

# 2019 Combined Funders Homeownership Application

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This application is for Homeownership projects ONLY, including new construction and acquisition/ rehabilitation projects, as well as Down Payment Assistance Programs.

## **Note Concerning Use of Federal Funds:**

Department of Commerce's HOME and National Housing Trust Fund federal programs are funding Homeownership projects at this time.

Some other Public Funders accepting this application use federal funds for homeownership activities, such as Community Development Block Grant Program funds or local HOME Investment Partnership Program funds. Be mindful of these programs' requirements when completing this application.

## Section 1: Program Summary

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### Project Design

1. Provide a brief description of your proposed project and/or program including:
  - The kind of project or program
  - The ownership model
  - The type of activities planned (e.g., development, construction, rehabilitation)
  - Financial assistance to be provided (e.g., down payment and/or mortgage (including rehab) to homebuyers and homeowner households):

Click or tap here to enter text.

### Tab 1 Form

Please make sure to complete the following Excel Form:

- Form 1: Project Summary

## Section 2: Project Narrative

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### Project Intent

1. Describe how your proposed project/program will result in creating or preserving affordable homeownership units:  
[Click or tap here to enter text.](#)

### Project Marketing

2. Describe how your organization will market this particular project or program to potential homebuyers (**NOTE: The Housing Trust Fund uses an expanded “first-time homebuyer” definition in the 2019 and 2020 funding cycles—refer to the solicitation for applications**):  
[Click or tap here to enter text.](#)

### Loan Qualification Process

3. Describe your process for qualifying *eligible* homebuyers for this project. Describe how you prioritize homebuyers for this project, the mortgage and approval process, and the process for closing on the home:  
[Click or tap here to enter text.](#)

### Readiness

4. Please list any issues that may affect the timing of this project or program, including current status of architectural plans, permits, availability of private mortgage financing, etc.:  
[Click or tap here to enter text.](#)

### Property Selection Criteria

*For Down Payment Assistance & Acquisition/Rehab Programs. If your proposed project is not Down Payment Assistance or Acquisition/Rehab, please enter “n/a”.*

5. Describe the home selection guidelines, including the type(s) and costs of typical properties that homebuyers will purchase, the maximum purchase price, and the minimum property standards that homes must meet before acquisition and before occupancy if rehab will be required:  
[Click or tap here to enter text.](#)

6. Describe the appraisal and home inspection processes:  
Click or tap here to enter text.
7. Identify the proposed resale and/or recapture restrictions:  
Click or tap here to enter text.

## Property Location

8. If this is a development (construction and/or rehab) project, describe the property location, neighborhood, transportation, local services, etc. If this is a down payment assistance program, describe the targeted neighborhood(s) or area(s) where assisted households will be purchasing homes:  
Click or tap here to enter text.

## Property Description - Development Project

9. For a development project, describe the existing property including vacant land and existing structures that may be demolished or rehabilitated:  
Click or tap here to enter text.
10. If your project is an existing structure, include the age of building(s), size, number of stories, type of construction, physical condition, layout of buildings, and any unique features in your description:  
Click or tap here to enter text.

## Zoning

11. What is the current zoning of the project site(s)?  
Click or tap here to enter text.
12. Is the proposed project consistent with the zoning status of the site(s)?
  - Yes, skip to Site Control
  - No
    - a. If current zoning is not consistent, explain:  
Click or tap here to enter text.

- b. Outline the steps that will be taken to address zoning issues (e.g., administrative, conditional use, hearing examiner, council approval), what approvals are required, and the time frame needed to resolve these issues:

Click or tap here to enter text.

## Site Control

13. Describe the type of site control (e.g., statutory warranty deed, purchase and sale agreement, lease agreement, etc.) and key dates (e.g., purchase date, closing date, option to purchase expiration date, maximum extension, etc.) and attach documentation.

Click or tap here to enter text.

## Environmental

For information regarding the required Phase I ESA and Limited Survey, see Sections 205.4.1 and 205.5, respectively, of the Housing Trust Fund [Handbook](#).

14. Is a Phase I ESA required for this project?

- Yes. Continue to Question 15

- No. Skip to Construction/Rehab Information

15. Phase I ESA Completion date: Click or tap here to enter text.

16. Does the Phase I ESA recommend a Phase II be completed?

- **YES**

- a. Outline the ESA Phase I issues triggering a Phase II recommendation.

Click or tap here to enter text.

- **No** – *Is the project site location a former heavy equipment facility (e.g., bus barn), former wood product production facility, or former military installation such as an armory, training center, or assembly point? If yes, then it is recommended that a Phase II ESA be completed even if the Phase I did not specifically recommend it.*

17. Are there structures on-site?

- **YES** - *Limited Surveys for Asbestos, Lead-Based Paint, and Mold are required regardless of whether the structures are included in the project either to be rehabilitated or to be demolished.*

- **NO** - Skip to the [Limited Survey for Wetlands](#) question.

