

Exhibit A - Development Synopsis

The synopsis is a **one page** description of the development, including, but not limited to, a summary of the need for the development; its impact on the community; targeted population; square footage of the development; number and type of buildings; number and bedroom size of units in each building; amenities and unique features of the development; and a description of nearby services.

Exhibit B - Multifamily Housing Core Application

An Application is required to be completed for all Agency Multifamily programs. Be sure to complete all sections, answer all questions, and provide all requested supporting documentation.

If you do not know the Census Tract and/or Block information for your proposed site, this information may be obtained from census maps accessible on the internet at:

http://factfinder.census.gov/servlet/ReferenceMapFramesetServlet?_lang=en&_bm=y

Enter the address (including the +4 zip code) of the site and continue following the directions to obtain census tract, block, group, legislative districts, voting district, school district and municipality.

For purposes of this Preliminary Site Application, the budget should include the anticipated sources and uses of development funds. The Agency will use this information for determining availability of program funds.

Developments which include both residential and commercial space must separate the estimated costs. All costs associated with both the commercial and residential areas must be included in Total Development Costs in the Development Budget. A narrative of the anticipated use of the commercial space must also be provided including an exact square footage so that the Agency can evaluate the impact of the commercial space on the development.

For applications involving rehabilitation and new construction buildings, the construction costs must be broken down to show separately the costs of new construction and rehabilitation.

Please note that if the development contains multiple buildings and only some buildings are located in a QCT/DDA, submit separate budgets for those buildings located in a QCT/DDA and those that are not in a QCT/DDA.

Please be advised that the Agency will be using the Unit Configuration and Rental Income Projections from the Core Application for the purpose of evaluating the Preliminary and Underwriting applications. This information must match the supporting documentation set forth in the Market Study/Housing Needs Assessment.

Per line instructions for completing the Operating Budget and budget narrative are attached. In addition, per unit controllable operating expense ranges by geographic region are available on the Agency's website. (Controllable operating expenses only include administrative expenses, excluding management fee, operating and maintenance expenses, and payroll. They do not include taxes, insurance, utilities, supportive services, and reserve for replacement expenses.) Per unit controllable operating expenses on the Application must be within these ranges in order to be considered a feasible Application. Waivers of this requirement may be made at the Agency's discretion.

OPERATING BUDGET INSTRUCTIONS

The following descriptions are included to facilitate the preparation of the **proposed** Operating Budget. For developments seeking Agency financing, they represent the key items the applicant must consider when preparing the Operating Budget. A narrative should be provided indicating the basis for the following numbers: gross rental income, commercial rental income, other rental income, service income, all payroll categories, real estate taxes, misc. taxes and insurance, supportive services, investor service fee, and any other categories that may require an explanation.

The per-unit controllable operating expenses must fall within the Agency's acceptable range or within the average range for the applicable management agent to meet the requirements for a feasible application. **The ranges are available on the Agency's website.** Please refer to this website for the requirements regarding the controllable operating expenses.

For underwriting purposes, the Agency will continue to trend income at 2% annually and expenses at 3% annually for the 2011 funding round.

1. **Gross Rental Income** - Annual gross potential income based on the monthly rents and unit configuration. The Gross Rental Income should be calculated from the Unit Configuration & Rental Income Projections schedule in the Application, using Column A, Tenant Paid Rent, and Column C, Rental Assistance Payment.
2. **Commercial Income** - Specify square footage and annual rent per square foot for each commercial space (stores or offices). Submit copies of leases or letters of intent to lease under Tab 18.
3. **Other Rental Income** - Other substantial rental revenue, including rental subsidies, parking and garages.
4. **Total Rental Income** - Add lines 1, 2, 3.
5. **Residential Vacancies** - A minimum of 1 unit vacant per month is required if less than 20 units. A minimum of 5% is required for 20 units or more.
6. **Commercial Vacancy** - A minimum of 10% is required.
7. **Total Vacancies** - Add lines 5,6.
8. **Net Rental Income** - Subtract line 7 from 4.
9. **Service Income** – Laundry income specifying owned or leased machines. If leased, reflect only the net income to the property. For underwriting purposes, service income may not exceed \$60 per unit per year and the budget should not include vending income. The Agency may require justification for any amount listed in this category.
10. **Effective Gross Income** - Add lines 8 & 9.

