



Rental Development Project Application

HOME • Workforce Housing Trust Fund

Thank you for your interest in submitting a rental development proposal to the City of Albuquerque. In order to ensure that all proposals are evaluated based on consistent defined factors, we have amended our submission procedures.

To facilitate the financial analysis of the project, all applicants are required to complete and submit a completed Excel Multi-Family Underwriting Template. This template addresses the development proforma, and operational proforma for the project. It also addresses factors such as unit mix, project rents, sources and uses of funds, and other relevant financial criteria.

Attached is a Rental Development Project Application Checklist that details the required submittals that constitute a complete application. Please review these requirements carefully. In addition to serving as a guide for the applicant, the completed checklist is also required to be submitted as a part of the proposal submission.

ORGANIZATION OF THE PROPOSAL SUBMISSION:

If you require more space than allowed by any form, you may add additional pages to the applicable section as needed. Applications must be submitted as follows to be considered complete:

1. Applications must be typed or legibly printed in ink.
2. Applications must be double-sided on 8.5" X 11" white paper which can be photocopied clearly.
3. Sections must be contained within a three-ring binder and be divided/designated with tabbed dividers as designated on the Rental Development Project Application Checklist. Please use numbered tabs for the designated sections only. **Do not insert additional tabs, and do not provide information not requested in the application.**
4. All required documents must be submitted along with the completed application under the appropriate tab section.
5. Applications must include all applicable certifications with signatures.
6. If a section requires more than just checking a box, do not leave the section blank. If the section does not apply, please enter "N/A". Sections left blank may constitute an incomplete application.
7. Submit by hand delivery one (1) original full proposal with original signatures and required documents, and three (8) full application copies (nine [9] total), each in a separate clearly labeled three-ring binder with properly tabbed dividers. In addition, please provide one (1) digital version (completed Excel Multi-Family Underwriting Template must be provided in its original excel format). Transmit the complete proposal to:

Department of Family and Community Services
Old City Hall
400 Marquette NW
5th Floor, Room 504
Albuquerque, NM 87102

Due to COVID-19, anyone entering a City facility must undergo a limited health screening. This is located at the 1 Civic Plaza entrance (immediately south of Old City Hall).

Proposals will be accepted between the hours of 9:00 a.m. and 4:00 p.m. Friday, December 4, 2020.

Late and/or incomplete applications and/or applications which are not submitted in the proper format will not be

considered. Any instructions required to complete a section will be found in that section. If you have any questions regarding completing the application, please contact Rick Giron II at (505) 768-2968 or at rickgiron@cabq.gov.

CITY OF ALBUQUERQUE

RENTAL DEVELOPMENT PROJECT APPLICATION CHECKLIST and SUBMISSION ORGANIZATION GUIDE

Tab Number	Tab Contents
1	<p>Cover Letter</p> <ul style="list-style-type: none"> <input type="checkbox"/> On applicant letterhead, provide a brief description of the project, project location, the amount of funding and funding source being requested, the timeframe by which City approval is requested, and the signature of an official authorized to submit the Application <input type="checkbox"/> A completed copy of this "Application Checklist" form which specifies the documents and responses contained in your proposal submission
2	<p>Rental Development Application</p> <ul style="list-style-type: none"> <input type="checkbox"/> Application <input type="checkbox"/> Application Attachment "A" - Development Schedule <input type="checkbox"/> Application Attachment "B" - Construction Financing Summary <input type="checkbox"/> Application Attachment "C" - Developer Experience Information <input type="checkbox"/> Application Attachment "D" - Development Team Information <input type="checkbox"/> Application Attachment "E" - Development Team Resumes <input type="checkbox"/> Application Attachment "F" - Management Team Information <input type="checkbox"/> Provide a certificate from a third party certified public accountant which states that for the developer's current housing projects in operation for over three years, that the projects have maintained a positive operating cash flow from operating income alone, for the year in which each development's last financial statement has been prepared, and have funded reserves in accordance with the partnership agreements and any applicable loan documents. <input type="checkbox"/> Provide a copy of any Developer partnership, operating agreement, or Memorandum of Understanding with other not-for-profits, for-profits, or service providers in project development or specific service delivery related to scope of the Project.
3	<p>Multi-Family Underwriting Template</p> <ul style="list-style-type: none"> <input type="checkbox"/> Completed Excel Multi-Family Underwriting Template <input type="checkbox"/> Indicate total development value of proposed project: \$_____
4	<p>Site Documentation</p> <ul style="list-style-type: none"> <input type="checkbox"/> Evidence of Site Control <input type="checkbox"/> Parcel Map <input type="checkbox"/> FEMA Flood Insurance Rate Map with Project Site Identified

