



KANSAS HOUSING
RESOURCES CORPORATION

INSTRUCTIONS FOR THE MODERATE INCOME HOUSING (MIH) APPLICATION:

Kansas Housing Resources Corporation encourages this application to be submitted electronically to better facilitate data into a database for application evaluations. Please note that if submitting this application in hard copy, KHRC will enter the information into the database. KHRC cannot be responsible for errors when entering data not submitted electronically. Submitting data electronically is not required and will not affect the merit of the application.

Electronic Submissions: Please save this application as "2018_Name of applicant_MIH". Example 1: Anytown, USA would submit the application as "2018_Anytown_MIH" and attach to an email to: fbentley@kshousingcorp.org. If an applicant is submitting more than one application for a community, the file should have a number after "MIH". Example 2: "2018_Anytown_MIH_1" and "2018_Anytown_MIH_2". Accompanying documents can also be sent electronically or mailed to the address below. All

documents submitted electronically should be sent in PDF.

Hard Copy Submissions: Send three (3) copies of application and any accompanying documents to: Kansas Housing Resources Corporation, Attention: Moderate Income Housing Program, 611 South Kansas Ave, Suite 300, Topeka, Kansas 66603.



APPLICATION FOR MODERATE INCOME HOUSING PROGRAM

Submission Instructions:

By mail: Send three (3) copies of application and any accompanying documents to: Kansas Housing Resources Corporation, Attention: Moderate Income Housing Program, 611 South Kansas Ave, Suite 300, Topeka, Kansas 66603.

By Email: Send one (1) copy of this application to: fbentley@kshousingcorp.org. Accompanying documents can be sent in hard copy to the address above or by email. If sending by email, please send all documents in PDF format.

I. APPLICANT INFORMATION:

Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Primary Contact: _____ Email: _____

The primary contact person should be someone that is familiar with the development and application, and can answer questions that arise during the application review.

Kansas Senate District: _____ Kansas House District: _____ Kansas Congressional District: _____

Have you previously applied for MIH funding? : Yes No *If no, skip to Section II. Type of Development.*

If yes, in what years did you apply? : _____

Did you receive funding? : Yes No If yes, please list amount of funding allocated: \$ _____

II. TYPE OF DEVELOPMENT:

How many total units are in your development? : _____

Total Units funded by MIH?: _____

What is the type of the development? : *Please mark all that apply.*

- | | | |
|---|--|--|
| HOMEOWNERSHIP <input type="checkbox"/> | RENTAL HOUSING <input type="checkbox"/> | INFRASTRUCTURE <input type="checkbox"/> |
| SINGLE FAMILY RENTAL <input type="checkbox"/> | MULTI-FAMILY RENTAL <input type="checkbox"/> | DUPLEXES <input type="checkbox"/> OTHER <input type="checkbox"/> |

What is the anticipated start date of the development? : _____ Completion Date?: _____

III. FUNDING INFORMATION:

What is the amount of funding being requested? : _____

How will the funds be used? *Please check all that apply.*

COST OF INFRASTRUCTURE GAP FILLER DOWNPAYMENT

OTHER: _____

If applying for infrastructure funding, has the applicant considered a Rural Housing Incentive District (RHID)? Yes No
If no, why not? _____

NARRATIVE:

In the space below, describe in detail how the funds will be used. Applicants may attach additional pages if needed.

(Limit of 5,000 characters available below.)

IV. PARTNERSHIP INFORMATION:

Identify the ownership structure if it is rental housing.

Name _____ Federal ID No. _____

General Partner(s)/Managing Members/or Principals Involved:

Name _____ Telephone _____ Ownership _____%

Name _____ Telephone _____ Ownership _____%

Name _____ Telephone _____ Ownership _____%

V. DEVELOPMENT TEAM INFORMATION:

Provide the following information if applicable and attach resume for each team member listed.

