

## Part III - Points

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[Senior](#)

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# FAMILY CYCLE

Maximum Score = 63

SLIDING SCALE

Sponsor Scoring Agency Scoring

EXTENDED USE				
Increase in Compliance Period (non-QCT) OR Qualified Census Tract OR Conversion to Tenant Ownership (SF/Duplex only) Public Housing Waiting Lists	15 OR 15 OR 10 1			

LARGE FAMILY UNITS				
Low Density Bldg with at least 30% large family tax creditunits OR Non- Low Density Rehab OR Weighted Average for Multi-Building Projects	7 OR 3 OR 3-7			

COUNTY & MUNICIPAL SUPPORT				
Tax Abatement or 2 Yr Tax Escrow + County/Municipal Support > 5% of Total Project Cost or 2 Yr Tax Escrow + County/Municipal Support = 5% of Total Project Cost or 2 Yr Tax Escrow + County/Municipal Support >1% & <5% of Total Project Cost	5 OR 4 OR 3 OR 2			

GOALS				
Provision of Social Services	0-3	_____ social services x 1		
Certified MBE/WBE Utilization	4			
Ready to Grow Area PLUS COAH/Court-ordered obligation/Transit Village (Not in QCT) OR PLUS COAH/Court-ordered obligation/Transit Village (In QCT) OR PLUS QCT w/CRP	5 5 OR 3 OR 2			
Unit Amenities	0-3	_____ unit amenities x 1		
Project Amenities	0-2	_____ project amenities x 1		
Community Policing/Public Safety Enhancements	1			
Site Selection	2			
NJ Green Future, solar photovoltaic system, LEED certified OR Microload	1			
Historic Building/Certified "Brownfields" Project/Adaptive Reuse PLUS Historic Tax Credits	2 1			

AFFORDABILITY				
Elect 20% at 50% federal set aside OR Elect to restrict 10% of tax credit units at 30% of AMI	1			

READINESS TO PROCEED				
Syndicator/Investor Commitment	1			
Commitment to Start Construction within 120 days of tax credit award	2			

SUCCESSFUL DEVELOPMENT EXPERIENCE				
Two tax credit properties with 93% occupancy, 1.15 dcr for 6 consecutive months	2			

NEGATIVE POINT CATEGORIES				
DEVELOPER				
Involvement in Foreclosure within past 7 Years	-3			
Utilization of Cure Period	0 - -2	_____ cures x -1		
COMPLIANCE				
Uncorrected Noncompliance - Code/Health Violation, Failed System	-10			
Uncorrected Noncompliance - State QAP Violation	-5			
Full Credit Return within past 2 Years	-3			
Failure to Pay Monitoring Fees	-10			
Failure to Submit Annual Project Certifications and/or Building Status Reports	-10			

TOTAL SCORE\*

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Scores should not include decimals.  
Use normal rounding (.1 to .4 round down and .5 to .9 round up)

\* Total Score must be at least 41

# SENIOR CYCLE

Maximum Score = 57

SLIDING SCALE

Sponsor Scoring

<b>EXTENDED USE</b>			
Increase in Compliance Period (non-QCT) <b>OR</b> Qualified Census Tract <b>OR</b> Conversion to Tenant Ownership (SF/Duplex only) Public Housing Waiting Lists	15 <b>OR</b> 15 <b>OR</b> 10 1		

<b>COUNTY &amp; MUNICIPAL SUPPORT</b>			
Tax Abatement or 2 Yr Tax Escrow + County/Municipal Support > 5% of Total Project Cost or 2 Yr Tax Escrow + County/Municipal Support = 5% of Total Project Cost or 2 Yr Tax Escrow + County/Municipal Support >1% & <5% of Total Project Cost	5 or 4 or 3 or 2		

<b>GOALS</b>			
Provision of Social Services	0-3	_____ social services x 1	
Certified MBE/WBE Utilization	4		
Ready to Grow Area PLUS COAH/Court-ordered obligation/Transit Village <b>OR</b> PLUS QCT w/CRP	5 5 <b>OR</b> 2		
Unit Amenities	0-3	_____ unit amenities x 1	
Project Amenities	0-2	_____ project amenities x 1	
Community Policing/Public Safety Enhancements	1		
Site Selection	2		
NJ Green Future, solar photovoltaic system, LEED certified OR Microload	1		
20% Frail Elderly	1		
Historic Building/Certified "Brownfields" Project/Adaptive Reuse PLUS Historic Tax Credits	2 1		