	<ul style="list-style-type: none"> <input type="checkbox"/> Appraisal or Statement of Value (Note that if a current appraisal is not available at the time of application, one will be required prior to preparation of a development agreement) <input type="checkbox"/> Evidence of zoning consistent with proposed use (Zone Atlas Page) <input type="checkbox"/> Evidence of the availability of utilities <input type="checkbox"/> HOME - Please submit a market study, dated no more than 6 months prior to application date. If a current market study is not available at the time of application, one will be required prior to preparation of a development agreement. <input type="checkbox"/> Workforce Housing Trust Fund and other Non-HOME funding - For projects of 16 or more units, please submit a market study, dated no more than 6 months prior to application date. If a current market study is not available at the time of application, one will be required prior to preparation of a development agreement. <input type="checkbox"/> Documentation to support Utility Allowance Calculations <input type="checkbox"/> Provide a completed Neighborhood Conditions Evaluation Form contained in Attachment "C". <input type="checkbox"/> Provide a map(s) that demonstrates that the site is located in any of the target areas specified under Section 3 of this Application.
5	<p>Acquisition of Property with Existing Buildings</p> <p>If there are existing buildings on the property and if relocation is involved, please submit the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The relocation plan and proposed relocation assistance, or provide a statement of non-displacement. Note that if the proposed project is to be federally funded it must comply with the displacement, relocation, and acquisition requirements implementing the Uniform Relocation Assistance and Real Property Acquisition Policies Act (42 U.S.C. 4201-4655) and implementing regulations at 49 CFR Part 24; and if funded with other than federal resources, it must comply with City of Albuquerque relocation requirements, <input type="checkbox"/> Name of funding source for relocation assistance along with a commitment letter from the funding source <input type="checkbox"/> Copy of lead-based paint test survey and testing (pre-1978 – all painted surfaces). Please specify year constructed: _____ <input type="checkbox"/> Copy of any asbestos testing performed <input type="checkbox"/> Copy of Summary of Findings of Phase I Environmental Assessment
6	<p>CHDO Application</p> <ul style="list-style-type: none"> <input type="checkbox"/> If applying for federal HOME funds, attach CHDO Application (may be inserted here with required CHDO tabs or provided as a separate attachment to the application) <input type="checkbox"/> If applying for HOME funds, and no other governmental funds are being used for any portion of the project, then provide an affidavit that specifies the no other governmental funding other than the HOME funds are being used to fund the project.

	<p>AHDO Application</p> <p><input type="checkbox"/> If applying for other than HOME funds, attach the AHDO Application (may be inserted here with required AHDO tabs or provided as a separate attachment to the application)</p>
<p>7</p>	<p>Certification Documents</p> <p><input type="checkbox"/> Submit Certification Documents as required in the Administrative Requirements for Contracts Awarded Under the City of Albuquerque, Dept. of Family and Community Services, and identified as:</p> <ol style="list-style-type: none"> 1. Application No. 8 - Representations and Certifications Form 2. Application No. 9 - Attachments on File Form 3. Application No. 10 - Drug Free Workplace 4. Application No. 11 - Debarment, Suspension, Ineligibility and Exclusion Certification 5. Application No. 12 - Certification of Receipt of Administrative Requirements 6. Application No. 13 - Disclosure of Lobbying Activity <p>The Administrative Requirements and Forms can be accessed at: https://www.cabq.gov/family/partner-resources/request-for-proposals/administrative-requirements</p> <p>NOTE: Proof of insurance is not a requirement for submission of a proposal, but applicants should be aware that no contract will be executed until the proper original certificates or policies are filed with the City.</p>
<p>8</p>	<p>Financial Requirements</p> <p>For HOME funding requests:</p> <p><input type="checkbox"/> Provide documentation for all project financial commitments. If supporting documentation is not submitted, provide justification for any requested exemption</p> <p>For Workforce Housing Trust Funds requests:</p> <p><input type="checkbox"/> Provide a narrative justifying financial feasibility and sustainability</p> <p><input type="checkbox"/> Provide documentation for all project financial commitments, and demonstrate that the 4:1 leverage requirement is being met. If supporting documentation is not submitted, provide justification for any requested exemption based on the Consolidated Plan.</p> <p><input type="checkbox"/> Using the development cost information contained in the WHTF & HOME Excel Multi-Family Underwriting Template, provide the calculation which demonstrates that 20% or less of the Housing Trust Funds are being used to fund Project Related Development Soft Costs.</p>

<p style="text-align: center;">9</p>	<p>Neighborhood Conditions Complete and provide:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Neighborhood Conditions Evaluation Form <p>Neighborhood Standards and Affirmative Fair Housing Marketing (if awarded federal funding)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Site and Neighborhood Standards Analysis (compliant with the provisions of 24 CFR §983.57(e)) <input type="checkbox"/> Affirmative Fair Housing Market Plan (Form HUD-935.2A) <p>Public Outreach Submit the following documentation to demonstrate the public process undertaken:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Map of Neighborhood Associations (obtained from City’s Office of Neighborhood Coordination) with project location identified and reflecting 1 mile notification radius <input type="checkbox"/> A description of Community Meetings conducted with Neighborhood Association(s) and area residents <input type="checkbox"/> Documentation describing how neighborhood associations or area residents were notified. If invitations were sent, provide sample invitation and invitation list. If flyers were distributed, provide a copy of the flyer <input type="checkbox"/> Copies of Meeting Notices and Agenda, Meeting Minutes, Sign-In Sheets which identify area represented, location of the meeting, date and time meeting conducted, and resident surveys regarding the project
<p style="text-align: center;">10</p>	<p>Additional Evaluation Criteria “Green” Criteria – Submit the following documentation to receive consideration:</p> <p>LEED:</p> <ul style="list-style-type: none"> <input type="checkbox"/> LEED Compliance Narrative and Checklist <input type="checkbox"/> Name and contact information for LEED accredited professionals <p>BGNM Silver or Enterprise Silver</p> <ul style="list-style-type: none"> <input type="checkbox"/> applicable Compliance Narrative and Checklist <input type="checkbox"/> Name and contact information for applicable accredited professionals <p>HERS:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Home Energy Rating System (HERS) Index rating performed by a certified RESNET HERS Rater <p>Additional Green Criteria Information:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Costs attributable to green features <p>Design and Location Criteria:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Submit 8½” x 11” Building Plan Elevations, Floor Plans, and Site Plans to scale, photographs of the neighborhood surrounding the proposed

site, and a narrative describing how the project will fit into the context of the neighborhood, why the design is appropriate for that specific community and/or how the community involvement in the design process will assist in evaluation of building design.

- Submit renderings of proposed buildings within the current environment.