11. **Advertising & Renting** - Expenses for the ongoing rental of the units. Include advertising, marketing and referral fees.
12. **Office & Telephone-** Office expenses for an on-site office only. In addition, include costs for telephone, answering service, and pager rental.
13. **Management Fee** - Indicate the fee factor, or fee per unit, the Management Agent will accept as total compensation for services, and apply the factor to line 10. This is subject to Agency approval. The management fee factor should not be less than 5% nor exceed 10%. The fee factor budgeted should be the percentage expected to be maintained for at least the first three years of operations.
14. **Legal** - Budget only the legal fees and costs directly related to property operations. Partnership and syndication expenses are not property operating expenses.
15. **Audit** - Fees to prepare the annual audited financial statements.
16. **Miscellaneous Administrative Expense** - Anticipated costs of home visits, credit reports and miscellaneous overhead expenses.
17. **Total Administrative Expense** (Total Admin.)- Total lines 11 through 16.
- 18-22. **Utilities** - Utility costs by the respective line items for all annual utilities paid by the property. Include common areas and an allowance for tenant paid utilities, which may be required for vacant apartments. Include on each line item the anticipated consumption and unit cost.
23. **Total Property Paid Utilities** - Total of lines 18 through 22.
24. **Janitor/Maintenance Supplies** - Cost of all janitorial, maintenance and cleaning supplies.
25. **Operating/Maintenance Contracts** – Includes contracts for repairs, janitorial/cleaning, exterminating, and systems equipment.
26. **Rubbish Removal** - Cost of scheduled trash removal. Indicate whether the municipality or an outside contractor will provide the services.
27. **Security Payroll/Contract** – Includes cost of security service and security equipment. Also includes the cost of on-site personnel, indicating hours of coverage and hourly wage.
28. **Repairs Materials** - Supplies, tools, etc. for repairs to the building and equipment.
29. **Elevator Maintenance** - Estimate the cost of a full preventative maintenance contract, which is required by the Agency.
30. **HVAC Maintenance** - The cost for heating and air conditioning maintenance. Indicate if contracted services will be utilized.
31. **Grounds Maintenance/Snow Removal** - Landscape maintenance, snow removal and minor repairs to the parking area. Also include contracted services if they will be utilized.

32. **Painting and Decorating** - For properties financed by the Agency, \$20 per room per year is required.

<u>Unit</u> <u>Size</u>	<u>Number</u> <u>of</u> <u>Rooms</u>	<u>Unit</u> <u>Size</u>	<u>Number</u> <u>of</u> <u>Rooms</u>
SRO	1.5	3 Bdrm	5.5
EFF	2.5	4 Bdrm	6.5
1 Bdrm	3.5	5 Bdrm	7.5
2 Bdrm	4.5		

33. **Vehicle Operation & Repairs:** The cost of operating and repairing the property's motor vehicles and maintenance equipment, including motor vehicle insurance.
34. **Miscellaneous Operating & Maintenance** - Include any expenses that are not specifically budgeted on lines 29 through 38.
35. **Total Operating and Maintenance Expense** - Total lines 24 through 34.
- 36.-42. **Property Payroll** - Budget the payroll costs by the respective line items for all property personnel. Include hours/week and hourly rate for each person. See payroll breakdown below:

Line No.	Description	No. of hours per week	Salary	Employee Apt. Line 39	Payroll Taxes Line 41	Workers Comp. Line 42	Employee Benefits Line 43
37	Office						
38	Manager						
39	Janitor						
40	Maintenanc e						

43. **Total Payroll Expense** - Total lines 36 through 42.
44. **Real Estate Taxes:** Provide a detailed calculation of taxes at full assessment after rehabilitation or construction. Include estimated assessment and millage. This represents the amount the Agency will bill and escrow during the first year of operations that will be used to pay the real estate tax bills due in year two.

For properties seeking Agency financing, a letter from the tax assessor may be required. Submit all current year tax invoices. Include any applicable tax abatement information for the property.

