



# Allegheny County Economic Development

## Allegheny Housing Development Fund Program

### 2023 Application

# APPLICANT INFORMATION

## APPLICANT

Name of Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Federal Taxpayer ID Number: \_\_\_\_\_

If funds are awarded, you will need to register with the [System for Award Management \(SAM\)](#) and obtain a [Dun & Bradstreet D-U-N-S® Number](#) and also obtain a [CAGE number](#). If you are not familiar with this system, please contact ACED for information.

Please Select One:

Individual(s)	For-Profit Corporation
General Partnership	Not-for-Profit Corporation
Limited Partnership	Other

Has this entity been formed yet?	Yes	No
Is Applicant the Project Owner?	Yes	No
Is Applicant a Housing Consultant?	Yes	No
Is Applicant a Real Estate Developer?	Yes	No

Name(s) of Individual(s), Principal(s) in the Corporation; or General Partner(s) in the Partnership:

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

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

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

Designated Contact Person(s) for this proposal:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Telephone / Fax No.: \_\_\_\_\_ Telephone / Fax No.: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Non-Profits only: Please attach the following additional items:

- List of Officers, Names and addresses of current Board Members
- Is the Organization a certified CHDO?
- Copy of IRS 501(c) (3) certification
- Copy of by-laws and Articles of Incorporation

## ACED CERTIFICATION OF EXPERIENCE

Organizational and Financial Capacity: List developments (name/address) completed within the past five years. *(You may instead include copies of the PHFA Exhibit for each of the members of the development team if completing a PHFA funding application.)* Please also include financial statements for your organization for the last two full years and the most recent two federal tax returns for the organization.

Role for this Certification:

Developer	Attorney	Architect
Architect	Management Agent	General Contractor

Development: \_\_\_\_\_

Location: \_\_\_\_\_

Development Name	Location	Type (family, senior, SRO, etc.)	No. Of Units	Completion Date	Full Lease-Up Date	Currant Occupancy Rate

Please use additional sheets as required The above list is an accurate representation of projects completed for which (firm) is the (role). By completing this form, I acknowledge that (firm) intends to participate in this development as (role).

Firm Signature: \_\_\_\_\_

Print Full Name: \_\_\_\_\_

Role: \_\_\_\_\_

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

## PROJECT INFORMATION

Please identify the project site (use additional pages as needed):

Address	Lot & Block

Census Tract: \_\_\_\_\_

County Council District: \_\_\_\_\_

State House District: \_\_\_\_\_

State Senate District: \_\_\_\_\_

US Congressional District: \_\_\_\_\_

Note:

See

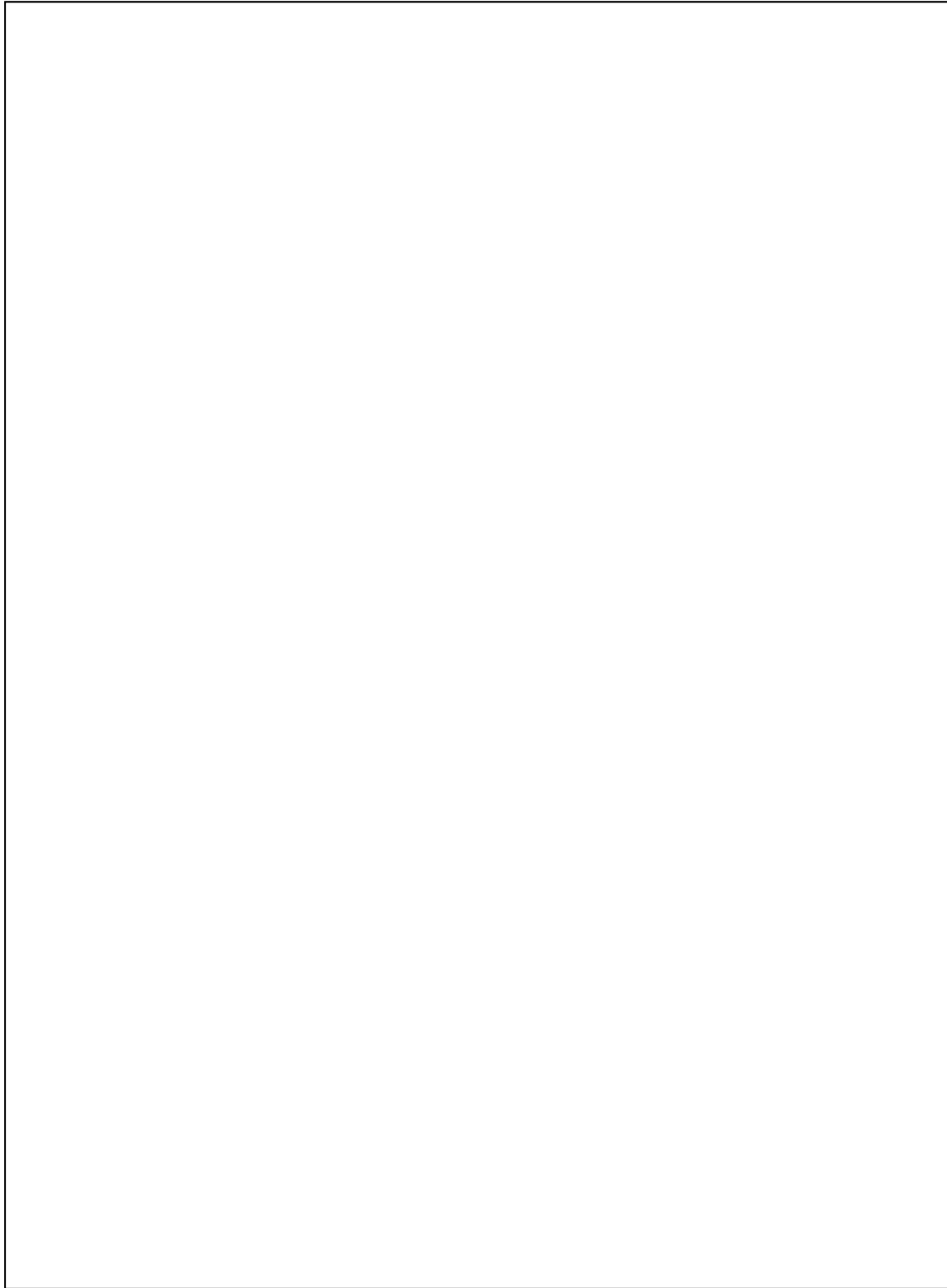
<https://geomap.ffiec.gov/FFIECGeocMap/GeocodeMap1.aspx> to ascertain above items.