Workforce Housing Trust Fund - Crime-Free Multi-Housing Training and Plan

- Certificate documenting completion of the Crime-Free Multi-Housing Training
- A narrative describing how you will design, build, manage and operate your development using Crime Prevention through Environmental Design (CPTED) principles

Uniform Federal Accessibility Standards (UFAS) and Energy Conservation Code

- Submit a Statement of Compliance from the project architect which states that the project complies with the current International Energy Conservation Code standards, the U.S. Department of Housing & Urban Development, Office of Fair Housing & Equal Opportunity - Uniform Federal Accessibility Standards (UFAS), 24 C.F.R. § 40, Appendix A, Section 504 of the Rehabilitation Act of 1973 (Section 504), 29 U.S.C. § 794; 24 C.F.R. Part 8, and the Fair Housing Act (42 U.S.C. §§ 3601-20; 24 C.F.R. Part 100); and/or the Americans with Disabilities Act of 1990 (42 U.S.C. §§ 12101 et seq.), as applicable.

Compliance with City Design and Development Standards

- Submit a Statement of Compliance from the project architect which indicates that the proposed development conforms to the City's IDO development and design standards.

Link to Growth Management Plan

- Provide the data that documents the job and housing balance in accordance with the requirements of Attachment "C" - Link to Growth Management Plan

GLOSSARY

Brownfield Site – real property, the expansion, redevelopment or reuse of which may be complicated by the presence or potential presence of a hazardous substance, pollutant, or contaminant. (U.S. EPA)

Design Review Considerations

A. Site Plan Considerations:

1. Propose a pedestrian friendly building layout focusing on privacy; create accessible walks linking buildings to each other, to common areas and to parking.
2. Propose a site plan that contributes to public streetscape and minimizes the visibility of parking.
3. Propose site amenities or identify existing amenities within ¼ mile walk distance, such as playgrounds, gazebos, garden spots, walking trails, picnic areas, ball fields, basketball/tennis courts and exercise rooms.
4. Propose a landscaping plan that incorporates xeriscaping and/or rainwater collection.

B. Building Design:

1. Propose creative and versatile architectural elements designed to be proportional to the human scale. Depending on the design and architectural style, some ways to achieve this are: broken roof lines, front gables, formers or front extended facades, wide banding and vertical horizontal siding applications, creative use of materials, masonry accents, front porches, courtyards, portals, bancos, attractive deck rail patterns, and building and window placement. However the appropriateness of certain elements in terms of overall design and site context will be taken into consideration.
2. Consider shade, light, natural heating and cooling, and privacy.
3. Propose an attractive building focusing on visual appeal. Keep in mind qualities of massing, proportion, space, architectural style, textures, color tone and articulations.

C. Contextual and Spatial Design:

1. Propose how the architectural style and planning design themes and massing supports the area.
2. Propose a design that embodies healthy human environments including varying interior and exterior spatial environments, incorporates aspects of open plan design, long sightlines to increase spatial dimension, and incorporates creative use of natural lighting to add spatial differentiation and dimension.

Greyfield Site – any site previously developed with at least 50% of the surface area covered with impervious material; an example might be an asphalt parking lot.

Mixed Income Workforce Housing – Developments that have a mixture of income groups as a fundamental part of its financial and development plan.

Mixed-Use - Allowing more than one type of use in a building or set of buildings. This can mean some combination of residential, commercial, industrial, office, institutional, or other land uses.

Project Related Development Soft Costs – Soft costs include the architect's fees, the engineering reports and fees, developer fees, legal fees, appraisal fees, the environmental report fee, any government fees, - including the plan check fees, building permits, any assessments – plus the financial costs such as construction period interest and loan fees.

Special Needs Households – A household composed of one or more persons, at least one of whom meets the following criteria: (HUD's Handbook 4571.2, Section 1-5, Parts A.2. and A.3).

1. Has a physical, mental or emotional impairment which:
 - a. is expected to be of long-continued and indefinite duration,
 - b. substantially impedes the person's ability to live independently, and

c. is of a nature that such ability could be improved by more suitable housing conditions.

OR

2. Has a developmental disability, defined as a severe chronic disability which:

a. is attributable to a mental or physical impairment or combination of mental and physical impairments,

b. is manifested before the person attains age twenty-two,

c. is likely to continue indefinitely,

d. results in substantial functional limitation in three or more of the following areas of major life activity:

1) self-care,

2) receptive and expressive language,

3) learning,

4) mobility,

5) self-direction,

6) capacity for independent living, and

7) economic self-sufficiency.

e. reflects the person's need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services which are of lifelong, or extended duration and are individually planned and coordinated.



**CITY OF ALBUQUERQUE
RENTAL DEVELOPMENT PROJECT APPLICATION**

City of Albuquerque
1 Civic Plaza
Albuquerque, New Mexico 87102

APPLICANT INFORMATION

Applicant Name:	
Applicant Address:	Applicant City, State, Zip:
Applicant Phone Number:	Application Date:
Applicant Contact Person:	Applicant Contact Person email address:

SECTION 1 – PROJECT IDENTIFICATION

Project Name:		
Project Address:	Project City, State, Zip:	
UPC Number:	Census Tract(s):	Census Block Group(s):

NOTE: If you are applying for more than one program (e.g. Home Ownership and Rental), staff will work with you to create a merged application. If a question does not apply, please mark “N/A” so it is clear the question was not overlooked. All Attachments and required submissions for this Development Project Application are identified in the Rental Development Project Application Checklist. All Attachments must be clearly labeled and provided in the order requested.

SECTION 2 – FUNDING SOURCE REQUESTED

Please specify the source of funds and funding conditions which you are requesting. Please note that the funding source may be changed at the discretion of the City.

