

O 9%Housing Tax Credit

Name of Applicant:

#### Department of Housing & Community Empowerment

## Request for Application Housing Tax Credit Resolutions

Q 4% Housing Tax Credit

Contact Person for quer regarding application, p include e-mail address phone:	olease					
Ownership Entity as it v appear on TDHCA applic						
Public Partner(s), includi and roles of each meml (if applicable):						
Partnership Members, i names and roles of eac member:						
Name of Development as it will appear on TDHCA application:						
Address/Location of Dev	velopment:					
Please describe the dev	relopment:					
Unit Composition	Market Rate Units	Rent Restricted (non-voucher)	Walker Units or Housing Choice Voucher	Continuum of Care Units	Total Number of Units	
Number of Units						
Percentage of Total Units					100%	
					Daga 1	



### **Department of Housing & Community Empowerment**

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Unit mix/types availab	le:					
0 bedroom	1 bedroom	2 bedroom		3 bedroom		4 bedroom
Will this development	focus on a particular	target population?				
If multiple target popu explain:	lations are being serv	red, please				
Property Amenities:						
Current Zoning:		Zoning ch required proposed	nange ? If yes, Izoning.			
Council District:						
Please place an 'X' in the box below, if any of the following apply:						
		One Mile/Three-Yea	ar Rule			
	I	f yes, what project(	(s):			_
	Twice the State Average Per Capita (2x)  Census Tract that has more than 20% Housing Tax Credit Units per total households  40+ % poverty rate/RECAP					
		0+ % poverty rate				
		Project will include		a who a wa la ! :-		
	'	Project will pursue I	инголично ра	artnersnip		



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Does this development qualify as a Priority Housing No. 18 If yes, please include an explanation as a part of the	
Any additional information to be considered:	
Please ensure that the following information is inc	cluded in the application package submitted:
Evidence of Site Control	Certification of Good Standing
Minimum Site Requirements Form	Conflict of Interest Questionnaire
Mitigation Plan (if applicable)	☐ Fair Housing Review Checklist
Proforma Including Projections and Cash Flow	Evidence of Consultation with Planning/Zoning Staff (if applicable)
MOUs with Identified Partners	Proof of Tenant Notification (if applicable)
Map Demonstrating Proximity to Site Amenities	Relocation Plan (if applicable)
Resident Services Checklist	Plan and Cost Review (if applicable)
Evidence of Priority Housing Needs (if applicable)	Capital Needs Assessment (if applicable)
	TDHCA Application (if applicable)
	City of Dallas application form

For additional information or questions regarding this application, please contact our team at HousingLIHTC@dallascityhall.com or 214-670-3644.