2021 NHTF APPLICATION MANUAL

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INSTRUCTIONS

**Users and Access**

**Username.** All users must have own username. Username requests shall be submitted through the online Application by selecting “request one”. Username and passwords must not be shared.

**Granting Access.** Each Applicant shall be responsible for granting and removing Application access to each user. The person who creates the Application shall be the “creator” and shall be responsible for granting and removing Application access to authorized users. IFA recommends that a regular review of users’ access to each Application be completed by Applicants.

**OVERVIEW**

**Application Tabs.** Complete entry of each Application Tab, save, upload required exhibits to the threshold Application, and submit.

The red X on each Tab will change to a green check mark when all information is entered correctly and saved. Some Tabs will have a red X until each tab with corresponding requirements have been entered.

If a red X remains and no error message was received when “Submit” was selected, go back to the tab with the red X and save.

**Prior to Application Submittal.** Questions regarding an interpretation or clarification of the NHTF policies/procedures/rules may be submitted to [nationalhousingtrustfund@iowafinance.com](mailto:nationalhousingtrustfund@iowafinance.com).The questions and answers will be placed on the 2021 NHTF Round webpage.

**Binding Obligations.** The representations made in the Application shall bind the Applicant and shall become a contractual obligation of the Developer and the Ownership Entity and any Entity the Developer or the Ownership Entity is representing in the presentation of the Application or a successor in interest in the event NHTF funds are awarded to a proposed Project.

**Complete Application***.* Complete Applications for NHTF under the current funding round are required to be submitted through the online Application **by 4:00 p.m. C.S.T. on July 2, 2021**.

**After Application Submittal.** No Applicant shall contact any IFA staff or Board members, nor shall anyone contact staff or Board members on the Applicant’s behalf, in order to unduly influence IFA’s determination related to the award of NHTF.

**Threshold Deficiency Review Period.** The Application, once submitted, shall be unavailable to the Applicant until such time that the Applicant needs to make a change per IFA’s request during the Threshold Deficiency Review period. An email will notify the Applicant of the deficiencies for review and response. The Applicant shall respond in the Application, make corrections within the appropriate Application Tabs, if applicable, and submit the Application to IFA within the time allowed for the deficiency responses.

Changes to the Application shall not be allowed that maintain or improve the score received by an Applicant.

A change in funding sources, shall not be allowed during the threshold deficiency review period unless specifically requested by IFA.

The Developer fees may not be increased after submission of the threshold Application.

The deficiency review period is the one and only opportunity to respond to items in IFA’s deficiency report.

**Scoring.** Scoring exhibits are due at threshold Application submission and cannot be provided during the deficiency period. IFA will award scoring points based on the evidence provided in the Application and exhibits. IFA designed the scoring to allow Applicants to propose Projects that work best for their communities, targeted market and development organizations, not to garner maximum points. IFA shall make the final determination of the Applicant’s score. Scoring determinations made in prior years are not binding on IFA for the current funding round.

**\*PROJECTS THAT DO NOT PASS THRESHOLD WILL NOT BE SCORED\***

NHTF Application

**GUIDANCE BY TAB** (Be sure to **save each Tab before exiting** the Application)

**General Information** This manual highlights and is a summary of the application, this is not an all-inclusive document.

**Scoring Criteria to Projects that pass threshold.**

Site Plans shall show all amenities and scoring construction elections entered in the online Application.

When entering each building’s address number, street name, city and nine-digit zip code, are correct.

There are 12 scoring categories

1. Targeted Populations
2. Great Places
3. Home Base Iowa Community
4. Fully Accessible Units
5. Utilization of Project-Based Assistance
6. Opportunity Index Census Tracts
7. Leverage
8. Flexible Tenant Selection Criteria
9. IFA Iowa Title Guaranty Certificate
10. Zoning
11. Nonprofit Ownership
12. HTF Subsidy Per Unit

The Table below lists each scoring category, where it can be found on the application. and guidance on requesting preliminary scoring points.