Name of Developer: _____ Phone: _____

Address: _____ City, State, Zip: _____

Name of Principal: _____ Phone: _____

Address: _____ City, State, Zip: _____

Name of Contractor: _____ Phone: _____

Address: _____ City, State, Zip: _____

Name of Management Company: _____ Phone: _____

Address: _____ City, State, Zip: _____

Name of Consultant: _____ Phone: _____

Address: _____ City, State, Zip: _____

Name of Architect: _____ Phone: _____

Address: _____ City, State, Zip: _____

VI. ADDITIONAL DEVELOPMENT INFORMATION:

Construction Type: *Please check all that apply.*

- New Construction Historic Rehabilitation Acquisition & Rehabilitation
 Rehabilitation Infrastructure Homeowner Assistance

Other: _____

Project Type: *Please check all that apply.*

- Row House/Townhouse Detached Single Family Detached Multi-Family Garden Apartments
 Elevator Stories Slab on Grade
 Crawl Space Partial Basement Full Basement

Other: _____

Total Development Costs? (Prefilled from Total Development Costs on pg. 7) \$ _____

Is site properly zoned for the proposed development? Yes No Unsure

Are all utilities presently available to the site? Yes No Unsure

***PLEASE NOTE: The following information must be included with the application. Please check when attached.**

- Proof of site control
 Proper zoning or application for proper zoning
 Sketch plan
 Legal description of site

VII. SOURCE OF FUNDS (Construction & Permanent Financing):

Construction – List individually the source of construction financing.

| Source of Funds | Amount of Funds | Contact Name | Phone |
|-----------------|-----------------|--------------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Total Construction Funds _____

Permanent

List Total Source of funds for the Development at Closing (Do not include construction financing).

| Name of Lender or Source of Funds | Amount of Funds | Annual Debt Service | Interest Rate of Loan Period | Amortization Period | Term of Loan |
|---|-----------------|---------------------|------------------------------------|---------------------|--------------|
| | | | % | | |
| | | | % | | |
| | | | % | | |
| | | | % | | |
| Total Permanent Funds (Must equal total development costs.) | | | ← Total Annual Debt Service | | |

VIII. LEVERAGING:

Show all funding leveraged by MIH funds.

Loans _____

City/County funds _____

Tax rebates through NRP _____

Other state or federal funds _____

Other funds (such as Employer Contributions, Private Investments, etc.):

Type: _____ Amount: _____

Type: _____ Amount: _____

Type: _____ Amount: _____

Type: _____ Amount: _____

Type: _____ Amount: _____

Type: _____ Amount: _____

Type: _____ Amount: _____

IX. PROJECTED INCOME:

| Unit Type | Number of Units | Monthly Rent Per Unit | Total Tenant Paid Rent | Gross Rent Per Unit | Square Feet Per Unit |
|-----------|-----------------|-----------------------|------------------------|---------------------|----------------------|
| _____ BR | _____ | _____ | _____ | _____ | _____ |
| _____ BR | _____ | _____ | _____ | _____ | _____ |
| _____ BR | _____ | _____ | _____ | _____ | _____ |
| _____ BR | _____ | _____ | _____ | _____ | _____ |

Total Number of Units: _____ Total monthly rental income: \$ _____

Other Income type: _____ Other Income Amount: \$ _____

Less Vacancy Allowance _____ % Total Less Vacancy Allow: \$ _____

What is the estimated annual percentage _____ Total monthly income: \$ _____

Increase in projected income? :\$ _____ Multiply by 12 (Annualized): X _____

Total: \$ _____

X. ANNUAL EXPENSE INFORMATION:

Administrative

Advertising _____

Management _____

Legal/Partnership _____

Accounting/Audit _____

Other _____

Other _____

Other _____

TOTAL ADMIN. COST _____

Operating

Elevator _____

Fuel (Heating & Hot Water) _____

Lighting & Misc. Power _____

Gas _____

Trash Removal _____

Payroll, including taxes _____

Insurance _____

TOTAL OPERATING COST _____

Maintenance

Decorating _____

Repairs _____

Exterminating _____

Ground Expense _____

Other _____

TOTAL MAINT. COST _____

Taxes

Real Estate Taxes _____

TOTAL REAL ESTATE TAXES: _____

TOTAL ANNUAL OPERATING EXPENSES: _____

ANNUAL REPLACEMENT RESERVE FOR UNITS: _____

Estimated percentage increase in annual expenses: _____

Development Cost:

List Total Development Costs.

| Itemized Cost | Development Cost | Itemized Cost | Development Cost |
|--|------------------|---|------------------|
| To Purchase Land and Buildings | | For Financing Fees and Expenses | |
| Land | | Bond Premium | |
| Existing Structures | | Credit Report | |
| Demolition | | Permanent Loan Origination Fee | |
| Other | | Permanent Loan Credit Enhancement | |
| For Site Work | | Cost of Iss./Underwriters Discount | |
| Site Work | | ** Title and Recording | |
| Off-Site Improvement | | ** Counsel's Fee | |
| For Rehabilitation & New Construction | | ** Cost Certification Fee | |
| New Building | | ** Other | |
| Rehabilitation | | For Soft Cost | |
| Accessory Building | | Property Appraisal (Feasibility) Market Study | |
| General Requirements | | Environmental Report | |
| Contractor Overhead | | Rent-Up Consultants Other | |
| Contractor Profit | | For Developer's Fees | |
| Building Permit Fee | | Developer's Overhead | |
| For Contingency | | Developer's Fees | |
| Construction Contingency | | Other | |
| Other | | For Development Reserves | |
| For Architectural & Engineering Fees | | Rent-Up Reserve Operating Reserve Other | |
| ** Architect Fee-Design | | Other | |
| ** Architect Fee-Supervision | | SUBTOTAL COLUMN 2 | |
| ** Real Estate Attorney | | SUBTOTAL COLUMN 1 | |
| ** Consultant or Processing Agent | | TOTAL DEVELOPMENT COSTS | |
| ** Property/Survey Fee | | | |
| ** Engineering Fees | | | |
| ** Other | | | |
| ** Other | | | |
| For Interim Costs | | | |
| Construction Insurance | | | |
| Construction Interest | | | |
| Construction Loan Origination Fee | | | |
| Construction Loan Credit Enhancement | | | |
| Taxes | | | |
| SUBTOTAL COLUMN 1 | | | |

XII. Job Creation and Economic Development

Please provide documentation^o to support each answer except those marked unknown.

Number of jobs created in the last two years

◇ Submit letters from employers that have created the jobs as verification

Narrative:

Unknown

Number of jobs expected to be created in the next two years

◇ Submit letters from employers that will create the jobs as verification

Narrative:

Unknown

Number of jobs available but not filled due to a lack of housing

◇ Submit letters from employers that have unfilled openings as verification

Narrative:

Unknown

Number of employees living in the community but in substandard or inadequate housing and who would like better housing

◇ Submit letters of interest from employees as verification

Narrative:

Unknown

Number of employees not living in the community but who would like to live in the community if adequate housing existed

◇ Submit letters of interest from employees as verification

Narrative:

Unknown

The Applicant hereby makes application to Kansas Housing Resources Corporation for the Moderate Income Housing in the amount of \$_____. The Applicant agrees that the KHRC shall not be held responsible, or liable, for representations made to the undersigned, or its investors, relating to the KHRC MIH. Therefore, the undersigned Applicant assumes all the risk of damages, losses, costs, and expenses related thereto, and further agrees to indemnify and hold harmless the KHRC against any and all claims, suits, losses, damages, costs, and expenses of any kind and of any nature, that the KHRC may hereinafter suffer, incur, or pay arising out of the use of the information concerning the MIH on the above referenced development.