Funding Source	Amount Requested	Proposed Use of Funds	Funding Terms Being Requested
HOME Program (HOME Investment Partnerships Program)			
Workforce Housing (Funds must be leveraged at a minimum of 4:1)			
CDBG (Community Development Block Grant)			
HNEED (Housing and Neighborhood Economic Development)			

SECTION 3 – TARGET POPULATION(S) and TARGET AREA

A. Target Populations

Please specify the target income populations to be served:

- 30% of Area Median Income 50% of Area Median Income 60% of Area Median Income

B. Target Area

Please check all that apply to the project site (refer to <https://www.cabq.gov/council/documents/pgs> for Planned Growth Strategy designations):

- Infill Area Brownfield Site Greyfield Site
 Metropolitan Redevelopment Area (MRA) 2020 Qualified Census Tract
 Centers and Corridors Mixed Use zoned

Please check the area designation that applies to the project site:

- Investment Area Reinvestment Area Investment/Reinvestment Area

SECTION 4 – PROJECT DESCRIPTION

A. Affordability Requirements - Use Restriction

NOTE: When the funds below are combined with other sources that require an affordability term, the period of affordability is the most restrictive term. By signing this Application, the owner irrevocably commits to the provision of affordable housing as required under an executed covenant agreement for the following affordability restriction periods:

Minimum Affordability Periods for HOME Funded Projects	
Amount of Funding per Unit	Minimum Period of Affordability
Under \$15,000	5 years
\$15,000 - \$40,000	10 years
Over \$40,000 or rehabilitation involving refinancing	15 years
New construction or acquisition of newly constructed housing	20 years

Minimum Affordability Periods for Other Funding Sources	
Funding Source	Minimum Period of Affordability
Workforce Housing Trust	90 years from the completion of the project ("Affordability Period") with a renewable 90 years after the first Affordability Period
Federal CDBG Funds	
HNEDF	

B. Occupancy

1. Does the project currently or expect to receive Project-Based Section 8 subsidies? Yes No
2. Will the project accept Section 8 vouchers? Yes No
3. Special Needs and Target Population

a. List those units restricted to occupancy by Special Needs Tenants or Target Populations:

Number of Units	Population Type

b. Are Supportive Services being provided to Special Needs tenants? Yes No

Please describe provided services: _____

c. Are Supportive Services specific to Target Population? Yes No

Please describe provided services: _____

d. Please specify who will be providing the Supportive Services: _____

e. Are costs of Supportive Services included in the rent? Yes No

C. Site Information

1. Site control is in the form of:

- Deed Option to Purchase Purchase Contract Lease

If site control is in the form of a lease, please specify the lease term: _____ years

Are there any Use or Deed Restrictions on the site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please specify:	

Please indicate the expiration date of the contract, option, or lease term:	
Name of Seller or Lessor:	
Seller or Lessor Address:	

Telephone Number:	Email address:

Is there any direct or indirect financial or other interest between the buyer and seller? Yes No

If "yes", please explain how there is not a conflict of interest:

Please disclose any other site conditions, development/other limitations, or environmental concerns:

2. Planning

Please specify the zoning for the development site:	
Is the zoning consistent with the development being proposed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "No", please indicate the status and anticipated date of resolving all zoning inconsistencies:	
Has the City approved the site plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the City issued a building permit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are all utilities available to the perimeter of the site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "No", please specify which utilities need to be brought to the site:	
Please indicate who is responsible for bringing utilities to the site:	
Specify the conditions that must be met to develop the site:	

D. Proposed Improvements

Please check all that are applicable to the project:

- | | | |
|---|--|--|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Rehabilitation of Existing Building | |
| <input type="checkbox"/> Detached | <input type="checkbox"/> Manufactured/Modular/Mobile | <input type="checkbox"/> Townhome |
| <input type="checkbox"/> Semi-Detached Duplex | <input type="checkbox"/> High rise (4 stories or more) | <input type="checkbox"/> Midrise (2-3 stories) |
| <input type="checkbox"/> Special Needs | | |

Other (please describe):

Is any portion of the building used for other than habitable residential purposes? Yes No

If yes, please explain:

Please identify the following for the project:

Total Land Area:		Building Square Footage:		No. of Floors in Tallest Bldg.:		No. of Elevators:	
Total No. of Units:		Number of Handicap Accessible Units:		Structural System:		Exterior Finish(es)	

E. Borrower and Project Ownership

Please provide the following information for the organization which will be borrowing entity:

Name of Entity:

Address:

Will the borrowing entity provide funds to a partnership? Yes No

If a partnership or LLC, name all partners and their respective percentage of ownership:

Name	% of Ownership
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Please describe who will hold title to the completed project and the manner in which it will be held:

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F. Appliances and Amenities Provided Without Additional Charge

Amenity/Appliance	Market Units		Affordable Units	
	Yes	No	Yes	No
Refrigerator				
Gas Range				
Electric Range				
Dishwasher				
Disposal				
W/D Hookups				
A/C				
Evaporative Cooling				
Carpet				
Drapes/Shades				
Exhaust Fan				
Range Hood				
Other (please list):				

G. Monthly Utility Allowance Calculations

Utilities	Type of Utility (Gas, Electric, etc.)	Utilities Paid By:		Utility Allowance by Bedroom Size				
		Owner	Tenant	0 BR	1 BR	2 BR	3 BR	# ___ Br
Heating								
Evaporative or A/C								
Cooking								
General electric								

The City of Albuquerque reserves the right to request additional materials as needed or require changes in the information submitted herewith. The City of Albuquerque may adjust any or all figures provided herein for underwriting purposes.

Applicant Certification

The undersigned hereby applies for the item(s) as specified above and represents that the property described herein will not be used for any illegal or restricted purposes. The undersigned certifies that the statements made in this application and all attachments are true, correct and complete. Verification may be obtained from any source necessary.

