

Completeness Checklist

Please complete this checklist before submission. All tabs must be in order and complete. This checklist includes all items from the CFA, separated into 'Sections' from the CFA Narrative and 'Forms' from the CFA Workbook.

Tab 1: Project Summary

Section 1	<input type="checkbox"/>	Project Summary
Form 1	<input type="checkbox"/>	Project Summary

Tab 2: Project Description

Section 2	<input type="checkbox"/>	Project Narrative
Form 2A	<input type="checkbox"/>	Building Information
Form 2B	<input type="checkbox"/>	Square Footage Details
	<input type="checkbox"/>	Preliminary Drawings and Site Plan <ul style="list-style-type: none"> To include elevations, typical floor plans, descriptive building sections, site plan, and roof plan
	<input type="checkbox"/>	Outline Specifications
	<input type="checkbox"/>	Evergreen Sustainable Development Standard Checklist 4.0

Tab 3: Need & Populations Served

Section 3	<input type="checkbox"/>	Need & Populations Served
Form 3	<input type="checkbox"/>	Populations to be Served
Attachments		
	<input type="checkbox"/>	Market Study – May be waived by OH, contact OH to request
	<input type="checkbox"/>	Neighborhood Notification Plan
	<input type="checkbox"/>	Sample Neighborhood Notification Letter and Address List

Tab 4: Relocation

Not Applicable. Do not complete the Section and Form for this section.

Tab 5: Project Schedule

Form 5	<input type="checkbox"/>	Project Schedule
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Tab 6: Development Budgets

Section 6	<input type="checkbox"/>	Development Budget Narrative
Form 6A	<input type="checkbox"/>	Development Budgets
Form 6B	<input type="checkbox"/>	Development Budget Details
Form 6C	<input type="checkbox"/>	LIHTC Budget (Basis Calculation)
Form 6D	<input type="checkbox"/>	LIHTC Calculation
Form 6E	N/A	Fee Schedule – NOT REQUIRED FOR OH APPLICATION

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Attachments		
	<input type="checkbox"/>	3 rd Party Construction Cost Estimate
	<input type="checkbox"/>	Capital Needs Assessment and Lifecycle Cost Analysis (Rehab Projects only)
	<input type="checkbox"/>	Appraisal or Property Tax Assessment

Tab 7: Project Financing

Section 7	<input type="checkbox"/>	Project Financing
Form 7A	<input type="checkbox"/>	Financing Sources
Form 7B	<input type="checkbox"/>	Estimate of Cash Flow During Development
Attachments		
	<input type="checkbox"/>	Funding Commitment Letters
	<input type="checkbox"/>	Letters for Committed Donations (including Sponsor Donations)
	<input type="checkbox"/>	Capital Campaign Plan, if funding includes a Capital Campaign

Tab 8: Project Operations

Section 8	<input type="checkbox"/>	Project Operations
Form 8A	<input type="checkbox"/>	Proposed Rents and AMIs Served
Form 8B	<input type="checkbox"/>	Operating, Service, and Rent Subsidy Sources
Form 8C	<input type="checkbox"/>	Personnel (Service and Operating) and Non-Personnel Service Expenses
Form 8D	<input type="checkbox"/>	Operating Pro Forma
Form 8E	<input type="checkbox"/>	Operating Pro Forma Details
Attachments		
	<input type="checkbox"/>	Documentation of Utility Allowance calculations and schedule

Tab 9: Development Team

Section 9	<input type="checkbox"/>	Development Team
Form 9A	<input type="checkbox"/>	Project Team
Form 9B	<input type="checkbox"/>	Identity of Interest Matrix
Form 9C	<input type="checkbox"/>	Project Sponsor Experience
Form 9D	<input type="checkbox"/>	Project Development Consultant Experience
Form 9E	<input type="checkbox"/>	Project Property Management Firm Experience
Attachments		
	<input type="checkbox"/>	Development Consultant Agreement
	<input type="checkbox"/>	OH CHDO Certification (Required if CHDO indicated as Proposed Ownership Structure). Contact OH for form.
	<input type="checkbox"/>	Signed board resolution authorizing application submittal (if applicable)
	<input type="checkbox"/>	Secretary of State certification of existence (RCW 24.03) of Applicant
	<input type="checkbox"/>	Organizational By-laws and Articles of Incorporation

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<input type="checkbox"/>	Board Composition list, including board member biographies
<input type="checkbox"/>	Organizational Management Team list, including biographies
<input type="checkbox"/>	Resumes/Bios of development team members
<input type="checkbox"/>	Resumes/Bios of property management team members
<input type="checkbox"/>	501(c)3 letter of determination from IRS, if applicable
<input type="checkbox"/>	Audit reports with financial statements for the past three years (plus year to date statements from the most recent fiscal quarter) with the parent organization and subsidiaries broken out, in addition to consolidated totals. Include any management letters from the auditor.
<input type="checkbox"/>	Tax return 990 forms for the last two years

Tab 10: Services

Section 10	<input type="checkbox"/>	Services (if applicable)
Attachments		
	<input type="checkbox"/>	Memorandum of Understanding (if applicable)
	<input type="checkbox"/>	Examples of assessment tools used
	<input type="checkbox"/>	Services funding commitment letters
	<input type="checkbox"/>	On-site services partnership letter (<i>if applicable</i>)

Tab 11: Addendum Questions

Attachments		
	<input type="checkbox"/>	Addendum Questions

If any item listed above is not checked, or is not applicable to your project, please reference the specific document and provide an explanation as an attachment.

Self-Certification of Completeness

I, _____ (Name),
 _____ (Title - must be authorized official), of
 _____ (Sponsor Organization), acknowledge that I have reviewed
 the application and checklist and that all the required documentation necessary to review this
 application has been included.

Signature: [Click here to enter text](#)

Name: [Click here to enter text](#)

Title: [Click here to enter text](#)

Organization: [Click here to enter text](#)

Completeness Checklist



Date: [Click here to enter text](#)