

# The Housing Authority of the City of Yuma

## Project Based Voucher Application

### OVERVIEW

This application is for Project Based Voucher (PBV) rental units for very low-income individuals and families. Awarded projects will be required to submit additional information in order to comply with The Housing Authority of the City of Yuma (HACY) policies and U.S. Department of Housing and Urban Development (HUD) regulations. HACY reserves the right to request additional information from an applicant as deemed necessary.

### I. TYPE OF REQUEST

Application Program Type: (As defined in 24 CFR 983)	<input type="checkbox"/> Existing Housing Units <input type="checkbox"/> Rehabilitating Housing Units <input type="checkbox"/> New Construction Units
Number of Project Based Vouchers Being Requested: ** Minimum of 30 - Maximum of 100	
What is the length of the Project Based Voucher contract you are seeking?	
Has the project received full funding or commitment letters at this time?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, when and what kind of funding have you been awarded or was committed to the project?	
If no, what funding are you seeking and what is the projected decision date?	

### II. SPONSOR/OWNER INFORMATION

Sponsor/Owner Entity Name:  **Evidence of ownership must be attached. Resulting contracts will be made between the HACY and Owner.	
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Sponsor/Owner Address:	
Sponsor/Owner Telephone #:	
Sponsor/Owner Contact Person:	
Contact Person Telephone #:	
Contact Person Email:	
Federal Tax ID Number:	
Is the Owner a Non-Profit Entity and if so, what type of entity and where was it formed?	

**III. DEVELOPMENT (PROPERTY) INFORMATION**

Development Name:	
Property Address:	
Parcel Identification Number (PIN):	
Census Tract(s):	
Total Number of Units in Development:	
Date the project is anticipated to be ready for tenants:	

**IV. Developer Information**

Developer Name and Contact Information (if applicable):	
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V. **PROPOSED UNIT MIX**

Please indicate the number of units of each type for the proposed development assuming that funding is received. The total unit count should equal the total number of units in the development (the entire building or buildings).

Number of Units with:	PBV/HCV Units	Other Restricted Units	Market Units	Total Units
0 Bedroom (Studio)				
1 Bedroom				
2 Bedroom				
3 Bedroom				
Other				
Total				

For existing housing, to the best of your knowledge does the project substantially comply with HUD's Housing Quality Standards (HQS)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
For new/rehab housing, to the best of your knowledge does the project substantially comply with HQS?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will the project comply with Section 504 of the Rehabilitation Act of 1973, which mandates certain accessibility features?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How many Americans With Disabilities Act (ADA) accessible units are in your project?  ** Accessibility documentation must be attached.	
How many ADA accessible units will be included in the assigned PBV units?	

VI. **DEVELOPER EXPERIENCE**

Please attach a description of the applicants experience in the development and management of rental properties, especially those servicing low income individuals and families. Please note the number of years of experience as well as the number of units.



VII. **PROJECT DESCRIPTION (DETAILED)**

Please attach a written detailed narrative to thoroughly describe the proposed project. At a minimum the narrative should address the following:

- a. Description of the type of housing to be provided, including number of units, total number of PBV units, number of buildings, floor plans, number of bedrooms, building amenities to be provided, and photos of each building.
- b. Need for the project and market study.
- c. Characteristics of the population to be served including individuals, couples, families with children, age, gender, race, ethnicity, disabilities, income classifications, and other demographic descriptors as appropriate to the project.
- d. Onsite Support Services plan.
- e. Public Transportation options.
- f. Location and characteristics of the site including, but not limited to, relevant zoning issues, neighborhood amenities and characteristics, distance to local amenities and services, health care, employment options and stores.
- g. Environmental Concerns.
- h. For New Construction or Rehabilitation Projects, describe the proposed design, layout and other construction elements of the project; include, as appropriate, architectural drawings, floor plans, accessibility modifications, and evidence of compliance with local permits and zoning requirements.
- i. Describe how the project is consistent with the priorities of the City of Yuma's current Consolidated Plan.
- j. Proposed contract rents for each unit type and utility responsibilities.
- k. Commitment to comply with Davis-Bacon, Section 3, and Minority Business Enterprise/Women's Business Enterprise (MBE/WBE) requirements.
- l. Lead-based paint certificate, if applicable.
- m. Disclosure of other governmental assistance for the proposed project (provide a subsidy layering review).
- n. HUD environmental review.
- o. Tenant Selection Plan for tenancy.

VIII. **PROJECT TIMELINES**

Describe the project timelines. Identify relevant development activities that will move your project forward to full occupancy.

IX. **PROJECT FUNDING**

- a. Budget: All applicants must complete the accompanying Budget and Source and Use documents.
- b. Include Operating Performa.
- c. Copy of most recent audit.



**X. CERTIFICATION**

I am an officer authorized to make a binding contractual commitment for the applicant.

I have received, read, and understand the provisions of this application.

I acknowledge that failure to disclose a material fact or misrepresent a fact can result in disqualification of the development proposal from further consideration of an award. I certify that all information contained in this application is true and correct to the best of my knowledge and belief.

I understand by signing this form that the Housing Authority of the City of Yuma (HACY) may, at its choosing, conduct a check with credit verification agencies.

I understand HACY is not obligated to pay, nor will it in fact pay, any costs or losses incurred by the applicant at any time including, but not limited to, the cost of: 1) any prior actions by the applicant in order to complete this application, and 2) any future actions by applicant in connection with any negotiations between the applicant and HACY including, but not limited to, actions to comply with requirements of HACY or any applicable federal, state, or local laws/regulations. I agree to comply with all federal, state or local laws or regulations that may apply to this project.