|  |  |  |  |
| --- | --- | --- | --- |
| Category | Application Section | Item Description | Points |
| Targeted Populations | Project Name & Description | Application has a targeted population of: Families Experiencing Homelessness (Homeless persons, including homeless individuals, families, youth and/or veterans | **0 or 30 pts** |
| Great Places | Project Name & Description | Points will be awarded if the application says the project is located entirely in a Great Place and the IFA required form for Exhibit H-30, Great Places, is uploaded with the online application. | **0 or 2 pts** |
| Home Base Iowa Community | Project Name & Description | Points will be awarded if the application shows that the project is located "entirely" in a Home Base Iowa Community as shown at [Home Base Iowa](https://www.homebaseiowa.gov/resources/communities/). The Home Base Iowa Community can be either a HBIC County or a HBIC city. | **0 or 2 pts** |
| Fully Accessible Units | Buildings | The required percentage of the HTF-assisted units must be fully accessible (not adaptable) as shown in the plans submitted with the application. “Fully accessible unit” means a unit designed and constructed for full accessibility in accordance with Section 1002 of the International Code Council (ICC) A117.1. | **2 points** – At least 10% but less than 25% of the HTF-assisted units will be fully accessible  **5 points** – At least 25% but less than 50% of the HTF-assisted units will be fully accessible  **10 points** – 50% or more of the HTF-assisted units will be fully accessible |
| Utilization of Project-Based Assistance | Project Name & Description, Exhibits | Points will be awarded to projects providing **Exhibit H-29** that show it has Federal Project-Based Rental Assistance, HUD-VASH Voucher Assistance or Local Project-Based PHA (Public Housing Authority) Voucher Assistance. | **5 pts** = At least 25%of the total Project Units are covered by a project-based rental assistance contract.  **10 pts** = At least 50% of project units are covered by a project-based rental assistance contract.  **15 pts** = At least 75% of the total Project Units are covered by a project-based rental assistance contract |
| Opportunity Index Census Tracts | Buildings | Points will be awarded if the project is located entirely in a census tract that is identified as a High or Very High Opportunity Area as shown on Appendix F. | **3 pts.**=High Opportunity Area;  **6 pts.**=Very High Opportunity Area |
| Leverage | Funding Sources & Leverage | The total amount of local, non-federal funds designated as leverage (as approved by IFA) will be divided by the amount of total HTF funds requested. | **0 points =** 0 - 4% eligible HTF leverage  **3 points =** 5 - 9% eligible HTF leverage  **6 points=** 10 - 14% eligible HTF leverage  **9 points=** 15 - 20% eligible HTF leverage  **15 points =** 21% or more eligible HTF leverage |
| Flexible Tenant Selection Criteria | Project Name & Description | IFA will give preference in funding decisions to applicants who intend to create units for individuals or families who face multiple barriers to securing permanent housing. Multiple barriers may include poor credit, prior evictions, past criminal convictions, poor rental history, and multiple shelter placements. | **0 or 5 points** |
| IFA Iowa Title Guaranty Certificate | Project Name & Description | Points will be awarded if the applicant selects on the application that the Ownership Entity shall, at a minimum, obtain a Final Iowa Title Guaranty Certificate with an amount of coverage that is not less than the value of the land and pre-existing improvements, if any, combined with the total Hard Construction Costs of the Project. | **0 or 2 pts** |
| Zoning | Zoning | Points will be awarded if the property is appropriately zoned at the time of application for the proposed project and the completed Zoning Exhibit, H-31, is uploaded with the online application. | **0 or 4 pts** |
| Nonprofit Ownership | Ownership Entity | Points will be awarded as follows if the owner of the proposed project will be a nonprofit entity. For scoring purposes, Nonprofit Ownership may also include a nonprofit general partner of a limited partnership or a nonprofit managing member of a limited liability corporation. | **5 points** for a nonprofit owner with experience in providing any type of housing or supportive services  **10 points** for a nonprofit owner with experience in providing housing or supportive services to extremely low-income households  **15 points** for a nonprofit owner with experience in providing housing or supportive services to extremely low-income households in the proposed project’s market area |
| HTF Subsidy Per Unit | Buildings | The extent to which a project proposes to use the least amount of HTF subsidy per HTF-assisted  unit. The project with the lowest HTF-subsidy per unit requested will receive 10  points. The project with the highest subsidy per unit requested will receive 0 points. Projects in  between will receive points on a sliding scale from 0 to 10 points.  The calculation formula is: =**IF (SPU Grant Amount/HTF-assisted Units) < Max SPU then 10-**  **(10\*(((SPU Grant Amount/HTF-assisted Units)-Min SPU)/ (Max SPU-Min SPU))) Else 0)** | **0 to 10 points** |

**Resources**

**IFA Website:** Notices**,** Application Package**,** NHTF Exhibits, 2021 HTF Allocation Plan, NHTF Webinar and Appendices.