Original Signature Required

Applicant Name:	
Applicant Representative Signature:	Title:
Printed Name:	Date:

DEVELOPMENT SCHEDULE

Project Name:	Date:
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		Date	Comments
A.	Site Acquisition		
B.	Financing		
1.	Construction Loan		
	Closing Date:		
2.	Partnership Closing		
	Closing Date:		
3.	Permanent Loan		
	Commitment Date:		
	Closing Date:		
4. Other	Source of Funds:		
	Firm Commitment/Award Date:		
5. Other	Source of Funds:		
	Firm Commitment/Award Date:		
C.	Environmental Review Completed		
D.	HUD Authority to Use Grant Funds Issued		
E.	City Council funding appropriation approval		
F.	Plans Submitted to the City		
G.	Building Permits Issued		
H.	Notice to Proceed Issued		
I.	Start of Construction		
J.	Completion of Construction		
K.	Estimated Placed-in-Service Date		
L.	Estimated Lease-Up Date		

Construction Financing Summary

Please specify the source(s) for all Construction Funds, inclusive of loan, grant, and other subsidy sources that are equal to 100% of the construction uses specified in the development proforma.

NOTE: If firm commitments are not available, identify the sources you plan to approach and describe your history of successfully obtaining funds from them in the past. If funding sources are identified to which you have not applied in the past, please describe your rationale for applying to them for this project.

Where funding commitments are in place, please provide documentation supporting the availability of construction funds for the project.

Uses of Funds / Total Development Cost	Amount	Source of Construction Funding
Site Work Costs		
Construction / Rehabilitation Costs		
Architectural / Engineering Costs		
Other Owner Construction Related Costs		
Construction Interest		
Other Interim Financing Costs		
Total Construction Costs		

DEVELOPER PROJECTS UNDER DEVELOPMENT

Project Name:	Date:
Developer:	

Please list all housing projects that are currently under development (attach additional pages as necessary):

	Project Name and Address	New Construction	Rehabilitation	Funding			Number of Total Units	Estimated % Completed	Estimated Completion Date	Multi-Family	Single Family
				HUD	LIHTC	WFHT					
1		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
2		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
3		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
4		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
5		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
6		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
7		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
8		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
9		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
10		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
11		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
12		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
TOTALS											

DEVELOPER EXPERIENCE

Project Name:	Date:
Developer:	

Please list the affordable housing developments that you have completed:

	Project Name and Address	New Construction	Rehabilitation	Funding			Number of Total Units	Number of Affordable Units	Date Placed in Service	Multi-Family	Single Family
				HUD	LIHTC	WFHT					
1		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
2		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
3		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
4		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
5		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
6		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
7		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
8		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
9		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
10		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
11		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
12		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
TOTALS											

Development Experience:

Where the development team experience reflected in the previous table is not consistent with the experience required for the project being proposed, please provide details regarding how you plan to gain expertise in the proposed program, in order to ensure that the team is competent in developing and managing the property in compliance with program requirements.

Describe proposed actions:

Consolidated Plan Compliance:

Please provide a description of how the proposed project is consistent with the City's Consolidated Plan Strategic Plan goals. Refer to: <https://www.cabq.gov/family/documents/albuquerque-consolidated-plan-2018-2022-final-submitted-6-18-18.pdf>

Consolidated Plan Compliance:

Need a section where developers can discuss how they are meeting the "Design and Location Criteria" program element described in the Workforce Housing Trust Fund ordinance.

Prior Foreclosure:

Developer/Co-Developer must list any projects they have owned or developed that has received a notice of default prior to foreclosure that has not been cured, is in the process of foreclosure, or has been fully foreclosed upon while the Applicant, Developer, general partner (or Person with a Controlling Interest in any of these entities) has/had an interest and/or involvement in the project and acknowledge the disclosures regarding the foreclosed property are accurate.

Project Name:

Project Address:

Project Name:	Project Address:

Removal by Development Team Member:	
Developer/Co-Developer must list any projects previously awarded Federal, City, or Tax Credit funding within the last five (5) years in which they were terminated or removed by any other member of the Development Team.	
Project Name:	Project Address:
Project Name:	Project Address:

Fraud and Misrepresentation:	
Developer/Co-Developer must list any conviction, current indictment or complaint, or circumstances where it has been found liable, or is currently accused of fraud, in this State or any other State, or misrepresentation relating to: (a) issuance of securities; (b) the development, construction, operation or management of a Tax Credit or other government subsidized housing program; (c) the conduct of the business of the Developer, general partner or any Person with a Controlling Interest in either such party in any administrative or other proceeding; or (d) any filing with the Internal Revenue Service in any State.	
1.	
2.	

Qualifying Non-Profit Organization:	
<input type="checkbox"/> The qualifying non-profit is the sole developer for this project	
If the qualifying non-profit is not the sole developer, please provide a description of the non-profit's participation in the development, operation, and management of the project:	
If the qualifying non-profit is not the sole developer for this project, will the non-profit hold a 51% or greater interest in the General Partnership, or if a Partnership, or an LLC, will it be the Managing Member?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

The undersigned hereby certifies that the statements made in this attachment are true, correct and complete.

Developer Name:

ATTACHMENT "C"

Developer Signature:	Title:
Printed Name:	

Co-Developer Name:	
Co-Developer Signature:	Title:
Printed Name:	

AUTHORIZATION FOR RELEASE OF DEVELOPER TEAM INFORMATION

The form is to be completed and submitted for each member of the development team as reflected in Attachment "D".

To complete this form, please enter the required information and signature in the lower table. The upper table with be completed by the City.

Project Name:
Developer Team Member Company:

We hereby request and authorize you to release to the City of Albuquerque, New Mexico (City) any information regarding the Developer listed above, as it relates to their performance in the development and operation of housing under a federal, Low-Income Housing Tax Credit, State, local or other governmental agency, or Work Force Housing Trust Fund assisted activity, inclusive of curing of or failure to cure any project non-compliance, and an formal/informal action by your agency as it relates to the aforementioned entities' assisted development. Any other development data that would be relevant to the City in its assessment of their development experience and compliance record would be appreciated.