45. **Property & Liability Insurance** - A written quote is required for properties of 12 units or more which includes the cost of hazard, general liability and other applicable premiums. This represents the amount the Agency will bill and escrow during the first year of operations that will be used to pay the insurance bill due in year two.
46. **Miscellaneous Taxes & Insurance Licenses/Permits** - Additional property taxes, such as business privilege taxes, which are not included on line 44. Also include occupancy permit fees and additional insurance not included on line 45.
47. **Total Taxes and Insurance** - Total lines 44 through 46.
48. **Total Supportive Services** – Cost for an ongoing supportive services program, including staffing and contracted services, if included in the proposal.
49. **Total Replacement Reserve** - For properties making application to the Agency the replacement reserve should be calculated using \$375.00 per unit for elderly, \$500.00 per unit for general or family, and \$200.00 per unit for single room occupancy proposals. The Agency may also make additional adjustments as deemed necessary during underwriting. (Please see final program guide for the applicable contribution amount)
50. **Investor Service Fee** - Annual fee charged by equity investor, if applicable. The equity investor letter must state that the fee is to be paid yearly as a project operating expense. If the fee is not listed in the letter, it may not be paid from project operations. In addition, the fee must be budgeted to be paid from operations.
- 51-52. **Other**- Other operating expenses not addressed above.
53. **Total Operating Disbursements** - Total lines 17, 23, 35, 43, 47, 48, 49, 50, 51 and 52.
54. **Net Operating Income (NOI)** - Subtract line 53 from line 10.
55. **Primary Debt Service** - The mortgage that the property can support is determined by using a debt service coverage ratio of 115% based upon line 54.
56. **Service Fee** - Refer to Program Guidelines.
57. **Credit Enhancement** - Refer to Program Guidelines.
58. **Other Service Fee** – Reflects other allowable service fees, including HUD Risk Sharing Fee.
59. **Total Primary Debt Service** - Add lines 55, 56, 57 and 58.
60. **Initial Cash Flow** - Subtract line 59 from line 54.
61. **Primary Debt Service Coverage** - Divide line 54 by line 59. Refer to Program Guidelines for specific debt service requirements under the program(s) for which you are applying.

- 62. **PennHOMES Debt Service** - If cash flow (line 60) allows, calculate repayment of this debt. Refer to Program Guidelines.
- 63-64. **Other** – Debt Service (other than PennHOMES), if applicable.
- 65. **Total Secondary Debt Service** - Total lines 62 through 64.
- 66. **Secondary Cash Flow** - Subtract line 65 from line 60.

Exhibit C - Market Study/Housing Needs Assessment

If the Market Study/Needs Assessment is not completed by the appropriate party or is not in the Agency's format, the Application may be rejected and returned to the applicant. Please do not submit the full market study report at this time. Only the following Agency form should be included with this application.

A comprehensive Market Study/Housing Needs Assessment ("MS/HNA"), completed within 12 months of the Application date, of the housing needs of low-income individuals in the area to be served by the development must be submitted at the time of application. Waived from this requirement are developments with a reservation of Tax Credits from a previous year in which a MS/HNA was submitted at the time of the original reservation.

If an applicant is applying only for PennHOMES funds and the development is either serving special needs residents in 100 percent of the units, or is a preservation proposal which has a stable occupancy, a waiting list of at least 10 percent of the units and is not converting to market rate housing, then the applicant has the option of completing the Market Study/Housing Needs Assessment report using an independent market analyst or his/her own resources and data.

The MS/HNA consists of four parts: 1) the Market Study/Housing Needs Assessment Form; 2) the PHFA Housing Inventory Request Form; 3) the Housing Providers Needs Assessment Form; and, (4) the Comparable Housing Survey Form. The MS/HNA must be performed and completed by an independent, experienced market analyst specifically qualified in affordable rental markets of Pennsylvania. If the MS/HNA is not completed by the appropriate party or is not in the Agency's format, the Application may be rejected by the Agency.

The assumptions used in the MS/HNA (e.g. number of units, housing type, unit mix, projected rents, income targeting) must precisely reflect the information contained in the development's Application. Proposals that include a MS/HNA that is inconsistent with or does not accurately reflect the information submitted in the Application will be rejected.

In all instances, the Agency reserves the right to order its own or an additional MS/HNA on any development. Applications may be rejected if the proposed development is not supported by an independent MS/HNA acceptable to the Agency or if Agency staff determines that there will be an adverse impact on the marketability of existing affordable housing developments or initiatives in the area. The MS/HNA shall become the property of the Agency and may be subject to public dissemination.

All Applications must include a map showing the proposed site and the surrounding area.

For Preliminary Site Applications submitted by November 5, 2010, The Agency will only accept this form without modification for processing.

The completion date of this Market Study/Housing Needs Assessment must be within twelve (12) months of the application date.

If the market analyst has questions on completing this form, please call the Development Division at (717) 780-3876 or the Tax Credit Division at (717) 780-3948.

MARKET STUDY/HOUSING NEEDS ASSESSMENT

Proposed Development Name

Street Address

City County (ZIP)

Housing Type: _____ Elderly 62+ _____ General Occupancy
 _____ Elderly 55+ _____ Other (describe)

Total Number of Rental Units: _____

The market analyst must first define the primary market area by the zip code(s) or census tract(s). Once the primary market area is defined, the analyst **MUST** request a listing of existing PennHOMES and Tax Credit housing developments located within the primary market area using the attached PHFA Housing Inventory Request Form. Attach the listing to this study with the current occupancy and waiting lists for each development that may be impacted by the proposal. Refer to #10 below.

Additional information sheets may be attached and must reference the appropriate category.

1. Provide a narrative describing the primary and secondary market areas and the factors used in making your determination and attach a street map showing the proposed site and surrounding area in addition to outlining the primary market area. List each zip code/census tract or part thereof which comprises the primary market area that specifically references the location of the proposed site:

2. Provide photographs of the site from a minimum of two perspectives. The photographs must be either originals or color copies and should be dated. For multiple sites, the photographs must identify the site address. All photographs must be clear and show the detail of any buildings. (Attach photos on a separate page.)
3. The Market Analysts should determine whether the proposed development is located in an urban, suburban, or rural area and explain the methodology for their determination.

_____ Urban _____ Suburban _____ Rural

4. Provide the number of age and income qualified renter and homeowner households for the primary market area from the 2000 census, and a five-year projection. Discuss the population trend and the three factors that are having the most impact on the trend.

2000 _____ 5-year Projection from current date _____

Data Source:

5. Using the number of age and income qualified renter and homeowner households located within the primary market area, compute the development specific capture rate percentage using the 2000 Census data. The minimum household income being used for total housing expenses should not exceed a total housing expense to income ratio of 40% and 45% for general and elderly occupancy designated projects, respectively.

Provide the total/sum of the renter and homeowner households in the primary market area by age and income qualifications. The minimum household income being used for total housing expenses should not exceed 40% for general occupancy or 45% for elderly occupancy. Based on this information compute the development specific primary market area's capture rate percentage for the qualified households to the projected number of units being proposed by income type.

The total number of units proposed _____ divided by the number of age and income qualified households _____ equals a capture rate of _____%.

In addition to the development specific capture rate, compute the overall primary market area's capture rate percentage, which incorporates both the number of units proposed for the subject property and the total of similar (general, senior, bedroom size, homeless special needs etc.) existing and proposed PennHOMES and Tax Credit units in the primary market area. If the proposed development includes Project Subsidized units, also include like developments in the PMA.

The total number of units _____ divided by the number of age and income qualified households equals an overall capture rate of _____%.

6. Interview and/or survey neighborhood groups, grassroots organizations, local community development corporations, potential tenant populations, and local government officials to determine support, interest and/or opposition to the proposed development, as well as identifying other proposed housing for the area. List all people interviewed, including phone numbers, and discuss the comments received below:

7. Analyze the suitability of the site for the subject development including accessibility to employment and services and its compatibility with surrounding uses, including economic benefits to the area and/or the proposed residents.

8. Complete the first section of the attached Housing Providers Needs Assessment Form and forward it to the Executive Director of the appropriate County and/or Local Housing Authority and/or Public Housing Agency serving the market area. The response must be incorporated into your evaluation and attached to this final report. If no response, document the date sent to the Housing Authority.

9. List the name and address of all subsidized housing developments within the primary market area, including current occupancy levels and number of persons on the waiting list. If you are aware of any deviations in the occupancy levels and size of the waiting list in the past 2 or 3 years, please describe.

10. Discuss the availability of affordable housing options including home ownership opportunities for the target population. Describe the age, condition, etc, of housing, and the extent of abandoned housing and other buildings within the primary market area. If possible identify any substandard housing in the primary market area.

11. Discuss the short and long-term impact that the subject development may have on existing and/or proposed affordable market rate, Tax Credit, and subsidized housing located within the primary market area including the information provided in the PHFA Housing Inventory Request Form. List the properties and identify the current occupancy and number of persons on the waiting list for these properties.

12. List market rental comparables (no income restrictions) within the Primary Market Area. *Do not use rent subsidized developments.* Attach a color photo of each comparable. A minimum of three comparables should be submitted. If comparables cannot be located, a thorough explanation must be provided and report what type of rental housing is available in the market. Attach a map identifying the location of the subject and comparables. Please use the attached Comparable Housing Survey forms.

13. Summarize the comparable unassisted market rent for each unit size.

<u>Unit Size</u>	<u>Rent</u>		<u>Tenant Paid</u>		<u>Adjusted</u>
			<u>Utilities</u>		<u>Market Rent</u>
One-bedroom	\$ _____	+	\$ _____	=	\$ _____
Two-bedroom	\$ _____	+	\$ _____	=	\$ _____
Three-bedroom	\$ _____	+	\$ _____	=	\$ _____
Four-bedroom	\$ _____	+	\$ _____	=	\$ _____

14. Compute the Pricing Advantage of the subject development's proposed rents to the Adjusted Market Rent.

<u>Unit Size</u>	<u>Subject Rent</u>		<u>Adjusted</u>		<u>Pricing</u>
			<u>Market Rent</u>		<u>Advantage*</u>
One-bedroom	\$ _____		\$ _____		_____ %
Two-bedroom	\$ _____		\$ _____		_____ %
Three-bedroom	\$ _____		\$ _____		_____ %
Four-bedroom	\$ _____		\$ _____		_____ %

*Calculated by subtracting the Subject Rent from the Adjusted Rent and dividing the difference by the Subject Rent.

