( ) \_\_\_\_\_



**2. PREVIOUS PARTICIPATION STATEMENT**

- (a) Provide a previous participation statement for the general partner, managing member or developer listing all the projects for which such entity has requested an allocation of LIHTC and provide the following information and attach as ***“Exhibit 12”***:
  - (i) Project Name and Location
  - (ii) Date of Application
  - (iii) Status of Project

**3. NON-PROFIT SET ASIDE ELECTION**  YES  NO

- (a) To qualify for non-profit preference, a non-profit must materially participate in the development and operation of the project throughout the project’s compliance period. Under IRC Section 469(h), “a (non-profit) shall be treated as materially participating in an activity only if the (non-profit) is involved in the operations of the activity on a basis that is regular, continuous, and substantial.”

A non-profit must demonstrate a history of material and clearly verifiable capacity to produce affordable housing, that it is operating the housing in good standing, that it conforms with the provisions of Section 501(c)(3) or 501(c)(4) of the IRC and that it performs the primary function of owner, manager or developer.

IRC Section 42(h)(5) specifies the requirements that must be met to be considered a qualified non-profit. Be sure you meet all the requirements of that section.

Indicate the type of non-profit determination for this project:

- 501(c)(3)
- 501(c)(4)

- (b) If the project is to be considered for the non-profit LIHTC set-aside, the following information must be attached and labeled as ***“Exhibit 13”***:
  - (i) Describe the non-profit’s participation in the development and operation of the project. List all names, addresses and phone numbers of board members for the non-profit organization.
  - (ii) Describe the non-profit’s ownership percentage in the project.
  - (iii) State whether the non-profit ownership is expected to remain the same throughout the compliance period.
  - (iv) Identify all paid full-time staff and sources of funds for annual operating expenses and current programs.

**4. SENIOR PROJECT**

Will the project be reserved for seniors aged 55?  YES  NO

Will the project be reserved for seniors aged 62 and older?  YES  NO

If “YES,” complete “*Exhibit 205*” and designate if project will be reserved for seniors aged 55 or 62.

**5. PROJECT INCOME INFORMATION**

(a) Check the types of rental residential or federal subsidies/assistance, if any, that will be available to this project?

- |   |   |
|---|---|
| <input type="checkbox"/> Section 8 New Construction           | <input type="checkbox"/> Section 8 Project-based Assistance |
| <input type="checkbox"/> Section 8 Substantial Rehabilitation | <input type="checkbox"/> Section 8 Moderate Rehabilitation  |
| <input type="checkbox"/> Section 8 Certificates or Vouchers   | <input type="checkbox"/> HOME Program Funds                 |
| <input type="checkbox"/> FHA Loan Guarantees                  | <input type="checkbox"/> McKinney Act Funding               |
| <input type="checkbox"/> RD 515 Rental Assistance             | <input type="checkbox"/> Other (please identify) _____      |

(b) Provide “*Exhibit 14*,” explaining in detail the planned manner in which the units will receive assistance, the number of units receiving said assistance, the number of years remaining on the contract, and any and all other information pertinent to the assistance program.

(c) Provide a copy of the contract or documentation verifying the assistance program to the project and attach as “*Exhibit 14(a)*.”

**6. UTILITY ALLOWANCE CALCULATIONS**

Provide “*Exhibit 15*,” a copy of the current Section 8 utility allowance established by the local public housing authority with jurisdiction over the subject property’s area, or other organizations that would qualify under IRC § 42(g)(2)(B)(ii).

<b>(Check One)</b>		<b>Type of Utility</b>	<b>Allowance Amount</b>				
<b>Utility Paid by Owner</b>	<b>Utility Paid by Tenant</b>		<b>Efficiency Unit</b>	<b>One Bed</b>	<b>Two Bed</b>	<b>Three Bed</b>	<b>Four Bed</b>
_____	_____	Heating (gas)	_____	_____	_____	_____	_____
_____	_____	Air Conditioning	_____	_____	_____	_____	_____
_____	_____	Lighting (electric)	_____	_____	_____	_____	_____
_____	_____	Water/Sewer	_____	_____	_____	_____	_____
_____	_____	Trash	_____	_____	_____	_____	_____
_____	_____	Cable TV (if required)	_____	_____	_____	_____	_____
Total Utility Allowance for units			_____	_____	_____	_____	_____
Total Utility Allowance paid by tenants			_____	_____	_____	_____	_____
Source of data _____							

**LIHTC UNITS ONLY**

(a) Characteristics of the LIHTC units—enter a corresponding number or “YES” if appropriate.

Number of Bedrooms per Unit	(1) Number of Units	(2) Square Footage per Unit	(1) x (2) Total Square Feet	Number of Baths per Unit	Dishwasher	Refrigerator	Parking Facilities	Washer/Dryer Hookup	Washer/Dryer Furnished	Fire Sprinklers	Security System	(3) Gross Monthly Rent per Unit	(4) Less Tenant Paid Utility	(3) - (4) = (5) Net Monthly Rent per Unit	(1) x (5) Total Net Monthly Rent
Total															

(a1) Total Number of Units in the Project: \_\_\_\_\_

(a2) Total Number of LIHTC Units in Project: \_\_\_\_\_

(a3) Total Net Monthly Rent Income from LIHTC Units: \_\_\_\_\_

**MARKET RATE UNITS ONLY**

Number of Bedrooms per Unit	(1) Number of Units	(2) Square Footage per Unit	(1) x (2) Total Square Feet	Number of Baths per Unit	Dishwasher	Refrigerator	Parking Facilities	Washer/Dryer Hookup	Washer/Dryer Furnished	Fire Sprinklers	Security System	(3) Gross Monthly Rent per Unit	(4) Less Tenant Paid Utility	(3) - (4) = (5) Net Monthly Rent per Unit	(1) x (5) Total Net Monthly Rent

Total Net Monthly Rent Income from Market Units

Other Monthly Income Source(s)

Vacancy Allowance % \_\_\_\_\_

Less:

Vacancy Allowance Amount

Total Net Monthly Income From Housing Units

(If applicable) Total Net Monthly Income From Commercial Space

Estimated Annual Increase in Rental Rates \_\_\_\_\_%

Total Net Monthly Income for the Project

**7. ANNUAL PROJECT EXPENSE INFORMATION**

(a) **General and/or Administrative Expenses**

Advertising	\$ _____
Legal	\$ _____
Accounting/Auditing	\$ _____
Security	\$ _____
NIFA Annual Compliance Fees	\$ _____
Management Fee	\$ _____
Other _____	\$ _____
Total General and/or Administrative Expenses	\$ _____

(b) **Operating Expenses**

Fuel	\$ _____	Management Salaries	\$ _____
Electricity	\$ _____	Office/Accounting	\$ _____
Water/Sewer	\$ _____	Other Salaries	\$ _____
Gas	\$ _____	Trash Removal	\$ _____
Snow Removal	\$ _____	Elevator	\$ _____
Total Operating Expenses			\$ _____

(c) **Maintenance Expenses**

Painting and Repairs	\$ _____
Exterminating	\$ _____
Grounds	\$ _____
Other _____	\$ _____
Total Maintenance	\$ _____
Total Insurance	\$ _____
Total Real Estate Taxes	\$ _____
Other _____	\$ _____
Total Annual Residential Expenses	\$ _____
Total Annual Commercial Space Expenses	\$ _____ (if applicable)
Total Annual Project Expenses	\$ _____
Total Annual Replacement Reserves	\$ _____

(d) Estimated annual increase in expenses \_\_\_\_\_%

(e) How were expenses and reserves determined? \_\_\_\_\_

**8. SOURCE OF PUBLIC FUNDS AND SUBSIDIES**

Is any portion of the funds for the project financed directly or indirectly with federal, state or local government funding?  YES  NO

If "YES," provide the following information

Tax-Exempt Bond Financing	\$ _____
Housing Trust Fund	\$ _____
HOME Financing	\$ _____
Rural Development	\$ _____
CDBG	\$ _____
TIF	\$ _____
(Must Submit Letter From Community Describing the Status of the Application)	
Other (please describe) _____	

**9. EXTENDED USE PERIOD**

Points will be awarded with preference for projects serving low-income tenants for the longest period of time. The minimum term of the low-income occupancy commitment is 30 years (15-year compliance period plus a 15-year extended use period).

Points will be awarded only if the project owner elects to extend the compliance period for an additional number of years.

Years Project Owner Agrees To Extend Compliance Period \_\_\_\_\_

**10. TAX-EXEMPT BONDS**

If tax-exempt bond financing is being requested (4% LIHTC), provide the following:

- (a) Will the project receive tax-exempt bond financing for at least 50% of the aggregate basis of the building(s) and land includable in the project?  Yes  No
- (b) \$\_\_\_\_\_ Total Project Cost
- (c) \_\_\_\_\_ Applicable Percentage Rate for the tax-exempt financing
- (d) Expected type of bond sale:  Private Placement  Public Sale
- (e) Any credit enhancement for bonds?  Yes  No

If "YES," what type and provided by whom: \_\_\_\_\_

- (f) If a public sale, will the bonds be rated?  Yes  No

If "YES," provide the following:

Grade: \_\_\_\_\_  
Rating Agency: \_\_\_\_\_  
Bank: \_\_\_\_\_  
Bond Trustee: \_\_\_\_\_

- (g) Projected loan terms

(i) Principal Amount \$ \_\_\_\_\_

(ii) Interest Rate \_\_\_\_\_%  Fixed  Variable

(iii) Term of Loan \_\_\_\_\_ Years

(iv) Amortization (years) \_\_\_\_\_ Level \_\_\_\_\_ Balloon

- (h) Loan Security:

(i) Project Mortgage	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(ii) Assignment of Project Rents	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(iii) FHA Mortgage Insurance	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(iv) Personal Guarantees	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Please explain: \_\_\_\_\_

(v) Other, if any, enhancement on the bonds, such as bond surety (i.e., bond insurance, collateral pledge): \_\_\_\_\_

## 11. FINANCING INFORMATION

- (a) **Interim/Construction Financing.** Provide as "*Exhibit 16*" a detailed narrative of the type(s) of interim and construction financing planned for this project. List all preliminary and firm financing commitments, including grants. The source and amount of financing for any commercial space that is part of the project should also be included and identified. If the applicant plans to finance all or part of the project from its own resources, the applicant must provide sufficient documentation (including a certification from an independent third party, or a notarized investment letter under penalties of perjury) verifying that the applicant has the necessary funds committed solely for this purpose.

Any owner equity contributions or deferred fees should also be listed below if the funds will provide a source of financing.

Lenders or Source of Funds	Date of Application	Date of Commitment	Amount of Funds	Type of Financing *	Name and Telephone Number of Contact Person

\*Type of financing (e.g., a conventional loan, federal grant, deferred payment, etc.)

