Required Read Me Form

Please do not proceed to application form without reading and initialling each item below.

IN ORDER TO SAVE FORM, YOU MUST DOWNLOAD IT TO YOUR COMPUTER. PLEASE READ AND INITIAL EACH BOX.

I agree to read/review the entire loan application before I begin working on it.
I understand that the loan application fee is \$500.00, payable to the Midlands Housing Trust Fund. The application fee will be deposited once your application has been submitted to the loan committee. We will notify you once your check has been deposited.
I understand that the \$500 application fee is non-refundable.
I understand that the Midlands Housing Trust Fund does not provide financial or other assistance to individuals.
I agree to only use the pro forma spreadsheets available on the Midlands Housing Trust Fund website for my development and other budgets. You will find these spreadsheets under the Apply for a Loan section on our website.
I am aware that Firefox browser does not support fillable PDFs of the MHTF application form. You may use Google Chrome, Safari, Internet Explorer, etc.
I understand that loan origination fees are non-negotiable.
I understand that all loan closing cost (borrower's and lender's) are borne by the borrower. MHTF uses the McNair Law Firm for all loan closings.
I understand that origination fees and lender's closing costs are deducted from the loan proceeds at closing (unless prior arrangements have been made).
I understand that the MHTF is required to collect impact data annually on occupants of housing financed by MHTF.
I understand that the MHTF requires an affordability covenant on all units financed by the MHTF. This means that the unit(s) must remain affordable for households at or below 80% of area median income for a typical period of no less than 20 years.
I understand that the MHTF does not finance any housing units not targeted to serve households at or below 80% of area median income.
<i>If mixed income and/or use of development is planned, MHTF will only finance those units.</i>
I agree to provide a certified and complete Business Scored Credit Report. If the MHTF has to pull a credit report for you, a \$250 fee will be assessed.
Credit reports from Experian, Transunion, Dunn & Bradstreet, etc. are acceptable as long as they include an overall credit score.
PROCEED

IN ORDER TO SAVE FORM, YOU MUST DOWNLOAD IT TO YOUR COMPUTER.

	SECTION 1: LOAN SUMMARY					
1.	LOAN TYPE					
	Predevelopm	nent	Bridge		Gap	Permanent
2.	ACTIVITY TYPE (Select All that Appl	y)				
	Acquisitio	on	Infrastructure		onstruction/ edevelopment	Rehabilitation
3.	UNIT TYPE (Select All that Apply)					
	Homeowner	ship	Rental		omeownership Id Rental	Transitional
	Single Famil	У	Multi Family	M	ixed Use	Mixed Income
4.	PROJECT COST					
	TOTAL PROJECT COST	ſ:				
5.	LOAN TERMS					
J.	Amount Requested	1:				
	Loan Term Requested					
	When do you need the funds					
	How will you repay the MHTF loan	Construe ? Financ		Permanent Financing		
	Source of Committed Fund	ls				
				Valuation o collateral		Less prior liens:
	SEC	TION 1B: S	UBSIDY SECTIO	ON (IF AVAI	ILABILE*)	
	Amount Requested:					
	When do you need the funds	?				
	Why do you need subsidy funds?					
*M	*MHTF will keep 25% of its unrestricted capital funds available for subsidies, most of these subsidies will be used for the Home Buyer Assistance program.					
	S	ECTION 2: (ORGANIZATIO	N SUMMAR	XY	
1.	APPLICANT INFORMATION (IF MORE	THAN ONE APP	PLICANT, FILL OUT S	SECTION 3 FOR	R EACH APPLICANT A	AND INCLUDE ATTACHMENTS)
	Applicant Name:					
	Contact Name And Title:					
	East Number					
	Email Addusses					
	Federal Tax Identification #:					
		n-Profit			Joint Ventu	ure
	For Pi		, · · · · · ·			
_						
2	ORGANIZATIONAL CAPACITY					
	ase provide a brief history of the applicant, r	elated exneria	ence, and a descri	ntion of nrev	zious projects succ	essfully completed
	he applicant is <u>not</u> the developer, provide thi					contraction completeu.