15. **For existing facilities applying for preservation funding** provide evidence indicating that the development is or is not a likely candidate for converting to a market rate rental development that may not be affordable to the existing residents. Factors to consider include, but are not limited to, demand for or waiting list of market rate units within the primary market area, significant increases in rents at other market rate properties, significant increases in median incomes and property values within the primary market area, and the development's location or proximity to new economic development which is creating higher than average new employment opportunities.

16. **For developments seeking consideration under the Community and Economic Impact Selection Criteria** provide a brief one page narrative demonstrating the capacity for community revitalization opportunities. Factors to consider include, but are not limited to, for general occupancy developments: low poverty rates, limited affordable housing options, both subsidized and non-subsidized, limited affordable housing production in past 20 years, close proximity to employment, strong housing markets, and high owner-occupied markets. For senior occupancy developments: large number of seniors eligible for affordable housing, limited affordable housing options, both subsidized and non-subsidized, limited affordable housing production in past 20 years, and close proximity to amenities for the senior population, including health and retail establishments, home health agencies, and hospitals.

17. Based on the aforementioned information, discuss your support for the proposed development or provide recommendations and/or suggest modifications. This should include your conclusion regarding the need and marketability of the proposed housing. Also, estimate the absorption period and ongoing vacancy rate for the proposed housing based upon comparables and/or housing experience.

Submitted by:

_____	_____
Date	Name (type or print)

	Title

	Firm

	Address

	Phone Number

	FAX Number

	Email

PHFA HOUSING INVENTORY REQUEST FORM

Date: _____

Person Requesting Information _____

Company Name _____

Address _____

City _____

State _____ Zip Code _____

Telephone _____ FAX _____

E-mail Address _____

How would you like your request returned? FAX _____ E-MAIL _____

Development Name (if known) _____

Exact Site Location/Address _____

Requesting Information For

Exact Site Municipality _____

County _____

Zip Code(s)

Census Tract(s)

Additional Information and/or Comments

Submit your request by fax 717-780-1811 or by e-mail llutz@phfa.org .

The above information describes the location of the proposed site and additional details to be utilized by the Agency in response to the PHFA Housing Inventory request. The inventory is for information purposes only.

HOUSING PROVIDERS NEEDS ASSESSMENT

The attached form is to be completed by the County and/or Local Housing Authority and/or other public housing agencies serving the market area of the proposed development and returned within 5 days to the market analyst.

The first section of the form describing the proposed development is to be completed by the market analyst and submitted to the housing authority with the attached form.

The following proposed development intends to apply to the Pennsylvania Housing Finance Agency (PHFA) for funding and/or Low Income Housing Tax Credits.

Development

Name: _____

Location: _____

The primary market area is defined by the following census tract(s) and/or zip code(s).

Zip Code(s)

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Census Tract(s)

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Occupancy Type: Elderly _____ General _____

Unit Type(s):	Bdrm Type	Quantity	Sq. Ft.	Rent
	SRO	_____	_____	_____
	EFF	_____	_____	_____
	1 Bdrm	_____	_____	_____
	2 Bdrm	_____	_____	_____
	3 Bdrm	_____	_____	_____
	4 Bdrm	_____	_____	_____
	5 Bdrm	_____	_____	_____

Expected date of completion: _____

Resident's Income Range: _____

To assist the market analyst and PHFA in evaluating the need for this proposal, please answer the following questions.

1. Please provide your waiting list, if more than one, by program and how many applicants on each.

2. How many different individuals are on your total waiting list?

Elderly, age 62+ _____ Non-elderly _____ Persons needing accessible units _____

3. How frequently do you purge the waiting list? _____

4. When was the last time you purged the waiting list? _____

5. How many of the individuals on the waiting list are within the income range of the proposed development?

6. How many of the individuals on the waiting list are seeking unit types similar to the proposed development?

7. What was your average utilization rate of the Section 8 voucher program at the end of last year?

8. Are you aware of any subsidized housing or programs in the area that would be at a competitive disadvantage by the proposed housing? (If yes, please include the name of the development, address and reason why.)