NHTF Appendices

|  |  |
| --- | --- |
| **Appendices** | **Description** |
| A | Tip Sheet |
| B | Links |
| C | NHTF Maximum Per Unit Subsidy Limit |
| D | Leverage Contribution Information |
| E | Underwriting Standards |
| F | Opportunity Index Census Tracts |
| G | Appraisal Information |
| H | Restrictions on Lobbying |
| I | Lead Based Paint Requirements |
| J | Providing Audits – Nonprofit |
| K | Providing Financial Statements – For Profit |
| L | Long-Term Inspection Fees |
| M | Iowa Title Guaranty - Rate Sheet |
| N | Noise Standards |
| O | Iowa Census Tract Minority Percentages (for new construction or acquisition/new construction) |

NHTF Exhibits

The exhibits listed on this form must accompany the online NHTF Application if required/applicable.

| Exhibit # | Description | **Required** |
| --- | --- | --- |
| H-1 | Application Certification – **IFA required form** | Yes |
| H-2 | Assurances Signature Page - **IFA required form** | Yes |
| H-3 | Applicant/Recipient Disclosure/Update Form (HUD 2880) | Yes |
| H-4 | W-9 Form (Request for Taxpayer ID # & Certification) | Yes |
| H-5 | Minority Impact Statement – **IFA required form** | Yes |
| H-6 | No Lobbying Certificate – **IFA required form** | Only if requesting over $100,000 in NHTF funds |
| H-7 | Disclosure of Lobbying Activities | If applicable |
| H-8 | Local Support  A letter(s) of involvement, endorsement and investment by local citizens, local organizations or the governing body of the local government in which the housing project is located. The local support shall promote the objectives of the housing activity or projects assisted through the NHTF program. | Yes |
| H-9 | Nonprofit Status (2 items required)  1) Provide a letter from the IRS stating that the entity is a qualified nonprofit and has received a tax-exempt ruling under 501(c) depending on the type and purpose of the organization seeking the designation for tax-exemption:  The 501(c) designations permissible under NHTF are:  501(c)3 status -- A charitable, nonprofit corporation;  501(c)4 status -- A community or civic organization;  Section 905 status -- a subordinate organization or a 501(c) organization.  2) Provide a current good standing letter from the Iowa Secretary of State's Office (i.e. a Certificate of Existence or a Certificate of Authority.) | Only if Ownership Entity is a nonprofit |
| H-10 | Color Photos of Property & Adjacent Properties  Eight photos of each site are required looking at each site from the North, South, East, & West, and looking out from each site toward the North, South, East & West.  If the project involves acquisition of existing buildings, you must also provide at least ten photos of the inside of the building.  All photos must include the street address and building number. Submit all color photos as ONE PDF file. | Yes |
| H-11 | Letters of intent from lending institutions for private construction & permanent financing  Must be on the lending institution’s letterhead. | Yes |
| H-12 | Commitment letters from all other sources (i.e. grants, loans, leverage, etc.)  Each letter must include:  - the value of the commitment;  - the interest rate & term;  - the purpose the funds can be used for;  - the time limitations related to the commitment;  - if the source is from a federal program. | Yes |
| H-13 | PHA Utilities  If tenants pay for any of their utilities, provide current PHA utilities dated within one year of the NHTF round closing date. If date on documentation is not within one year, also provide written confirmation that the PHA utilities are still current. | Only if tenants pay for any of their utilities. |
| H-14 | Market Information for Proposed Project  - **IFA required form**  If project is located in multiple primary market areas, one form is required for each primary market area. | Yes |
| H-15 | Ownership Entity Documentation  For LP, LLP, LLLP, provide:  - Current Certificate of Limited Partnership  - Current Signed Partnership Agreement  For LC, LLC, LLC, provide:  - File-Stamped Articles of Organization  - Current Signed Operating Agreement | Only if Ownership Entity is for-profit AND not a sole proprietor |