(b) **Permanent Financing.** Provide as “*Exhibit 17*” a detailed narrative of the type(s) of permanent financing planned for this project. List all preliminary and enforceable financing commitments, including grants. The source and amount of financing for any commercial space that is part of the project should also be included and identified. If the applicant plans to finance part of or the entire project from its own resources, the applicant must provide sufficient documentation (including a certification from an independent third party, or a notarized investment letter under penalties of perjury) verifying that the applicant has the necessary funds committed solely for this purpose.

(i) Any owner equity contributions or deferred fees should also be listed below if the funds will provide a source of financing.

Lender's or Source of Funds' Name and Telephone Number	Date of Application	Date of Commitment	Amount of Funds	Interest Rate of Loan %	Amortization Period (Months)	Term of Loan	Annual Debt Service Cost
Total							



## 12. PROJECT COST SCHEDULE

	Actual or Estimated Project Costs	(4% LIHTC) Eligible Basis	(9% LIHTC) Eligible Basis	Amortized or Expended (Noneligible)	Allowable 20% Limit Dev/Cont
Land	\$ _____			\$ _____	
Existing structures	\$ _____	\$ _____		\$ _____	
Demolition (new)	\$ _____			\$ _____	
Demolition (rehab)	\$ _____	\$ _____	\$ _____		\$ _____
Site grading, clearing, etc.	\$ _____	\$ _____	\$ _____		\$ _____
Off-site improvements	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
New building hard costs	\$ _____	\$ _____	\$ _____		\$ _____
Rehabilitation hard costs	\$ _____	\$ _____	\$ _____		\$ _____
Accessory building	\$ _____	\$ _____	\$ _____		\$ _____
General requirements	\$ _____	\$ _____	\$ _____		\$ _____
Construction contingency	\$ _____	\$ _____	\$ _____		\$ _____
Architect design	\$ _____	\$ _____	\$ _____		\$ _____
Architect supervision	\$ _____	\$ _____	\$ _____		\$ _____
Survey/engineer fees	\$ _____	\$ _____	\$ _____		\$ _____
Construction insurance	\$ _____	\$ _____	\$ _____		\$ _____
Construction loan interest	\$ _____	\$ _____	\$ _____		\$ _____
Origination fee	\$ _____	\$ _____	\$ _____		\$ _____
LIHTC enhancement fee	\$ _____	\$ _____	\$ _____		\$ _____
Construction period taxes	\$ _____	\$ _____	\$ _____		\$ _____
#Bridge loan expense	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
#(Eligible basis for construction period only)					
Property appraisal	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
(Appraisal—To evaluate feasibility, cost includable in basis.)		(If appraisal for lender requirement only, do not include in basis.)			
LIHTC fees	\$ _____	\$ _____	\$ _____		\$ _____
Environmental study	\$ _____	\$ _____	\$ _____		\$ _____
Market study	\$ _____	\$ _____	\$ _____		\$ _____
RE Attorney	\$ _____	\$ _____	\$ _____		\$ _____
*RE Consultant	\$ _____	\$ _____	\$ _____		
*LIHTC consultant fee	\$ _____	\$ _____	\$ _____		
*Contractor overhead	\$ _____	\$ _____	\$ _____		
*Contractor profit	\$ _____	\$ _____	\$ _____		
*Developer overhead	\$ _____	\$ _____	\$ _____		
*Developer fee	\$ _____	\$ _____	\$ _____		
Title and recording	\$ _____	\$ _____	\$ _____	\$ _____	
Bond premium	\$ _____			\$ _____	
Credit report	\$ _____			\$ _____	
Perm. Loan origination fee	\$ _____			\$ _____	
Perm. Loan enhancement	\$ _____			\$ _____	
Cost of underwriter	\$ _____			\$ _____	
Counsel fee	\$ _____			\$ _____	
Organizational	\$ _____			\$ _____	
Tax opinion	\$ _____			\$ _____	
Rent-up reserves	\$ _____			\$ _____	
Operating reserves	\$ _____			\$ _____	
Other _____	\$ _____			\$ _____	
Other _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Total residential costs:	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
	(1 + 2 + 3)	(1)	(2)	(3)	
Total commercial space costs:	\$ _____				

	<b>(1 + 2 + 3)</b>	<b>(1)</b>	<b>(2)</b>
	<b>Total Residential Costs</b>	<b>4% LIHTC Eligible Basis</b>	<b>9% LIHTC Eligible Basis</b>
(Numbered columns at the bottom of preceding page 16)	\$ <u>                    </u>	\$ <u>                    </u>	\$ <u>                    </u>
(Deduct from basis: All grant proceeds used to finance costs in eligible basis		- \$ <u>                    </u>	- \$ <u>                    </u>
Nonqualified nonrecourse financing		- \$ <u>                    </u>	- \$ <u>                    </u>
Nonqualified portion of higher quality units (IRC Section 42(d)(3))		- \$ <u>                    </u>	- \$ <u>                    </u>
Historic credits (on residential portion only)		- \$ <u>                    </u>	- \$ <u>                    </u>
Total Eligible Basis (Add to basis: Projects located in a qualified census tract (see list on page 20) may add a portion of the adjusted basis of a community service facility targeted to serve tenants whose income is 60% or less of area medium income (limited to 10% of project eligible basis)		\$ <u>                    </u>	\$ <u>                    </u>
		+ \$ <u>                    </u>	\$ <u>                    </u>
High-cost area adjustment (if applicable—see list on page 20)(No adjustment is allowed for acquisition costs)			(multiplied by 130%)
Total Adjusted Eligible Basis		\$ <u>                    </u>	\$ <u>                    </u>
Multiplied by the applicable fraction		<u>                    </u> %	<u>                    </u> %
Total Qualified Basis		\$ <u>                    </u>	\$ <u>                    </u>
Multiplied by the Applicable Percentage		<u>                    </u> * 4%	<u>                    </u> * 9%
Total Amount of LIHTC Requested		\$ <u>                    </u>	\$ <u>                    </u>

Developer and contractor overhead and profit fees and consultant fees will be allowed on new construction and rehabilitation projects. For purposes of determining the amount of LIHTC that is allocable to a project, NIFA may limit these fees included in eligible basis to an amount not more than 20% of eligible basis costs, excluding the fees:

Example: Total Eligible Basis

- Contractor Overhead
- Contractor Profit
- Developer Overhead
- Developer Fee
- LIHTC Consultant Fee
- Real Estate Consultant Fee

= Adjusted Eligible Basis

---

x 20%

= Maximum allowable for developer, contractor overhead and profit and consultant fees

If developer and contractor overhead and profit fees and consultant fees exceed the maximum percentage of 20%, the applicant must provide documentation, labeled as “*Exhibit 18*,” outlining the reasons for the variation. Acceptance of this documentation is at NIFA’s discretion. NIFA may reduce the level of LIHTC to achieve the range of 20% for these fees. When an identity of interest exists between the developer and contractor, NIFA may reduce the total of these fees where it deems them excessive.

### 13. RESERVES

For reserves/contingencies required outside the ownership entity, NIFA will require documentation of the amount and disposition of reserves/contingencies. If the reserves/contingencies revert back to the developer, general partner, managing member or any ownership interest, NIFA will consider the reserves/contingencies as deferred developer fees and the above limits will apply.

### 14. CONTRACTOR DEFINITION

- (a) If the project developer does not have an in-house staff to construct the project, it is assumed that an intermediary will be hired to perform the service as general contractor. Among other things, a general contractor shields the project developer from the liabilities of construction. In most cases, the general contractor awards subcontracts to other contractors to facilitate the completion of the project and becomes the clearinghouse for much of the contractor’s work.

**Note:** If the project developer does not have an in-house staff to construct the project, NIFA will evaluate and restrict the ability of the project developer to take any contractor overhead and profit fees.

- (b) NIFA will scrutinize total project costs to ensure that such costs are reasonable considering the low-income housing objectives as identified in the qualified allocation plan. In determining whether or to what extent a project qualifies for an allocation of LIHTC, NIFA may compare such factors as projected cost per bedroom, LIHTC per bedroom or other meaningful measures against standards or averages deemed reasonable (such as industry cost standards and/or average costs from competing projects).
- (c) Payments or charges over and above what are represented to NIFA in application(s) or other documents and misrepresentations of any sort will be subject to remedial action at NIFA's discretion. In instances where there are unsubstantiated costs or charges, NIFA may engage a third party to conduct an audit at the expense of the developer before taking action on the projects' placed-in-service application.

**15. LOCATION OF COUNTIES LISTED BY HUD AS QCTS**

Following are the Department of Housing and Urban Development Statutorily Mandated Qualified Census Tracts for IRC Section 42:

<b>County</b>	<b>Census Tract Number</b>					
Douglas	0003.00	0004.00	0005.00	0006.00	0007.00	0008.00
	0009.00	0010.00	0011.00	0012.00	0016.00	0019.00
	0021.00	0029.00	0032.00	0038.00	0039.00	0040.00
	0041.00	0051.00	0052.00	0053.00	0054.00	0059.01
	0059.02	0060.00	0063.01			
Sarpy	0103.02					
Lancaster	0004.00	0005.00	0007.00	0008.00	0017.00	0018.00
	0019.00	0020.00	0032.01	0035.00		
Adams	9661.00					
Lincoln	9601.00					
Buffalo County	9696.00					
Cherry County	9559.00					
Dawes County	9507.00					
Keya Paha County	9754.00					
McPharson County	9579.00					
Scotts Bluff County	9537.00					
Thurston County	9761.00	9782.00				
Pottawattamie County	0307.00	0309.00				

**16. NOTIFICATION OF PUBLIC OFFICIAL**

Pursuant to IRC Section 42(m)(1)(A)(ii), NIFA will notify the chief executive officer (or the equivalent) of the local jurisdiction within which the project is located that the project has applied for and/or received a reservation of LIHTC and provide such officer a reasonable opportunity to comment on the project. Please provide the following information:

Name of political jurisdiction \_\_\_\_\_  
Name and title of Chief Executive Officer \_\_\_\_\_  
Address \_\_\_\_\_  
Phone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_  
Congressional District \_\_\_\_\_ State Senate District \_\_\_\_\_

**17. NET ANNUAL CASH FLOW FROM OPERATIONS**

Net Monthly Income (Bottom page ____)		\$ _____
		<u>          x 12 months          </u>
Annual Income		\$ _____
Less:		
Total Annual Expense (Bottom page ____)	-	\$ _____
Less:		
Replacement Reserves (Bottom page ____)	-	\$ _____
Net Operating Income	=	\$ _____
Less:		
Annual Debt Service (Page ____)	-	\$ _____
Net Annual Cash Flow	=	\$ _____

**18. SOURCES AND USES: EQUITY GAP INFORMATION**

List all uses and corresponding amounts of funds:

Total Development Costs		\$ _____
Other Uses		\$ _____
_____		\$ _____
_____		\$ _____
_____		\$ _____

Total Uses (1) \$ \_\_\_\_\_

Conventional Loan		\$ _____
Conventional Loan		\$ _____
HOME		\$ _____
CDBG		\$ _____
Other Federal Loans		\$ _____
Local Municipality Loan		\$ _____
Private Loan		\$ _____
Owner Equity		\$ _____
Other _____		\$ _____

Total Sources (2) \$ \_\_\_\_\_

Equity Gap

Total Uses (Project Cost)	(1)	\$ _____
(Less) Total Sources of Funds	(2) -	\$ _____
Funding Shortfall (Equity Gap)	(3) =	\$ _____

Annual LIHTC Required

Funding Shortfall (Equity Gap)	(3)	\$ _____
Divided by 10-year LIHTC Period		\$ _____ ÷ 10
LIHTC "EQUITY" Required	=	\$ _____
Divided by Net Equity Factor*		÷ 75 %

\*The current average dollar yield of net syndication proceeds (or equity contributions) per dollar of LIHTC allocated.