9. How many of the individuals on the waiting list currently reside within the primary market area (as defined by the market analyst) of the proposed development?

10. Is the type of housing being proposed being considered a priority/preference under voucher certification program?

11. Is your Public Housing waiting list currently open? _____
(If no, how long has it been closed?) _____

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12. Is your Section 8 waiting list currently open? _____
(If no, how long has it been closed?) _____

13. When do you qualify applications for eligibility? a. when application was made _____
or b. after nearing top of the list _____

14. Would you recommend, and/or do you feel there is a need/sufficient demand to develop this housing? (please explain)

15. Please provide any additional information regarding the housing proposal that would assist PHFA in evaluating the need for the housing.

Completed by:

_____ Date

_____ Name (Type or Print)

_____ Executive Director Signature

_____ Name of Public Housing Authority

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COMPARABLE HOUSING SURVEY FORM

Date: _____

Name of Property: _____

City: _____ Zip Code: _____

Address: _____

Distance From Subject Property: _____

Yes No

Is it within Primary Market Area: _____

Building Type: _____ Walk-up _____ Row/Townhouse _____ Elevator

Age of the property: _____

Contact: _____

Telephone No. of Contact: _____

	Type of Service (gas, elec., etc.)	Included in Rent		Included in Rent		List the appliances provided within the unit:
		Yes	No	Yes	No	
Heat	_____	_____	_____	_____	_____	_____
Hot water	_____	_____	_____	_____	_____	_____
Cooking	_____	_____	_____	_____	_____	_____
A/C	_____	_____	_____	_____	_____	_____
Unit lighting	_____	_____	_____	_____	_____	_____
				Water	_____	_____
				Sewer	_____	_____

Number of Units	Number of Bdrm/Bath	Square Feet	Rent	Occupancy or Vacancy (%)	Number on Waiting List
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Identify any special characteristics or amenities of the comparables:

Attach **Color** Photo Here

Exhibit D – Maps, Site & Building Plans

For the 2011 Preliminary Site Application the following is required:

- A map clearly identifying the exact location of the Development site and the location of community amenities and services, including transportation, near the proposed site and appropriate to its tenant population so that Agency staff may easily conduct a site visit.
- Labeled color photographs (or color copies) of the Development site and all adjacent properties.
- Site plans showing the Development site boundaries, building(s) foot print(s), location (or proposed location) of roadways and connection points for all utilities.
- Provide a front elevation of the building(s).
- Rehabilitation and Preservation developments must provide preliminary plans and a **preliminary** scope of proposed work outlining all proposed changes to existing buildings (**interior and exterior**), site improvements, parking areas, etc.

Exhibit E - Evidence of Site Control

The Applicant must submit evidence of exclusive control of the real estate in one of the forms outlined below. NOTE: SITE CONTROL MUST BE IN THE NAME OF THE "APPLICANT" LISTED IN THE CORE APPLICATION.

For the Preliminary Site Application submission, without exception, the site control must be provided through December 31, 2010. An option to purchase a site included in the development may not expire before December 31, 2010. If entering into a lease agreement the applicant must provide either a copy of the lease or an executed agreement to enter into a lease between all parties. The minimum term of a lease agreement is 35 years. The Agency will not recognize, at a later date, a value for site acquisition if it was not specifically shown in the initial Application. If an option, agreement of sale, or lease is provided as evidence of site control, evidence of site ownership by seller, grantor, or lessor (in the form of a deed or other formal instrument) may be required to verify that the party/parties conveying the property to the applicant does/do have authority to do so.

In the event the property(s) is owned by a municipality, redevelopment authority, or other public body, a letter from its solicitor designating the applicant as the selected developer and stating the terms of the sale of the property must be provided. The Agency may require evidence, in the form of deeds, municipal resolutions or other documentation of site acquisition by the public body.

The site control documentation for Applications containing agreements with more than one seller must be controlled by one entity, and the buyer named in each agreement must be the same entity.

If the Application is part of a phased development, the site control document must address the location of the specific phase described in the Application. A site control document for the entire parcel is not acceptable. The description of the property on the site control document must agree with the description of the property as described in the Application. If the Agency is not able to clearly identify the site for the current application phase, the Application will not be processed.

Exhibit F - Community and Economic Impact

For Preliminary Site Applications – The Developer must complete and submit the following Community and Economic Impact Questionnaire Only.

Community and Economic Impact Questionnaire

Name of Community Revitalization, Neighborhood or Comprehensive Plan:

Letter from local official explaining how the proposed development contributes to the Community Plan: **Yes** _____ **No** _____

Is the development located in a QCT **Yes** _____ **No** _____ ; if no, identify the existing buildings to be included in the development and how they will be reused:

Indicate the specific location(s) within the community plan where the proposed development is discussed:

List each of the local, state, federal and/or private programs that are participating in the overall revitalization program and the amount of funding that has been committed under each program:

-
-
-
-

Which of the following are included in the overall community plan?

_____ Infrastructure such as streets, walkways, street lighting, trees, greening activities, water, sewer etc. Please provide details: _____

_____ Recreational Facilities such as parks, playgrounds, activity centers etc. Please provide details: _____

_____ Economic and Business Development such as new or rehabbed commercial space, business organizations, tax incentives, transportation/parking facilities, facade improvements, marketing etc. Please provide details: _____

_____ Public Safety such as demolition of blighted buildings, cleanup, block captains, town watch etc. Please provide details: _____

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_____ Community Services such as job training, educational programs, after school programs, utility assistance, homeowner repair programs etc. Please provide details: _____

_____ Rental Housing. Please provide details: _____

_____ Homeownership. Please provide details: _____

_____ Do the housing components include both affordable and market rate/price

Yes _____ **No** _____

Discuss the progress to date of each component of the overall community plan, to what extent the community has changed as a result of the completed components and the approximate amount of program funding utilized to date:

How will the development add to the community plan?

If the development is not financed, what impact will it have on the community?

Provide a brief one page narrative demonstrating the capacity for community revitalization opportunities, including the trend and direction of real estate development and area economic health.

Exhibit G – Site/Environmental Assessment

For Preliminary Site Applications – The Developer must complete and submit the following Site/Environmental assessment form only.

Pennsylvania Housing Finance Agency
2011 Preliminary Site Application
Site/Environmental Assessment

Project Name: _____

Project Location or Address: _____

Owner: _____

Number of Units: _____

Number of Buildings: _____

New Construction: _____ Rehabilitation: _____

Flood Management

Is the development located within a 100-year floodplain or Special Flood Hazard Area as designated on a current FEMA Flood Hazard Boundary Map or Flood Insurance Rate Map?

Yes _____ No _____

Comments:

Protection of Wetlands

Are there drainage ways, streams, rivers on or near the site?

Yes _____ No _____

Are there ponds, marshes, bogs, swamps or other wetlands on or near the site?

Yes _____ No _____

Is the development located within a wetland designated on a National Wetlands Inventory map of the U.S. Fish and Wildlife Service?

Yes _____ No _____

Comments:

Mining Hazards

Is the development located in a county affected by mining?

Yes _____ No _____

Is the development located on or near a mine?

Yes _____ No _____

Comments:

Noise Abatement

Is the development located near a major noise source, i.e. airport (within 5 miles), major highway or busy roads (within 1000 feet), or railroads (within 3000 feet)?

Yes ____ No ____

Comments:

Hazardous Industrial Operations

Are industrial facilities handling explosive or fire-prone materials such as propane, gasoline or other storage tanks adjacent to or visible from the development site?

Yes ____ No ____

Comments:

Airport Hazards

Is the development within 30 feet from the end of an airport runway?

Yes ____ No ____

Comments:

Endangered Species

Has the U.S. Fish and Wildlife Service Federal list of Endangered Species and Critical Habitats been reviewed?

Yes ____ No ____

Has the Pennsylvania Department of Conservation and Natural Resources list of Endangered and Threatened Species been reviewed?

Yes ____ No ____

Is the proposed development likely to affect any listed or proposed endangered or threatened species or critical habitats?

Yes ____ No ____

Comments:

Farmlands Protection

Is the site or area presently being farmed, forested or being used as cropland?

Yes ____ No ____

Is the site in violation of Pennsylvania Executive Order 2003-2 – Preservation of Agricultural Land?

Yes ____ No ____

Comments:

Unique Natural Features Area

Is the site near unique natural features or near public or private scenic areas?

Yes ____ No ____

Are other unique natural resources visible on the site or vicinity? Will any such resources be adversely affected or will they adversely affect the development?

Yes ____ No ____

Comments:

Soil Stability, Erosion and Drainage

Slopes: Not Applicable ____ Steep ____ Moderate ____ Slight ____

Is there evidence of slope erosion or unstable slope conditions on or near the site?

Yes ____ No ____

Is there evidence of ground subsidence, high water table or other unusual conditions on the site?

Yes ____ No ____

Is there any visible evidence of soil problems (cracked foundations basement flooding) on or near the site?

Yes ____ No ____

Is there indication of cross-lot runoff, swales, drainage flows on the property?

Yes ____ No ____

Are there visual indications of filled ground?