| H-16 | Documentation for General Partner/Managing Member & Co-GP/Co-MM  For LP, LLP, LLLP, provide:  - Current Certificate of Limited Partnership  - Current Signed Partnership Agreement  For LC, LLC, LLC, provide:  - File-Stamped Articles of Organization  - Current Signed Operating Agreement  For Corp. or Incorp., provide:  - Bylaws  - Board Resolution approving actions of corp. concerning proposed project | Only if the Project Team includes a GP/MM or Co-GP MM |
| H-17 | Document(s) providing evidence of control or ownership of site(s)  Provide purchase agreement, title of property, title opinion, etc. Must be good through 6 months following the NHTF round closing date. | Yes |
| H-18 | Map with Site Location(s)  Provide legible, recent city map pinpointing the site location(s). Must show the address of the property, the names of surrounding streets & any other information important for the site inspection | Yes |
| H-19 | Site Plan(s) clearly listing the following:  - Site dimensions  - Easements & setbacks  - All buildings (including manager’s & Accessory Bldgs.)  - Parking  - Play area  - Pool  - Other items | Yes |
| H-20 | Plans & Specifications clearly listing the following:  - Use of all rooms in the bldg. (i.e. exercise room, computer learning center, manager’s office, library, craft room, maintenance room, dining room, etc.)  - The square footage of each room in the bldg.  - Use of all rooms in the units (i.e. bedroom, bathroom, kitchen, living room, etc.)  - The square footage of each unit  - Designate all handicap accessible units | Yes  NOTE: If requesting points for fully accessible units, this must be demonstrated on the plans & specs |
| H-21 | Leverage Documentation **(2 items required)**   1. Provide the **IFA required form** 2. Provide a letter from each entity providing leverage (must be on their letterhead). Each letter must include:  * Date * Name of entity providing the leverage * Dollar amount of leverage * Description of leverage * Language specifying that the leverage is for the proposed NHTF project   Signature of person authorizing the commitment of leverage funds | If applying for points for Leverage |
| H-22 | Noise Abatement & Control **(1 or 2 items required)**  1) Provide the **IFA required form** - Noise Abatement & Control  2) If checked that any noise sensitive conditions exist, must also provide a noise assessment that meets HUD federal requirements. | Yes |
| H-23 | Sellers Acknowledgement Form – **IFA required form** | Yes |
| H-24 | Relocation Plan – **IFA required form** | If there is an occupied existing bldg.(s) on the site |
| H-25 | Site & Neighborhood Standards – **IFA required form** | Yes |
| H-26 | Flood Zone – FEMA FIRMette map of each site  Link: [How to Find Your FIRM and Make a FIRMette](http://www.fema.gov/media-library/assets/documents/34930) | Yes |
| H-27 | 3 Yrs. Balance Sheets/Profit & Loss Statements or Non-Profit Audits  Provide documentation for ownership entity. Alternative financial information may be accepted if IFA deems it sufficient. | Yes |
| H-28 | Tax Abatement Documents  Provide tax abatement schedule plus assessed valuation (estimated if necessary) subject to abatement and applicable tax levy. | Only if have tax abatement |
| H-29 | Project-Based Rental Assistance  Provide a letter from the subsidy provider that the project has Federal Project-Based Rental Assistance, HUD-VASH Voucher Assistance or Local Project-Based PHA (Public Housing Authority Voucher Assistance). | If requesting points for Utilization of Project-Based Assistance |
| H-30 | Great Places – **IFA required form** | If requesting points for Great Places |
| H-31 | Zoning  Provide documentation on status of zoning. This exhibit must be provided by the city/municipality where the proposed project will be located. The city/municipality must state (1) the property’s current zoning classification and (2) if this zoning classification permits construction of the proposed project. | If requesting points for zoned correctly at time of application |