A. Annual LIHTC Required = \$ \_\_\_\_\_

B. Amount of LIHTC Requested = \$ \_\_\_\_\_

(See page \_\_\_\_)

**19. PROJECT COMPLETION SCHEDULE:**

<b>Activity</b>		<b>Actual or Scheduled Month/Year</b>
Site:	Option/Contract executed	_____ / _____
	Zoning approval	_____ / _____
	Site acquisition	_____ / _____
	Site survey ordered	_____ / _____
Financing:	Interim/construction financing	
	Loan Application	_____ / _____
	Firm Commitment	_____ / _____
	Permanent financing	
	Loan Application	_____ / _____
	Firm Commitment	_____ / _____
	Other loans/grants	
	Type and Source	_____ / _____
	Application	_____ / _____
	Award	_____ / _____
	Other loans/grants	
	Type and Source	_____ / _____
	Application	_____ / _____
	Award	_____ / _____
	Syndication commitment	_____ / _____
Other:	Title report ordered	_____ / _____
	Title report received	_____ / _____
	Plans/Specs/Drawings completed	_____ / _____
	Building permits requested	_____ / _____
	Building permits received	_____ / _____
	Market study ordered	_____ / _____
	Market study to be received	_____ / _____
	Environmental study ordered	_____ / _____
	Environmental study received	_____ / _____
	Construction start-ups	_____ / _____
	Construction completion	_____ / _____
	More than 10% of costs to be incurred <i>IRC Section 42(h)(1)(E)(i) and (ii)</i>	_____ / _____
	Placement-in-service date	_____ / _____
	Occupancy of all LIHTC units	_____ / _____

**E. SELF SCORING-THRESHOLD CRITERIA**

**1. THRESHOLD CRITERIA**

- (a) Applicants must submit all exhibits with the exhibit number identified by tabs. Applicants are to self-score all pertinent items on the application and enter the appropriate number of points earned for each requirement. NIFA will review.

**NOTE: Applications must obtain a score in each of the Threshold Criteria Items b-k.**

**NOTE: Applications not scoring under any Threshold Criteria Item will not be considered for LIHTC.**

Requirement	Points Available	Points Scored
<p>(b) <b>Costs: “Exhibit 100”</b></p> <p>Provide an outline specification of the proposed construction costs, material and equipment/appliances to be used in the project. (Use the Project Cost Schedule as a guide for costs.)</p>	1	_____
<p>(c) <b>Architectural Plans: “Exhibit 101”</b></p> <p>Provide preliminary architectural drawings, including plot plan, elevation drawings and schematic floor plans of the various unit sizes.</p> <p>Provide Fair Housing Act Accessibility Checklist completed by the project’s Architect attached as “<b>Exhibit 101A.</b>”</p>	1	_____

**NOTE:**

- (i) Material changes to the floor plan(s) without prior approval of NIFA could result in cancellation of the reservation or allocation of LIHTC.
- (ii) The project must be constructed in compliance with the Fair Housing Act Amendments of 1988, consideration being given to the accessibility/adaptability of units to handicapped occupancy.
- (iii) The project must be constructed in accordance with the applicable local energy conservation code, however, if the project receives funding from the state it must meet the 1998 International Energy Conservation Code.



(d) **Site Control: “Exhibit 102”**

Provide evidence of site control in the form of one of the following (if multiple sites, the applicant must have control of each site making up the single project).

**(Score only one)**

- |       |  |   |       |
|-------|--|---|-------|
| (i)   | Recorded Warranty Deed in the name of the ownership entity, general partner or entities which comprise the general partner as filed with the appropriate governmental authority.                                       | 2 | _____ |
| (ii)  | Executed disposition and development agreement with a public agency. (Example: City owns the land and has an agreement to transfer property.)  | 1 | _____ |
| (iii) | Signed and recorded long-term land lease on NIFA-approved form with evidence that the lessee owns the land. (A valid and enforceable lease must remain in effect for the full project compliance/extended use period.) | 2 | _____ |
| (iv)  | A valid contract or option to purchase the Land in the name of the ownership entity, general partner, managing member or entities which comprise the general partner or managing member.                               | 1 | _____ |

**Note: Site control contract(s)/option(s) listed above must be valid for at least 90 days from the appropriate cycle application deadline.**

(e) **Zoning: “Exhibit 103”**

Provide a letter from the appropriate local governmental body indicating the project’s status in relation to local zoning requirements for the proposed number and type of units, or provide building permit(s). (Model of Exhibit 103 attached at the end of the Application)

**(Score only one)**

(i) Confirmation letter stating that the project meets all local zoning requirements for the proposed number and type of units, or provide building permits. 2 \_\_\_\_\_

(ii) If the project is not subjected to municipal zoning ordinances, then the project owner must supply NIFA with written documentation from the appropriate local governmental official, stating the proposed project can be built per the current governing land use regulations, subject to review of final plans and specifications. 2 \_\_\_\_\_

(iii) If the property is currently a nonconforming use, as per zoning regulations, then the project owner must have the zoning administrator’s explicit evaluation that a conditional use permit or final approval that enables you to get a building permit can be obtained within 120 days of the LIHTC reservation. The applicant must demonstrate that nothing at the local level will interfere with the project obtaining all necessary permits. 1 \_\_\_\_\_

(f) **Utilities: “Exhibit 104”**

Provide a letter from the appropriate local utility provider(s) indicating that applicable utilities are available and adequate to the site(s) (water, sewer, electric, gas, as applicable) or provide building permit(s). 1 \_\_\_\_\_

(g) **Permanent Financing: “Exhibit 105”**

Provide fully executed copies of all financing commitments (permanent = 15-year minimum).

Financing should cover all financing needs not covered by equity contributions, grants or other funding sources.

**Note:** Commitments must contain amount, term, rate, amortization period of the loan and proper signatures of all parties. (Model of Exhibit 105 attached at the end of the Application.)

**Note:** **Permanent Financing Commitments must be valid for at least six months from the appropriate cycle application deadline.**

(Score only one)

- (i) ***Permanent Financing Commitment*** for the project from a bona fide lending institution, or

If the applicant intends to finance all or part of the projects costs out of its own resources, the applicant must provide a third-party verification or a notarized letter under penalties of perjury that such resources are available and committed solely for this purpose. A firm commitment must also be included for any federal, state or local funding sources (i.e., TIF, Federal Home Loan Bank, CDBG, any local grants, etc.)

2 \_\_\_\_\_

- (ii) ***Letter of Preliminary or Conditional Commitment*** to provide financing for the project from a bona fide lending institution. A letter of preliminary consideration or conditional commitment must also be included for any federal, state or local funding sources (i.e., TIF, Federal Home Loan Bank, CDBG, any local grants, etc.)

1 \_\_\_\_\_

(h) **Land Use Regulatory Agreement: “Exhibit 106”**

Provide a statement signed and notarized by the project owner stating its intention to enter into the extended LIHTC commitment with NIFA as provided in IRC Section 42(h)(6), prior to the issuance of IRS Form(s) 8609 to the project owner.

1 \_\_\_\_\_

(A generic copy of the Land Use Regulatory Agreement (“LURA”) is available for review, but the specific document for each project will be prepared after receipt of the project’s final cost certification. The LURA must be recorded before IRS Form(s) 8609 will be issued by NIFA.)

(i) **Applicant Information: “Exhibit 107”**

Provide a current listing of all directors and officers of the applicant and the proposed project owner (profit and/or non-profit), along with information pertaining to their primary occupations.

1 \_\_\_\_\_

(j) **Pro Forma:**

Provide a pro forma financial statement showing that the project will be financially viable for the first 15 years of its operation.

Example:

Total Potential Gross Income	_____
Less: Vacancy Loss	- _____
Effective Income	_____
Less: Operating Expenses (includes reserves)	- _____
Net Operating Income	_____
Less: Debt Service	- _____
Cash Flow	= \$ _____

1 \_\_\_\_\_

(k) **Evidence of Need:**

IRC Section 42 requires a comprehensive market study of the housing needs within the community in which the project will be located. The market study must be conducted by an independent, third-party market evaluation professional whose credentials are acceptable to NIFA. The market study must be conducted at the developer's expense.

The market study must be current (within six months prior to submission of the Application) and include at least each of the following to score points in this area:

- Description of the proposed site
- Demographic analysis of the number of eligible households in the market area that can afford the proposed rent
- Review of the existing housing market (including types of units, rents, vacancies)
- Review of new housing projects to be developed in the community
- Review of occupancy levels in existing multifamily projects
- Review of population characteristics and projected trends
- Review of employment and economic development characteristics
- Geographic definition and analysis of market area
- Analysis of operating expenses of comparable properties in the market area
- Expected market absorption of proposed deal—effect on market area
- A written narrative on the assumptions and methods used in the study, including data sources

3 \_\_\_\_\_

**NOTE:** *For Tax-exempt Bond Financed Projects Only*—Exhibit 109 must be submitted in the LIHTC application and Exhibit 109b must be submitted before a final bond allocation.

All applications must score in each of the above Threshold Criteria (Items (b) through (k)) in order to receive further consideration by NIFA.

**2. SELF SCORING: OTHER SELECTION CRITERIA**

**(a) Extended Use Period: “Exhibit 200”**

Points will be awarded to projects serving low-income tenants for an extended period of time. The minimum term of the low-income occupancy commitment is 30 years (15-year compliance period plus a 15-year extended use period).