3.	REFERENCES						
1)	Name			E	nail Address		
	Address			T	elephone Number		
	Prior Project(s) in which reference has participated:						
2)	Name			Eı	nail Address		
	Address			T	elephone Number		
	Prior Project(s) in whi	ch reference has pa	articipated:				
3)	Name		Email Address				
	Address			T	elephone Number		
	Prior Project(s) in which reference has participated:						
		-	000000				
			SECTIO	ON 3: PROJECT	SUMMARY		
1.	PROJECT INFORMA						
	Street Add	duaaa.					
	TMS Nu	mber:					
	Census	Tract:					
	Legislative District Nu	mber: S	C Senate		SC House	US Congress	
2	PROJECT DISCUSSI	ON					
des neig	Include a brief discussion of the project for which you are seeking funding. Your discussion should incorporate, but not be limited to: a description of the activity, size and scope of the project; the project location and why it is appropriate; the impact of the project on the neighborhood; anticipated funding sources; when the project construction will begin and when it will be completed. Include other relevant issues not discussed elsewhere in the application.						
3.	HOUSING UNITS						
J	The Recipient sha	all create					
	(number) housing units,						
	of which (number)	will	be affordable to	very low income households, (5	50% of median and below)	
	(1	number)	will	be affordable to	low income households, (51% t	to 80% of median)	
	(1	number)	will	be affordable to	moderate income households, ((81% to 120% of median)	
	and (number)	will	be market rate.			
4.	MHTF FINANCED U	UNITS					
	MHTF wil	ll finance	hou	sing units,			
	of which (number)	will	be affordable to	very low income households, (5	50% of median and below)	
(number)							
	(number) will be affordable to moderate income households, (81% to 120% of median)					(81% to 120% of median)	
5.	UNIT DESCRIPTION	JC					
0.	# Units	#		Sq. Ft.	Sales/Rental Price	Moderate, Low, or Very Low	
		"Bedrms/Baths		- 1			

SECTION 4: DEVELOPMENT TEAM

1. **DEVELOPER** Please identify the project developer(s) and other members of the development team. If more than one firm or individual is being identified, please indicate for what portion or phase of the project they will be responsible. Organization **Contact Person** Address **Telephone Number & Email** Address City, State, Zip Code Responsibility Organization **Contact Person** Address **Telephone Number & Email** Address City, State, Zip Code Responsibility Organization **Contact Person** Address **Telephone Number & Email** Address City, State, Zip Code Responsibility **CONTRACTOR/BUILDER** 2. Organization **Contact Person** Address **Telephone Number & Email** Address City, State, Zip Code Responsibility 3. ARCHITECT Organization **Contact Person** Address **Telephone Number & Email** Address Responsibility City, State, Zip Code 4. CONSULTANT/PLANNER Organization **Contact Person** Address **Telephone Number & Email** Address City, State, Zip Code Responsibility 5. PROJECT COORDINATOR Organization **Contact Person** Address **Telephone Number & Email** Address City, State, Zip Code Responsibility 6. ATTORNEY Organization **Contact Person** Address **Telephone Number & Email** Address City, State, Zip Code Responsibility

