



**Housing Authority
of the
County of Tulare**

September 22, 2022

To: Owners/ Developers wishing to apply for 35 Section 811 Mainstream Project-Based Vouchers (MPBV) via the Housing Authority of Tulare County (HATC) September 2022 Request for Proposals (RFP)

Dear Proposer(s):

The Housing Authority of the County of Tulare will be accepting Proposals for 35 Section 811 Mainstream Project-Base Vouchers (MPBV). Enclosed is Request for Proposal and can also be found on the Section 811 Mainstream Project-Based Vouchers Request for Proposal link on our website at www.hatc.net. If you have any questions throughout the proposal process please contact me at cindy@hatc.net or (559) 627-3700 ext.116.

Proposals must be received by **5:00 P.M. PDT on October 14, 2022.**

Yours truly,

HOUSING AUTHORITY OF THE COUNTY OF TULARE

CYNTHIA LOPEZ
Programs/MTW Coordinator



**HOUSING AUTHORITY OF TULARE COUNTY
SECTION 811 MAINSTREAM PROJECT-BASED VOUCHER
PROGRAM (MPBV)
SEPTEMBER 22, 2022**

PROPOSAL PACKAGE

**PROGRAM DESCRIPTION, PROPOSAL FORMS, ATTACHMENTS, CHECKLIST
AND SCORING FACTORS FOR OWNER/DEVELOPER SUBMISSION OF MPBV
PROPOSALS**

**PROPOSALS MUST BE RECEIVED BY OCTOBER 14, 2022, 5:00
P.M. PDT**

Submit one original and one electronic copy to:
Housing Authority of Tulare County
P.O. Box 791
Visalia, CA 93279
Contact Person: Cynthia Lopez
cindy@hatc.net or (559) 627-3700 ext.116

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**HOUSING AUTHORITY OF TULARE COUNTY
SECTION 8 MAINSTREAM PROJECT-BASED VOUCHER PROGRAM (MPBV)
SEPTEMBER 22, 2022**

REQUEST FOR PROPOSALS (RFP)

1. INTRODUCTION

The Housing Authority of Tulare County (HATC) is inviting owners and developers of New Construction rental projects within the limits of the county of Tulare, to submit proposals for participation in the Section 811 Mainstream Project Based Voucher Program (MPBV). **MPBV assistance is available for up to 35 units under this RFP.** Applications will be accepted for projects with “New Construction” Residential Units only.

A Project is twenty or more dwelling units that are income/rent restricted or under a regulatory agreement.

A housing unit is considered a *new construction unit* if construction has **not** started at the time of HATC selection. All financing of project costs and operating expenses will be the responsibility of the owner.

The new construction units will be leased to eligible families referred by HATC. All families must have an annual income at or below 60% of area median income (AMI), as adjusted for family size, in order to qualify for a MPBV.

All eligible households must have a non-elderly household member with a disability. The eligible household must be: transitioning out of institutional and other segregated settings, at serious risk of institutionalization, homeless, or at risk of becoming homeless. All eligible households must meet the eligibility parameters to participate in the Mainstream Voucher Program; as outlined in FR-6100-B-43 FY2017 *Mainstream Voucher Program Notice of Funding Availability (NOFA)*.

Rents for MPBV units cannot exceed the maximum allowable Payment Standard as established by HATC for the MPBV Program. In addition, to meet HUD’s requirements for “rent reasonableness,” rents must be comparable to those for similar rental units in the area in which the project is located. Rent reasonableness determinations will be made in accordance with HUD regulations.

2. PROGRAM OVERVIEW AND REQUIREMENTS

A. Purpose

The primary purpose of the MPBV Program is to create designated rental units that are decent, safe and sanitary for persons earning no more than 60% AMI and that are non-elderly with a disability, transitioning out of institutional and other segregated settings, at serious risk of institutionalization, homeless, or at risk of becoming homeless.

B. Funding

HUD awarded 45 Section 811 Voucher to HATC through FR-6100-B-43 FY2017 *Mainstream Voucher Program Notice of Funding Availability (NOFA)* in September of 2018. The vouchers are Section 811 Housing Choice Vouchers (known as Mainstream Vouchers), but are subject to all HCV/Section 8 requirements of 24 CFR part 982, and/or part 983 for vouchers that are project-based. Thus, they will operate similar to traditional HCV/Section 8 vouchers, but taking in to account the specific program eligibility criteria described in the NOFA and RFP.

C. Number of PBV Units Available

HATC will make up to 35 units available in the one category identified below:

1. 35 units available for New Construction that will serve a non-elderly household member with a disability. The eligible household must also be: transitioning out of institutional and other segregated settings, at serious risk of institutionalization, homeless, or at risk of becoming homeless.

D. Cap on Number of PBV Units in a Project

HATC may not select a proposal to provide MPBV assistance for units or enter into a HAP (Housing Assistance Payments) contract to provide MPBV assistance for units if the total number of dwelling units that will receive MPBV assistance during the term of the MPBV HAP contract is more than 25 percent of the number of dwelling units (assisted or unassisted) in the project.

E. Definition of Disabled and Elderly Households, Homelessness and Families with Supportive Services

For purposes of this RFP, Non-elderly person with disabilities is defined as (for purposes of determining eligibility): A person 18 years of age or older and less than 62 years of age, and who:

- (i) Has a disability, as defined in 42 U.S.C. 423;
- (ii) Is determined, pursuant to HUD regulations, to have a physical, mental, or emotional impairment that:
 - (A) Is expected to be of long-continued and indefinite duration;
 - (B) Substantially impedes his or her ability to live independently, and
 - (C) Is of such a nature that the ability to live independently could be improved by more suitable housing conditions; or
- (iii) Has a developmental disability as defined in 42 U.S.C. 6001.

For purposes of this RFP, an “elderly” household means a family whose head, spouse, or sole member is a person who is at least 62 years of age. It may include two or more persons who are at least 62 years of age living together, or one or more persons who are at least 62 years of age living with one or more live-in aides. (24 CFR 5.403)

For purposes of this RFP, a family determined to be “Homeless” must be certified as such by an established and qualified service provider that regularly provides services to homeless individuals and families. Homeless individuals or families must meet the definition of “Homelessness” as set out by Title 42, U.S. Code section 11302 (as such section may be amended from time to time).

Definition of Homelessness: *The individual must be moving from an emergency shelter, transitional housing, or the individual must be currently homeless, meaning that he/she:*

- a. Lacks fixed, regular and adequate nighttime residence;*
- b. Has a nighttime residence that is a publicly or privately operated shelter designated to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for persons with mental illness);*
- c. Has a nighttime residence that an institution that provides a temporary residence for individuals intended to be hospitalized.*
- d. Has a nighttime residence that is a public or private place not designed for, or ordinarily used as a regular sleeping accommodation for human beings.*

F. MPBV Program Contract Assistance and Term

New Construction Housing Term

Selected projects may not begin construction until all post-selection requirements (see Section 3.H. below) are met and HATC and the owner have executed an AHAP. **HUD regulations do not allow any exception to this “no-start” rule.**

Upon satisfactory compliance with all post-selection requirements, satisfactory compliance with provisions of the AHAP, completion of new construction and a successful Housing Quality Standard (HQS) inspection, the HAP contract will be executed, and agreed upon, between HATC and the owner for specified units, for an initial term of up to 15 years (maximum), with potential extension(s).

Contract Assistance

Rental assistance is provided while eligible families occupy the units. An eligible family's income must not exceed the HUD-established low income limit (80% AMI), adjusted for family size. A family who resides in a MPBV unit for at least one year may move with continued rental assistance under the tenant-based Section 8 Program if assistance is available. The MPBV unit the family occupied must then be rented to an eligible family from HATC's wait list. MPBV units must be leased to eligible families for the full term of the HAP contract.

The HAP contract establishes the initial rents for the units and describes the responsibilities of HATC and the owner. HAP contract renewal may occur at the sole option of HATC for such period as HATC determines appropriate to expand housing opportunities and to achieve long-term affordability of the assisted housing. All HAP contract renewals are contingent upon the future availability of appropriated HUD funds for the Mainstream Voucher Program.

G. Occupancy and Vacant MPBV Units

For existing projects, units that are occupied on the proposal selection date must be occupied by a family eligible for MPBV assistance (see income limits listed in Section 8.A. of the Owner/Developer Proposal). If the family is not eligible, the unit cannot be selected for MPBV assistance.

Initial vacancies for any project as well as all ongoing vacancies will be filled using HATC's wait list. Owners may refer applicants to HATC's waiting list during periodic openings of the list. Both the owner and the tenant of a MPBV assisted unit must notify HATC if the tenant will be moving from the MPBV unit. HATC will notify appropriately-sized households at the top of its wait list that a unit is available. Once a tenant is approved by the owner, the owner must refer the family back to HATC for final eligibility.