Points will be awarded when the project owner elects to extend the compliance period for an additional number of years. (Example: An owner electing to extend the compliance period for 15 years will be restricting the property for 45 years—a 30-year compliance period and a 15-year extended use period.)

**Note:** Extension of the compliance period bars the utilization of IRC Section 42(h)(6)(I) until the beginning of the last year of the extended compliance period.

**(Score only one)**

(i) 30 year minimum	0	_____
(ii) 30 year minimum plus 5 additional years = 35 year total	1	_____
(iii) 30 year minimum plus 10 additional years = 40 year total	3	_____
(iv) 30 year minimum plus 15 additional years = 45 year total	5	_____

**Note:** Projects will be bound to the extended use period elected upon the execution of the LURA.

**(b) Right of First Refusal or Purchase Option: “Exhibit 201”**

Points will be awarded if the project owner submits a notarized statement (attach as Exhibit 201) stating the project owner’s commitment to offer a right of first refusal or purchase option to the tenants, tenant groups, tenant cooperatives, as well as a non-profit under IRC Section 501(c)(3) or 501(c)(4) entity, governmental entities and resident management corporations to purchase the project at the end of the fifteenth year of the compliance period. IRC Section 42(h)(6) or Section 42(i)(7) references the provisions that allow the price to be predetermined or fixed in advance. The predetermined price is the outstanding debt remaining on the property (excluding any debt added in the five years prior to sale) plus federal, state and local taxes due as a result of the sale.

2 \_\_\_\_\_

**Note:** Exhibit 201 will be incorporated into the LURA.

(c) **Eventual Tenant Homeownership: “Exhibit 202”**

Points will be awarded if the project owner provides a feasible plan (attach as Exhibit 202) to provide affordable home ownership opportunities to the low-income tenants of the project.

3 \_\_\_\_\_

**Note:** Exhibit 202 will be incorporated into the LURA.

(d) **Project Characteristics: “Exhibit 203”**

If the project is a federally assisted building (within the meaning of IRC Section 42(d)(6)(B)) in danger of having the mortgage assigned to HUD, RD, or creating a claim on a federal mortgage insurance fund, provide Exhibit 203. Exhibit 203 must be a letter from the institution to which the project is in danger of being assigned.

1 \_\_\_\_\_

(e) **Unit Mix: “Exhibit 204”**

If the composition of the project offers a unit mix which is targeted to low-income families with children, including individuals with children, as evidenced by the fact that 10% or more of the LIHTC units in the project are three bedrooms or larger, evidence as provided in Exhibit 204. To qualify for these points, each of the targeted units must have at least a net 1,000 square feet of living space for three bedrooms and at a minimum 1¾ bathrooms or a net 1,200 square feet for four bedrooms and at a minimum 1¾ bathrooms.

2 \_\_\_\_\_

**Note:** The project’s LURA will reflect this targeting as an additional use restriction.

(f) **Senior Project (55 or 62 and Older) With Significant Social Services: “Exhibit 205”**

Mark the appropriate seniors the project will serve:

- |                          |              |         |
|--------------------------|--------------|---------|
| <input type="checkbox"/> | 55           | 2 _____ |
| <input type="checkbox"/> | 62 and Older | 3 _____ |

Senior projects must compile with the following total square footage:

- One bedroom consisting of minimum 625 square feet.
- Two bedroom consisting of minimum 800 square feet.

- (i) Senior Projects must include handrails along steps and interior hallways, grab bars in bathrooms, routes that allow for barrier-free access, lever-type doorknobs, single-lever faucets and elevators for projects of over two stories.
- (ii) Provide evidence showing that the Senior Project is on a suitable site within reasonable walking distance of basic services or has adequate access to public transportation.
- (iii) Senior units are restricted to seniors who qualify for an exception or exemption under the Fair Housing Act.

(g) **Assisted Living Senior Project: “Exhibit 206”**

**Requirements for Assisted Living Senior Project:**

- (i) Project must provide a complete living facility, including a kitchen that consists of at least a small refrigerator, sink, pull-down table and two-burner stove with an oven (or a full-sized microwave oven instead of the stove and oven).
- (ii) Additional services such as laundry, housekeeping, regular daily meals in a common dining facility, 24-hour monitoring of emergency call service, planned social activities, transportation services to shopping, hospital and doctor, medication management and routine checking of well-being (i.e., assistance in getting in and out of bed and chairs, assistance in using sanitary facilities, and assistance in walking).



**Development Size:**

- (i) While the program does not establish formal minimum or maximum size limits, applicants are advised that projects with 10 or fewer units may have difficulty delivering needed services that are cost-effective.
- (ii) The program is intended to provide assisted living alternative to low- and moderate-income chronically impaired or disabled elderly persons in a homelike environment.
- (iii) All proposals must include a long-term affordability provision and a Site-Specific Market Study.
- (iv) Under the regulations promulgated under IRC Section 42, services and rents must be billed separately.
- (v) Given the high cost of building and operating an assisted living development, sponsors are encouraged to secure other sources of funding to offset the cost of providing shelter and services for low- and moderate-income frail elderly persons. Other possible funding sources are the Nebraska Excellence Health Care Trust Fund (HHS), HOME, Affordable Housing Trust Funds, Federal Home Bank, CDBG Fund, TIF, and sponsors of contributions from equity, fund raising and other private and public sources.

**Design Guidelines:**

- (i) The architectural design should create a “homelike” residential setting that emphasizes a “homelike” environment which promotes the residents’ quality of life and independence while providing efficient delivery of planned services to the residents.

**Underwriting Terms:**

- (i) Debt Service Coverage—should be at least 1.25.
- (ii) Operating Expenses—must be separated into building and supportive service cost.
- (iii) Vacancy Rates—should be based on 10% for the cash flow analysis.
- (iv) Other Income—will be included up to 2% of the gross rental income if adequately supported by market and other data.

- (v) Replacement Reserves—will be funded from revenues in an amount equal to the greater of 2% of the effective gross income or \$700 per unit per year for real property. (Based on \$200 per unit per year for real property and \$500 per unit per year for personal property.)
- (vi) Operating Deficit Reserve—an operating deficit reserve must be capitalized in an amount equal to the project losses prior to stabilized occupancy. A 24-month cash flow analysis will be completed to estimate operating losses during the rent-up period.
- (vii) Operating Reserve—minimum operating reserve equal to six months of debt service and three months of operating expenses (including residential cost, service cost and board cost) must be funded in the development budget.

**Note:** For purposes of LIHTC application, the term “Assisted Living” shall have the meaning set forth in IRC Section 42, regulations and/or rulings thereunder. The types of services that jeopardize the status of an assisted living project are continual or frequent nursing, medical or psychiatric services.

(h) **Mixed Income Projects: “Exhibit 207”**

2 \_\_\_\_\_

A point will be awarded to projects which have a minimum of 20% and a maximum of 60% of the units set aside for market rate tenants to encourage mixed-income tenancy.

Number of Market Rate Units = \_\_\_\_\_ %  
Total Units in the Project

1 \_\_\_\_\_

(i) **Design Standards: “Exhibit 208”**

NIFA encourages the construction of multifamily projects that reflect the character of the community in which they are located. The marketability of the property and appearance of the site are important components in the final product. Longevity and low maintenance are to be considered in the design of the property. Low maintenance and durability of exterior materials will extend the life of the property. Attractive exterior features will assist in the marketability of the project.

Points will be awarded if evidence is provided in the following categories: (Points can be obtained for each (i), (ii) and (iii))

- (i) Buildings will have brick or stone exterior finish material in excess of 25% of the total exterior wall surfaces on all faces of the building. 1 \_\_\_\_\_
  
- (ii) Upgrade of exterior finish materials from minimum standards such as longer-life roofing, heavier-gauge or more durable exterior siding (excluding vinyl siding), prefinished wood windows, etc. In order to receive consideration for these points, appropriate documentation from the manufacturer must be provided indicating these upgrades and the durability or low maintenance benefits assigned to the proposed materials. 1 \_\_\_\_\_
  
- (iii) Exterior additions such as shutters, decorative exterior patio/porch fencing or additional trim or heavy landscaping on street-visible exterior elevations. 1 \_\_\_\_\_

(j) **Density Configurations: “Exhibit 209”**

Points will be awarded for either (i) or (ii) when evidence is provided showing that the LIHTC units in the project will be constructed with:

- (i) A density configuration of 12 units or less per acre; or 1 \_\_\_\_\_
- (ii) With a density configuration of 12 units or less per acre and a building design(s) that does not exceed two stories and includes a separate outside ground-level main entrance for each unit. 2 \_\_\_\_\_

**Note:** Per-acre measurement does not include access roads, but can include bordering dedicated improved permanent open space (park) available for use any time.

(k) **Rural Community Size: “Exhibit 210”**

Points will be awarded based on the number of Total Units in each Rural Community as follows:

- (i) One to eight Total Units 2 \_\_\_\_\_
- (ii) Nine to 16 Total Units 1 \_\_\_\_\_
- (iii) 17 or more Total Units 0 \_\_\_\_\_

(l) **Track Record: “Exhibit 211”**

Provide evidence, the below information as Exhibit 209, if the project owner has a track record in successfully developing and operating affordable rental housing under a program designated by HUD, RD, agency which allocated LIHTC, or any other verifiable source to the satisfaction of the executive director:

- (i) Name and location of all properties
- (ii) Number of units
- (iii) Number of years owned 1 \_\_\_\_\_

**Note:** Developers/owners with unfavorable prior performance as determined solely in NIFA’s opinion may not qualify for points in this category.

(m) **Public Housing Authority Waiting Lists: “Exhibit 212”**

(i) If an agreement is signed between the project owner and the housing authority to consider, as potential tenants, those households on the public housing authority waiting list, then one point will be awarded. If there is no public housing authority in the locality, the project owner must utilize the nearest housing authority or the office responsible for the Section 8 program.

(Referral agreement form attached as Exhibit 212A.)

1 \_\_\_\_\_

(ii) If an agreement is signed between the project owner and the U.S. Military installation housing office located within a 30 mile radius of the project to consider, as tenants, households who have a family member considered an extended duty personnel and is on the U.S. Military installation housing office waiting list for housing, then one point will be awarded

1 \_\_\_\_\_

(Referral agreement form attached as Exhibit 212B).

(n) **Owner Financial Support: “Exhibit 213”**

(i) Owner will provide at least 5% of the total financing of the project.

(ii) Owner’s financing must be evidenced by a promissory note or other written agreement, acceptable to NIFA or a commitment, in writing, from the owner to provide cash equity.

(iii) Owner must remain in the project for a period of at least ten years.

(iv) This financial support is in addition to any personal loans, any proceeds of the syndication of LIHTC, any equity contributions by parties other than the owner, and/or any third-party loans.