APPLICATION SECTIONS

Project Name & Description Tab

1. **Project Name.** Complete the name of the project.
2. **Project Type.** New Construction, Gut Rehab, or Acquisition/New Construction (Adaptive Reuse), from the dropdown box.
3. **Occupancy Type.** Select Family from the dropdown box.
4. **Targeted Population.** Select N/A; Families experiencing homelessness (Homeless persons, including homeless individuals, families, youth and/or veterans); persons with disabilities; persons with HIV/Aids; persons with substance abuse; victims of domestic violence.
5. **Designated Units.** If any of the units going to be designated N/A, persons with HIV/Aids, persons with HIV/Aid that are chronically homeless, homeless persons and families, or homeless persons and families that are chronically homeless from the dropdown box.
6. **Total project units.** Fill in the number of units in the project.
7. **Total project NHTF units.** Fill in the number of NHTF units.
8. **Type of NHTF units.** Select fixed or floating from the dropdown box.
9. **Number of fully accessible units.** Fill in the number of fully accessible units (minimum 10% of NHTF units).
10. **Number of units for hearing/visually impaired.** Fill in the number of hearing/visually impaired units (minimum 2% of NHTF units).
11. **Great Place.** Is the project located entirely in and a part of a current Great Place Community approved by the Department of Cultural Affairs, choose yes or no.
12. **HOME Base.** Is the project located entirely in a city that is a HOME Base Iowa Community as shown at <https://www.homebaseiowa.gov/resources/communities/> , choose yes or no.
13. **Project-based Assistance.** Does the project utilize project-based assistance, choose yes or no.
14. **High or Very High Iowa Opportunity.** Is the entire project located in a census tract that is identified as a High or Very High Iowa Opportunity area as shown on Appendix F, choose yes or no.
15. **Describe Accessory building and area.** Describe the area where the project will be located.
16. **Describe commercial facilities.** Describe if there are any commercial facilities new or on the project site.
17. **Description of project**. Provide a brief description of the project that may be released to the public.
18. **Freestanding structure.** If any NHTF funding will be used for the rehabilitation or construction of freestanding structures, including detached garages and/or community centers - Explain. (NHTF funding cannot be used for freestanding structures that do not constitute housing except in rare circumstances with approval from IFA.)
19. **Need**. Provide a description of the need for the project. This description needs to be specific about your project. The information will provide IFA reviewers with details and make the project competitive with other projects competing for this round of NHTF funds.
20. **Local Support.** Provide a description of the local support for your project. This should be specific on who is providing the support and how they have been involved with the development of the proposed project.
21. **Title Guarantee.** Will the Ownership Entity, at a minimum, obtain a Final Iowa Title Guaranty Certificate from IFA with an amount of coverage that is not less than the value of the land and pre-existing improvements, if any, combined with the total Hard Construction Costs of the Project, choose yes or no.
22. **Tenants.** Do pay for any of their utilities, choose yes or no.
23. **Flexible Tenant Selection Criteria.** Will the proposed project create housing units for individuals or families who face multiple barriers to securing permanent housing, choose yes or no. IF yes, describe the anticipated barriers potential tenants face  (multiple barriers may include poor credit, prior evictions, past criminal convictions, poor rental history, and multiple shelter placements) and how the proposed project will help tenants overcome those barriers to achieve and maintain permanent housing. Describe the outreach plan to bring potential tenants into the project.

If participating in a community's Coordinated Entry system, as defined by HUD, describe this. A HUD Coordinated Entry Policy Brief is available here:

<https://www.hudexchange.info/resource/4427/coordinated-entry-policy-brief/>

Project Team Tab

**Enter each team member that will be working with the project**. There should be adequate team members involved to ensure the success of the project. Indicate the length of partnership between team members

Capacity of Team

1. **Developer housing experience in the last five years**. Enter the date, existing project name, and city project is located.
2. **Ownership Entity/General Partner housing experience in the last five years**. Enter the date, existing project name and city project is located.
3. **Management Company housing experience in the last five years**. Enter the date, existing project name, and city project is located.
4. **List all other IFA Programs where an award or financing was received during the past 5 years for developer and ownership entity/general partner**.
5. **Have any of the Project Team members participated in a housing project that received a federal, state or local award or incentive where the project failed to reach completion**. Select yes or no from drop down box. Explain if yes.
6. **Have any of the Project Team members worked on any housing project which has resulted in the initiation or completion of a foreclosure or sheriff's sale proceedings**. Select yes or no from drop down box. Explain if yes.
7. **Have the following Project Team members worked on any housing project/program where they had to repay or forfeit any funds awarded to a federal, state, or local program**. Select yes or no from drop down box. Explain if yes.
8. **Have the following Project Team members worked on any housing project/program that currently has an outstanding noncompliance issue for a federal, state, or local program**. Select yes or no from the drop-down box. Explain if yes.
9. **Have the following Project Team members experienced any turnover in key staff positions in the past two years**. Select yes or no from the dropdown box. Explain if yes.
10. **Name the Project Team member that has National Environmental Protection Act (NEPA) experience**. Provide name, title, company and number of years with NEPA experience. Provide the approximate number of environmental reviews completed by individual.