H. Rent Limits

The rent to owner must not exceed the lowest of the following:

- An amount determined by HATC, not to exceed 110 percent of the applicable HUD Fair Market Rent (FMR) (or any HUD-approved exception payment standard) for the unit bedroom size ("HATC Payment Standards") minus any utility allowance;
- The reasonable rent; or
- The rent requested by the owner.

I. Threshold Project Eligibility

In order to be considered under this RFP, a project must meet all of the following:

1. Proposed project must be located in HATC's jurisdiction within the limits of Tulare County.
2. For new construction, the proposed project must *not* have started at the time of selection for PBV (and cannot start until all post-award conditions are met and an AHAP is signed). Before selecting a new construction project and before an AHAP is signed HATC will make a site inspection to verify this condition.
3. Proposed project must be ready to start construction within 18 months of selection for MPBV.
4. Applicant must have site control or submit evidence to indicate that the needed approval/documentation for site control is likely to be obtained and will not delay the project.
5. Applicant must submit evidence that the proposed new construction is permitted by current zoning ordinances or regulations, or submit evidence to indicate that the needed rezoning is likely to be obtained and will not delay the project.
6. Proposed project must be financially feasible.

J. Ineligible Projects

Ineligible Housing Types (24 CFR 983.53)

HATC may not attach MPBV assistance to:

- Shared housing units;
- Units on the grounds of a penal reformatory, medical, mental, or similar public or private institution;
- Nursing homes or facilities providing continuous psychiatric, medical, nursing services, board and care, or intermediate care (except that assistance may be provided in assisted living facilities);
- Units that are owned or controlled by an educational institution or its affiliate and are designated for occupancy by students of the institution;
- Manufactured homes;
- Cooperative housing; or
- Transitional housing.

Ineligible Subsidized Housing (24 CFR 983.54)

HATC may not attach MPBV assistance to any of the following types of subsidized housing:

- A public housing unit;
- A unit subsidized with any other form of Section 8 assistance;
- A unit subsidized with any governmental rent subsidy;
- A unit subsidized with any governmental subsidy that covers all or any part of the operating costs of the housing;
- A unit subsidized with Section 236 rental assistance payments (except that HATC may attach assistance to a unit subsidized with Section 236 interest reduction payments);
- A Section 202 project for non-elderly households with disabilities;
- Section 811 project-based supportive housing for persons with disabilities;
- Section 202 supportive housing for the elderly;
- A Section 101 rent supplement project;

- A unit subsidized with any form of tenant-based rental assistance; or
- A unit with any other duplicative federal, state, or local housing subsidy, as determined by HUD or HATC in accordance with HUD requirements.

K. Site Inspection and Site Selection Standards

Deconcentration of Poverty

HATC may not select a proposal for existing, rehabilitated or new construction MPBV housing on a site or enter into an AHAP or HAP contract for units on the site unless HATC has determined that PBV assistance for housing at the selected site is consistent with its goal of deconcentrating poverty and expanding housing and economic opportunities. In complying with this goal HACT will limit approval of sites for PBV housing to census tracts that have poverty concentrations of 20 percent or less.

HATC will consider exceptions to the 20 percent standard where it determines that the MPBV assistance will complement other local redevelopment activities designed to deconcentrate poverty and expand housing and economic opportunities such as activities located in:

- A census tract that is a HUD-designated Enterprise Zone, Economic Community, or Renewal Community;
- A census tract where the concentration of assisted units will be or has decreased as a result of public housing demolition and HOPE VI redevelopment;
- A census tract that is undergoing significant revitalization, under an approved regulatory agreement, as a result of state, local, or federal dollars invested in the area;
- A census tract where new market rate units are being developed where such market rate units will positively impact the poverty rate in the area;
- A census tract where there has been an overall decline in the poverty rate within the past five years; or
- A census tract where there are meaningful opportunities for educational and economic advancement.

Site and Neighborhood Standards for Existing and Rehabilitated Housing (24 CFR 983.57(d))

HATC may not enter into an AHAP or a HAP contract for existing or rehabilitated housing until it has determined that the site complies with the HUD-required site and neighborhood standards.

The site must:

- Be adequate in size, exposure, and contour to accommodate the number and type of units proposed;
- Have adequate utilities and streets available to service the site;
- Promote a greater choice of housing opportunities and avoid undue concentration of assisted persons in areas containing a high proportion of low-income persons;
- Be accessible to social, recreational, educational, commercial, and health facilities and services and other municipal facilities and services equivalent to those found in neighborhoods consisting largely of unassisted similar units; and
- Except for housing for elderly persons, be located so that travel time and cost via public transportation or private automobile from the neighborhood to places of employment is not excessive.

Site and Neighborhood Standards for New Construction (24 CFR 983.57(e))

In order to be selected for MPBV assistance, a site for new construction must meet the following HUD-required site and neighborhood standards:

- The site must be adequate in size, exposure, and contour to accommodate the number and type of units proposed;
- The site must have adequate utilities and streets available to service the site;
- The site must not be located in an area of minority concentration unless permitted under section (e)(3) of 24 CFR 983.57;
- The site must not be located in a racially mixed area if the project will cause a significant increase in the proportion of minority to non-minority residents in the area;
- The site must promote a greater choice of housing opportunities and avoid undue concentration of assisted persons in areas containing a high proportion of low-income persons;
- The neighborhood must not be one that is seriously detrimental to family life or in which substandard dwellings or other undesirable conditions predominate;
- The housing must be accessible to social, recreational, educational, commercial, and health facilities and services and other municipal facilities and services equivalent to those found in neighborhoods consisting largely of unassisted similar units; and
- Except for housing designed for elderly persons, the housing must be located so that travel time and cost via public transportation or private automobile from the neighborhood to places of employment is not excessive.

L. Federal Requirements

Certain other Federal requirements also apply to MPBV assistance, including, but not limited to:

1. Fair Housing: Nondiscrimination and equal opportunity. See 24 CFR 5.105(a) and Section 504 of the Rehabilitation Act.
2. Environmental Review: See 24 CFR parts 50 and 58 and 24 CFR part 983.58.
3. Labor Standards: Regulations implementing the Davis-Bacon Act, Contract Work Hours and Safety Standards Act (40 U.S.C. 3701-3708), 29 CFR part 5, and other federal laws and regulations pertaining to labor standards applicable to an AHAP covering nine or more assisted units.
4. Debarment: Prohibition on use of debarred, suspended, or ineligible contractors. See CFR 5.105(c) and 24 CFR part 24.
5. Uniform Relocation Act: A displaced person must be provided relocation assistance at the levels described in and in accordance with the requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (URA) (42 U.S.C. 4201-4655) and implementing regulations at 49 CFR part 24.

M. Federal Program Regulations and HATC Program Policies

The information contained in this RFP is a summary overview of the MPBV Program. HATC does not warrant that it is exhaustive and bears no responsibility for its accuracy or completeness. All persons submitting proposals are encouraged to read the HUD regulations on the PBV Program and the Mainstream Voucher Program for a full description of the Program's requirements. Project Based Voucher regulations can be found at: 24 CFR part 983 and as revised per Federal Register Notices and Regulations. It is available online at :

Mainstream Voucher Program and Project Based Voucher Regulations are available online at:

[Mainstream Vouchers | HUD.gov / U.S. Department of Housing and Urban Development \(HUD\)](#)

[Project Based Vouchers | HUD.gov / U.S. Department of Housing and Urban Development \(HUD\)](#)

3. PROPOSAL SUBMITTAL AND PROCESSING

A. Organization of Submitted Materials

All proposals must be legibly typed and neatly organized and presented. Use the forms provided; do not use your own except where the form instructions permit you to do so. **Submit section 4 (Owner/Developer Proposal), section 5 (Factors for Scoring and Ranking Proposals), and section 6 (Document Checklist and Required Attachments) of this Proposal Package.** Attach all attachments in the order shown in section 6. REQUIRED ATTACHMENTS TO PROPOSAL (**DOCUMENT CHECKLIST**).

B. Submittal Deadline

Proposals are due by **5:00 p.m. PDT on October 14, 2022**. Submit an original and one electronic copy to:

Housing Authority of Tulare County
P.O. Box 791
Visalia, CA 93279
Contact Person: Cynthia Lopez
cindy@hatc.net or (559) 627-3700 ext.116

Only proposals submitted in response to this RFP will be accepted for consideration. Proposals must respond to all requirements as outlined in the RFP. HATC will date and time stamp all proposals upon receipt. Proposals submitted after the deadline will not be accepted. Proposals will not be accepted via a facsimile machine.

