

Preliminary Application

#### development infomation

Development Name	

Development Address

### applicant/developer

For the purpose of completing this form, the Applicant/Developer is the Applicant, as defined in the QAP. If there are multiple developer entities, provide a completed Applicant Track Record Certification for each.

Developer Name										
Developer Entity										
Address										
City	Zip									
Phone Email										
Have you had any bankruptcy or foreclo	provide details.		Yes		No					
Have you ever defaulted on a loan? If ye			Yes		No					
Have you ever requested an extension to deadline? If yes, provide details.		Yes		No						
Have you ever requested supplemental f CHFA? If yes, provide details.		Yes		No						
Have you ever missed submitting a Place		Yes		No						
Have you ever missed submitting a Final Application? If yes, provide details.		Yes		No						
For awarded projects in process, have yo		Yes		No						
Have you ever missed a CHFA PAB Pool	details.		Yes		No					
Do any of your Housing Tax Credit (HTC noncompliance issues for which an IRS f		Yes		No						
Have you submitted or are planning to s If yes, how many?		Yes		No						
Do you have any HTC projects which ha If yes, how many?		Yes		No						

#### required attachments

1

- Completed Multifamily Development Experience Worksheet (see page three). Applicants may provide their own list of properties, however, the formatting must be followed and requested information provided.
  Development (Yee) statements form a how
- □ Provide details on any "Yes" statements from above.

#### applicant certification

All Applications and related materials are subject to disclosure under the Colorado Open Records Act ("CORA"), codified at Colorado Revised Statutes Section 24-72-210 et seq. This Applicant Certification is part of the Application and, therefore, constitutes public records within the meaning of CORA and may be subject to public inspection and copying. The Applicant agrees to indemnify CHFA from any claims arising from or related to CHFA's disclosure or nondisclosure of materials submitted to CHFA related to the Certifications.

The undersigned, being duly authorized, hereby represents and certifies that the foregoing information, including all attachments, to the best of his/her knowledge, is true and complete. Misrepresentations of any kind will be grounds for denial or loss of the Housing Tax Creditsand may affect future participations in the Housing Tax Credit program in Colorado.

## signature

signature		
IN WITNESS HEREOF, the applicant(s) ha , 20 .	s caused this document to be duly executed in its name on this	day of
Legal Name of Preparer (Company)		
Ву		
Name		
Title		
STATE OF COLORADO	)	
COUNTY OF	)ss. )	
Acknowledged before me this day of as	, 20 , by , of	
Witness my hand and official seal		
	Notary Public	
My commission expires: IN WITNESS HEREOF, the applicant(s) ha , 20 .	s caused this document to be duly executed in its name on this	day of
Legal Name of Applicant		
Ву		
Name		
Title		
STATE OF COLORADO	)	
COUNTY OF	)ss. )	
Acknowledged before me this day of as	, 20 , by , of	
Witness my hand and official seal		
	Notary Public	

My commission expires:\_

# multifamily development experience worksheet

year of award	year built	award type mkt rate	# of units	project name	location	tax credit	older adult	family	new	rehab	syndicator/investor	project status (award received, under construction, in lease-up, or stabalized)	If stable – percent occupied If under construction – percent complete If awarded – list projected PIS date If in lease-up – percent occupied

Please note: CHFA will accept applicants' documentation as long as it follows the format above with the requested information completed.