Staffing Experience – Type of position held must fall into one of the following defined categories

1. **STAFF -** Staff are full-time employees as defined by the IRS. This does not include Board members, volunteers, and consultants who do not have responsibility for day-to-day operations.
2. **CONTRACT EMPLOYEES -** Contract employees are those individuals who are paid but not entitled to receive benefits**.**
3. **PARTNERS -** Partners are those with a legally or contractually defined role in the control of the project decision making (e.g. tax credit investors, joint ventures, etc.).
4. **OTHERS** - Others are consultants, architects, marketing firms, etc.
   1. **Developer Experience**
      1. Rental Projects 1-11 units; 12-48 units; 49-100 units; and/or 100+ units
   2. **Marketing**
      1. Advertising, sales/leasing
   3. **Property Management**
      1. Compliance (program regulations, building codes, and contractual responsibilities)
      2. Property Management
      3. Property Maintenance
      4. Lease/tenant relations (including rent collection, re-leasing, termination, and other tenant-related issues)
      5. Financial Management (bookkeeping, profit & losses, and balance sheets)
      6. Capital Planning (focuses on long term capital replacement, planning, annual updates and management of replacement reserves)
   4. **Contract Management**
      1. Design (engineer and architect)
      2. Construction
      3. Marketing
      4. Property Management
   5. **Owner Experience**
      1. Experience in providing any type of housing or supportive services
      2. Experience in providing housing or supportive services to extremely low-income households
      3. Experience in providing housing or supportive services to extremely low-income households in the proposed project’s market area

Project Timetable **Complete the timeline for the project. This will be inputted into your contract.**

Buildings

1. **General Building Information**. Buildings. Click ***Add New Building***. You will be prompted to enter the following information:
   1. **Address Information.** Enter the address and all other requested information for the project address
   2. **Other Information.** Enter new or acquired, number of stories, number of fully accessible units, number of hearing/visually impaired units, acquisition cost, rehabilitation cost, date building originally constructed, indicate who has control of property, input the date that the property ownership, include utilities that will be provided in rent, indicate building items, provide square footage, and provide any remarks about the building.
   3. **Complete the chart for the units:** type of unit, number of bedrooms, number of bathrooms, net square foot, initial AMI, long term AMI, monthly rent, utility allowance, total housing expense, fair market rent, and NHTF rent limit.
2. **Determine whether the NHTF units will be fixed or floating.** Units must be comparable in size by the bedroom count and square footage of individual units. Not all units with the same number of bedrooms are comparable in size. If there is a substantial difference in the square footage of two units with the same number of bedrooms the units are not considered comparable. All units entered with similar bedroom counts are within 20 square feet in area.

Comparability in amenities means similar fixtures, appliances and other features. In many mixed-income projects, to demand varying rents, the quality and types of amenities may vary among units. For instance, a project manager can demand a higher rent for a unit with wall-to-wall carpeting, garbage disposal, dishwasher and finer fixtures than for a unit without these amenities. This type of project does not typically have comparability of units, unless there is an equal distribution of assisted and non-assisted units that have these amenities. If the units are not comparable in size or amenities the units then must be fixed.

1. **Total Hard Cost of construction/rehab for NHTF-Assisted Units (not per unit).**
2. **Total Hard Cost of construction/rehab for non NHTF-Assisted Units (not per unit).**
3. **HTF Subsidy Per Unit**

Funding Sources & Leverage

**Enter funding sources for the project**. Provide the funding source type, name of entity providing the funding source, if source can be used for NHTF Leverage, type of leverage, the amount, rate, term, amortization, and debt service year.

Budget

**Enter budget line items for the project**. The first column is for other funding sources (non-NHTF), the second column is for NHTF eligible cost.

1. **Purchase Land and Buildings**
2. **Site Work**
3. **Construction**
4. **Professional Fees**
5. **Interim Costs**
6. **Financing Fees and Expenses**
7. **Soft Costs**
8. **Developer’s Fees**
9. **Project Reserve**

Projected Annual Operating Costs

**Input cost for annual operating cost.**

Projected Cash Flow

**Financial Feasibility requirements must be met in order to submit the threshold Application.**

Exhibits **Upload all exhibits that are required for your project.**

Requirements

**Read and at the bottom of the page check the box that “I agree” to the requirements listed on the page.**

Overview

**This tab provides a summary of your application from information that was inputted into the application.**

NHTF Unit Analysis

**This provides an analysis for units from information that was inputted into the application.**

NHTF Threshold Items

1. Financial Feasibility (project and developer)
2. Need
3. Impact on Local Housing
4. Impact of Proposed Activity
5. Capacity (developer and team members)

**\*NOTE: If a project’s application does not meet requirements of the threshold items, the application will not be reviewed any further by IFA.\***

The Table on the next page lists each code reference, description. and whether it is required.