C. Proposal Review and Selection

HATC will review, evaluate, rank, and select the proposals according to this RFP. If a HATC-affiliated project is selected for PBV, the local HUD field office must review and approve the selection procedures.

Prior to selecting units, HATC will determine that each proposal is responsive to and in compliance with HATC's written selection criteria as stated in this RFP, and in conformity with HUD program regulations and requirements at 24 CFR part 983 and as revised per Federal Register Notices and Regulations.

Proposals that meet the Project Thresholds outlined in Section 2.I above will be evaluated and ranked according to the factors described in Section 6 of this RFP. A Ranking List will be prepared according to points awarded to each proposal. In order to be considered for award, a proposal for New Construction housing must score at least 100 points.

The proposals scoring the highest points within each of the categories will be eligible to be awarded project-based vouchers up to the amount requested and in accordance with the specified limits.

HATC may, at its discretion, select one or more of the proposals submitted, or none of the proposals submitted. HATC reserves the right to postpone or cancel the final award of the proposals at HATC's convenience.

HATC will promptly notify the selected owner(s) in writing of their selection for the MPBV program.

Documents regarding HATC's basis of selection for MPBV proposals will be made available for public inspection, excluding sensitive owner information such as financial statements and similar information about the owner.

D. Incomplete and Non-Responsive/Non-Compliant Proposals

If HATC determines that a proposal is non-responsive or non-compliant with this RFP, written selection criteria and procedures or HUD program regulations, the proposal will be rejected and returned to the applicant with notification stating the reason for rejection. In cases where the proposal meets the minimum information requirements but is defective through typographical or minor calculation errors the proposal will be processed.

HATC reserves the right to reject a proposal at any time for misinformation, errors or omissions of any kind, no matter how far such proposal has been processed.

E. Withdrawal of Proposal

Applicants may withdraw their proposals before or after the RFP submittal deadline by submitting a written request to HATC

F. Proposal Cost

All costs incurred in the preparation of the proposal are the responsibility of the applicant. All documents submitted as part of the proposal will become property of HATC. Any material submitted that is confidential must be clearly marked as such.

G. Affirmative Action

HATC is an Equal Opportunity Business Enterprise which promotes competitive solicitations and does not discriminate on the basis of race, color, religion, creed, national origin, sex, disability, age or sexual orientation.

HATC encourages Minority, Small, Women- and/or Disabled-owned Business Enterprises to respond to this solicitation.

H. Post Award Conditions

New Construction Units

HUD regulations require that a number of conditions are met before new construction units can be subsidized. The following represent some, but not all, of the conditions that must be completed before HATC and the owner/developer can execute an AHAP:

1. *Subsidy Layering Review (SLR)*: PBV projects that utilize LIHTCs or other governmental housing assistance from federal, state or local agencies are subject to a SLR (see 24 CFR 983.55) to prevent excessive public assistance for the project. Applicants will be required to submit a list of documents to HATC that will then be submitted to HUD, or the approved State Housing Credit Agency, for the SLR approval.
2. *Environmental Review*: PBV activities are subject to HUD environmental regulations in 24 CFR parts 50 and 58. The owner must obtain documentation of environmental clearance from the Responsible Entity (i.e., the city or county) that conducted or approved the environmental review (see 24 CFR 983.58).
3. *Determination of Initial Contract Rent*: HATC will determine the estimated and actual amount of initial rent to the owner according to 24 CFR 983.301. The AHAP states the estimated amount of the initial rent to owner; the actual amount of the initial rent to owner is established at the beginning of the HAP contract term.

In addition the following represent key items, but not all items, that must be completed before HATC and the owner/developer can execute a HAP contract for new construction.:

1. HATC has inspected each contract unit in accordance with 24 CFR 983.103(b) and has determined that the unit fully complies with HQS. In the event that a selected project is owned by HATC or a related entity, each contract unit will be inspected by HUD or a HUD approved entity.
2. The owner has provided evidence that certifies that the units have been completed in accordance with the AHAP; such as the Davis Bacon provisions for all contractors. Completion of the units by the owner and acceptance of units by HATC are subject to the provisions of the AHAP (see 24 CFR 983.155 and 24 CFR 983.156) In the event that a selected project is owned by HATC or a related entity, acceptance of the units are subject to HUD or a HUD approved entity, in accordance with the above mentioned provisions.

I. Post Award Costs

All costs for the environmental review, Rent Comparability Study or Appraisal (if required for establishment of rent), Davis Bacon monitoring and any and all other costs that may be associated with processing and approval of the proposal are the responsibility of the owner and shall not be paid by HATC.

**HOUSING AUTHORITY OF TULARE COUNTY
SEPTEMBER 22, 2022**

SECTION 811 MAINSTREAM PROJECT-BASED VOUCHER PROGRAM (MPBV)

4. OWNER/DEVELOPER PROPOSAL

PROPOSAL SECTION A: APPLICANT STATEMENT, CERTIFICATIONS AND NOTARY

APPLICANT:

| |
|--|
| |
|--|

PROJECT NAME:

| |
|--|
| |
|--|

The undersigned applicant hereby submits this proposal to the Housing Authority of Tulare County (HATC) for a reservation of

_____ Section 811 Mainstream Project-Based Vouchers (MPBV).

I understand that HATC's entering into the Housing Assistance Payments (HAP) contract is contingent on my providing all required documents and compliance with the U.S. Department of Housing and Urban Development (HUD) project-based regulations at 24 CFR part 983 and the Mainstream Voucher Program regulations as outlined in *FR-6100-B-43 FY2017 Mainstream Voucher Program Notice of Funding Availability* (NOFA).

I agree it is my responsibility to provide HATC with an original and three (3) copies of a complete proposal. I agree that it is also my responsibility to provide such other information as HATC requests as necessary to evaluate my proposal. I represent that if an award is made as a result of this proposal, I will furnish promptly such other supporting information and documents as may be requested. I understand that HATC may verify information provided and analyze materials submitted as well as conduct its own investigation to evaluate my proposal. I recognize that I have an affirmative duty to inform HATC when any information in the proposal or supplemental materials is no longer true and to supply HATC with the latest and accurate information.

I acknowledge that the determination of completeness, compliance with all thresholds, and the point total of the proposal shall be based entirely on the documents contained in the proposal as of the date of submission. No additional documents in support of the basic thresholds or points shall be accepted beyond the proposal filing deadline, unless the Executive Director, at his or her sole discretion, determines that the deficiency is a clear reproduction or application assembly error, an obviously transposed number, or other minor error. In such cases, applicants shall be given up to five (5) business days from the date of receipt of staff notification to submit said documents.

I acknowledge that all materials and requirements are subject to change by enactment of federal legislation or promulgation of regulations.

I acknowledge that the information submitted to HATC in this proposal or supplemental thereto, other than financial statements, may be subject to the Public Records Act or other disclosure. I understand that HATC may make such information public.

In carrying out the development and operation of my project, I agree to comply with all applicable federal and state laws regarding unlawful discrimination and will abide by all applicable PBV and Mainstream Program requirements, rules, and regulations.

I agree that HATC in no way warrants the feasibility or viability of the project to anyone for any purpose.

I certify that I believe that the project can be completed within the development budget and the development timetable set forth and can be operated in the manner proposed within the operating budget set forth.

I acknowledge that if I obtain a MPBV award, I will be required to enter into a HAP contract, which will contain, among other things, all the conditions under which the rental subsidy payments will be made.

I acknowledge that if a Subsidy Layering Review (SLR) is required that such SLR is performed by HUD, not HATC, and that HATC has no control over the amount of time HUD takes to perform such SLR. I further acknowledge that if I obtain a MPBV award that additional documents will be required including, but not limited to, appraisal reports, environmental reports and finance commitment letters.

I agree to hold HATC, its commissioners, members, officers, agents, and employees harmless from any matters arising out of or related to the MPBV Program.

I declare under penalty of perjury that the information contained in my proposal, exhibits, attachments, and any further or supplemental documentation is true and correct to the best of my knowledge and belief. I understand that misrepresentation may result in cancellation of my MPBV award.

Signature of
Owner/Developer _____

Dated this _____ day of _____, 2022 at
_____, California

ACKNOWLEDGEMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF _____)
COUNTY OF _____)

On _____ before me, _____,
personally appeared _____,

_____ who proved to me on the basis of satisfactory evidence)
to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)

**HOUSING AUTHORITY OF TULARE COUNTY
SEPTEMBER 22, 2022**

SECTION 811 MAINSTREAM PROJECT-BASED VOUCHER PROGRAM (MPBV)

SECTION 1: GENERAL AND SUMMARY INFORMATION

A. Basic Proposal

1. What type of MPBV assistance are you applying for?

Existing Rehabilitation New Construction

2. What category are you applying for?

35 units available for New Construction projects that will serve a household with a non-elderly household member with a disability. The eligible household must be: transitioning out of institutional and other segregated settings, at serious risk of institutionalization, homeless, or at risk of becoming homeless.