7.	TAX CR	REDIT SYNI	DICA	TOR				
Orga	nization					Contact Person		
Addı	ress					Telephone Number & Er	mail	
City,	City, State, Zip Code					_ Address _ Responsibility		
				SECTION S	5: PROJECT TIMETABLE	AND READINESS TO F	PROCEED	
1.	CONST	TRUCTION	DAT	ES				
Ant	icipated	length of cor	ıstruc	tion, acquis	sition, or rehabilitation:			
Sta	rt Date				End D)ate		
2	CITE							
2.		INFORMAT						
a.	5	have site cor			YES		NO	
b.	If yes, it	dentify form	ot cor	ntrol.	Deed		Title	
					Purchase Agreement		Option	
	Arro the	dood	at ui	on th	Other			
c.		ere any deed i		_				
d.	NO Is thoro	e sewer and v	YES	at the site?	If yes, provide a copy of the	e restriction(s).		
u.	Is there NO	_	YES	at the site?	If no, what is the estimated	l cost of bringing water an	ad cowar to the site?	
		_			II IIO, WIIAL IS LIFE ESTIMATED	l COSt OI Di Inging water an	In sewer to the site:	
e.	Is asbes	stos removal	YES	ired?	Marca area do a conviolth		time and (on any	
_ ۲					If yes, provide a copy of the	e study if available (execu-	tive summary and/or cor	iclusions UNL 1 J.
f.	Is lead j	paint remova	YES		If yes, provide a copy of the	o study if available (evecu	tive summary and /or cou	volucione ONLV)
g.		vas the prior						ICIUSIONS ONLET J.
h.					veys been done on this site			
—	NO		YES		If yes, provide a copy of the	e studv if available (execu	tive summary and/or cor	clusions ONLY.)
					n , co, p. c			
3.	3. LOCAL APPROVALS							
a.	Is the si	ite zoned to p	permi	it the propos	sed use?			
	NO		YES		If no, what variances are and how long will			
b.	What va acquire	ariances have ed?	e beei	n				
c.	_	plan approva	-					
	NO		YES		If yes, what is the status/timing?	If scattered sites, o	r a phased project, give ir	nformation on each.
d.	Are pro	operty taxes o	curre	nt?			* *	
	NO	_	YES		If no, what is the status/timing?			
4.	ADDI	TIONAL AP	PRO	VALS				
					approvals needed and status			
List	dii auun	.1011ai iocai, c	Ouncy	/, and state t	appiovais necucu anu status			

5. ARCHITECTURAL AND SITE PLANS (If Available)							
Status of Site Plans Conceptual Only Preliminary Final							
Status of Architectural Plans Conce	eptual Only		Preliminary		Final		
				DO			
SECTION 6: ENERGY EFFICIENCY, ENVIR							
1. Check all of the following certifications you are seeking	g to obtain fo	or your p	roject and exp	lain eac	h checke	d item.	
Earth Craft							
Energy Star							
Green Communities							
NAHB					1 11.		
2 Check all of the following strategies you have incorpor	-	_ /	-	each che	cked iter	n.	
Use durable materials to minimize maintenance cost, e.g. long	lasting exterio	or finish m	aterials.				
Increase energy and water efficiency by using:							
Properly sized high efficiency Energy Star-compliant heating,		ot water eq	luipment				
Fully sealed duct system, insulated pipes, water heater jackets	5						
Passive solar Strategies							
Low e/ low-solar-gain windows							
Water efficient shower heads and toilets							
Energy Star-compliant appliances	F C		1				
Energy efficient lighting using day lighting when possible and	Energy Star co	mpliant lig	ghting fixtures				
Home Energy Rating System (HERS) testing							
Other:							
Increase health and safety with:							
Low toxicity interior paints, finishes, carpets							
Effective mechanical ventilation Other							
Other: Second							
a Lapiani cach checkeu hein above.							
SECTION 7: MARKET,	/NEEDS ASS	ESSMENT	[
INTENDED POPULATION	INTENDED POPULATION						
What is the population that you intend to serve with this project? Check all that apply							
Income Level							
Extremely Low Income Household (30% and below of AMI)			ome Household 80% of AMI)				
Very Low Income Household (31% to 50% of AMI)			e Income Househo 120% of AMI)	ld			
Household Information		1					
Single Parent Household		Female H	lead of Household				
Senior Head of Household (Age 62 or older)		Dual Inco	ome Household				
Disabled Household Member		Homeles	S				

2. SITE SELECTION				
Why did you select this site for your project?				
3. OCCUPANTS				
From what geographic area do you	anticipate drawing occupants fo	r this project?		
4. SALES/RENTS OF SIMILA	K UNITS IN THE AKEA			
# of Bedrooms	# of Bathrooms	Market Pric	e or Rent	Your Proposed Sale Price or Rent
What methodology did you use for	determining the values listed ab	ove?		
5. SOURCES OF INFORMATI	ON			
Sources of Evidence of Project Need in Neighborhood Check all that apply. Provide contact person name where appropriate.				
	Area Realtors			
Neighborhood Groups	, Churches, Other Developers			
Waiting List Data from Municipal				
	Data from Section 8 Program			
Waiting List Data from Other Affor				
-	Census Data			
Other Source of Infor	mation (please specify)			
	nalysis (please specify)			
,	·			
6. NEIGHBORHOOD DESCR	IPTION			
How would you describe the	neighborhood? Check all that	annly		
How would you describe the Severely Blighted	-	appiy. trifying		Urban
Blighted		ell Kept		Rural
Diighteu	L W			Ruiai 📋