18. Limited Survey for Asbestos completion date: Click or tap here to enter text.

- a. State the conclusion and recommended further actions from the Limited Survey for Asbestos.  
Click or tap here to enter text.

19. Limited Survey for Lead Based Paint completion date: Click or tap here to enter text.

- a. State the conclusion and recommended further actions from the Limited Survey for Lead Based Paint.  
Click or tap here to enter text.

20. Limited Survey for Mold completion date: Click or tap here to enter text.

- a. State the conclusion and recommended further actions from the Limited Survey for Mold.  
Click or tap here to enter text.

21. Limited Survey for Wetlands completion date: Click or tap here to enter text.

- a. State the conclusion and recommended further actions from the Limited Survey for Wetlands.  
Click or tap here to enter text.

22. Identify how environmental issues identified in either the Phase 1 ESA or the Phase II ESA will be abated or otherwise addressed, including an estimated budget that must be included as a separate line item in the *Development Budgets- Forms 6A, 6B, and 6C*. Items to be addressed at a minimum include, *but are not limited to* asbestos, lead based paint, mold, wetlands, and underground storage tanks (USTs).

Click or tap here to enter text.

- a. Has the Washington State Department of Ecology been consulted, formally or informally, regarding issues with the site and/or structures on the site? If yes, provide details of the consultation.

Click or tap here to enter text.

- i. Is a No Further Action (NFA) determination being sought for this project site, or structures on the site?

- Yes

- No

- Not Applicable

- b. Provide a timeline for the hazardous material remediation.  
Click or tap here to enter text.

## Construction/Rehab Information

*Down Payment Assistance programs not doing construction or rehab are not required to complete this section.*

### General Description of the Construction Project

23. Provide a detailed description of the proposed design, construction, rehabilitation, site development and/or other project related improvements (including any plans for existing structures on-site that may be demolished or rehabilitated):  
Click or tap here to enter text.

### Rehabilitation- Acquisition/Rehabilitation Projects

24. For acquisition rehabilitation programs, describe the types of repairs and improvements that will be undertaken. Summarize your rehab standards, including the projected life span of rehabilitated homes:  
Click or tap here to enter text.

## Tab 2 Form

Please make sure to complete the following Excel Form:

- Form 2: Evergreen Sustainable Development Standard Checklist

## Section 3: Project Need

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### Population Narrative

1. Indicate the target area location, characteristics and the specific population to be served:  
Click or tap here to enter text.

### Discussion of Need & Consistency with Local Plans

2. Describe the critical, unmet need for homeownership in the community your project/program will address:  
Click or tap here to enter text.
3. What is the magnitude and extent of the need? (Some examples of magnitude may include increased real estate values in the in the target market, the economy of the area, risk of closure of current subsidized housing units, higher than normal vacancy rates, possible health and safety issues due to the physical conditions of the property, extraordinarily long waiting lists for affordable housing.)  
Click or tap here to enter text.
4. Provide an explanation about how this project is a local priority. Include references to consistency with local plans that are specific to the population to be served, and citations of specific source data  
Click or tap here to enter text.

### Hardships Faced by Target Buyers

5. Describe the intensity of hardship facing the intended population in the geographic area to be served. (Some examples of intensity include but are not limited to rent burden for the targeted population, lack of safe and affordable housing units in the target area, lack of living wage jobs, unemployment rates higher than the state average.)  
Click or tap here to enter text.

### Homebuyer Readiness

6. Describe the readiness of the intended homebuyers for your project/program. Include the number and type of homebuyers on any waiting list and their prequalification status:  
Click or tap here to enter text.



## Special Needs Projects/Programs

*(If the proposed project does not serve special needs, please enter "n/a").*

7. Will the proposed project serve Special Needs households?  
 - Yes. Continue to Question 8  
 - No. Skip to Market Study
  
8. For homeownership projects/programs designed to help disabled households, describe the geographic area(s) from which this project will draw its target population (e.g., city, county, region, state).  
**Click or tap here to enter text.**
  
9. What is the estimated number of people in the target population needing affordable housing within this service area?  
**Click or tap here to enter text.**

## Market Study – For Subdivision Development Projects Only

10. Is a Market Study required for this project?  
 - Yes – Date the Market Study was completed: **Click or tap here to enter text.**  
 - No – Section complete. Skip to Section 4.
  