<b>AFFORDABILITY</b>			
Elect 20% at 50% federal set aside <b>OR</b> Elect to restrict 10% of tax credit units at 30% of AMI	1		

<b>READINESS TO PROCEED</b>			
Syndicator/Investor Commitment	1		
Commitment to Start Construction within 120 days of tax credit award	2		

<b>SUCCESSFUL DEVELOPMENT EXPERIENCE</b>			
Two tax credit properties with 93% occupancy, 1.15 dcr for 6 consecutive months	2		

<b>NEGATIVE POINT CATEGORIES</b>			
<b>DEVELOPER</b>			
Involvement in Foreclosure within past 7 Years	-3		
Utilization of Cure Period	0 - -2	_____ cures x -1	
<b>COMPLIANCE</b>			
Uncorrected Noncompliance - Code/Health Violation, Failed System	-10		
Uncorrected Noncompliance - State QAP Violation	-5		
Full Credit Return within past 2 Years	-3		
Failure to Pay Monitoring Fees	-10		
Failure to Submit Annual Project Certifications and/or Building Status Reports	-10		

**TOTAL SCORE\***

0

Scores should not include decimals.

# SUPPORTIVE HOUSING CYCLE

Maximum Score = 73

SLIDING SCALE

Sponsor Scoring Agency Scoring

SUPPORTIVE HOUSING				
Supportive Services Plan - Description of population's supportive service needs, description of proposed services, including supportive service agreements with providers & funding sources - Provision of at least 1 of the following: 24/7 crisis response, financial training, on-going follow up services - Social Service Provider(s) Years of Experience (3 or more years for each) - Landlord/Tenant Relationship incl. detailed eligibility criteria for tenant selection/screening	5			
Education and/or job training	0 - 2			
Lease-based permanent supportive housing (all units)	2			
Project Based Rental Assistance for all special needs units	2			
Qualified Non Profit Sponsor	2			
Integrated community living opportunities	2			
Minimum Living Standards (must meet all 4) - Dwelling units have bedrooms not less than 100 square feet - Unrelated residents have their own bedroom - No more than 4 unrelated adults share a bathroom - Residents have access to a full kitchen	5			
<b>LOW INCOME</b>				
Increase in Compliance Period (non-QCT) OR Qualified Census Tract OR Conversion to Tenant Ownership (SF/Duplex only) Public Housing Waiting Lists	15 OR 15 OR 10 1			
<b>COUNTY &amp; MUNICIPAL SUPPORT</b>				
Tax Abatement or 2 Yr Tax Escrow + County/Municipal Support > 5% of Total Project Cost or 2 Yr Tax Escrow + County/Municipal Support = 5% of Total Project Cost or 2 Yr Tax Escrow + County/Municipal Support >1% & <5% of Total Project Cost	5 or 4 or 3 or 2			
<b>GOALS</b>				
Certified MBE/WBE Utilization	4			
Ready to Grow Area PLUS COAH/Court-ordered obligation/Transit Village (Not in QCT) OR PLUS COAH/Court-ordered obligation/Transit Village (In QCT) OR PLUS QCT w/CRP	5 5 OR 3 OR 2			
Unit Amenities	0-3	_____ unit amenities x 1		
Project Amenities	0-2	_____ project amenities x 1		
Community Policing/Public Safety Enhancements	1			
Site Selection	2			
NJ Green Future, solar photovoltaic system, LEED certified OR Microload	1			
Historic Building/Certified "Brownfields" Project/Adaptive Reuse PLUS Historic Tax Credits	2 1			
<b>AFFORDABILITY</b>				
Elect 20% at 50% federal set aside OR Elect to restrict 10% of tax credit units at 30% of AMI	1			
<b>READINESS TO PROCEED</b>				
Syndicator/Investor Commitment Commitment to Start Construction within 120 days of tax credit award	1 2			
<b>SUCCESSFUL DEVELOPMENT EXPERIENCE</b>				
Two tax credit properties with 93% occupancy, 1.15 dcr for 6 consecutive months	2			
<b>NEGATIVE POINT CATEGORIES</b>				
<b>DEVELOPER</b>				
Involvement in Foreclosure within past 7 Years	-3			
Utilization of Cure Period	0 - -2	_____ cures x -1		
<b>COMPLIANCE</b>				
Uncorrected Noncompliance - Code/Health Violation, Failed System	-10			
Uncorrected Noncompliance - State QAP Violation	-5			
Full Credit Return within past 2 Years	-3			
Failure to Pay Monitoring Fees	-10			
Failure to Submit Annual Project Certifications and/or Building Status Reports	-10			