SECTION 8:	RESOLUTION
(To Apply for and	Accept MHTF Funds

WHEDEAC	(the a	nnlicant) decires to annly for and obtain s				
	HEREAS (the applicant) desires to apply for and obtain a for the purpose for dable housing subsidy) from The Midlands Housing Trust Fund, Inc. in the amount of \$ for the purpose					
,	(project activity) in the project name.					
	FORE RESOLVED, that					
for and the execution	n of a contract for the receipt of such a loan, and	l does further, upon the execution of such	a contract, authorize			
the expenditure of su	uch funds pursuant to the terms of said contrac	t between the applicant and MHTF.				
BE IT FURTH	ER RESOLVED that the persons whose names,	titles and signatures appear below are au	thorized to sign the			
	they or their successors in said titles are author	• • • • • • • • • • • • • • • • • • • •	-			
in connection therev						
SIGNED		SIGNED				
	NAME	NAME				
	IN A IVIE	NAME				
	TITLE	TITLE				
Board of Directors Ce	rtification (if applicable)					
I.	(Name of Secretary, C	FO), hereby certify that at a meeting of the				
(Governing Body) held	on (Date) the above resolution w	ras duly adopted.				
			DV			
	DATE	SEAL OR NOTA	кү			

ATTACHMENTS CHECKLIST

Complete and submit forms for all sections of the application. All attachments are required except those listed as "if applicable." Place attachments at the end of the application in the following order. Label each attachment with the section and title that identifies it in the application. Check all attachments you are submitting. Application is complete when all sections are filled out and all appropriate attachments are included along with a nonrefundable application fee of \$250. Only complete applications will be considered.

SECTION 1	LOAN SUMMARY
	Development Budget Worksheet
	Operating Pro Forma Worksheet
	Sources and Uses Worksheet
	Affordability Worksheet
SECTION 2	ORGANIZATION SUMMARY (IF MORE THAN ONE APPLICANT, FILL OUT SECTION 2 FOR EACH APPLICANT AND INCLUDE ATTACHMENTS)
	Copy of 501(c)(3) Designation Letter (if applicable) Copy of Articles of Incorporation (if applicable) Certificate of Good Standing from the SC Secretary of State
	☐ If developer is a 501(c)(3) non-profit corporation attach list of the Board of Directors and the staff
	U-9 Request for Taxpayer Identification Number and Certification
	Copy of Annual Report (if applicable)
	Copy of Most Recent Audited Financial Statement (if applicable)
	Dunn & Bradstreet Report and Scored Credit Report on all principals
	Status of other Projects
	Three years of Tax Returns and Current Year to Date Financial Statements
	List any litigation the company or its principals are involved in or litigation on the project and the disposition of this litigation
SECTION 3	PROJECT SUMMARY
	Attach maps of the neighborhood that clearly show the project site and the project's location within the municipality
	Attach photographs of the site and structures, if available, and the adjacent properties
	Directions to project site
SECTION 4	DEVELOPMENT TEAM
	Resumés and relevant experience of the developer, contractor/builder, and the consultant/ planner (if applicable.)
SECTION 5	PROJECT TIMETABLE
	Attach copies of all available documents referenced in this section:
	A copy of site control documentation and deed restrictions Title (if applicable)
	A copy of the executive summary and/or conclusions of asbestos removal, paint removal, and/or environmental or soil surveys
	Copies of additional approvals
	For new construction, attach conceptual plans
	For rehabilitation or adaptive reuse of a vacant building, attach work write-up(s) and cost estimate and attach certification from a licensed architect or engineer that the building is structurally sound and appropriate for the intended use and that the reconstruction is achievable or within the cost structure proposed in this application
	Supplement this information to the greatest extent possible with site plans, floor plans and architects and/or engineer report
	For Acquisition and Pre-development: Sales contract, site information
SECTION 6 SECTION 7 SECTION 8	ENERGY EFFICIENCY MARKET NEEDS ASSESSMENT RESOLUTION