

**City of Bloomington
Housing and Neighborhood Development
Department**



Showers City Hall, Room 130
401 N. Morton
P.O. Box 100
Bloomington, IN 47402
(812) 349-3401

**Housing Development Fund
Application**

Additional Attachments required:

- Up-to-date Financial Statement
- Project specifications/site plan
- Assessment of market need – Analysis of Location
- Pro Forma and Operating Budget including Debt Coverage Ratio
- Documentation of Developer's Contribution to Project

I. APPLICANT INFORMATION

Organization:	
Mailing Address:	
City, State, Zip:	
Contact Person and Title:	
Phone No.	Email:

Applicant is (check all that applies):

- | | |
|---|---|
| <input type="checkbox"/> Not for Profit Developer | <input type="checkbox"/> For Profit Developer |
| <input type="checkbox"/> Public Housing Authority | <input type="checkbox"/> Individual |
| <input type="checkbox"/> Owner | <input type="checkbox"/> Developer |
| <input type="checkbox"/> Builder | |
| <input type="checkbox"/> Other, Explain: _____ | |

II. GENERAL INFORMATION

1. Amount of Funding Request: \$ _____
2. Project Location/Address: _____

3. Housing Category (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Rental Housing | <input type="checkbox"/> Reconstruction |
| <input type="checkbox"/> Owner-Occupied Housing | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Transitional Housing | <input type="checkbox"/> Acquisition |
| <input type="checkbox"/> Rehabilitation | |
| <input type="checkbox"/> Other (Specify) | |

4. Housing Type (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Single Room Occupancy | <input type="checkbox"/> Single-Family Dwelling |
| <input type="checkbox"/> Townhouse/Row House | <input type="checkbox"/> Condominium |
| <input type="checkbox"/> One or Two Story Gardens | <input type="checkbox"/> Attached Multifamily |
| <input type="checkbox"/> More Than Four Stories | |
| <input type="checkbox"/> Other (Specify) | |

5. Type of financing being requested

- | | |
|---|---|
| <input type="checkbox"/> Mortgage | <input type="checkbox"/> Bridge Loan |
| <input type="checkbox"/> Special Conditional Loan | <input type="checkbox"/> Line of Credit |
| <input type="checkbox"/> Grant | |

III. PROJECT DESCRIPTION

1. Provide a brief narrative of the proposed project: Include project objectives, target population, major project characteristics, number and type of units, project design, proximity to services, public or other transportation, etc. Explain how the use of Housing Development Funds makes this project feasible.

Attach copy of preliminary site plan, including floor plans for each unit type in the project. Plans must be to scale. Preliminary plans do not have to be done by architects or engineers. Also included should be proposed design materials for the project and any green features proposed for the unit and/or site.

IV. PROJECT INFORMATION

Building and Unit Information:

Total Number of Buildings: Residential _____ Commercial _____

Number of Residential Units and Square Footage

_____ Total number of units
 _____ Total number of units designated for low-income
 _____ % of units designated low-income units to total units
 _____ Total square footage of all residential units

_____ Total commercial space square footage (if applicable)
 _____ Total common area square footage (if applicable)
 _____ Total parking spaces
 _____ Total square footage of all project structures (residential, commercial, common areas and parking)

Project Rents

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
#Bedrooms	Total # Units	# of HSG fund Units in total (b)	Unit Size (Sq. Ft.)	Monthly Resident Paid Rent (w/o utilities)	Monthly Utility Allowance	Monthly Rent Plus Utility Allowance (e+f)	% of Area Median Income Targeted
(1) Units Designated Low Income:							
(2) Market Rate Units:							

V. PROJECT FINANCING (SOURCES AND USES OF FUNDS).

Project Price Breakdown Sheet:	
<i>Item</i>	<i>Amount</i>
Land	\$
Construction Costs	\$
Rehab costs (if applicable)	\$
Architectural & Engineering Fees	\$
Appraisal	\$
Building Permits/Inspections	\$
Site Survey	\$
Environmental Survey	\$
Other Costs (title, attorney, recording, etc.)	\$
Interim Costs (insurance, interest, fees)	\$
Permanent Financing fees (closing costs, subordination fees)	\$
Developer's Fee	\$
Marketing/Management	\$
Operating Expenses	\$
Taxes	\$
Insurance	\$
Total	\$

Project Sources of Funding

Mortgage	\$
Low Income Housing Tax Credits	\$
Federal Home Loan Bank	\$
	\$
	\$
Total	\$
GAP	\$

VI. PROJECT DEVELOPMENT SCHEDULE

Project Completion Timeline

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Site Acquired												
In Spec Process												
Bid Process												
Under Construction												
Construction Complete												
Inspections Complete												
Unit Sold												
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Site Acquired												
In Spec Process												
Bid Process												
Under Construction												
Construction Complete												
Inspections Complete												
Unit Sold												

VII. CERTIFICATION

If this application is approved for funding, the organization agrees to comply with all required federal, state, and local laws and regulations. The organization confirms that it is fully capable of fulfilling the obligations as stated in this proposal and in any attachments or documents included with this application.

As a duly authorized representative of the organization, I submit this application to the City of Bloomington and verify that the information included herein is true, accurate and complete.

Signature : _____
Print Name: _____
Title: _____
Phone No. _____
Date: _____