<https://www.pavoterservices.pa.gov/Pages/FindYourDistrict.aspx>

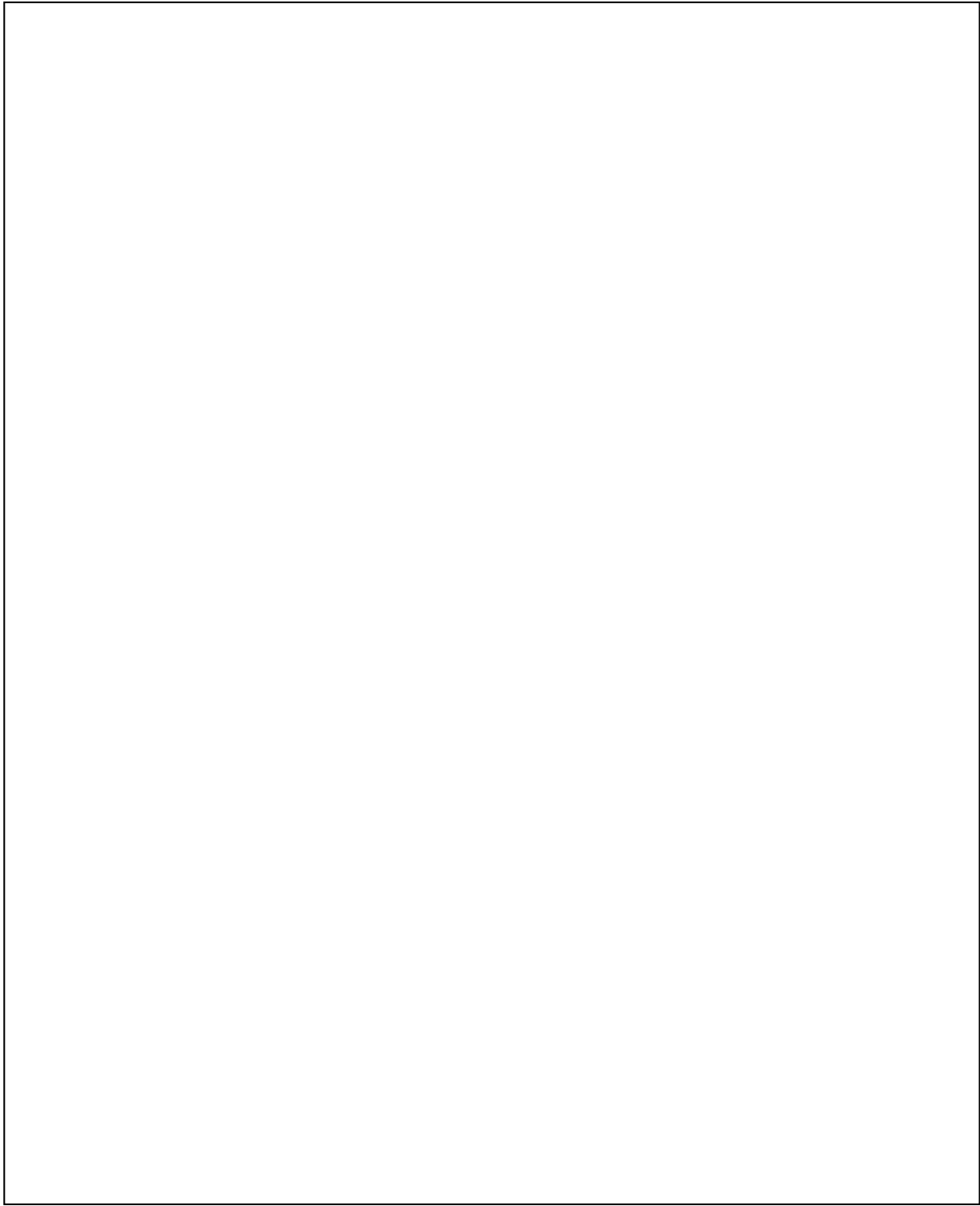
Project Description: Briefly describe the project (*Attach an additional sheet if necessary*)

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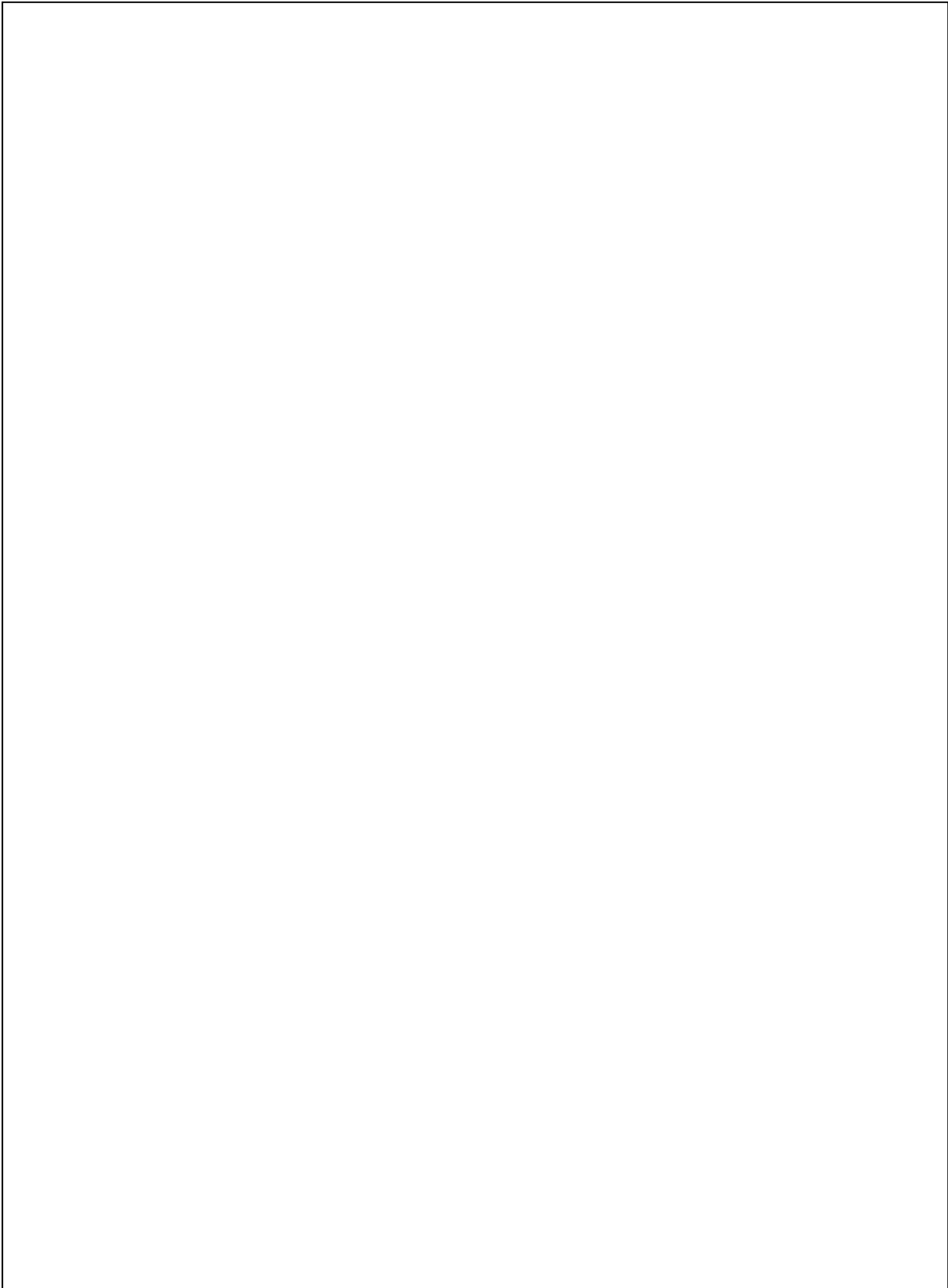
If the property is an occupied rental property, please provide a tenant survey with this application. Also, briefly indicate how the development will facilitate relocation of tenants:  
*(Attach an additional sheet if necessary)*