There are 3 Threshold Code reference categories on the Table:

1. Application
2. Federal Regulation
3. State HTF Allocation Plan

| Code Reference | Description | **Required** |
| --- | --- | --- |
| Application | Compliance with IFA Programs  IFA determines, at its discretion, whether the Ownership Entity or its partners listed for the project pass threshold if they are delinquent or out of compliance with another IFA program. | **Yes** |
| Application | Complete Application | **Yes** |
| Application | Flood Zone  No assisted rental unit may be located in an identified or proposed flood zone. | **Yes** |
| Application | Repay/Forfeit Funds  The Ownership Entity/General Partner(s) and Developer have not worked on any housing project/program where they had to repay or forfeit any funds awarded from a federal, state, or local program. | **Must answer & explain** |
| Application | Site Control  Applicant must have site control valid for six months following the NHTF round closing date. | **Yes** |
| Application | Zoning  Property location is zoned correctly or will be prior to construction. | **Yes** |
| Application | Minimum NHTF Subsidy  The NHTF subsidy to the project is at least $1,000 per unit. | **Yes** |
| Application | Radon  All buildings must be tested for radon. Radon gas is measured in picocuries per liter (pCi/L) of air. If a building tests at over 4.0 pCi/L or over, a mitigation system must be installed. | **Yes** |
| Application | Local Support  The application shall demonstrate local support for the proposed activity. | **Yes** |
| Application | NHTF Certification  The application shall include a NHTF certification that the applicant will comply with all applicable state and federal laws and regulations. | **Yes** |
| Application | Evidence of Need  The application shall provide evidence of the need for the proposed activity, the potential impact of the proposed activity, the feasibility of the proposed activity, and the impact of additional housing resources on the existing related housing market. | **Yes** |
| Application & Federal 24 CFR 93.300 | Pro Rata or Fair Share  The total amount of NHTF funds awarded on a per-unit basis cannot exceed the (2012) pro rata or fair share of the total project costs when compared to a similar unit in a rental activity. | **Yes** |
| Federal  24 CFR 5, subpart A | Ineligible Parties  The following parties are not on the U.S. Dept. of HUD’s debarred list: Ownership Entity, General Partner, Co-General Partner, Developer, Co-Developer, and Management Company. | **Yes** |
| Federal  24 CFR 93.150 | Site & Neighborhood Standards  Incorporate the site and neighborhood standards of the NHTF Program as an integral part of the project evaluation process. | **Yes** |
| Federal  24 CFR 93.250 | NHTF Income Limits  All NHTF-assisted units shall be rented to extremely low-income households (at or below 30% AMI). | **Yes** |
| Federal  24 CFR 93.300 | GAP Financing  The application shall show that a need for NHTF assistance exists after all other financial resources have been identified and secured for the proposed activity. | **Yes** |
| Federal  24 CFR 93.300 | NHTF Subsidy Layering  IFA shall evaluate the project in accordance with subsidy layering guidelines adopted by HUD for this purpose. | **Yes** |
| Federal  24 CFR 93.301 | Property Standards  All rental housing shall be constructed in accordance with any locally adopted and enforced building or housing codes, standards and ordinances. In the absence of locally adopted and enforced building or housing codes, the requirements of the state building code shall apply. | **Yes** |
| Federal  24 CFR 93.301 | Handicapped Accessibility Requirement  If new construction, the project must have at least 5% Handicapped Accessible units. (also adaptive reuse) | **Yes** |
| Federal  24 CFR 93.301 | Handicapped Accessibility Requirement  If new construction, the project must have at least 2% Visual/Hearing Handicapped Accessible units. (also adaptive reuse) | **Yes** |
| Federal  24 CFR 93.301 &  24 CFR 35 | Lead Based Paint Requirements  Applicant agrees to use a Lead Safe Renovator for lead based paint issues. (Only required for pre-1978 buildings) | **If pre-1978 project** |
| Federal  24 CFR 93.301 &  24 CFR 51, subpart B | Noise Abatement and Control  The requirements set out in Section 51.104(a) are designed to ensure that interior level noise does not exceed the 45 decibels (dB) level established as a goal in Section 51.101(a)(9) | **Yes** |
| Federal  24 CFR 93.302 | NHTF Rent Limits  NHTF-assisted units meet NHTF rent limits. If a unit receives Federal or [State](https://www.law.cornell.edu/definitions/index.php?width=840&height=800&iframe=true&def_id=26a6338a9b45e985c3cb4e4ae70708dd&term_occur=1&term_src=Title:24:Subtitle:A:Part:93:Subpart:G:93.302) [project](https://www.law.cornell.edu/definitions/index.php?width=840&height=800&iframe=true&def_id=87201aea9b347846b2f9b1dbda295aad&term_occur=2&term_src=Title:24:Subtitle:A:Part:93:Subpart:G:93.302)-based rental subsidy, and the tenant pays as a contribution toward rent not more than 30 percent of the tenant's adjusted income, the maximum rent is the rent allowable under the Federal or [State](https://www.law.cornell.edu/definitions/index.php?width=840&height=800&iframe=true&def_id=26a6338a9b45e985c3cb4e4ae70708dd&term_occur=2&term_src=Title:24:Subtitle:A:Part:93:Subpart:G:93.302) [project](https://www.law.cornell.edu/definitions/index.php?width=840&height=800&iframe=true&def_id=87201aea9b347846b2f9b1dbda295aad&term_occur=3&term_src=Title:24:Subtitle:A:Part:93:Subpart:G:93.302)-based rental subsidy program. | **Yes** |
| Federal  24 CFR 93.400 | Project Timeline  Activity timeline for completing the project is within allowed HUD guidelines. | **Yes** |
| State HTF Allocation Plan | Eligible NHTF Applicant  Application is from a qualified, eligible NHTF applicant. | **Yes** |
| State HTF Allocation Plan | Eligible NHTF Activities  Funds requested are for eligible NHTF activity/activities. | **Yes** |
| State HTF Allocation Plan | Per Unit Dollar Limits  The total amount of NHTF funds awarded on a per-unit basis may not exceed the per unit dollar limitations established in the State of Iowa HTF Allocation Plan. | **Yes** |
| State HTF Allocation Plan | Award Limit  An award shall be limited to no more than $2,700,000 for rental activities. | **Yes** |
| State HTF Allocation Plan | NHTF Purpose and Consolidated Plan  The application shall propose a housing activity consistent with the NHTF purpose and eligibility requirements in the State of Iowa HTF Allocation Plan and the state Consolidated Plan. | **Yes** |
| State HTF Allocation Plan | Capacity  The application shall document the applicant’s capacity to administer the proposed activity. Such documentation may include successful administration of prior housing activities. | **Yes** |