1 \_\_\_\_\_

**Note:** This commitment of funding must be part of the sources and uses of funds at all review levels to receive this scoring. The commitment of this funding must be through the tenth year of the project.

(o) **Amenities: “Exhibit 214”**

Up to a maximum of eight points will be awarded if Exhibit 214 is provided. Exhibit 214 must be a certification from the project’s Architect that the project design includes the amenities selected and will be provided in each LIHTC unit upon completion of construction.  
**(Maximum eight points)**

**Note:** Rehabilitation projects must either replace or provide new amenities to score points.

(i)	All three-bedroom units will have at a minimum 1 & 3/4 bathrooms	2	_____
(ii)	Furnished community room with a minimum of 600 square feet	2	_____
(iii)	Washer and dryer installed and maintained in each unit at no cost to the tenants for usage or rental	2	_____
(iv)	Elevator	1	_____
(v)	All units will have a washer and dryer hookup (N/A if points awarded in (iii))	1	_____
(vi)	Community laundry room (N/A if points awarded in (iii))	1	_____
(vii)	All units must have a dishwasher	1	_____
(viii)	All units must have range and *refrigerator (*frost-free, minimum size 14 cubic feet)	1	_____
(ix)	All units must have microwave and garbage disposal	1	_____
(x)	Designated playground and equipment (exterior)	1	_____
(xi)	Public telephone	1	_____
(xii)	Covered parking (all units)	1	_____
(xiii)	Electronic security system for exterior doors and accessible windows	1	_____
(xiv)	Storage area for each unit (minimum size = 288 cubic feet and must be an enclosed and secure space) (Closets off bedrooms do not qualify)	1	_____

**Note:** Amenities must be provided for every LIHTC unit in order to be included in eligible basis. (The cost of facilities and amenities can be included in eligible basis and earn LIHTC as long as they are functionally related to the housing unit, there is no separate fee for their use, and they are available to all tenants on a comparable basis.)

(p) **Pre-notification: “Exhibit 215”**

Provide evidence of pre-application notification submitted to the chief executive officer (or its designee) of the local jurisdiction describing the proposed project’s configuration, density, planned use and intention to apply to NIFA for LIHTC. Such evidence must be in the form of a copy of the letter of transmittal to the local chief executive officer accompanied by either a certified mail receipt, overnight mail receipt or confirmation letter from the appropriate official’s office.

1 \_\_\_\_\_

(q) **Local Support: “Exhibit 216”**

Documentation of support from the chief executive officer (or the equivalent) of the local jurisdiction, dated within 90 days’ of the application date, expressing the project’s value in the community and economic development effort and must address the specific project.

1 \_\_\_\_\_

(r) **Difficult to House Population: “Exhibit 217”**

Points will be awarded to projects providing evidence verifying that units are specifically equipped for persons with physical and/or mental disabilities. Such evidence must be in the form of a certification from an accredited/licensed architect stating the number of units which will be designed to meet American National Standards for buildings and facilities providing accessibility and usability for persons with disabilities and will conform to the Fair Housing Act Amendments of 1988.

- (i) “Equipped” means features that make the units fully usable to such persons are installed in the units at the time of construction or provisions have been included in construction for easy modification to meet the standards.
- (ii) Evidence must also include a referral agreement with a local service provider or a sponsor with a demonstrated capacity to provide on-site supportive services specifically designed for such tenants in one or more of the following population groups:
  - (a) Homeless or displaced individuals/families eligible under IRC Section 42 who lack a fixed, regular and adequate nighttime residence;
  - (b) Persons with physical, mental or developmental disabilities, including impaired sensory, manual or speaking abilities which result in a functional limitation in access to and use of a building or facility (housing for the physically disabled must be accessible, not merely adaptable); or
  - (c) Other special needs populations (specify).
- (iii) Evidence that the services provided must be affordable and accessible to the project’s tenants and the social service provider must have the capacity to perform such services. The services may include, but are not limited to:

- (a) Hiring a full-time social service coordinator. If a social service coordinator is provided through a third party, then a signed agreement between the two parties is required, and the coordinator must be dedicated to the LIHTC project for at least 20 hours a week;
  - (b) Providing child care services either on-site or linked to outside child care centers;
  - (c) Providing health care services either on-site or linked with a local health care provider;
  - (d) Providing job training programs on-site or linked with a local training center;
  - (e) Providing personal care and/or housekeeping services on-site;
  - (f) Providing at least one congregate meal on-site;
  - (g) Providing adult day-care services; and/or
  - (h) Providing transportation services for the residents.
- (iv) Supportive services range across a wide continuum of care (such as meals preparation, assistance with housecleaning, etc.) to high level (such as substance abuse and mental health supports) to medically intense (such as skilled nursing) and will vary from person to person depending on their particular physical, psychosocial and/or mental limitations, and may vary for each person over time. Each special needs tenant need not utilize all of the services provided by the project; however, the services must be available. If tenants are not utilizing the services that are available, NIFA may call into question whether or not the project is serving a special needs population.

Total Special Needs Units = \_\_\_\_\_ ÷ \_\_\_\_\_ = \_\_\_\_\_ % Serving Special Needs Tenants  
 Total Development Units

**(Score only one)**

- (a) 75 - 100%      6                      \_\_\_\_\_
- (b) 50 - 74%        4                      \_\_\_\_\_
- (c) 20 - 49%        2                      \_\_\_\_\_

(s) **CROWN Project: “Exhibit 218”**

A point will be awarded to a project owner who develops a bona fide long-term CROWN project. Long-term CROWN is a lease-to-own home pursuant to a plan (attach as Exhibit 218) and with documents approved in advance by NIFA that will be sold to a qualified tenant at the end of the 15-year compliance period.

1 \_\_\_\_\_



(t) **Developments Located in Qualified Census Tract (“QCT”): “Exhibit 219”**

Points will be given to projects located in a QCT (see list on page 20) if the project contributes to a concentrated community revitalization plan. A letter from the highest governmental body must be submitted stating that the project contributes to such a plan (attach letter on plan as Exhibit 219).

5 \_\_\_\_\_

(u) **Internet Connection Provided to Tenants: “Exhibit 220”**

A point will be given to projects that agree to construct all LIHTC units with an Internet connection in each bedroom and one in the family room to provide to each unit basic Internet services at no subscription or usage cost to the tenant. Provide a statement signed and notarized by the project owner stating its intention to provide such connections (attach statement as Exhibit 220).

1 \_\_\_\_\_

***F. NIFA-SCORED CRITERIA***

**RENT LEVEL OF EFFORT.**

**1. Targeting gross rents to lower levels.**

Points will be awarded based upon the depth of the targeted gross rent levels in comparison to other applicants in the current round. In order to receive points an applicant must either have the gross rent amounts for all LIHTC units in the project combine to an average amount affordable for an income level at or below 55% of the county’s area median income.

Up to 10 points \_\_\_\_  
(NIFA will calculate this score.)

**Note:** Applicants agree to have project rents bound by the stated targeted percentage on the application form for the duration of the compliance period through the execution of a LURA.

**2. Efficient Housing Production.**

The project represents an efficient production of housing. Points will be awarded when comparing current applicants, in a measure of the quality of effort made to minimize project costs, and leverage funding sources in the production of affordable housing. Project cost per bedroom and LIHTC per occupant are within reasonable limits as compared to local and national standards.

Up to 4 points \_\_\_\_\_  
(NIFA will calculate this score.)

**3. LIHTC Management Plan, Qualifications, Experience and Agreement:  
“Exhibit 300.”**

Points may be awarded if evidence is provided that the project has entered into an executed management agreement with a management agent who has successfully managed affordable rental housing projects during the past five years.

**Note:** A sample draft of a management plan is attached at the end of this application.

**Note:** A point will be awarded if the management company can provide evidence of attendance at a NIFA-sponsored LIHTC Training Seminar.

**Note:** Management entities with unfavorable prior performance, as determined solely in NIFA’s opinion, may not qualify for points in this category.

Up to 3 points \_\_\_\_\_  
(NIFA will calculate this score.)

**4. Supportive Services: “Exhibit 301.”**

Due to the fact that the availability of social services greatly improves the quality of life for residents, up to five points can be awarded when evidence is provided that the property owner has a fully executed agreement with a qualified provider of supportive services that would not otherwise be available to the tenants.

(a) The services may include, but are not limited to:

- (i) Hiring a full-time social service coordinator. If a social service coordinator is being provided through a third party, then a signed agreement between the two parties is required, and the coordinator must be dedicated to the LIHTC project for at least 20 hours a week;
- (ii) Providing childcare services either on-site or linked to outside child care centers;
- (iii) Providing health care services either on-site or linked with a local health care provider;
- (iv) Providing job training programs on-site or linked with a local training center;
- (v) Providing personal care and/or housekeeping services on-site;
- (vi) Providing at least one congregate meal on-site;
- (vii) Providing adult day-care services; and/or

(viii) Providing transportation services for the residents.

**Note:** Supportive services range across a wide continuum of care (such as meal preparation, assistance with housecleaning, etc.) to high level (such as substance abuse and mental health supports) to medically intense (such as skilled nursing) and will vary from person to person depending on their particular physical, psychosocial and/or mental limitations and may vary for each person over time.

(b) The supportive services will be evaluated based upon the following:

(i) The terms of the service agreement;

(ii) Independent financing of fees;

(iii) The experience of the service provider; and

(iv) The importance of the service in enhancing the tenants' standard of living.

Up to 5 points \_\_\_\_\_  
(NIFA will calculate this score.)

**Note:** The supportive service will be incorporated in to the LURA.

## 5. Point Deductions

Points may be deducted if the proposed project includes:

(a) persons who have an identity of interest;

(b) The applicant's existing projects have reoccurring events of uncorrected noncompliance;

**Note:** Significant events of noncompliance in NIFA's discretion could result in removal of an application from consideration.

(c) Failure to pay fees;

(d) Involvement in a foreclosure or deed in lieu of a foreclosure within past seven years;

(e) A previous project of the applicant's received a reservation of LIHTC but did not meet the minimum 10% carryover requirement resulting in returned LIHTC; or

(f) A previous project of the applicant's was not placed-in-service within 24 months of receiving the LIHTC carryover allocation.

Up to 10 negative points \_\_\_\_\_  
(NIFA will calculate this score.)