Mission/Objectives: Rationale for project – what community need is being met or mitigated?  
(Attach an additional sheet if necessary)

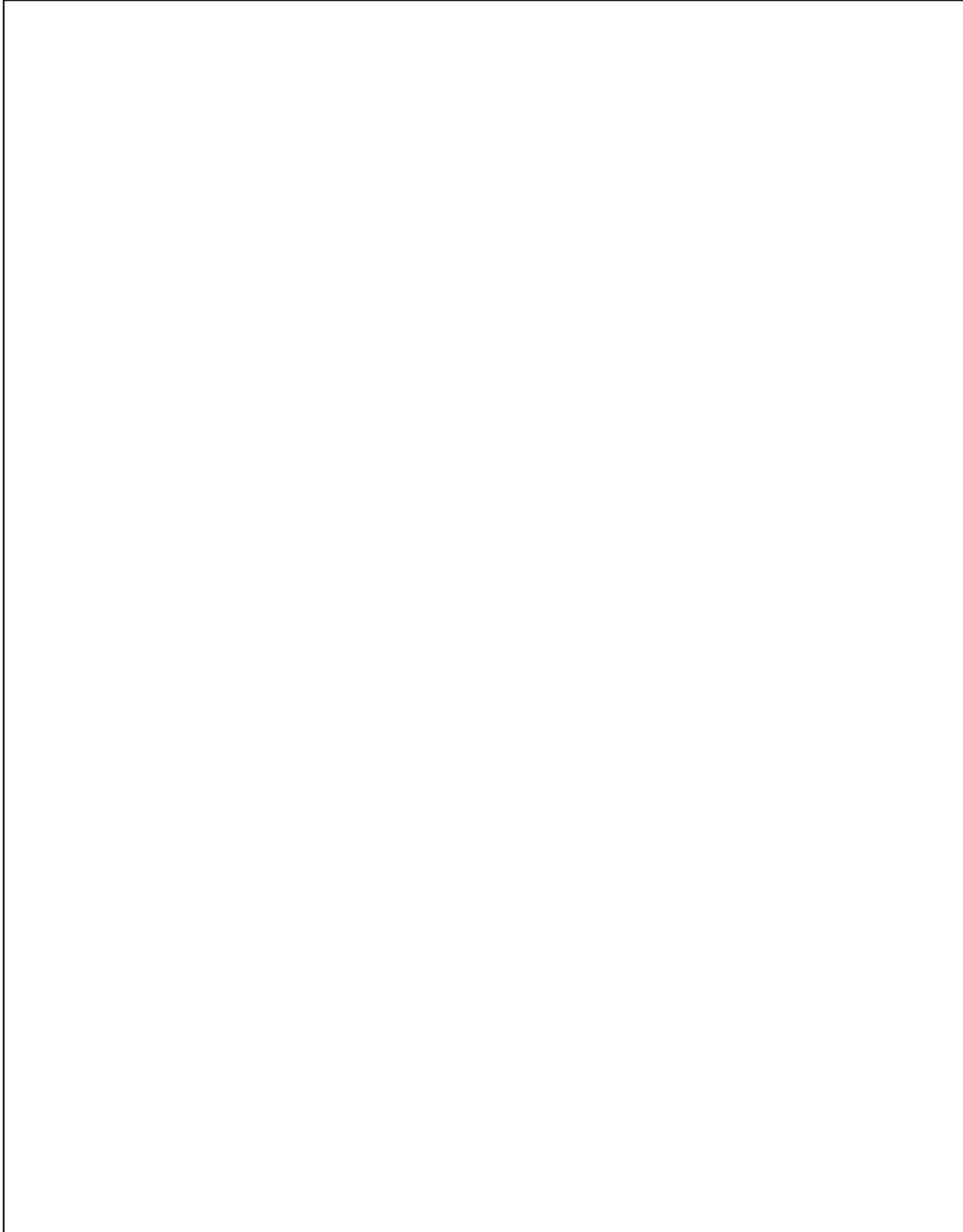


How was the problem / need identified? (*Attach an additional sheet if necessary*)