2021 NHTF Key Terms

**Experienced Nonprofit Entity** is defined as a 501(c)(3) nonprofit organization with experience providing housing or supportive services to extremely low-income households in the proposed project’s market area.

**Gut rehabilitation** shall be defined as extensive alteration work to an existing structure including the reconfiguration of space of over 50 percent of the total building area or of an entire occupancy classification within the building.

**Adaptive reuse** shall be defined as conversion of an existing structure from a non-housing use to a housing use in which the existing building had not provided residential housing space for a minimum of three years prior to the date of HTF application submission.

**“Families Experiencing Homelessness”** is defined for HTF scoring purposes as an individual or family who meets the definition of Homeless from the U.S. Department of Housing and Urban Development at 24 CFR Part 91.5. ”[Homeless" Definition-Cornell Law](https://www.law.cornell.edu/cfr/text/24/91.5)

**Fully Accessible Unit Lease Addendum:** The Owner shall lease Accessible Units designed for persons with disabilities to tenants requiring the accessibility features of the unit. The Applicant shall agree to require a lease addendum to be executed by a tenant(s) occupying that Accessible Unit who does not require such Accessible features. In the lease addendum, the tenant shall agree to move to a comparable non-accessible Unit upon the request of the Owner with moving expenses to be paid by the Owner. The lease addendum shall be submitted as part of the HTF Grantee's Administrative Plan. The Project shall maintain use of the lease addendum throughout the Affordability Period.

**Replacement Reserve**: Initial deposit of $700 per unit will be required to establish the replacement reserve account at construction completion. Annual deposits of $350 per unit will be required throughout the NHTF compliance period

**Operating Reserve:** - The project must establish an operating reserve account within one year of construction completion. The initial operating reserve is an eligible NHTF project cost and may be established with NHTF funding. The calculation for the minimum operating reserve is Gross monthly rent amount for all units x 3 months.

Fully Financing Commitment

For all projects proposing private construction and permanent financing, a letter of intent from the lending institution on their letterhead is required. This letter must clearly state the term of the permanent loan, how the interest rate will be indexed and the current rate at the time of the letter, the amortization period, fees, any prepayment penalties, anticipated security interest in the Property and lien position. The letter of intent must extend at least 6 months beyond the Application date due at IFA.