Developer Team Member Company Name:	
Developer Team Member Signature:	Date:
Printed Name:	Title:

DEVELOPER REFERENCES

Please provide contact information for a minimum of three (3) references:

Project Name:	
Project Address:	
Referral Firm:	Developer Relationship to Referral:
Firm Address:	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact Person email:

Project Name:	
Project Address:	
Referral Firm:	Developer Relationship to Referral:
Firm Address:	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact Person email:

Project Name:	
Project Address:	
Referral Firm:	Developer Relationship to Referral:
Firm Address:	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact Person email:

DEVELOPER REFERENCES

Project Name:	
Project Address:	
Referral Firm:	Developer Relationship to Referral:
Firm Address:	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact Person email:

Project Name:	
Project Address:	
Referral Firm:	Developer Relationship to Referral:
Firm Address:	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact Person email:

Project Name:	
Project Address:	
Referral Firm:	Developer Relationship to Referral:
Firm Address:	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact Person email:

**Link to Growth Management Plan
For Workforce Housing Trust Fund financed projects**

To comply with the documentation requirements that demonstrate project compliance with the City's Planned Growth Strategy, provide the following:

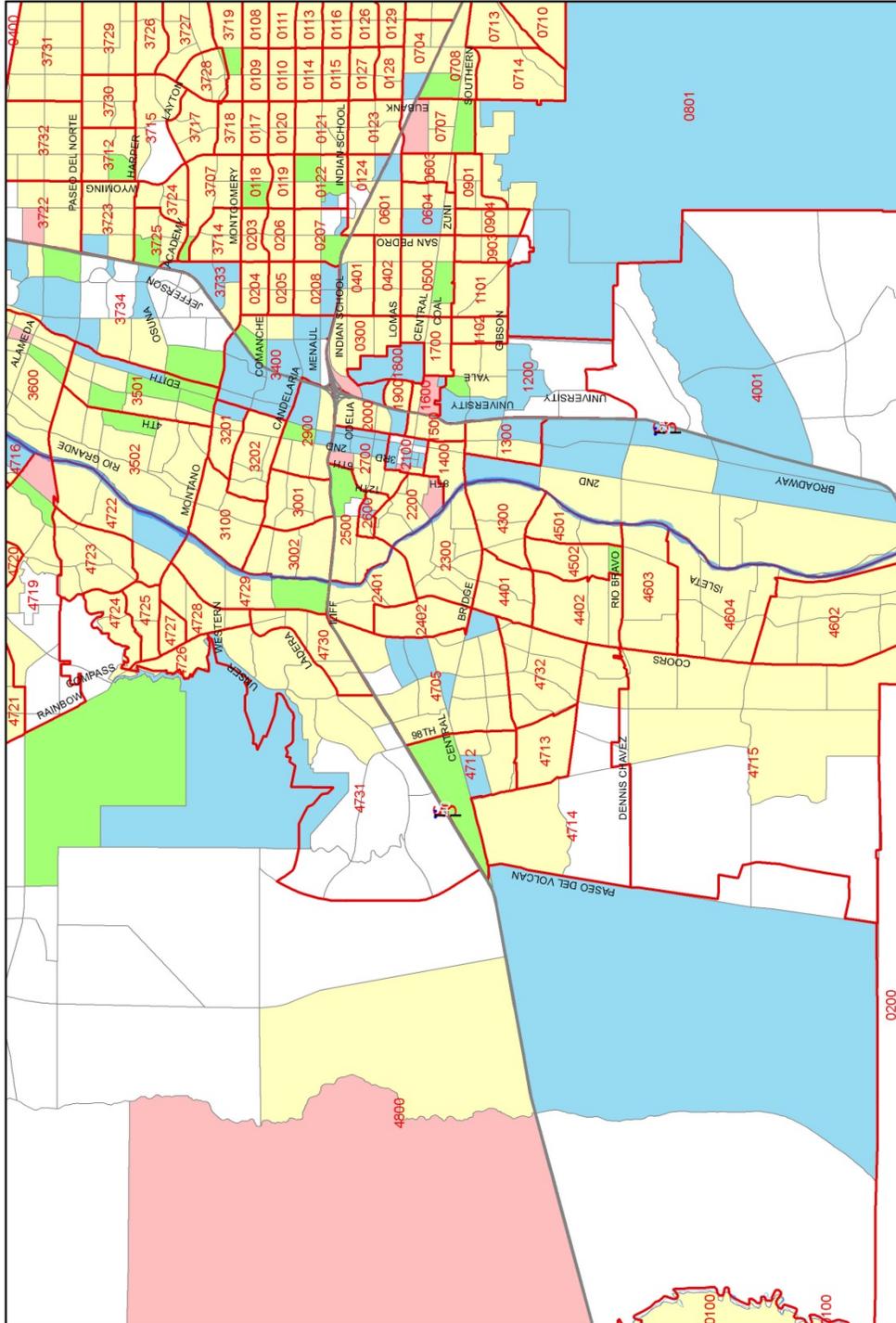
1. Data that documents the job and housing balance as follows:
 - a. is located near existing neighborhood shops, services and facilities so that the project boundary is within ¼ mile walk distance of at least four, or within ½ mile walk distance of at least 6, of the “List of Diverse Uses” detailed below = **3 points**
 - b. is located in a Census Tract (see attached “Jobs Per House” map) with an area where there are:
 - 1) 2-4 jobs per house = **1 point**
 - 2) 4-6 jobs per house = **2 points**
 - 3) 6 or more jobs per house = **3 points**

Note: If a Census Tract qualifies under more than one category, the highest number of points may be taken
 - c. is part of a mixed-use development = **3 points**
 - d. encourages walkability, pedestrian activity and use of existing public park and recreation facilities, provide common areas for community gatherings = **3 points**
 - e. contributes to the scattering of Workforce Housing throughout the City = **3 points**

Diverse Uses

Uses may not be counted in two categories, e.g. an office building may be counted only once even if it is also a major employment center. A mixed use building containing several uses as distinct enterprises would count each as a separate use, but no more than half of the minimum number of diverse uses can be situated in a single building. A single retail store of any type (such as a big box retail store that sells both clothing and household goods) may only be counted once even if it sells products associated with multiple use types.