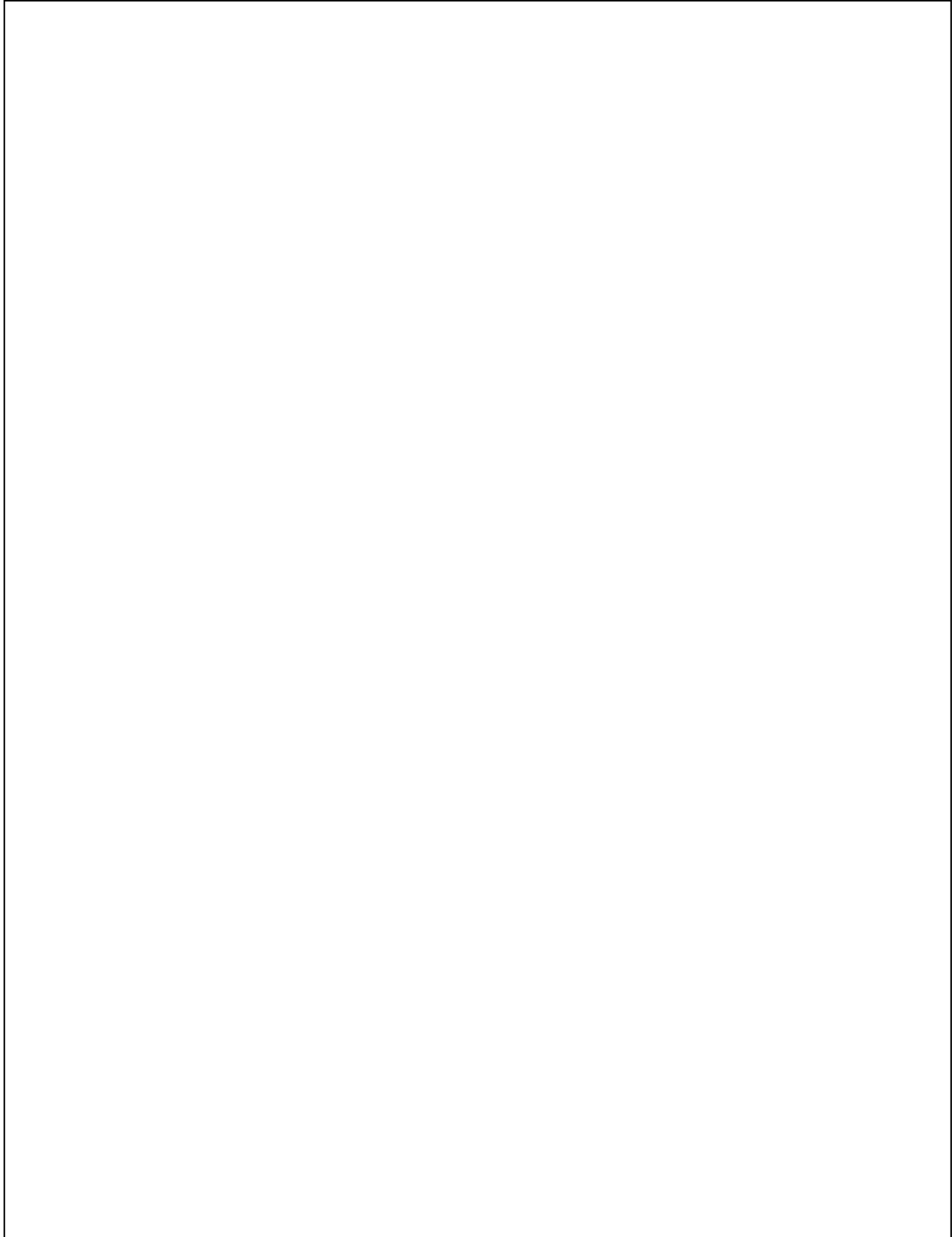




Has this need/problem been identified in the Allegheny County Five-Year Consolidated Plan?  
Explain how this project will address priorities in the Consolidated Plan. (*Attach an additional sheet if necessary*)



How has the community (local officials, community organizations, residents, etc.) been involved in the project? (*Attach an additional sheet if necessary*)



## SITE INFORMATION

Do you currently own the subject property?      Yes                  No

If yes, please indicate form of control:      Purchase Option  
Sales Agreement  
Deed  
Ground Lease

If no, how do you plan to acquire the property?

How long will it take to acquire this property?

Is the property properly zoned for this project:      Yes                  No

If no, what timeline and steps to completion do you project to gain proper Zoning?  
*(Attach an additional sheet if necessary)*

Are there other municipal approvals required?      Yes                  No  
(Subdivisions, building or sewer tap restrictions, etc.)

If yes, please explain briefly: *(Attach an additional sheet if necessary)*

Is the site served by public utilities? Please list below.

Utility	Provider	Distance to Site
Natural Gas		
Electric Service		
Water		
Sewer		

#### Architect / Contractor / Construction Information

Architect: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_

Telephone / fax: \_\_\_\_\_

Email: \_\_\_\_\_

General Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone / fax: \_\_\_\_\_

Email: \_\_\_\_\_

#### Project Schedule

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

Site Control: \_\_\_\_\_

Pre-development: \_\_\_\_\_

Closing / Construction Start: \_\_\_\_\_

Sales / Lease-up Completion: \_\_\_\_\_

## **DEVELOPMENT INFORMATION**

FOR SALE INFORMATION - (Single Family Projects Only)

Please complete the chart below for the proposed development.

Number of Each:

Targeted Buyer	60% of Median Income
	80% Area Median Income
	100% Area Median Income
	Market Rate

Is a market study complete:            Yes            No

If yes, please provide now. If not, please provide when available.  
*(Attach an additional sheet if necessary)*

If project targets multiple income groups, please list percentage expected of each group:

# of Bedrooms	# of Units REHAB	# of Units NEW	Proposed First Mortgage Amount	Proposed 2 <sup>nd</sup> Mortgage(s)	Square Ft. per Unit	Lot Width x Depth (approx.)	Income Target (% of Area Median Income)
2							
3							
4							
5							
Total:							

Please provide any (non-County) resale restrictions that this development will operate under (e.g., five- year FHLB Retention mechanism). *(Attach an additional sheet if necessary)*

**REFER TO EXCEL DOCUMENT:** Please complete the two affordability analysis sheet tabs labeled **Affordability Analysis Page 1** and **Affordability Analysis Page 2** provided in the AHDF Spreadsheets excel file.