3. Number of MPBVs requested:

_____ MPBVs

4. If there are insufficient MPBVs to fill your request are you willing to accept fewer?

Yes No If YES, how many? _____ MPBVs

5. Indicate the term you prefer for the Housing Assistance (HAP) contract if you get funded:

_____ Years

B. Project Location

Project Name: _____

Site Address: _____

If address is not established, enter detailed description (i.e. NW corner of 26th and Elm):

City: _____ County: _____

Zip Code: _____ Census Tract: _____

Assessor's Parcel Number(s): _____

Project is located in a Qualified Census Tract: Yes No

SECTION 2: APPLICANT INFORMATION

A. Identify Applicant

- Applicant is the current owner and will retain ownership
- Applicant will be or is a general partner in the to be formed or formed final ownership entity
- Applicant is the project developer and will be part of the final ownership entity for the project
- Applicant is the project developer and will not be part of the final ownership entity for the project

B. Applicant Contact Information

Applicant Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Ext.: _____ Fax: _____
Email: _____

C.

Legal Status of Applicant: _____

D. General Partner(s) Information

General Partner name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Contact Person: _____
Phone: _____ Ext.: _____ Fax: _____
Email: _____
Nonprofit/For Profit: _____

General Partner name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Contact Person: _____
Phone: _____ Ext.: _____ Fax: _____
Email: _____
Nonprofit/For Profit: _____

E. General Partner(s) or Principal Owner(s) Type

F. Status of Ownership Entity

- Exists To be formed If to be formed, enter date _____

G. Contact Person During Application Process

Company Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Ext.: _____ Fax: _____
Email: _____
Participatory Role: _____
(e.g., General Partner, Consultant, etc.)

SECTION 3 : PROJECT INFORMATION

A. Site Control

(Please check the appropriate response and attach one of the following documents as evidence of site control.)

- Title report (within last 90 days) Contract of Sale Option to Purchase
- Development Agreement Long-term Lease Agreement
- Other (Describe): _____

B. Purchase Information, if applicable N/A

Name of Seller: _____ Phone: _____

Purchase Price: _____ Date of Purchase Contract or Option: _____

Purchased from Affiliate: Yes No Expiration Date of Option: _____

If yes, broker fee amount to affiliate? _____ Special Assessment(s): _____

Holding costs per month: _____ Real Estate Tax Rate: _____

Total Projected Holding Costs: _____ Historical Site: Yes No

C. Building Information

Total Number of Buildings: _____ Residential Buildings: _____

Community Buildings: _____ Commercial/Retail Space: _____

If Commercial/Retail Space, explain (include use, size, location, and purpose):

D. Site Information

Current Land Use Designation _____

Proposed Zoning and Maximum Density _____

Does this site have Inclusionary Zoning or occupancy restrictions that run with the land?

- Yes No *(If yes, please explain)*

SECTION 3 : PROJECT INFORMATION (Continued)

D. Site Information (Continued)

Is site in a locally designated redevelopment project area, HUD-designed Enterprise Zone, Economic Community, or Renewal Community?

Yes No *(If yes, please specify)*

E. Project Unit Number

| Size of Units in Project | Square Footage | Number of Units in Project | Number for which PBV Assistance is Sought | Target Population (e.g. Elderly, Disabled, Family, etc.) | Number of Accessible Units for which PBV Assistance is Sought | Type of Accessibility Features (e.g. Vision, Hearing, Mobility) | Number of Units Now Vacant (Existing/Rehab Only) |
|--------------------------|----------------|----------------------------|---|--|---|---|--|
| Studio | | | | | | | |
| 1 BR | | | | | | | |
| 2 BR | | | | | | | |
| 3 BR | | | | | | | |
| 4 BR | | | | | | | |
| Totals | | | | | | | |

F. Supportive Services / Service Amenities

1. Check all the support services/amenities the project will provide. In the “service location” box indicate if the service will be located at the project or, if not, the address where it will be located.

| | |
|---|-----------------------------------|
| <input type="checkbox"/> Transportation for activities such as (but not limited to) grocery shopping, job training, education, attending medical and dental appointments, etc. | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |

SECTION 3 : PROJECT INFORMATION (Continued)

F. Support Services / Service Amenities (Continued)

| | |
|--|-----------------------------------|
| <input type="checkbox"/> Supervised taking of medication | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |
| <input type="checkbox"/> Treatment for drug addiction (for recovering and current users) | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |
| <input type="checkbox"/> Treatment for alcohol addiction (for recovering and current users) | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |

SECTION 3 : PROJECT INFORMATION (Continued)

F. Support Services / Service Amenities (Continued)

| | |
|--|-----------------------------------|
| <input type="checkbox"/> Training and development of housekeeping and homemaking skills | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |
| <input type="checkbox"/> Family budgeting | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |
| <input type="checkbox"/> Childcare | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |

SECTION 3 : PROJECT INFORMATION (Continued)

F. Support Services / Service Amenities (Continued)

| | |
|--|-----------------------------------|
| <input type="checkbox"/> Parenting skills | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |
| <input type="checkbox"/> Computer access and training | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |
| <input type="checkbox"/> Library Access | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |

SECTION 3 : PROJECT INFORMATION (Continued)

F. Support Services / Service Amenities (Continued)

| | |
|--|-----------------------------------|
| <input type="checkbox"/> Work skills development, job training, and employment counseling | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |
| <input type="checkbox"/> Case Management services and/or counseling | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |
| <input type="checkbox"/> Access to Health and Psychiatric Services (i.e. nurse/medical staff, mental health professional, etc.) | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |

SECTION 3 : PROJECT INFORMATION (Continued)

F. Support Services / Service Amenities (Continued)

| | |
|--|-----------------------------------|
| <input type="checkbox"/> Life skills training | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |
| <input type="checkbox"/> Access to on-site/off-site social activities | |
| Description: | |
| | |
| Service Provider Name: | Service Location: |
| | |
| Length of Service Contract: | What is the Financial Commitment? |
| | |

SECTION 3 : PROJECT INFORMATION (Continued)

G. Site Amenities

Check all site amenities that apply. Indicate the name of the amenity and its distance from the project. The amenities must be appropriate to the population served and must be in place at the time of MPBV proposal submission. If the project is located on scattered sites, complete one schedule below for each site.

| Amenity | Name of Amenity (e.g., Save Mart store, Visalia Transit) | Distance in miles from the project |
|---|---|--|
| <input type="checkbox"/> Health facility (e.g., medical clinic or hospital; not a private doctor's office) | | <input type="checkbox"/> on site <input type="checkbox"/> ½ mile or less <input type="checkbox"/> more than ½ mile |
| <input type="checkbox"/> Bus stop or station or rail station | | <input type="checkbox"/> on site <input type="checkbox"/> ½ mile or less <input type="checkbox"/> more than ½ mile |
| <input type="checkbox"/> Grocery store, supermarket or convenience store | | <input type="checkbox"/> on site <input type="checkbox"/> ½ mile or less <input type="checkbox"/> more than ½ mile |
| <input type="checkbox"/> Pharmacy | | <input type="checkbox"/> on site <input type="checkbox"/> ½ mile or less <input type="checkbox"/> more than ½ mile |
| <input type="checkbox"/> Public park or community center accessible to the general public | | <input type="checkbox"/> on site <input type="checkbox"/> ½ mile or less <input type="checkbox"/> more than ½ mile |
| <input type="checkbox"/> Public Library | | <input type="checkbox"/> on site <input type="checkbox"/> ½ mile or less <input type="checkbox"/> more than ½ mile |
| <input type="checkbox"/> Elementary, middle, or high school (if the project is a family project) | | <input type="checkbox"/> on site <input type="checkbox"/> ½ mile or less <input type="checkbox"/> more than ½ mile |
| <input type="checkbox"/> Senior center or facility offering daily services to seniors (if the project is a senior project) | | <input type="checkbox"/> on site <input type="checkbox"/> ½ mile or less <input type="checkbox"/> more than ½ mile |
| <input type="checkbox"/> Facility that operates to serve the population living in the development (if the project is a special needs project) | | <input type="checkbox"/> on site <input type="checkbox"/> ½ mile or less <input type="checkbox"/> more than ½ mile |

SECTION 3 : PROJECT INFORMATION (Continued)