I agree the applicant will not enter into, execute or be a party to any covenant, agreement, lease, deed, assignment, conveyance, or any other written instrument which restricts the sale, lease, use or occupancy of the property or any part thereof, upon the basis of race, color, religion, sex, or national origin. The applicant will comply with all federal, state, and local laws, in effect from time to time, prohibiting discrimination or segregation and will not discriminate by reason of race, color, religion, sex or national origin in the sale, lease, use or occupancy of the property.

I certify the applicant will not displace tenants (forcible move) from the units to be assisted at the proposed site.

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

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

Applicant Entity: \_\_\_\_\_

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



# **HOUSING AUTHORITY OF THE CITY OF YUMA**

## **PROJECT BASED VOUCHER**

### **BUDGET FORM**



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

Proposed Project Schedule: As applicable, provide the schedule for completing the following actions. Enter the anticipated completion dates that are relevant to your project.

**A. Project Start-Up**

**Completion Date**

- Property Acquisition Completed
- Zoning Approvals Obtained
- Detailed Program Design Completed
- Environmental Reviews Completed
- Building Permits Obtained

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**B. Financing Sources Obtained**

**Completion Date**

- Construction Loan
- Bridge Loan
- Private Lender Financing
- Tax Credit Application Submitted
- Tax Credit Allocation Approval
- Govt Grants/Loans
- Other Financing:

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\_\_\_\_\_

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**C. Construction/Implementation**

**Completion Date**

- Construction Starts
- Marketing of Units or Program Begins
- Occupancy/Rent-up Begins (rental projects)
- Complete Rehab Const. (for units occupied)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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

Project Costs: Provide information, as applicable

<b>A. Acquisition</b>	<b>Total Cost</b>
Land acquisition costs	_____
Building acquisition costs	_____
Other	_____

<b>B. Construction/rehab costs</b>	<b>Total Cost</b>
Clearance/demolition	_____
Drainage improvements	_____
Installation/renovation of sanitary sewers	_____
Installation/renovation of water mains	_____
Other site work	_____
Rehabilitation of existing units	_____
New Construction of residential units	_____
Other:	_____
Relocation	_____
Loss of Rental Income	_____

<b>C. Development Cost</b>	<b>Total Cost</b>
Real Estate Matters	_____
Partnership formation	_____
Subdivision	_____
Conversion to Condominiums	_____
Other:	_____

<b>Project Design</b>	<b>Total Cost</b>
Architectural	_____
Cost Estimate	_____
Engineering	_____
Site Investigation	_____





**Project Planning**

All Fees

Permits

Appraisal

Environmental Study

Other:

**Total Cost**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**D. Financing Costs**

Tax Credits

Tax Credit Fee

Tax Credit Counsel

Cost Certification

Other:

**Total Cost**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Conventional Loans**

Construction Loan Origination Fees

Construction Loan Legal Fees

Permanent Loan Origination Fees

Permanent Loan Legal Fees

Loan Recordation Taxes/Fees

Other:

**Total Cost**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Other Loans**

Legal Fees

Loan Recordation Taxes/Fees

Other:

**Total Cost**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**E. Other**

\_\_\_\_\_

**Total Cost**

\_\_\_\_\_

**F. TOTAL COST**

TOTAL

**Total Cost**

\_\_\_\_\_



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

Sources of Funds: Provide information as applicable.

**A. Permanent Financing (do not include construction financing)**

Name of Lender or Source of Funds, Contact Persons and Telephone #	Amount Funded	Annual Debt Service	Annual Interest Rate	Amortization Period (yrs)	Loan Term (yrs)
<b>Owner's Equity (describe):</b>		N/A	N/A	N/A	N/A
<b>Tax Credit Proceeds</b>		N/A	N/A	N/A	N/A
<b>TOTAL</b>					

**B. Construction Financing**

Sources of Funds	Amount	Name and Phone # of Contact



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

**Annual Project Income:** Provide the following information for rental projects only.

**A. Projected Rent Schedule When Project is Fully Implemented**

No. of Units of This Type	No. of Bedrooms & Baths	Avg Size (SF)	Monthly Rent per Unit	Annual Rent for All Units

**B. Current Rent Schedule (complete for rental projects that are currently occupied)**

No. of Units of This Type	No. of Bedrooms & Baths	Avg Size (SF)	Monthly Rent per Unit	Annual Rent for All Units

**C. Utility Allowance Information (Tenant Paid Utilities)**

Utility Cost	<u>Tenant Pays</u>		Type (gas, electric, etc)
	<u>YES</u>	<u>NO</u>	
Heating			
Air Conditioning			
Cooking			
Lighting			
Water			
Hot Water Heater			



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

**Stability of Operating Funding:**

**INCOME**

<b>Source</b>	<b>Amount</b>
Rental Income	_____
Parking	_____
Laundry Facilities	_____
Program Income	_____
Other Assistance	_____
Other (describe)	_____

**EXPENSES**

<b>Item</b>	<b>Amount</b>
Total Administrative	_____
Total Tenant Service	_____
Total Utilities	_____
Total Maintenance	_____
Other	_____

**OTHER:**

**TOTAL OPERATING INCOME** \$\_\_\_\_\_ Do not include program costs, support services, etc.

**Sources of Additional Operating Income**

Grants with commitments in hand	_____
Expected grants	_____
Contributions	_____