**RENTAL INCOME INFORMATION - (Multifamily Projects Only)**

Please complete the chart below for the proposed development:

(If applicable)

	# of Units	Square Ft. Per Unit	# of existing Units	Current Rents	Utility Allowance (Paid by Tenant)	Income Target (% of Area Median Income)
Efficiency						
1 Bedroom						
2 Bedrooms						
3 Bedrooms						
4 Bedrooms						
5 Bedrooms						
Private Room						
SRO Rooms (shared bath)						
<b>Total</b>						

What utilities are included in the rent? Which are paid by tenant?(Attach an additional sheet if necessary)

REFER TO EXCEL DOCUMENT: Please provide a 30-year operating pro forma from a PHFA application or other funder application in a similar format to that of the Operating Budget tab provided in the AHDF Spreadsheets excel file.



Please indicate population to be served.

Family Housing      Senior Housing      Other      , please specify: \_\_\_\_\_

What additional sources are Anticipated or Committed?

	<u>Anticipated</u>	<u>Committed</u>
Low Income Housing Tax Credits		
PHARE Funds		
Private Mortgage		
FHLB Affordable Housing Program Funds		
Other:		

REFER TO EXCEL DOCUMENT: *Please complete the two budget sheet tabs labeled: Budget (USES) and Budget (SOURCES) which are proved in the AHDF Spreadsheets excel file.*

### **FINANCING INFORMATION**

Allegheny Housing Development Fund Financing Mechanism requested (see Program Description for more information):

Deferred Payment Loan (rental)	Construction Subsidy (homeownership)
Low Interest Loan (rental)	Deferred Second Mortgage (homeownership)

Please fill out the following Program Sources and Uses Budget Section:

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

Developer(s): \_\_\_\_\_

Location: \_\_\_\_\_

Scattered Sites / Single Site located at: \_\_\_\_\_

Developers: \_\_\_\_\_

Contractor: \_\_\_\_\_

Architect: \_\_\_\_\_

Engineer: \_\_\_\_\_

Location: \_\_\_\_\_

Project Description: \_\_\_\_\_

**Sales Price**

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**Total Development Cost**

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**Other Construction Period Financing**

Bank Loan

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Developer Equity

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Other:

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Other:

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Other:

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**Permanent Sources**

Allegheny County Economic Development

Federal Home Loan Bank of Pittsburgh

PHFA

PA DCED

Other Allegheny County funds

Buyer's Take Out Loans

Other:

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Other:

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Other:

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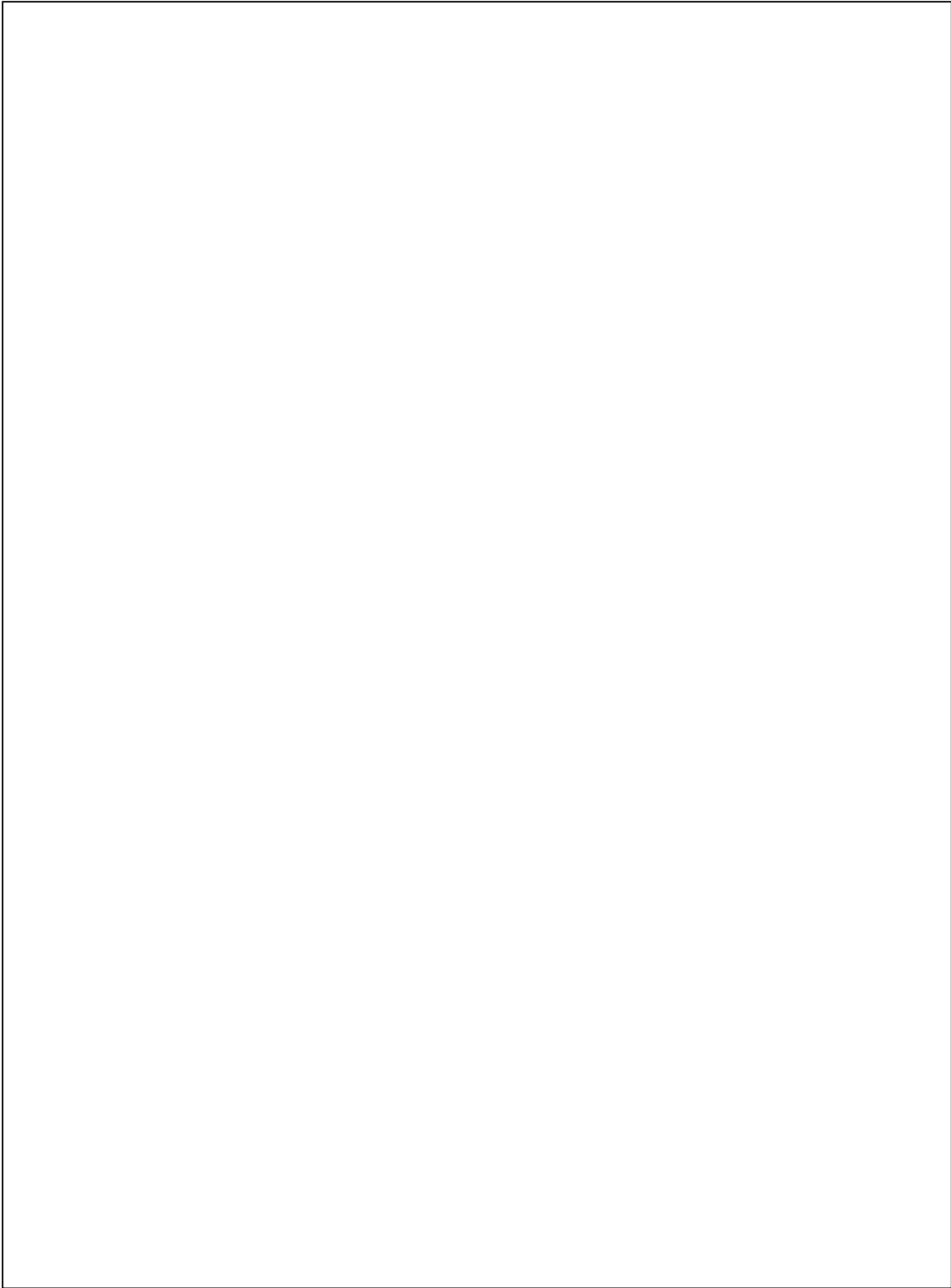
**Total Funds**