H. Utilities

1. Indicate those utilities that will be paid by the owner and those by the tenant.

| <u>Utility</u> | <u>Type</u> (e.g. Gas or Electric) | <u>Paid By</u> | |
|--------------------------------|---------------------------------------|--------------------------------|---------------------------------|
| Heating | _____ | <input type="checkbox"/> Owner | <input type="checkbox"/> Tenant |
| Cooking | _____ | <input type="checkbox"/> Owner | <input type="checkbox"/> Tenant |
| Hot Water | _____ | <input type="checkbox"/> Owner | <input type="checkbox"/> Tenant |
| Air Conditioning | _____ | <input type="checkbox"/> Owner | <input type="checkbox"/> Tenant |
| Other Electric | _____ | <input type="checkbox"/> Owner | <input type="checkbox"/> Tenant |
| Refrigerator (tenant supplied) | _____ | <input type="checkbox"/> Owner | <input type="checkbox"/> Tenant |
| Stove (tenant supplied) | _____ | <input type="checkbox"/> Owner | <input type="checkbox"/> Tenant |
| Sewer / Water | _____ | <input type="checkbox"/> Owner | <input type="checkbox"/> Tenant |
| Garbage | _____ | <input type="checkbox"/> Owner | <input type="checkbox"/> Tenant |

2. Monthly Resident Utility Allowance:

| | | SRO / Studio | 1 BR | 2 BR | 3 BR | 4 BR | 5 BR |
|------------------|--------------|--------------|------|------|------|------|------|
| Space Heating: | | | | | | | |
| Water Heating: | | | | | | | |
| Cooking: | | | | | | | |
| Lighting: | | | | | | | |
| Electricity: | | | | | | | |
| Other: (specify) | Base Charges | | | | | | |
| Total: | | | | | | | |

SECTION 4: REQUIRED LOCAL APPROVALS & DEVELOPMENT TIMETABLE

NEPA review required for all PBV projects, including Existing.

A. Local Approvals Required (New Construction and Rehabilitation Only)

| <i>Local Approval Date (month/year)</i> | | |
|---|---------------------------|-----------------------------------|
| CEQA | Proposed Submittal | Estimated Approval / Final |
| | | |
| NEPA* | Proposed Submittal | Estimated Approval / Final |
| | | |
| Article 34 of State Constitution | Proposed Submittal | Estimated Approval / Final |
| | | |
| Site Plan | Proposed Submittal | Estimated Approval / Final |
| | | |
| Design Review | Proposed Submittal | Estimated Approval / Final |
| | | |
| Conditional Use Permit | Proposed Submittal | Estimated Approval / Final |
| | | |
| Variance | Proposed Submittal | Estimated Approval / Final |
| | | |
| Subdivision Map | Proposed Submittal | Estimated Approval / Final |
| | | |
| General Plan Amendment | Proposed Submittal | Estimated Approval / Final |
| | | |
| Rezoning | Proposed Submittal | Estimated Approval / Final |
| | | |
| Building Permits | Proposed Submittal | Estimated Approval / Final |
| | | |
| Construction Start | Proposed Submittal | Estimated Approval / Final |
| | | |
| Construction End | Proposed Submittal | Estimated Approval / Final |
| | | |

**NEPA review required for all PBV projects, including Existing.*

**SECTION 4: REQUIRED LOCAL APPROVALS & DEVELOPMENT TIMETABLE
(Continued)**

B. PBV Timing

Describe when you will need the MPBVs. Discuss phasing of MPBVs, if any.



SECTION 5: CONSTRUCTION FINANCING

**A. List Below All Projected Sources Required to Complete Construction
(New Construction and Rehabilitation Only)**

| | | | | |
|--|--------------------------|-----------------------|----------------------|------------------------|
| 1. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| | | | | |
| Is Lender /Source Committed? | Type of Financing | Terms (months) | Interest Rate | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| 2. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| | | | | |
| Is Lender /Source Committed? | Type of Financing | Terms (months) | Interest Rate | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| 3. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| | | | | |
| Is Lender /Source Committed? | Type of Financing | Terms (months) | Interest Rate | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| 4. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| | | | | |
| Is Lender /Source Committed? | Type of Financing | Terms (months) | Interest Rate | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| 5. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| | | | | |
| Is Lender /Source Committed? | Type of Financing | Terms (months) | Interest Rate | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| 6. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| | | | | |
| Is Lender /Source Committed? | Type of Financing | Terms (months) | Interest Rate | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |

SECTION 5: CONSTRUCTION FINANCING (Continued)

A. List Below All Projected Sources Required to Complete Construction (Continued)

| | | | | |
|--|--|-------------------|----------------|-----------------|
| 7. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| Is Lender /Source Committed? | | Type of Financing | Terms (months) | Interest Rate |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| 8. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| Is Lender /Source Committed? | | Type of Financing | Terms (months) | Interest Rate |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| 9. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| Is Lender /Source Committed? | | Type of Financing | Terms (months) | Interest Rate |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| 10. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| Is Lender /Source Committed? | | Type of Financing | Terms (months) | Interest Rate |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| 11. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| Is Lender /Source Committed? | | Type of Financing | Terms (months) | Interest Rate |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| 12. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| Is Lender /Source Committed? | | Type of Financing | Terms (months) | Interest Rate |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |

| | |
|--------------------------------------|--|
| Total Funds for Construction: | |
|--------------------------------------|--|

SECTION 6: PERMANENT FINANCING

B. List Below All Projected Permanent Sources

| | | | | |
|--|--------------------------|----------------------------|----------------------|------------------------|
| 1. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| | | | | |
| Is Lender /Source Committed? | Type of Financing | Terms (months) | Interest Rate | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Residual Receipts / Deferred Payments | | Annual Debt Service | | |
| | | | | |
| 2. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| | | | | |
| Is Lender /Source Committed? | Type of Financing | Terms (months) | Interest Rate | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Residual Receipts / Deferred Payments | | Annual Debt Service | | |
| | | | | |
| 3. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| | | | | |
| Is Lender /Source Committed? | Type of Financing | Terms (months) | Interest Rate | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Residual Receipts / Deferred Payments | | Annual Debt Service | | |
| | | | | |
| 4. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| | | | | |
| Is Lender /Source Committed? | Type of Financing | Terms (months) | Interest Rate | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Residual Receipts / Deferred Payments | | Annual Debt Service | | |
| | | | | |
| 5. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| | | | | |
| Is Lender /Source Committed? | Type of Financing | Terms (months) | Interest Rate | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Residual Receipts / Deferred Payments | | Annual Debt Service | | |
| | | | | |
| 6. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| | | | | |
| Is Lender /Source Committed? | Type of Financing | Terms (months) | Interest Rate | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Residual Receipts / Deferred Payments | | Annual Debt Service | | |
| | | | | |

SECTION 6: PERMANENT FINANCING (Continued)

B. List Below All Projected Permanent Sources (Continued)

| | | | | |
|--|--|----------------------------|-----------------------|------------------------|
| 7. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| Is Lender /Source Committed? | | Type of Financing | Terms (months) | Interest Rate |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Residual Receipts / Deferred Payments | | Annual Debt Service | | |
| | | | | |
| 8. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| Is Lender /Source Committed? | | Type of Financing | Terms (months) | Interest Rate |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Residual Receipts / Deferred Payments | | Annual Debt Service | | |
| | | | | |
| 9. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| Is Lender /Source Committed? | | Type of Financing | Terms (months) | Interest Rate |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Residual Receipts / Deferred Payments | | Annual Debt Service | | |
| | | | | |
| 10. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| Is Lender /Source Committed? | | Type of Financing | Terms (months) | Interest Rate |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Residual Receipts / Deferred Payments | | Annual Debt Service | | |
| | | | | |
| 11. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| Is Lender /Source Committed? | | Type of Financing | Terms (months) | Interest Rate |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Residual Receipts / Deferred Payments | | Annual Debt Service | | |
| | | | | |
| 12. Name of Lender/Source | | Contact Name | Phone Number | Amount of Funds |
| Is Lender /Source Committed? | | Type of Financing | Terms (months) | Interest Rate |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Residual Receipts / Deferred Payments | | Annual Debt Service | | |
| | | | | |

| | |
|-------------------------------|--|
| Total Permanent Funds: | |
|-------------------------------|--|

SECTION 6: PERMANENT FINANCING (Continued)

C. Low Income Housing Tax Credits (LIHTC)

Project will will not use LIHTC

If yes, complete the following:

Name of Investor: _____

Investor Contact: _____ Phone: _____

Projected LIHTC Equity: _____ LIHTC Factor: _____

Projected Pay-in Schedule

| Total | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

D. Sources and Uses Budget (New Construction and Rehabilitation Only)

Complete the Permanent Sources and Uses Budget (double-click on icon to open worksheet):



SECTION 7: PROJECT REVENUE (Continued)