Yes ____ No ____

Are there active creeks or streams on the site?

Yes ____ No ____

Water supply, Sanitary Sewers and Solid waste disposal

Is the site served by adequate and acceptable Water Supply?

Yes ____ No ____ Municipal ____ Private ____

Sanitary sewers and waste water disposal system:

Yes ____ No ____ Municipal ____ Private ____

Trash collection and solid waste disposal:

Yes ____ No ____ Municipal ____ Private ____

Comments:

Site Suitability, Access and Compatibility with Surrounding Development

Has the site been used as a dump, sanitary landfill or mine waste disposal area?

Yes ____ No ____

Is there paved access to the site?

Yes ____ No ____

Are there other unusual conditions on the site?

Yes ____ No ____

Is there indication of?

distressed vegetation:	Yes ____	No ____
waste material/container:	Yes ____	No ____
soil staining, pools of liquid:	Yes ____	No ____
loose/empty drums, barrels:	Yes ____	No ____
oil/chemical spills:	Yes ____	No ____
abandoned machinery/cars	Yes ____	No ____
transformers, drainage pipes:	Yes ____	No ____

Is the development compatible with the surrounding area in terms of?

Land use	Yes ____	No ____
Height, bulk, mass	Yes ____	No ____
Building Type (low/high-rise)	Yes ____	No ____
Building density	Yes ____	No ____

Will the development be unduly influenced by?

Obsolete public facilities	Yes ____	No ____
Transition of land uses	Yes ____	No ____
Incompatible land uses	Yes ____	No ____

Are there air pollution generators nearby which would adversely affect the site?

Heavy industry	Yes ____	No ____
Incinerators	Yes ____	No ____
Power generating plants	Yes ____	No ____
Cement plants	Yes ____	No ____
Large parking facilities	Yes ____	No ____
Heavy travelled highway	Yes ____	No ____
Oil refinery	Yes ____	No ____
Other (specify)	Yes ____	No ____

Comments:

Nuisances and Hazards

Will the development be affected by natural hazards?

- | | | |
|------------------------------------|----------|---------|
| Faults, fracture | Yes ____ | No ____ |
| Cliffs, bluffs, crevices | Yes ____ | No ____ |
| Slope-failure from rains | Yes ____ | No ____ |
| Unprotected water bodies | Yes ____ | No ____ |
| Fire Hazards | Yes ____ | No ____ |
| Wind storm concerns | Yes ____ | No ____ |
| Poisonous plants, insects, animals | Yes ____ | No ____ |
| Hazardous terrain | Yes ____ | No ____ |

Will the development be affected by built hazards?

- | | | |
|----------------------------------|----------|---------|
| Hazardous street | Yes ____ | No ____ |
| Dangerous intersection | Yes ____ | No ____ |
| Through traffic | Yes ____ | No ____ |
| Quarries or other excavation | Yes ____ | No ____ |
| Dumps, landfills, mining | Yes ____ | No ____ |
| Railroad crossing | Yes ____ | No ____ |
| Inadequate street lighting | Yes ____ | No ____ |
| Hazards in vacant lots | Yes ____ | No ____ |
| Chemical tank-car terminals | Yes ____ | No ____ |
| Other hazardous chemical storage | Yes ____ | No ____ |
| High pressure gas lines | Yes ____ | No ____ |
| Overhead transmission lines | Yes ____ | No ____ |
| Hazardous cargo routes | Yes ____ | No ____ |
| Oil or gas wells | Yes ____ | No ____ |
| Industrial Operations | Yes ____ | No ____ |

Will the development be affected by nuisances?

- | | | |
|----------------------|----------|---------|
| Gas, smoke fumes | Yes ____ | No ____ |
| Odors | Yes ____ | No ____ |
| Vibration | Yes ____ | No ____ |
| Glare | Yes ____ | No ____ |
| Vacant buildings | Yes ____ | No ____ |
| Unightly land uses | Yes ____ | No ____ |
| Industrial nuisances | Yes ____ | No ____ |
| Other | Yes ____ | No ____ |

Comments:

Historic Preservation

Has the State Historic Preservation Office been notified of the development?

Yes ____ No ____

Is the development listed on or eligible for listing on the National Register of Historic Places?

Yes ____ No ____ Unknown ____

Is the development located within or directly adjacent to an historic district?

Yes ____ No ____ Unknown ____

Does the property's area of potential effects include an historic district or property?

Yes ____ No ____ Unknown ____

Comments:

I hereby certify that the information contained herein is accurate and complete, to the best of my knowledge, and that there are no material misrepresentations.

Owner: _____

By: _____ Date: _____