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**Project Benefit:** (*Attach an additional sheet if necessary*)

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Summary: *(Attach an additional sheet if necessary)*



Lender Information

If you plan to borrow funds from a lender to finance the project costs, please indicate the following:

Lender Name: \_\_\_\_\_

Lender Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Mortgage Amount: \_\_\_\_\_

Commitment in place:        Yes            No

If there is a private equity source (Tax Credit projects), please provide the syndicator information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Funds Amount: \_\_\_\_\_

Commitment in place:        Yes            No

If there is another source (Tax Credit projects), please provide that information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Amount: \_\_\_\_\_

Commitment in place:        Yes            No

Acquisition Financing

If you currently own the property, please complete the following:

Purchase Price: \_\_\_\_\_

Date of Acquisition: \_\_\_\_\_

Lender: \_\_\_\_\_

Mortgage Amount: \_\_\_\_\_

Outstanding Principal Balance of Mortgage: \_\_\_\_\_

Monthly Mortgage Payment: \_\_\_\_\_

Mortgage Interest Rate: \_\_\_\_\_

Mortgage Term: \_\_\_\_\_

Mortgage Payoff Amount: \_\_\_\_\_

**Signature\* Section** To the best of my knowledge and belief, the statements and data in this application are true and correct and its submission has been duly authorized by the governing body of the applicant. With this submission, I also agree to follow all rules and regulations governing federal (CDBG, HOME), state and county funding. PLEASE SIGN AND SCAN THIS SIGNATURE PAGE AND INCLUDE WITH YOUR COMPLETED APPLICATION. HARD COPY SIGNATURES ARE NOT REQUIRED AT THIS TIME.

\_\_\_\_\_  
Signature

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

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

\* Additional signature(s) required only in the case of "multi-organizational" applications. If this is a "multi-organizational" application, the head of each entity making application must sign. Attach an additional sheet if necessary.

Additional Signatures: *(Attach an additional sheet if necessary)*

\_\_\_\_\_  
Signature

Name: \_\_\_\_\_

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

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

\_\_\_\_\_  
Signature

Name: \_\_\_\_\_

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

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

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Please return the original application -- this section fully completed with a SCANNED signature + any attachments + the fully completed Excel Spreadsheets section of the application -- and one (1) copy of the entire application via email to:

[nathan.wetzel@alleghenycounty.us](mailto:nathan.wetzel@alleghenycounty.us)