B. Manager Units

| (a) Bedroom Type(s) | (b) Number of Units | (c) Proposed Monthly Rent (Less Utilities) | (d) Total Monthly rents (b x c) |
|--------------------------|------------------------|--|---------------------------------------|
| | | | |
| | | | |
| Total # of Units: | | Total: | |

C. Market Rate Units

| (a) Bedroom Type(s) | (b) Number of Units | (c) Proposed Monthly Rent (Less Utilities) | (d) Total Monthly rents (b x c) |
|--------------------------|------------------------|--|---------------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total # of Units: | 0 | Total: | 0.00 |

D.

| | |
|--|--|
| Rental Subsidy Income/Operating Subsidy (not PBV) | |
| Number of Units Receiving Assistance: | |
| Length of Contract (years): | |
| Expiration Date of Contract: | |
| Total Annual Rental Subsidy: | |

E.

| | |
|---|--|
| Miscellaneous Income | |
| Annual Income from Laundry Facilities: | |
| Annual Income from Vending Machines: | |
| Annual Interest Income: | |
| Other Annual Income: | |
| Total Miscellaneous Income: | |
| TOTAL ANNUAL RESIDENTIAL GROSS INCOME: | |

SECTION 7: PROJECT REVENUE (Continued)

F.

| Commercial Income | |
|---|--|
| Annual Income from Professional Space: | |
| Annual Income from Commerical/Retail Space: | |
| Annual Interest Income: | |
| Total Annual Commercial/Retail Income: | |

G. Annual Residential Operating Expenses

| Administrative | |
|------------------------------|--|
| Advertising: | |
| Legal: | |
| Accounting/Audit: | |
| Security: | |
| Other: (specify) | |
| Total Administrative: | |

| Management | |
|--------------------------|--|
| Total Management: | |

| Utilities | |
|-------------------------|--|
| Fuel: | |
| Gas: | |
| Electricity: | |
| Water/Sewer: | |
| Total Utilities: | |

| Payroll / Payroll Taxes | |
|---------------------------------------|--|
| On-site Manager: | |
| Maintenance Personnel: | |
| Other: (specify) | |
| Total Payroll / Payroll Taxes: | |
| Total Insurance: | |

| Maintenance | |
|---------------------------|--|
| Painting: | |
| Repairs: | |
| Trash Removal: | |
| Exterminating: | |
| Grounds: | |
| Elevator: | |
| Other: (specify) | |
| Total Maintenance: | |

SECTION 7: PROJECT REVENUE (Continued)

G. Annual Residential Operating Expenses (Continued)

| Other Expenses | | |
|------------------------------|--|--|
| Other: (specify) | | |
| Other: (specify) | | |
| Other: (specify) | | |
| Other: (specify) | | |
| Other: (specify) | | |
| Total Other Expenses: | | |

H. Total Annual Expenses

- Total Residential Operating Expenses: _____
- Total Number of Units in the Project: _____
- Total Operating Expenses Per Unit: _____
- Total Operating Reserve: _____
- Total Service Amenities Budget: _____
- Annual Per Unit Reserve for Replacement: _____
- Total Real Estate Taxes: _____
- Total Commercial/Retail Space Expenses: _____
- Total Commercial/Retail Debt Service: _____

5A. FACTORS FOR SCORING AND RANKING PROPOSALS (NEW CONSTRUCTION)

For each category, please check the box next to the number of points for which the project qualifies and attach any verification requested. Any inaccurate information will result in reduced points.

Total Possible Points: 200, Minimum Points Required: 100
Do not submit a proposal if you do not have the minimum points required.

A. Site Amenities

Maximum 20 Points

The project is within 1 mile of the following, which must be in existence at the time of MPBV proposal submission:

- 1. Health facility (e.g., medical clinic or hospital; not a private doctor’s office)
- 2. Bus stop or station or rail station
- 3. Grocery store, supermarket or convenience store
- 4. Pharmacy
- 5. Public park or community center accessible to the general public
- 6. Public library
- 7. Elementary, middle or high school (if the project is a family project)
- 8. Senior center or a facility offering daily services to seniors (if the project is a senior project)
- 9. Facility that operates to serve the population living in the development (if the project is a special needs project)

Indicate how many of the listed amenities are within 1 mile of the project and enter the total points received in the box below (select one):

- Project is within 1 mile of six or more of the listed amenities 20 Points
- Project is within 1 mile of four or five of the listed amenities 15 Points
- Project is within 1 mile of two or three of the listed amenities 10 Points
- Project is within 1 mile of one of the listed amenities 5 Points
- Project is within 1 mile of none of the listed amenities 0 Points

To receive points in this section, the amenities you claim in section 3.G. Site Amenities of the proposal that are within 1 mile of the project will be used to calculate your score. Submit a scaled for distance map showing all site amenities; a single map made be submitted. A proposal for a project located on scattered sites shall be scored proportionately in the site amenities based upon (i) each site’s score, and (ii) the percentage of units represented by each site. Additionally, the amenities must be appropriate to the tenant population served and must be in place at the time of MPBV proposal submission.

Total Points for Site Amenities:

B. Owner / General Partner Experience

Maximum 40 Points

Has received prior approval in CTCAC’s library of General Partner Characteristics: Yes

Indicate the level of the Owner / General Partner’s successful previous experience in project development and enter the total points received in the box below (select one):

- Seven or more projects in service over three years 40 Points
- Three to six projects in service over three years 35 Points
- One to two projects in service over three years 25 Points
- Seven or more projects in service under three years 20 Points
- Three to six projects in service under three years 15 Points
- One to two projects in service under three years 10 Points
- Zero to two projects in service under three years 0 Points

To receive points in this section, you must provide documentation of your experience for the projects for which you are claiming points as part of section 6. **REQUIRED ATTACHMENTS TO PROPOSAL (DOCUMENTS CHECKLIST)**. Owner / General Partner experience points may be given based on the experience of the principals involved (or on the experience of nonprofit entities that have experience but have formed single-asset entities for each project), notwithstanding that the entity itself would not otherwise be eligible for such points.

| | |
|---|--|
| Total Points for Owner / General Partner Experience: | |
|---|--|

C. Management Company Experience

Maximum 30 Points

Has received prior approval in CTCAC’s library of Management Co. Characteristics: Yes

Indicate the level of the Management Company’s successful previous experience in project development and enter the total points received in the box below (select one):

- Eleven or more projects in service over three years 30 Points
- Eleven or more projects in service under three years 25 Points
- Agent with certification from a CTCAC-approved tax credit compliance entity 20 Points
- Six to ten projects in service over three years 20 Points
- Six to ten projects in service under three years 15 Points
- Two to five projects in service over three years 10 Points
- Two to five projects in service under three years 5 Points
- No projects in service 0 Points

To receive points in this section, you must provide documentation of your experience for the projects for which you are claiming points as part of section 6. REQUIRED ATTACHMENTS TO PROPOSAL (DOCUMENTS CHECKLIST). Management Company experience points may be given based on the experience of the principals involved (or on the experience of nonprofit entities that have experience but have formed single-asset entities for each project), notwithstanding that the entity itself would not otherwise be eligible for such points. Alternatively, a management company may receive 20 points if it provides evidence that the management agent assigned to the project, either on-site or with management responsibilities for the site, has been certified, prior to the MPBV proposal submission deadline, by a housing tax credit certification examination by a nationally recognized housing tax credit compliance entity and be on a list maintained by CTCAC. These points may substitute for other management company experience but will not be awarded in addition to such points.

Total Points for Management Company Experience:

D. Extent to Which Project Furthers HATCs Goal of Deconcentrating Poverty and Expanding Housing Opportunities **Maximum 10 Points**

Indicate the poverty concentration of the census tract that the project is located in and enter the total points received in the box below (select one):

- Census tract has a poverty rate of 20.0% or less, or it qualifies for an exception referenced below and in Section 2K of this RFP 10 Points
- Census tract has a poverty rate of more than 20.0% and does not qualify for the exception 0 Points

To receive points in this section, you must provide a completed Census Tract Certification indicating the poverty rate of the census tract in which the project is located for the points you are claiming as part of section 6. REQUIRED ATTACHMENTS TO PROPOSAL (DOCUMENTS CHECKLIST). If you believe the project qualifies for an exception, the certification must include documentation of why it qualifies for the exception.