**G. FINAL RANKING**

<b>Required Threshold Criteria points</b>	- <b>Items (b-k)</b>	_____
<b>Other Selection Criteria points</b>	- <b>Items (a-u)</b>	_____
<b>NIFA-scored Criteria points</b>	- <b>Items (1-5)</b>	_____
	<b>Total</b>	=====

- (1) NIFA will rank each application according to the total number of points received in all Threshold, Other and NIFA-scored criteria. The results of the evaluation will be determined by NIFA in its discretion.
- (2) After evaluating and scoring all applications received for each application acceptance cycle, NIFA will utilize the following factors in determining which project will receive a LIHTC commitment in case of a tie between any applications:
  - (a) which serves the lowest-income tenants;
  - (b) which obligates the project owner to serve qualified tenants for the longest period of time;
  - (c) whose application demonstrates the highest readiness to proceed with the development;
  - (d) which provides the most efficient usage of the LIHTC on a per-unit basis; and
  - (e) which is located in a QCT and contributes to a concerted community revitalized plan.

## **H. OVERVIEW OF RANKING PROCESS**

### **CONSIDERATIONS.**

- (1) In reaching the final ranking of an application, NIFA will take into consideration the project owner's history of placing into service projects which have been awarded LIHTC in any state. NIFA may disqualify applications from applicants who are delinquent in fee payments (with respect to current or prior projects), who have previously failed to place into service projects which have received a LIHTC carryover allocation or who have not fulfilled the obligation of any previously issued commitment notice.
- (2) NIFA shall issue LIHTC only in the amount needed based on the review of the project. The issuance of LIHTC or the determination of any allocation amount in no way represents or purports to warrant the feasibility or viability of the project by NIFA. NIFA will, from time to time, set a maximum amount of LIHTC that can be allocated to a project in an amount which it deems appropriate, given the demand for Nebraska's LIHTC and the relative proposed costs of currently competing project applications. No member, officer, agent or employee of NIFA shall be personally liable concerning any matters arising out of, or in relation to, the allocation of the LIHTC.
- (3) NIFA has discretion to award additional points when scoring an application previously receiving an allocation of LIHTC when, upon re-application and re-award of LIHTC, the original allocation of LIHTC is returned to the authority and the following conditions are met:
  - (a) The original LIHTC allocation is determined to be inaccurate, as originally prepared, but was submitted in good faith; or
  - (b) The original LIHTC allocation requires projects modification due to community need; and
    - (i) The project is under construction, greater than 40% of the hard construction costs will be incurred by December 1st of the current year, and the costs are certified by an independent third-party certified public accountant or independent third-party attorney;
    - (ii) The rent AMI targeting will not exceed the originally proposed; and
    - (iii) The resubmitted project is requesting no more than a 115% of the original allocation.
  - (c) All applications that do not receive a reservation of LIHTC in any given cycle will be considered in the next available cycle in **2002** if:
    - (i) The applicant notifies NIFA, in writing, that it still wishes the project to be considered for LIHTC;

- (ii) The applicant submits the Reapplication Fee;
- (iii) The project meets or exceeds the minimum threshold criteria established by NIFA;
- (iv) Evidence is provided to NIFA showing that site control, financing commitments and any other required time-sensitive documents remain valid; and
- (v) There are no substantial or material changes to the application.

**Note:** Should the Internal Revenue Service (“IRS”) or the Department of the Treasury release rulings, notices or regulations that modify or change any of the information of this application, these rulings, notices or regulations will take precedence over the written material in Nebraska’s LIHTC Allocation Plan and application. All information submitted to NIFA shall be kept confidential and shall not be available to any other applicant. Applicants will be given their scoring results upon request and may receive the scoring results of other projects on an anonymous basis.

***I. APPLICANT CONSULTANT INFORMATION***

**1. IDENTIFICATION OF CONSULTANT**

Applicant is employing the services of the following consultant(s), as defined below, who will assist applicant and/or its joint venture or partner with all or a part of this application. For the purpose of this application, “consultant” shall include accountants, investment bankers, financial advisors, investors, syndicators, attorneys and any other advisor or consultant who is assisting the applicant in the completion and/or filing of this application:

Name of Consultant \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number ( ) \_\_\_\_\_ Facsimile Number ( ) \_\_\_\_\_

Name of Consultant \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number ( ) \_\_\_\_\_ Facsimile Number ( ) \_\_\_\_\_

**2. STATEMENT AND CERTIFICATION OF CONSULTANT** *(if a consultant is utilized in the making or filing of this application)*

Individually, or as the consultant(s) or officer(s) of the applicant entity, I (we) am (are) familiar with the provisions of the Tax Reform Act of 1986 and subsequent revisions, with respect to the Low Income Tax Credit Program, and, to the best of my (our) knowledge and belief, the applicant entity has complied, or will comply, with all of the requirements which are prerequisite to issuance of the low-income tax credits by NIFA. I (We) understand that the Low Income Tax Credit Program will be governed and controlled by rules and regulations to be issued by the United States Treasury, and I (we) have read such rules and am (are) familiar with the requirements thereof.

To the best of my (our) knowledge and belief, no information contained in this application or in the listed attachments and exhibits is in any way false or incorrect; that it is truly descriptive of the project or property for which the low-income tax credit is being applied, and the proposed construction will not violate zoning ordinances or deed restrictions.

I (We) hereby certify that the information contained in the NIFA Low Income Housing Tax Credit Application Form is true and accurate. I (We) understand that any misrepresentations and/or fraudulent information contained within this application may result in the termination of tax credits by NIFA and potentially my (our) and related parties being barred from future program participation and notification of such to the Internal Revenue Service.

Signature of Consultant \_\_\_\_\_ Date \_\_\_\_\_

STATE OF )  
 ) ss.  
COUNTY OF )

I, the undersigned, a notary public in and for said County, in said State, hereby certify that \_\_\_\_\_, whose name signed to the foregoing statement, and who is known to me, acknowledged before me on this date, that being informed of the contents of this statement, executed the same voluntarily.

Given under my hand and official seal this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Notary Public Date \_\_\_\_\_

### **3. STATEMENT AND CERTIFICATION OF APPLICANT/OWNER**

Individually, or as the general partner(s) or officers of the applicant entity, I (we) am (are) familiar with the provisions of the Tax Reform Act of 1986 and subsequent revisions, with respect to the LIHTC Program, and, to the best of my (our) knowledge and belief, the applicant entity has complied, or will comply, with all of the requirements which are prerequisite to issuance of LIHTC by the Nebraska Investment Finance Authority (“NIFA”). I (We) understand that the LIHTC Program will be governed and controlled by rules and regulations to be issued by the United States Treasury, and I (we) have read such rules and am (are) familiar with the requirements thereof. To the best of my (our) knowledge and belief, no information contained in this application or in the listed attachments and exhibits is in any way false or incorrect; that it is truly descriptive of the project or property for which the LIHTC is being applied; and the proposed construction will not violate zoning ordinances or deed restrictions.

I (We) hereby make application to NIFA for allocation of housing tax credits. The undersigned hereby acknowledges that the making of an allocation by NIFA does not warrant that the project is financially feasible or otherwise qualified to claim credits. I (We) agree that NIFA’s directors, officers, employees and agents will not be held responsible or liable for any representations made to the undersigned or its investors relating to the LIHTC Program; therefore, I assume the risk of all damages, losses, costs and expenses related thereto and agree to indemnify and save harmless NIFA or any of its directors, officers, employees and agents against any and all claims, suits, losses, damages, costs and expenses of any kind and of any nature that NIFA may hereinafter suffer, incur or pay arising out of its decision concerning the application for low-income housing tax credits or the use of the information concerning the LIHTC Program. The undersigned hereby certifies that the information set forth in this application form, and in any attachments and exhibits in support thereof, is true, correct and complete.

I (We) hereby certify that the information contained in the NIFA LIHTC Application is true and accurate. I (We) understand that any misrepresentations and/or fraudulent information contained within this application may result in the termination of tax credits by NIFA and potentially my (our) and related parties being barred from future program participation and notification of such to the Internal Revenue Service.





INQUIRIES: Inquiries, applications and further questions should be directed to:

Nebraska Investment Finance Authority

1230 O Street

Suite 200

Lincoln, NE 68508-1402

Telephone: (402) 434-3900

Facsimile: (402) 434-3921

Internet address: [www.NIFA.org](http://www.NIFA.org)

**Direct Construction Cost Breakdown**

**LIHTC DETAILED CONSTRUCTION COST BREAKDOWN**

Project: \_\_\_\_\_ Date: \_\_\_\_\_

Account Number		Category Description	Budget	Category Subtotals
<b>1</b>		<b>General Requirements</b>		
1	310	Superintendent		
1	320	Contract Administration		
1	330	Cleanup		
1	430			
1	620			
1	630			
1	650			
1	810			
1	910			
1	950			
1	980			
1	985			
1	985			
1	990			
			Subtotal:	

<b>2</b>		<b>On-site Work</b>		
2	110	Demolition		
2	230			
2	240			
2	250			
2	320			
2	350			
2	360			
2	370			
2	340			
2	400			
2	510			
			Subtotal:	
<b>2</b>		<b>Off-site Improvements</b>		
2	400	Off-site Improvements		
2	610			
			Subtotal:	

<b>3</b>		<b>Concrete</b>		
3	110	Excavation		
3	210	Footing/Foundation Labor and Materials		
3	220	Reinforcement Steel/Tie-downs		
3	230			
3	310			
3	350			
3	410			
			Subtotal:	

Account Number	Category Description	Budget	Category Subtotals
4	<b>Masonry</b>		
4	100 Masonry Labor and Materials		
4	200 Stonework		
4	310		
4	350		
4	410		
		Subtotal:	
5	<b>Metals</b>		
5	210 Miscellaneous Metals		
5	310 Steel Joists and Girders		
5	410		
		Subtotal:	
6	<b>Wood</b>		
6	110 Framing Material		
6	115 Framing Labor		
6	310 Finish Material		
6	315 Finish Labor		
6	510		
6	550		
6	610		
6	640		
		Subtotal:	
7	<b>Thermal/Moisture Protection</b>		
7	110 Waterproofing		
7	210 Soffit and Facia		
7	310 Gutter and Downspout Labor and Materials		
7	410 Insulation Labor and Materials		
7	510 Roofing Labor and Materials		
7	610 Vinyl Siding Labor and Materials		
7	610		
7	650		
7	670		
		Subtotal:	
8	<b>Doors and Windows</b>		
8	110 Hardware		
8	210 Steel Doors and Frames		
8	310 Wood Doors and Frames		
8	410 Windows Labor and Materials		
8	510 Sliding Doors Labor and Materials		
8	550		
8	610		
		Subtotal:	
9	<b>Finishes</b>		
9	210 Drywall Labor and Materials		
9	310 Ceramic Tile Labor and Materials		
9	410 Carpet Labor and Materials		