11. Provide the following Market Study data:
  - a. Absorption Rate (page #) **Click or tap here to enter text.**
  - b. Capture Rate (page #) **Click or tap here to enter text.**
  - c. Number of days on-market for comparable homes (page #) **Click or tap here to enter text.**
  
12. Describe the availability of homes affordable to the target population in the area where this project will be located:  
**Click or tap here to enter text.**
  
13. Cite any relevant data identified in the market study:  
**Click or tap here to enter text.**

## Tab 3 Form

Please make sure to complete the following Excel Form:

- Form 3: Units and Target Populations

## Section 4: Relocation

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### Tenant Relocation

1. Will this project involve relocation of existing tenants?  
 - Yes  
 - No. Section complete. Skip to Section 5.
2. Have you developed a relocation plan for this project?  
 - Yes  
 - No
3. State the number of **Residential** tenants to be relocated:  
Permanent relocation: [Click or tap here to enter text.](#)  
Temporary relocation: [Click or tap here to enter text.](#)
4. State the number of **Commercial** tenants to be relocated:  
Permanent relocation: [Click or tap here to enter text.](#)  
Temporary relocation: [Click or tap here to enter text.](#)
5. Briefly describe anticipated relocation needs and how they will be addressed  
[Click or tap here to enter text.](#)
6. What requirements or guidelines govern the project relocation plan? (check all applicable)  
 - Uniform Relocation Act  
 - Section 104 [d] (if HOME or CDBG funded)  
 - Washington State Department of Transportation  
 - Other - Identify the governing requirements: [Click or tap here to enter text.](#)
7. Have you provided notices to the tenants indicating the type of displacement and benefits provided to tenants?  
 - Yes  
 - No
8. Have you identified replacement or temporary units for those who will be displaced?  
 - Yes  
 - No
9. Have you determined any tenants' relocation benefits?  
 - Yes  
 - No

10. Have you included the total relocation budget in your development budget under relocation?

- Yes

- No

## Section 5: Project Schedule

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### Tab 5 Form

Please make sure to complete the following Excel Forms:

- Form 5A: Production Pipeline
- Form 5B: Production Pipeline

## Section 6: Development Budget Narrative

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### Construction Cost Estimates

For information regarding what must be included in a required Construction Cost Estimate, consult the program handbook of each Public Funder you are seeking funding from. If an identified Public Funder has not yet adopted a formal Cost Policy, refer to the WSHFC [Policies](#) (Chapter 3, Section 3.2, *et seq.*) and to the State Housing Trust Fund Handbook (Chapter 2, Section 205.9).

1. Total construction cost reflected in the 3rd party estimate, excluding sales tax:  
[Click or tap here to enter text.](#)
2. Base construction contract line item reflected in the development budget, excluding sales tax:  
[Click or tap here to enter text.](#)
3. Explain any line item differences between the cost estimate and the base construction cost in the development budget. Explain any increases, decreases, exclusions, additions, inflation, the escalation factor applied and number of months applied or any other factor which causes the two amounts to differ.  
[Click or tap here to enter text.](#)

### Tab 6 Forms

Please make sure to complete the following Excel Forms, as appropriate to your project:
➤ Form 6A : Total Development Budget
➤ Form 6B-1 : Affordable Unit Development Budget
➤ Form 6C-1 : Affordable Unit Development Details
➤ If the project includes Market Rate units in addition to Affordable units, also complete <ul style="list-style-type: none"><li>○ Form 6B-2 : Market Rate Units Development Budget</li><li>○ Form 6C-2 : Market Rate Units Development Budget Details</li></ul>
➤ If the project includes Non-Residential elements in addition to Affordable units, complete <ul style="list-style-type: none"><li>○ Form 6B-3 : Non-Residential Development Budget</li><li>○ Form 6C-3 : Non-Residential Development Budget Details</li></ul>
➤ Form 6D – Down Payment Assistance Budget
➤ Form 6E : Supplemental Development Budget – Single House

## Section 7: Project Financing

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### Project/Program Funding Sources

1. Provide relevant information not included on Excel Form 7 for each source, including any award conditions, performance requirements, date(s) of funding availability, approval process(es), timing issues, etc. as applicable:  
[Click or tap here to enter text.](#)
  
2. Were you denied funding by any entity?  
 - **Yes**
  - a. Briefly explain why you were denied funding.  
[Click or tap here to enter text.](#)
  
- **No**
  
3. List funding sources you considered applying for, but did not or will not apply for, **and clearly state the reasoning for not applying:**  
[Click or tap here to enter text.](#)
  
4. If your financing plan includes a capital campaign to raise additional capital funds, list the activities and benchmark dates (refer to the Housing Trust Fund solicitation for applications materials to make sure your project can be developed within the intended timeline):  
[Click or tap here to enter text.](#)

### Tab 7 Form

Please make sure to complete the following Excel Form:

- Form 7: Financing Sources

## Section 8: Homebuyer Finances

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### Tab 8 Form

Please make sure to complete a copy of the following Excel form for each market in which the program will operate:

- Form 8: Homebuyer Affordability Worksheet

## Section 9: Development Team

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1. Indicate the Sponsor Organization Type: Choose an item.
  - a. If Other is selected, specify the type of organization.  
Click or tap here to enter text.

### Organizational Pipeline

2. List by name all projects your organization is submitting an application for in this Funding Round, in order of priority (highest to lowest). State your rationale for this order (e.g., committed funding, local priority population):  
Click or tap here to enter text.

### Tab 9 Form

Please make sure to complete the following Excel Form:

- Form 9: Project Team