HATC will consider exceptions to the 20% standard where it determines that the PBV assistance will complement other local redevelopment activities designed to deconcentrate poverty and expand housing and economic opportunities, such as sites in:

- A census tract, in which the proposed PBV development will be located, is a HUD-designated Enterprise Zone, Economic Community, or Renewal Community;
- A census tract where the concentration of assisted units will be or has decreased as a result of public housing demolition and HOPE VI redevelopment;
- A census tract in which the proposed PBV development will be located is undergoing significant revitalization, under an approved regulatory agreement, as a result of state, local, or federal dollars invested in the area;
- A census tract where new market rate units are being developed where such market rate units will positively impact the poverty rate in the area;
- A census tract where there has been an overall decline in the poverty rate within the past five years; or
- A census tract where there are meaningful opportunities for educational and economic advancement.

| | |
|--|--|
| Total Points for Deconcentrating Poverty and Expanding Housing Opportunities: | |
|--|--|

E. Project Located In a Neighborhood Revitalization Zone

Maximum 10 Points

Project is an a Neighborhood Revitalization Zone:

- Project is in a Neighborhood Revitalization Zone 10 Points
- Project is not in a Neighborhood Revitalization Zone 0 Points

To receive points in this section, verification will be required

Total Points for Project Located in a Neighborhood Revitalization Zone:

F. Project Financing and Local Government Support

Maximum 50 Points

E(1) Commitment of Financing Required to Complete the Project

(select all applicable):

- Owner has demonstrated the ability to obtain necessary construction financing and permanent financing 15 Points
- Owner has obtained preliminary financing commitments for funding specific to serving special needs populations, including reserving at least 40% of the project’s units to serve special needs populations (e.g. Mental Health Services Act) 15 Points

To receive points in this section, E(1), you must provide documentation of financing commitments or ability to obtain financing for which you are claiming points as part of section 6. **REQUIRED ATTACHMENTS TO PROPOSAL (DOCUMENTS CHECKLIST).**

E(2) Demonstrated Local Government Support

Indicate the commitment level of local government funding required to complete the project and enter the total points received in the box below (select one):

- Owner has demonstrated the ability to receive the necessary GAP funding commitments from local and or statement government. 20 Points

To receive points in this section, E(2), you must provide documentation of funding commitments or ability to obtain financing for which you are claiming points as part of section 6. **REQUIRED ATTACHMENTS TO PROPOSAL (DOCUMENTS CHECKLIST).** All loans must be “soft” or residual receipts loans and have terms for at least the first 15 years. In addition, if the principal balances of any prior publicly funded or subsidized loans are to be assumed, verification of the loan assumption or other required procedure by the agency or local government initially approving the subsidy to satisfy the commitment requirements must be provided.

| | |
|--|--|
| Total Points for Project Funding and Public Agency Support: | |
|--|--|

G. Supportive Services/Service Amenities

Maximum 40 Points

The project provides one or more of the following supportive services appropriate to the project:

1. Transportation for activities such as, (but not limited to) grocery shopping, job training, education, attending medical and dental appointments, etc.
2. Supervised taking of medications
3. Treatment for drug addiction (for recovering and current users)
4. Treatment for alcohol addiction (for recovering and current users)
5. Treatment for mental health issues
6. Training and development of housekeeping and homemaking skills
7. Family budgeting
8. Child care
9. Parenting skills
10. Computer access and training
11. Library access
12. Work skills development, job training and employment counseling
13. Case management services and/or counseling
14. Access to health and psychiatric services, i.e., nurse/medical staff, mental health professional, etc.
15. Life skills training
16. Access to on-site/off-site social activities

Indicate the number of listed supportive services the project will provide and enter the total points received in the box below (select one):

- | | | |
|--------------------------|--|-----------|
| <input type="checkbox"/> | Project provides <u>at least five</u> of the listed services specifically including on-site treatment/counseling for drug or alcohol addiction and mental health issues to at least 40% of its residents | 40 Points |
| <input type="checkbox"/> | Project provides <u>at least five</u> of the listed services | 30 Points |
| <input type="checkbox"/> | Project provides four of the listed services | 25 Points |
| <input type="checkbox"/> | Project provides <u>three</u> of the listed services | 15 Points |
| <input type="checkbox"/> | Project provides two of the listed services | 10 Points |
| <input type="checkbox"/> | Project provides zero - one of the listed services | 0 Points |

To receive points in this section, the listing of supportive services you claim in section 3.F. Supportive Services/Service Amenities of the MPBV Proposal will be used to calculate your score. Attach a narrative describing the population to be served, the services you are providing, and how these services meet the identified needs of your target population. The supportive services must be appropriate to the tenant population served. The services may be located either at the project or off-site.

| | |
|--|--|
| Total Points for Supportive Services / Service Amenities: | <input style="width: 90%; height: 20px;" type="text"/> |
|--|--|

POINT SYSTEM SUMMARY

| <u>FACTORS FOR SCORING AND RANKING PROPOSALS</u> <u>(NEW CONSTRUCTION)</u> | Maximum Possible Points | Your Proposal Points |
|---|-------------------------|----------------------|
| A. Site Amenities | 20 | |
| B. Owner / General Partner Experience | 40 | |
| C. Management Company Experience | 30 | |
| D. Deconcentrates Poverty and Expands Housing Opportunities | 10 | |
| E. Project in Neighborhood Revitalization Zone | 10 | |
| F. Project Financing and Local Government Support | | |
| E(1) Commitment of Financing Required to Complete the Project | 30 | |
| E(2) Demonstrated Local Government Support | 20 | |
| G. Supportive Services/Service Amenities | 40 | |
| <i>Total</i> | 200 | |

6. REQUIRED ATTACHMENTS TO PROPOSAL (DOCUMENTS CHECKLIST)

Please attach all Attachments in the order shown below and tab by categories A through I. Attach only those items applicable to your proposal type (i.e. New Construction or Existing).

THRESHOLD PROJECT ELIGIBILITY

- A. **Census Tract Certification** (form attached)
- B. **Evidence of Site Control** (form attached)
- C. **Certification and Evidence of Zoning** (form attached)
- D. **Project Financing and Local Government Support**
 - D-1. 15-year proforma with all revenue and expense projections
 - D-2. Permanent Sources and Uses Budget (form attached)
 - D-3. Evidence of tentative or firm financing commitments including all local government funding
 - D-4. Evidence of fee waivers
 - D-5. Evidence of donated or leased land by a public entity
 - D-6. Evidence of donated land as part of a local inclusionary housing ordinance
 - D-7. Design Architect's Certification of Cost Estimate (form attached)

OTHER PROJECT ELIGIBILITY

- E. **Site Amenities**
 - E-1. Scaled for distance map of site amenities
- F. **Owner / General Partner / Management Company Experience**
 - F-1. Current financial statement (form attached)
 - F-2. Certification Regarding Debarment and Suspension (link provided)
 - F-3. Owner / General Partner Experience Form (attached)
 - F-4. Management Company Experience Form (attached)
 - F-5. Equal Opportunity Certification (form attached)
 - F-6. Disclosure of Lobbying Activities (link provided)
 - F-7. Certification of Payments to Influence Federal Transactions (link provided)

Continued on next page

6. REQUIRED ATTACHMENTS TO PROPOSAL (DOCUMENTS CHECKLIST)
(Continued)

- G. **Supportive Services / Service Amenities**
 - G-1. Supportive Services narrative

- H. **Site and Project Information**
 - H-1. Legal description
 - H-2. Narrative description of the proposed use of the subject property
 - H-3. Narrative description of the current use of the property, adjacent land uses, surrounding neighborhood identification
 - H-4. Description of any unique features of the site, noting those that may increase project costs or require environmental mitigation
 - H-5. Construction and design description
 - H-6. Site plan, building elevations, and unit floor plans, including square footages
 - H-7. Design Architect's Certification of Building Code Compliance

- I. **Additional Certifications**
 - I-1. Equal Opportunity Certification (form attached)
 - I-2. Applicant's Disclosure Questionnaire (form attached)

ATTACHMENT A

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Census Tract Certification

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please complete the items below. For assistance in determining the census tract, visit <http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml> Select “Address Search” on the right hand side of the screen and enter the requested data. The results will provide the census tract.

For assistance in determining the poverty rate, return to the previous website of the Census 2010 data, found at:

<http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml>

On the left hand side of the screen, enter your filters.

- First click on “Geographies” and select Census Tract. Follow the prompts and select the state, county and census tract. Select “Add to your selections” at the bottom of the box.
- Next, click on “Topics” and select People, then Poverty. Close the Select Topics Box.
- A list of data tables are displayed. Check the box for data table 1702 (page 1) and data table B17026 (page 3).
- Select View or Download at the bottom of the screen.
- The results will provide the Poverty Rate.

Census Tract: _____

Poverty Rate (Percent below poverty level for all families for whom poverty status is determined): _____

Housing Authority of the Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Census Tract Certification

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

I certify that the information entered above is true, complete and accurate to the best of my knowledge.