Account Number	Category Description	Budget	Category Subtotals
9	415	Resilient Flooring Labor and Materials	
9	510	Painting and Wall Covering Labor and Materials	
9	540		
9	540		
9	610		
		Subtotal:	
<b>Bathroom Accessories</b>			
10	110	Bathroom Accessories	
10	210	Address Numbers Labor and Materials	
10	310	Shutters Labor and Materials	
10	410	Mirrors Labor and Materials	
10	510		
10	610		
		Subtotal:	
<b>Equipment</b>			
11	110	Bath Appliances	
11	210	Kitchen Appliances	
11	310		
		Subtotal:	
<b>Furnishings</b>			
12	110	Cabinets Labor and Materials	
12	210		
		Subtotal:	
<b>Conveying Systems</b>			
14	110	Elevator Systems	
		Subtotal:	
<b>Mechanical</b>			
15	110	Heating Labor and Materials	
15	210	Air Conditioning Labor and Materials	
15	310	Cooler Labor and Materials	
15	410	Plumbing Labor and Materials	
15	510		
		Subtotal:	
<b>Electrical</b>			
	110	Security System	
	210	Electrical Labor and Materials	
	310	Lighting Fixtures Materials	
	410	Fire Detection System Labor and Materials	
	420		
	510		
		Subtotal:	
<b>Profit and Overhead</b>			
17	110	Builder Profit	
17	210	Builder Overhead	
17	310	Contingency	
		Subtotal:	
18		Impact Fees	
18	110	Impact Fees	

## **EXHIBIT 101A**

### **FAIR HOUSING ACT ACCESSIBILITY CHECKLIST**

The following is a checklist of design and construction requirements of the Fair Housing Act (the “Act”). This checklist represents many, but not all, of the requirements to the Act. This checklist is not intended to be exhaustive; rather, it is a helpful guide in determining if the major requirements of the Act have been met in designing and constructing a particular multifamily development.

#### **GENERAL REQUIREMENTS**

- Development has buildings containing 4 or more units and was designed and constructed for first occupancy on or after March 13, 1991.
- If it is an elevator building, all units are “covered units.”
- All units in buildings with elevators have features required by the Act.
- If it is a non-elevator building, all ground-floor units are “covered units.”
- All ground-floor units in buildings without elevators have features required by the Act.

**NOTE:** There is a narrow exception which provides that a non-elevator building in a development need not meet all of the Act’s requirements if it is impractical to have an accessible entrance to the non-elevator building because of hilly terrain or other unusual characteristics of the site.

#### **ACCESSIBLE BUILDING ENTRANCE ON AN ACCESSIBLE ROUTE**

- The accessible route is a continuous, unobstructed path (no stairs) through the development that connects all buildings containing covered units and all other amenities.
- The accessible route also connects to parking lots, public streets, public sidewalks and public transportation stops.
- All slopes are no steeper than 8.33%.
- All slopes between 5% and 8.33% have handrails.
- Covered units have at least one entrance on an accessible route.
  - There are sufficient curb cuts for a person using a wheelchair to reach every building in the development.

## COMMON AND PUBLIC USE AREAS

- At least two percent of all parking spaces are designated as handicapped parking.
- At least one parking space at each common and public use amenity is designated as handicapped parking.
- All handicapped parking spaces are properly marked.
- All handicapped parking spaces are at least 96" wide with a 60" wide access aisle which can be shared between two spaces.
- The accessible aisle connects to a curb ramp and the accessible route.
- The rental or sales office is readily accessible and usable by persons with disabilities.
- All mailboxes, swimming pools, tennis courts, clubhouses, rest rooms, showers, laundry facilities, trash facilities, drinking fountains, public telephones and other common and public use amenities offered by the development are readily accessible and usable by persons with disabilities.

## USABLE DOORS

- All doors into and through covered units and common use facilities provide a clear opening of at least 32" nominal width.
- All doors leading into common use facilities have lever door handles that do not require grasping and twisting.
- Thresholds at doors to common use facilities are no greater than 1/2".
- All primary entrance doors to covered units have lever door handles that do not require grasping and twisting.
- Thresholds at primary entrance doors to covered units are no greater than 3/4" and beveled.

## ACCESSIBLE ROUTE INTO AND THROUGH THE COVERED UNIT

- All routes through the covered units are no less than 36" wide.

## ACCESSIBLE ENVIRONMENTAL CONTROLS

- All light switches, electrical outlets, thermostats and other environmental controls must be no less than 15" and no greater than 48" from the floor.

## REINFORCED BATHROOM WALLS FOR GRAB BARS

- Reinforcements are built into the bathroom walls surrounding toilets, showers and bathtubs for the later installation of grab bars.

USABLE KITCHENS AND BATHROOMS

- At least 30" x 48" of clear floor space at each kitchen fixture and appliance.
- At least 40" between opposing cabinets and appliances.
- At least a 60" diameter turning circle in U-shaped kitchens unless the cooktop or sink at end of U-shaped kitchen has removable cabinets beneath for knee space.
- In bathroom, at least 30" x 48" of clear floor space outside swing of bathroom door.
- Sufficient clear floor space in front of and around sink, toilet and bathtub for use by persons using wheelchairs.

Checklist Completed By Project Architect

By \_\_\_\_\_  
Printed Name \_\_\_\_\_  
Title \_\_\_\_\_



**EXHIBIT 103  
VERIFICATION OF ZONING**

(Applicable Local Jurisdiction Letterhead)

Nebraska Investment Finance Authority  
Suite 200  
1230 O Street  
Lincoln, NE 68508-1402

Project Name:  
Project Address/Site:

Project City:  
Proposed Number of Units:  
Housing Type:

The site for the above-described low-income housing tax credit project is zoned \_\_\_\_\_. The zone allows for residential development of (multifamily)/(single-family) housing. This zoning designation allows \_\_\_\_ units per acre.

The proposed low-income tax credit housing project does/does not require a Conditional Use Permit/Variance/Density Bonus to be in compliance with local code.

If City Council or Board of Supervisors approvals are required prior to issuance of building permits, in addition to those listed above, please describe. Denote if the approvals are technical or discretionary in nature.

Zoning Ordinance No. \_\_\_\_\_ allows the development of the affordable housing project as described above. Attach a copy of the Ordinance to this letter.

Dated: \_\_\_\_\_

STATEMENT COMPLETED BY:

By \_\_\_\_\_  
Printed Name \_\_\_\_\_  
Title \_\_\_\_\_

**EXHIBIT 105**

**CERTIFICATION OF FINANCING COMMITMENT**

(Lender Letterhead)

Nebraska Investment Finance Authority  
Suite 200  
1230 O Street  
Lincoln, NE 68508-1402

The undersigned (“Lender”) hereby certifies as follows to the Nebraska Investment Finance Authority (“NIFA”) to urge NIFA to award \_\_\_\_\_ (“Applicant”) low-income housing tax credits for the Development located at or to be located at \_\_\_\_\_, known as or to be known as \_\_\_\_\_, and consisting of or to consist of \_\_\_\_\_ units.

1. All conditions precedent to the issuance of a binding [construction] [permanent loan] commitment (including, but not limited to, payment of commitment fees, other fees or any good-faith deposits) by Lender to Applicant for the financing of the Development have been met and are deemed satisfied by Lender.

2. Lender and Applicant have entered into a binding [construction] [permanent loan] commitment for the financing of the Development. This loan commitment is valid through \_\_\_\_\_.

3. The loan commitment does not contain any conditions, in connection with the financing for the Development, which are not customary and reasonable for financing of this nature and amount and which are not reasonably expected by Lender to be met at the time of the loan closing.

4. The Lender reasonably expects to close on the loan referred in the loan commitment by \_\_\_\_\_, subject to the performance of the Applicant.

5. The undersigned is an authorized officer of Lender who has direct and personal knowledge of the facts contained in the certification and who is authorized to execute this certification on behalf of Lender.

6. Exhibit #105 is evidence of the existence of a loan commitment between Lender and Applicant and a summary of certain relevant terms. Reference must be made to the copy of the loan commitment which is attached for a complete description of all terms and conditions of the loan commitment.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

LENDER

By \_\_\_\_\_  
Name \_\_\_\_\_  
Title \_\_\_\_\_

**EXHIBIT #109A**

**INITIAL NO OBJECTION LETTER**

(Tax-Exempt Bond Projects Only)

[DATE]

Nebraska Investment Finance Authority  
Suite 200  
Commerce Court  
1230 O Street  
Lincoln, NE 68508

Re: [PROJECT NAME]  
[ADDRESS]

Dear NIFA:

The City of \_\_\_\_\_ (the “City”) has no objections, at this time, to the application of [DEVELOPER] (the “Developer”) for tax-exempt financing for the above-referenced project.

**Need and Demand**

The [PROJECT] (the “Proposed Project”) involves the construction of \_\_\_\_\_ residential units. The Developer has represented that at least \_\_\_% of the units will be occupied by low- and moderate-income individuals or families. Completion of the Proposed Project would assist in addressing the housing needs identified [by this Department] [by the City].

**Zoning**

The parcel of land on which the Proposed Project will be located is zoned \_\_\_\_\_. This zoning designation permits (or will permit) multifamily residential use such as the Proposed Project.

**Satisfaction of Conditions**

As a prerequisite to delivery of this letter, the Developer may have made certain commitments and agreed to certain conditions required by the City. The Developer’s obligations have been identified by the City and agreed to by the Developer and are not conditions or standards established by Nebraska Investment Finance Authority (“NIFA”).

As evidenced by the Developer’s acknowledgment below, the undersigned has advised the Developer and the Developer understands that:

- (i) Delivery of this letter to NIFA is required by NIFA (in addition to such other requirements that may have been identified by NIFA to the Developer under

separate cover) as a condition to receiving a NIFA Board of Directors' approved Intent Resolution;

(ii) Neither this letter nor adoption of the Intent Resolution by the NIFA Board constitutes a commitment by the City or NIFA to proceed with the proposed financing of the Proposed Project;

(iii) Prior to the allocation of volume cap by NIFA to the Developer with respect to the Proposed Project, a second "no objection" letter from the City will be required restating its acknowledgment of the Proposed Project; and

(iv) Delivery of that second letter by the City is conditioned on the Developer's performance of the obligations and agreements to take additional action, if any, requested by the City, to the satisfaction of the City.

Your favorable consideration in the context of an Intent Resolution with respect to the Project is appreciated.

Sincerely,

---

Planning Director

Acknowledged by:

[DEVELOPER]

Date: \_\_\_\_\_

**EXHIBIT #109B**

**FINAL NO OBJECTION LETTER**

(Tax-Exempt Bond Projects Only)

[DATE]

Nebraska Investment Finance Authority  
Suite 200  
Commerce Court  
1230 O Street  
Lincoln, NE 68508

Re: Allocation of Nebraska Investment Finance Authority (“NIFA”) Volume Cap  
[PROJECT NAME]  
[ADDRESS]

Dear NIFA:

The City of \_\_\_\_\_ (the “City”) previously delivered to you its “no objection” letter with respect to the application of [DEVELOPER] (the “Developer”) for tax-exempt financing for the above-referenced project. A copy of that letter is attached.