TOTAL SCORE\*

0	
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Scores should not include decimals.  
Use normal rounding (.1 to .4 round down and .5 to .9 round up)

\* Total Score must be at least 47

# FINAL CYCLE

Maximum Score = 63

SLIDING SCALE

Sponsor Scoring Agency Scoring

EXTENDED USE				
Increase in Compliance Period (non-QCT) OR Qualified Census Tract OR Conversion to Tenant Ownership (SF/Duplex only) Public Housing Waiting Lists	15 OR 15 OR 10 1			

LARGE FAMILY UNITS				
Low Density Bldg with at least 30% large family tax creditunits OR Non- Low Density Rehab OR Weighted Average for Multi-Building Projects	7 OR 3 OR 3-7			

COUNTY & MUNICIPAL SUPPORT				
Tax Abatement or 2 Yr Tax Escrow + County/Municipal Support > 5% of Total Project Cost or 2 Yr Tax Escrow + County/Municipal Support = 5% of Total Project Cost or 2 Yr Tax Escrow + County/Municipal Support >1% & <5% of Total Project Cost	5 OR 4 OR 3 OR 2			

GOALS				
Provision of Social Services	0-3	_____ social services x 1		
Certified MBE/WBE Utilization	4			
Ready to Grow Area PLUS COAH/Court-ordered obligation/Transit Village (Not in QCT) OR PLUS COAH/Court-ordered obligation/Transit Village (In QCT) OR PLUS QCT w/CRP	5 5 OR 3 OR 2			
Unit Amenities	0-3	_____ unit amenities x 1		
Project Amenities	0-2	_____ project amenities x 1		
Community Policing/Public Safety Enhancements	1			
Site Selection	2			
NJ Green Future, solar photovoltaic system, LEED certified OR Microload	1			
Historic Building/Certified "Brownfields" Project/Adaptive Reuse PLUS Historic Tax Credits	2 1			

AFFORDABILITY				
Elect 20% at 50% federal set aside OR Elect to restrict 10% of tax credit units at 30% of AMI	1			

READINESS TO PROCEED				
Syndicator/Investor Commitment	1			
Commitment to Start Construction within 120 days of tax credit award	2			

SUCCESSFUL DEVELOPMENT EXPERIENCE				
Two tax credit properties with 93% occupancy, 1.15 dcr for 6 consecutive months	2			

NEGATIVE POINT CATEGORIES				
DEVELOPER				
Involvement in Foreclosure within past 7 Years	-3			
Utilization of Cure Period	0 - -2	_____ cures x -1		
COMPLIANCE				
Uncorrected Noncompliance - Code/Health Violation, Failed System	-10			
Uncorrected Noncompliance - State QAP Violation	-5			
Full Credit Return within past 2 Years	-3			
Failure to Pay Monitoring Fees	-10			
Failure to Submit Annual Project Certifications and/or Building Status Reports	-10			

TOTAL SCORE\*

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Scores should not include decimals.  
Use normal rounding (.1 to .4 round down and .5 to .9 round up)

\* Total Score must be at least 41

**SOCIAL SERVICES SUMMARY**

**This chart is to be completed by the applicant and will NOT be construed as part of the actual commitment letter between the applicant and social service provider. Please complete one chart for each social service proposed.**

<b>SOCIAL SERVICE</b>	
<b>SUMMARY DESCRIPTION of SOCIAL SERVICE</b>  (a full description of the social service should be recited in your executed agreement)  (attach your executed agreement and any applicable licenses).	
<b>EXECUTED AGREEMENTS (attached hereto)</b>	Term of Agreement: _____
<b>SOCIAL SERVICE PROVIDER</b>	
<b>REFERENCES (attached hereto)</b>	1: _____ 2: _____
<b>FUNDING SOURCES</b>	1: Source: _____      2: Source: _____  Amount: \$ _____                      Amount: \$ _____  Term: _____                              Term: _____  ONE-TIME or PERIODIC (circle)                      ONE-TIME or PERIODIC (circle)
<b>TENANT AFFORDABILITY (describe)</b>	
<b>TENANT ACCESSIBILITY (describe)</b>	

Insert additional pages if more space is necessary.