List of Diverse Uses	
Bank	Pharmacy (stand-alone)
Child care facility (licensed)	Place of worship
Community/civic center	Police/fire station
Convenience Store	Post office
Hair care	Restaurant
Hardware store	School
Health club or outdoor recreation facility	Senior care facility
Laundry/dry cleaner	Supermarket
Library	Theater
Medical/dental office	



Total Employment divided by Housing Units (2004 Estimates)
 Data is calculated and displayed by DASZ (MRCOG Data
 Analysis Sub Zone)

JOBS PER HOUSE

- Red outline: Census Tracts
- White: Zero
- Yellow: LESS THAN 2
- Green: 2-4
- Red: 4-6
- Blue: 6 OR MORE

The following are the 2019 Qualified Census Tracts within Bernalillo County*:

1.15	5.01	6.03	6.04	7.07	7.12	7.13	9.01	9.03	11.02	12.00	13.00
14.00	15.00	16.00	18.00	20.00	21.00	23.00	24.02	25.00	26.00	34.00	37.33
40.01	43.00	45.01	45.02	47.36	47.41	47.49	9407.00				

*City of Albuquerque funds under this RFP shall only be used within the City limits.

Is the proposed project located within any of the above identified census tracts?

Yes No

Areas Defined:

Investment Areas / designated as “Stable” under the Workforce Housing Trust Fund

Investment areas have higher homeownership rates, lower percentages of severely cost-burdened households, lower instances of overcrowding, higher levels of educational attainment, higher median household income, fewer unemployed, higher labor market engagement scores and have shorter transit times to work. These areas are generally suitable for new construction of affordable housing units as a mobility strategy pursuant to the Assessment of Fair Housing. Average minority percentage in Investment Area Tracts is 39.0 percent, whereas the Tract average in ABQ is 56.6 percent, which indicates an opportunity to foster greater diversity within these neighborhoods.

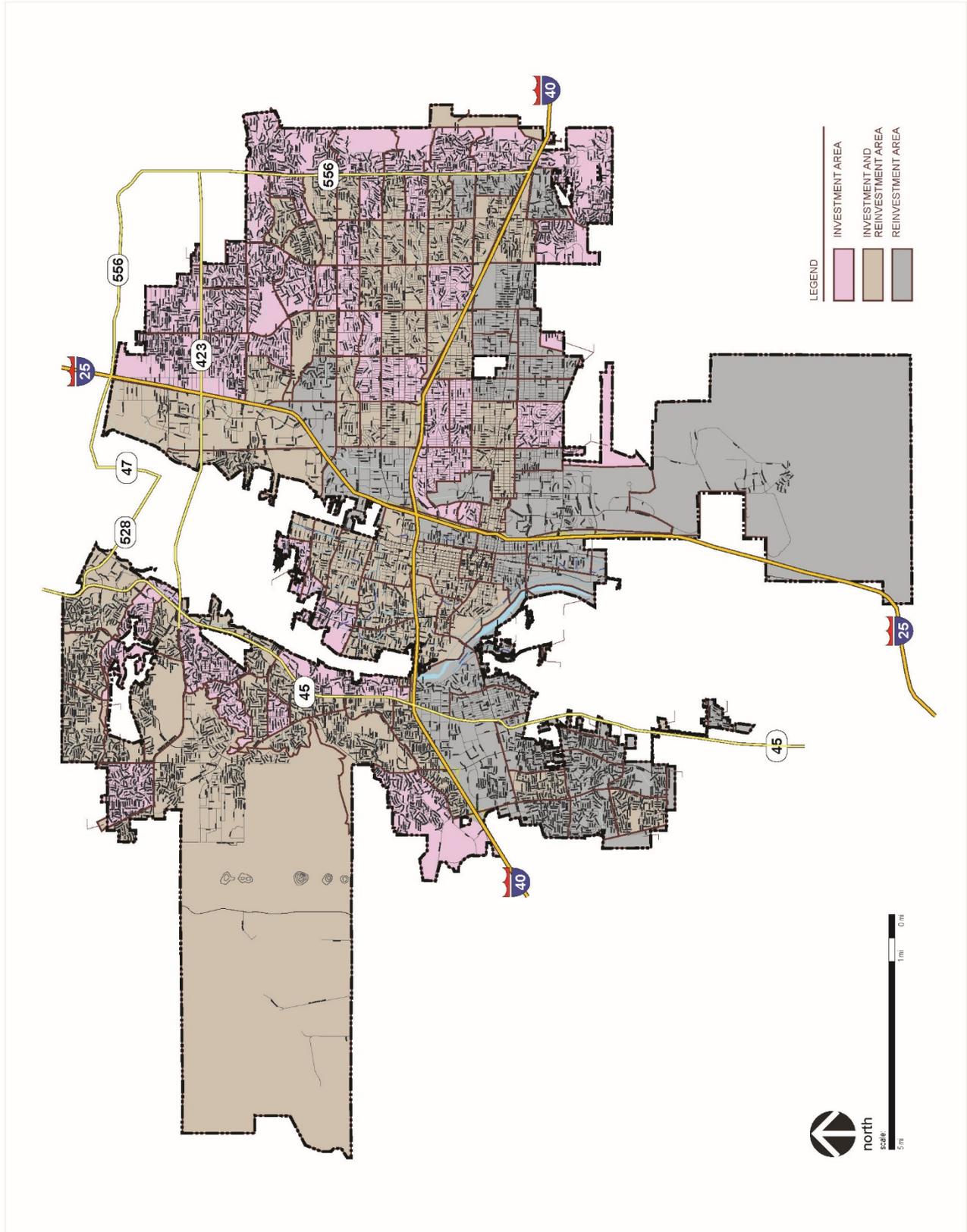
Investment & Reinvestment Areas

Investment & Reinvestment Areas offer decent access to opportunity in some respects while falling short in others. For this reason, these areas should be considered for a combination of mobility investments and place-based investments. Indices of Health & Wellbeing, Economic Security and Housing Stability for these areas indicate the need for a variety of housing, community and economic development activities. Investment and Reinvestment areas exhibit opportunities to improve services related to health and safety, and the environment. A combination of place based and mobility strategies are appropriate in these areas.