**Need and Demand**

The Proposed Project involves the construction of \_\_\_\_\_ residential units. The Developer has represented that \_\_\_\_\_% of the units will be available to be occupied by low- and moderate-income individuals or families. It is the conclusion of the undersigned that completion of the Proposed Project would assist in addressing the housing needs identified [by this Department] [by the City].

**Zoning**

The parcel of land on which the Proposed Project will be located is zoned \_\_\_\_\_. This zoning designation permits multifamily residential use such as the Proposed Project.

**Satisfaction of Conditions**

All conditions imposed on this Project by the City have been met to date. It is understood that these conditions are between the City and the Developer and are not conditions or standards established by NIFA.

As evidenced by the Developer’s acknowledgment below, the undersigned has represented and the Developer understands that:

(i) delivery of this letter to NIFA is required by NIFA (in addition to such other requirements that may have been identified by NIFA to the Developer under separate cover) as a condition to allocation of volume cap to the financing of the Project; and

(ii) in the event of changed circumstances or facts, neither this letter nor allocation of volume cap to the financing of the Project constitutes an irrevocable commitment by the City or NIFA to proceed with the proposed financing of the Proposed Project.

Your favorable consideration of allocation of volume cap to the financing of the Project is appreciated.

Sincerely,

---

Planning Director

Acknowledged by:

[DEVELOPER]

Date: \_\_\_\_\_

**EXHIBIT 212(A)**

**HOUSING AUTHORITY REFERRAL ARRANGEMENT**

In connection with \_\_\_\_\_'s (the "Applicant") application for an allocation of low-income housing tax credits, Applicant hereby agrees upon the conditions that the Applicant receives an allocation of low-income housing tax credits ("LIHTC's") from the Nebraska Investment Finance Authority, and the project is constructed, as follows:

If the Local Housing Authority (the "Authority") in the jurisdiction in which the Applicant's project is located maintains a public housing waiting list, the Applicant agrees:

1. To notify the Authority when target units, designated in the Applicant's application for LIHTC's, become available for rent. Such notice shall be given by telephone, facsimile or other immediate method and confirmed in writing to the Authority. The notice shall include information describing the location, size, type and rent for the unit.
2. For a period of seven days from the time notice is received by the Authority, Applicant shall receive and process applications for the unit from persons on the public housing waiting list of the Authority, who submit an application to the Applicant, and shall not advertise or seek renters from other sources during such period. Applicant, however, shall be under no obligation to consider a rental application from other than a low-income tenant under the provisions of the LIHTC program and Section 42 of the Internal Revenue Code.
3. It is expressly understood:
  - (a) That the Applicant shall have the final authority to accept tenants into the project pursuant to the fair housing laws applicable to the project and the rules and regulations applied to all tenants,
  - (b) That Applicant is not required to lease units to unqualified tenants pursuant to the rules applicable to the project and under the provisions of Section 42 of the IRC.
4. Applicant acknowledges that this agreement shall be recorded as part of the restrictive covenants and Land Use Restriction Agreement binding the Applicant, and his successors in ownership, to perform under this agreement during the effective period of the restrictive covenants.

For the Applicant: \_\_\_\_\_ Title: \_\_\_\_\_

Receipt of Agreement Acknowledged by the Authority on \_\_\_\_\_, 200\_.

By: \_\_\_\_\_

Title: \_\_\_\_\_



**EXHIBIT 212(B)**

**TENANT REFERRAL ARRANGEMENT**

In connection with \_\_\_\_\_'s (the "Applicant") application for an allocation of low-income housing tax credits, Applicant hereby agrees upon the conditions that the Applicant receives an allocation of low-income housing tax credits ("LIHTC's") from the Nebraska Investment Finance Authority, and the project is constructed, as follows:

If the U.S. Military Installation Housing Office (the "Housing Office") in the jurisdiction in which the Applicant's project is located maintains a waiting list, the Applicant agrees:

1. To notify the Housing Office when target units, designated in the Applicant's application for LIHTC's, become available for rent. Such notice shall be given by telephone, facsimile or other immediate method and confirmed in writing to the Housing Office. The notice shall include information describing the location, size, type and rent for the unit.
2. For a period of seven days from the time notice is received by the Housing Office, Applicant shall receive and process applications for the unit from persons on the waiting list of the Housing Office, who submit an application to the Applicant, and shall not advertise or seek renters from other sources during such period. Applicant, however, shall be under no obligation to consider a rental application from other than a low-income tenant under the provisions of the LIHTC program and Section 42 of the Internal Revenue Code.
3. It is expressly understood:
  - (a) That the Applicant shall have the final authority to accept tenants into the project pursuant to the fair housing laws applicable to the project and the rules and regulations applied to all tenants,
  - (b) That Applicant is not required to lease units to unqualified tenants pursuant to the rules applicable to the project and under the provisions of Section 42 of the IRC.
4. Applicant acknowledges that this agreement shall be recorded as part of the restrictive covenants and Land Use Restriction Agreement binding the Applicant, and his successors in ownership, to perform under this agreement during the effective period of the restrictive covenants.

For the Applicant: \_\_\_\_\_ Title: \_\_\_\_\_

Receipt of Agreement Acknowledged by the Housing Office on \_\_\_\_\_, 200\_.

By: \_\_\_\_\_  
Title: \_\_\_\_\_

**MANAGEMENT PLAN**

**PLEASE TYPE OR PRINT LEGIBLY**

Sponsor: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: (     ) \_\_\_\_\_

**Proposed Management Agent's  
Name, Address and Zip Code:**

**Name and Location of  
Proposed Facility:**


**A. Role and Responsibility of Proposed Managing Agent:**

1. What are the supervisory relationships between the sponsor, managing agent and project staff? (Please attach an organizational chart.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. What qualities will you look for when hiring a management staff?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. What is the proposed management fee? \$\_\_\_\_\_

**B. Personnel Policy and Staffing Arrangements:**

(All supervisory, bookkeeping/accounting and clerical expenses, along with all of the agent's overhead expenses that will be borne by the agent out of its own funds and will not be treated as an operating expense of the project.)

1. What is the planned staffing for the project? (Include a breakdown of jobs and salary schedules.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Which position within the management entity is responsible for resolving personnel disputes and/or problems?

---

3. Who will be responsible for the NIFA's reporting requirements and compliance with program requirements?

---

**C. Plans and Procedures for Marketing the Project:**

Projects funded through the HOME Program must follow HOME Affirmative Marketing Procedures.

Submit a copy of your marketing plan.

1. In which cities/communities will you advertise the project?

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2. What method of advertising media will be used?

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3. When will the marketing activities begin?

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4. What orientation will be provided to residents to familiarize them with the project and acceptable practices for care of their unit?

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5. What follow-up will you use to determine if residents are satisfied with their unit and the services provided?

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**D. Procedures for Selecting Residents:**

1. Who will be responsible for selecting residents?

---

2. What experience does this person have in selecting residents for this type of project? Provide a brief outline of such experience and state any provisions being made to train this person.

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3. List the criteria to be used in selecting residents. (Indicate the income screening procedures, and include the requirements of the requested funding program.)

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4. What efforts will be made to insure compliance with the Fair Housing Act with respect to resident selection?

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**E. Maintenance and Repair Program:**

1. What move-out inspection and repair procedures will you employ?

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2. What is your procedure for residents to report any and all maintenance needs?

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3. What is your procedure to have major repairs completed?

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**MANAGEMENT AGENT'S QUALIFICATIONS**

**PLEASE TYPE OR PRINT LEGIBLY**

Proposed Management Agent's  
Name, Address and Zip Code:

Name and Location of  
Proposed Facility:

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Management Agent's Phone Number (       ) \_\_\_\_\_

1. Distance in miles from firm's office to proposed site: \_\_\_\_\_
2. Number of projects currently managed: \_\_\_\_\_ Number of units: \_\_\_\_\_
3. Has this firm managed projects under different name? If yes, please list name, projects managed and date managed.  
\_\_\_\_\_  
\_\_\_\_\_
4. Please attach recent photos of currently managed building(s), exteriors, grounds, parking lot and common areas (including, but not limited to, garbage areas, laundry rooms and play areas). Please identify photos.
5. What year did management activities begin? \_\_\_\_\_
6. Attach a narrative explaining what experience your firm has, or specific employees of the firm have, that qualifies it to manage this particular type of project. Please include all property management experience or other comparable experience which you consider provide the skills necessary to manage this project. Attach resumes if available.
7. Have any of the projects that the firm managed/manages ever experienced a default? \_\_\_\_  
If yes, please explain circumstances surrounding each default.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Describe frequency and type of direct supervision to be given to the resident manager and by whom:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**F. Rent Collection Policies and Procedures:**

1. Describe the method by which monthly rents will be collected, receipted and deposited.

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2. What is the procedure when a resident misses a rent payment?

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3. Describe your proposed eviction policies and procedures.

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**G. Plans for Resident-Management Relations :**

1. How will resident grievances be handled?

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2. Do you have published house rules? \_\_\_\_\_ If yes, please attach a copy.

3. Do you have a published guest policy? \_\_\_\_\_ If yes, please attach a copy.

**H. Security Measures:**

1. What steps will be taken for the resident's security?

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**I. Food Service Program:**

1. If there is a food service program, please indicate who will be responsible for that program and their experience in that area.

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9. Does the firm have a Nebraska Broker's or Property Management license? \_\_\_\_\_  
If yes, indicate in whose name and the type of license.

\_\_\_\_\_  
\_\_\_\_\_

10. Does the firm have surety bond? \_\_\_\_\_ If yes, state:

(a) Amount of bonds: \$ \_\_\_\_\_

(b) Name of bonding company: \_\_\_\_\_

If no, is the firm eligible for a surety bond? \_\_\_\_\_

11. References: List references for whom management services have been provided:

	<u>Name</u>	<u>Address</u>	<u>Phone Number</u>
(a)	_____	_____	( ) _____
(b)	_____	_____	( ) _____
(c)	_____	_____	( ) _____

**CERTIFICATION:**

THE UNDERSIGNED HEREBY CERTIFIES UNDER PENALTY OF PERJURY THAT THE INFORMATION SET FORTH IN THIS DOCUMENT, AND IN ANY ATTACHMENT IN SUPPORT THEREOF, IS TRUE, CORRECT AND COMPLETE.

\_\_\_\_\_  
Name of Firm

By: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**NEBRASKA INVESTMENT FINANCE AUTHORITY  
LOW INCOME HOUSING TAX CREDIT PROGRAM**

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