Signature

Print Name

Title

Date

ATTACHMENT B

Housing Authority of the County of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Evidence of Site Control or Ownership

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please check the appropriate document and attach as evidence of site control

- Title report (within last 90 days) Contract of Sale Option to Purchase
- Development Agreement Long-term Lease Agreement
- Other
(Describe): _____

ATTACHMENT C

Housing Authority of the County of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Certification and Evidence of Zoning

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

I certify that the proposed **New Construction/Rehabilitation** project is permitted by current zoning ordinances and/or regulations. I further certify that should re-zoning be necessary for this proposed New Construction/Rehabilitation project, it is highly likely to occur and will not result in any material delay of the project.

Signature of Certifying Officer-Planning Dept.

Print Name

Title

Phone

Date

ATTACHMENT D-1

Housing Authority of the County of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Project Financing and Local Government Support

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please attach 15-year proforma with all revenue and expenses projections

ATTACHMENT D-2

Housing Authority of the County of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Project Financing and Local Government Support

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Complete and attach Permanent Sources and Uses Budget (link in Section 6.D of the Owner / Developer Proposal)

ATTACHMENT D-3

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Project Financing and Local Government Support

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please attach evidence of tentative or firm financing commitments including all local government funding

ATTACHMENT D-4

Housing Authority of the County of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Project Financing and Local Government Support

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please attach evidence of fee waivers

ATTACHMENT D-5

Housing Authority of the County of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Project Financing and Local Government Support

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please attach evidence of donated or leased land by a public entity

ATTACHMENT D-6

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Project Financing and Local Government Support

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please attach evidence of donated land as part of a local inclusionary housing ordinance

ATTACHMENT D-7

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Project Financing and Local Government Support

Design Architect's Certification of Cost Estimate

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

This is to certify that the total project development cost shown in the Permanent Sources and Uses Budget in Section 6.D. of the Owner/Developer Proposal is an accurate estimate of the total project costs for this project. This total project cost estimate reflects construction costs at the projected time of construction.

Signature

Print Name

Title

Date

ATTACHMENT E-1

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Site Amenities

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please attach a scaled for distance map of site amenities

ATTACHMENT F-1

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Current Financial Statement

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Include your most recent financial statements in a separate envelope. This information will not be included with any information that is made public unless it is already part of a document that has been distributed to the public.

ATTACHMENT F-2

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

*Applicant Disclosure Report
and
Certification Regarding Debarment and Suspension*

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please complete and attach the enclosed HUD-2992 and HUD-2880



Adobe Acrobat
Document

ATTACHMENT F-3
Housing Authority of the County of Tulare County

**2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher
(MPBV) Program**

Owner/General Partner Experience

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

OWNER/GENERAL PARTNER (G.P.) EXPERIENCE

| | Project Name & Address | Number of Units | Month & Year Project was Placed-In-Service | Month & Year G.P. Participation Began | Month & Year G.P. Participation Ended (if applicable) | Number of Full Years of G.P. Participation After Project Placed-In-Service* |
|-----|------------------------|-----------------|--|---------------------------------------|---|---|
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| 5. | | | | | | |
| 6. | | | | | | |
| 7. | | | | | | |
| 8. | | | | | | |
| 9. | | | | | | |
| 10. | | | | | | |

Signature (general partner)

Date

Organization

ATTACHMENT F-4
Housing Authority of Tulare County
2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher
(MPBV) Program

Management Company Experience

Applicant Name/Management Company:

Project Name:

Project Address:

MANAGEMENT COMPANY EXPERIENCE

| | Project Name & Address | Number of Units | Month & Year Project was Placed-In-Service | Month & Year Management Company Participation Began | Month & Year Management Company Participation Ended (if applicable) | Number of Full Years of Management Company Participation After Project Placed-In-Service* |
|-----|------------------------|-----------------|--|---|---|---|
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| 5. | | | | | | |
| 6. | | | | | | |
| 7. | | | | | | |
| 8. | | | | | | |
| 9. | | | | | | |
| 10. | | | | | | |
| 11. | | | | | | |
| 12. | | | | | | |

Signature (Management Principal)

Date

Management Company

ATTACHMENT F-5

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Equal Opportunity Certification

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

I certify that I, _____, as the authorized owner for the project named _____

shall comply with the Title VI of the Civil Rights Act of 1996, Title VIII of the Civil Rights Act of 1968, E.O. 11063, E.O. 11246, Section 3 of the Housing and Urban Development Act of 1968 (Equal Opportunity requirements) and all applicable Federal requirements listed in 24 CFR 983.11 including, but not limited to, the payment, if applicable, of not less than the prevailing wages in the locality pursuant to the Davis-Bacon Act to all laborers and mechanics employed in the construction/rehabilitation of the project.

Signature

Print Name

Title

Date

ATTACHMENT F-6

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Disclosure of Lobbying Activities

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please attach a completed copy of SF-LLL (07/1997). The form can be found at:

[SFLLL_1_2 \(epa.gov\)](https://www.epa.gov/sflll)

ATTACHMENT F-7

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Certification of Payments to Influence Federal Transactions

| |
|-------------------------|
| Applicant Name: |
| |
| Project Name: |
| |
| Project Address: |
| |

Please attach a completed copy of HUD-50071 (03/1998). The form can be found at: [50071.pdf \(hud.gov\)](#)

ATTACHMENT G-1

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Supportive Services Narrative

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please attach a narrative describing the population to be served, the services to be provided, and how these services meet the identified needs of your target population

ATTACHMENT H-1

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Legal Description

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please attach a legal description of the project

ATTACHMENT H-2

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Proposed Use of Subject Property

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please attach a narrative description of the proposed use of the subject property

ATTACHMENT H-3

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Current Use of the Property, Adjacent Land Uses, Surrounding Neighborhood Identification

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please attach a narrative description of the current use of the property, adjacent land uses, and surrounding neighborhood identification

ATTACHMENT H-4

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Site Features

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please attach a description of any unique features of the site, noting those that may increase project costs or require environmental mitigation

ATTACHMENT H-5

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Construction and Design

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please attach a description of the construction and design

ATTACHMENT H-6

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Site Plan, Building Elevations, and Unit Floor Plans

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

Please attach the site plan, building elevations and unit floor plans, including the square footage

ATTACHMENT H-7

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Design Architect's Certification of Building Code Compliance

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

This is to certify that, to the best of my knowledge, the Working Drawings and Specifications for this project comply with the applicable Local, State and Uniform Building codes.

Signature of Architect

Print Name

Title

Date

ATTACHMENT I-1

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Equal Opportunity Certification

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

I certify that I, _____, as the authorized owner for the project named _____

shall comply with the Title VI of the Civil Rights Act of 1996, Title VIII of the Civil Rights Act of 1968, E.O. 11063, E.O. 11246, Section 3 of the Housing and Urban Development Act of 1968 (Equal Opportunity requirements) and all applicable Federal requirements listed in 24 CFR 983.11 including, but not limited to, the payment, if applicable, of not less than the prevailing wages in the locality pursuant to the Davis-Bacon Act to all laborers and mechanics employed in the construction/rehabilitation of the project.

Signature

Print Name

Title

Date

ATTACHMENT I-2

Housing Authority of Tulare County

2022 Owner/Developer Proposal for the Section 811 Mainstream Project-Based Voucher (MPBV) Program

Applicant's Disclosure Questionnaire

| |
|------------------------|
| Applicant Name: |
| |

| |
|----------------------|
| Project Name: |
| |

| |
|-------------------------|
| Project Address: |
| |

1. Disclose material information relating to any legal or regulatory proceeding or investigation in which the applicant/project sponsor is or has been a party and which might have a material impact on the financial viability of the project or the applicant/project sponsor. Such disclosures should include any parent, subsidiary, or affiliate of the applicant/project sponsor that is involved in the management, operation, or development of the project.
2. Disclose any civil, criminal, or regulatory action in which the applicant/project sponsor, or any current board members, partners, limited liability corporation members, senior officers, or senior management personnel has been named a defendant in such action in the past 10 years involving fraud or corruption, or matters involving health and safety where there are allegations of serious harm to employees, the public, or the environment.

Disclosures should include civil or criminal cases filed in state or federal court; civil or criminal investigations by local, state, or federal law enforcement authorities; and enforcement proceedings or investigations by local, state or federal regulatory agencies. The information provided must include relevant dates, the nature of the allegation(s), charters, complaint or filing, and the outcome. For a publicly-traded company, the relevant sections of the company's 10K, 8K, and 10Q most recently filed with the Securities and Exchange Commission may be attached in response to question #1. With respect to a response for question #2, previous 10K, 8K, and 10Q filings of the company may be attached if applicable.

Nothing to Disclose

Signature (Applicant/Project Sponsor)

Date

Printed Name of Signatory

Printed Title of Signatory