Reinvestment Areas / designated as “Disinvesting” under the Workforce Housing Trust Fund

Reinvestment Areas are in need of reinvestment to address lagging indicators in terms of education, income and health. Reinvestment Areas include the eight Racially and Ethnically Concentrated Areas of Poverty (R/ECAPs) identified in the Assessment of Fair Housing. There is significant need for investment of affordable housing funds for rehabilitation and / or preservation in areas in need of reinvestment that have an existing concentration of affordable housing.

There is also a need for improvement of City public facilities, including community centers, senior or multi-generational centers, fire stations and equipment and other public buildings. City infrastructure improvements, including sidewalks, curb ramps, pedestrian crossings, signals and street lighting will benefit low- and moderate-income residents or those presumed under HUD regulations to be low- and moderate-income, such as the elderly and severely disabled adults. Despite having low average opportunity indices, Reinvestment areas contain extensive community assets, and include community centers, parks, senior centers, and libraries.



DEVELOPMENT TEAM

Project Name:	Date:
Developer:	

In accordance with the requirements of Section 5.5.2 of the Administrative Requirements for contracts awarded by the City of Albuquerque, Department of Family and Community Services, the Development Team shall be assembled in a manner that provides open and free competition.

APPLICANT	
Name:	Phone:
Address:.	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact person email address:
List all owners, officers, and affiliates of the General Contractor with controlling interest or that hold percentages of equity (indicate respective percentages):	

OWNER	
Name:	Phone:
Address:.	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact person email address:
List all owners, officers, and affiliates of the General Contractor with controlling interest or that hold percentages of equity (indicate respective percentages):	

GENERAL PARTNER or MANAGING MEMBER	
Name:	Phone:
Address::	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact person email address:
List all owners, officers, and affiliates of the General Contractor with controlling interest or that hold percentages of equity (indicate respective percentages):	

DEVELOPER	
Name:	Phone:
Address::	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact person email address:
List all owners, officers, and affiliates of the General Contractor with controlling interest or that hold percentages of equity (indicate respective percentages):	

CO-DEVELOPER	
Name:	Phone:
Address::	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact person email address:
List all owners, officers, and affiliates of the General Contractor with controlling interest or that hold percentages of equity (indicate respective percentages):	

DEVELOPMENT CONSULTANT	
Name:	Phone:
Address::	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact person email address:
List all owners, officers, and affiliates of the General Contractor with controlling interest or that hold percentages of equity (indicate respective percentages):	

GENERAL CONTRACTOR	
Name:	Phone:
Address::	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact person email address:
List all owners, officers, and affiliates of the General Contractor with controlling interest or that hold percentages of equity (indicate respective percentages):	

ENERGY CONSULTANT	
Name:	Phone:
Address::	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact person email address:

ARCHITECT	
Name:	Phone:
Address::	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact person email address:

MANAGEMENT COMPANY	
Name:	Phone:
Address::	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact person email address:

SYNDICATOR	
Name:	Phone:
Address::	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact person email address:

<p>Describe the process for assembling the Development Team:</p>
--

Describe any direct or indirect financial or other interest any member of the development team may have with another member of the development team or between any of the parties involved in the acquisition, construction, refinancing, rehabilitation, or management of this project:

Provide a narrative description of the Team's organizational capacity and the role to be play be each key member:

DEVELOPMENT TEAM RESUMES

Attach resumes behind this coversheet for each member of the Development Team.

MANAGEMENT COMPANY EXPERIENCE

Project Name:	Date:
Management Company Name:	

Please list the affordable housing developments that the management company is managing:

	Project Name and Address	New Construction	Rehabilitation	Funding			Number of Total Units	Number of Affordable Units	Date Placed in Service	Multi-Family	Single Family
				HUD	LIHTC	WFHT					
1		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
2		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
3		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
4		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
5		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
6		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
7		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
8		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
9		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
10		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
11		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
12		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>				
TOTALS											

AUTHORIZATION FOR RELEASE OF MANAGEMENT COMPANY INFORMATION

Project Name:
Management Company Name:

We hereby request and authorize you to release to the City of Albuquerque, New Mexico (City) any information regarding the Management Company listed above, as it relates to their performance in the development and operation of housing under a federal, Low-Income Housing Tax Credit, State, local or other governmental agency, or Work Force Housing Trust Fund assisted activity, inclusive of curing of or failure to cure any project non-compliance, and an formal/informal action by your agency as it relates to the aforementioned entities' assisted development. Any other development data that would be relevant to the City in its assessment of their development experience and compliance record would be appreciated.

Management Company Name:	
Management Company Signature:	Date:
Printed Name:	Title:

MANAGEMENT COMPANY REFERENCES

Please provide contact information for a minimum of three (3) references:

Project Name:	
Project Address:	
Referral Firm:	Management Company Relationship to Referral:
Firm Address:	
Contact Person:	Contact Person Title:
Contact Person Phone Number:	Contact Person email:

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Contact Person Phone Number:	Contact Person email: