



**HOUSING INCENTIVE FUND (HIF)**  
**SINGLE-FAMILY HOUSING APPLICATION**  
PLANNING AND HOUSING DEVELOPMENT DIVISION  
SFN 62451 (02/24)

**APPLICANT(S) INFORMATION**

Applicant/Organization Type			
<input type="checkbox"/> Non-Profit	<input type="checkbox"/> Local Government	<input type="checkbox"/> Tribal Organization	<input type="checkbox"/> Community Land Trust
Other (specify)			
Applicant Name		Federal Taxpayer ID	
Federal UEI Number (if available)		Contact Person	
Mailing Address	City	State	ZIP Code
Telephone Number	Email Address	County	

**CAPACITY AND EXPERIENCE**

Include a narrative labeled Experience Narrative detailing the experience of the applicant in developing single-family housing projects. The narrative should provide examples of completed projects.

Attach the following documents:

- Organizational Structure Documents
- Non-Profit Status
- Proof of Good Standing ND Secretary of State

**PROJECT NEED**

Describe the current housing conditions of the community.
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**GENERAL PROJECT INFORMATION**

Project Name
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**Type of Activity**

Attach a narrative describing the proposed project.

<input type="checkbox"/> New construction of single-family housing;
<input type="checkbox"/> Rehabilitation of existing uninhabitable single-family housing;
<input type="checkbox"/> Rehabilitation of existing of habitable single-family housing;
<input type="checkbox"/> Adaptive reuse of existing non-residential building(s) that create new single-family housing;

**Property Information**

Address of Property(ies)	City	State	ZIP Code
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Number of Units in the Project	County
Type of Unit <input type="checkbox"/> Semi-Detached <input type="checkbox"/> Duplex <input type="checkbox"/> Townhomes/Rowhomes <input type="checkbox"/> Detached Single-Family <input type="checkbox"/> Other	
Construction Type <input type="checkbox"/> Site-Built <input type="checkbox"/> Modular* <input type="checkbox"/> Panelized* <input type="checkbox"/> Other* (specify)	
If not site-built, provide manufacturer and manufacturing location	

**Provide copies of the plans and specifications for each unit proposed.**

### Real Estate Evaluation (Rehabilitation)

Projects proposing rehabilitation must provide a unit evaluation. This can be provided by a certified appraiser or a licensed Realtor.

### Site Information

Does the applicant currently control the site? If yes, provide evidence.	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
If no, is there a plan to purchase through:	
<input type="checkbox"/> Purchase Option	<input type="checkbox"/> Purchase Contract    Expiration Date (attach copy of contract/option)
Is the site currently located in the city limits?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
Check all utilities which are presently located up to or on the site	
<input type="checkbox"/> Public Water	<input type="checkbox"/> Private Well <input type="checkbox"/> Public Sewer <input type="checkbox"/> Private Septic <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas

Provide letters from local utility providers confirming utility access.

Indicate any environmental factors present or in proximity impacting this site, or "None":	
<input type="checkbox"/> None <input type="checkbox"/> 100-yr floodplain <input type="checkbox"/> Airport <input type="checkbox"/> High tension wires <input type="checkbox"/> High noise level	
<input type="checkbox"/> Wetlands <input type="checkbox"/> Hazardous waste <input type="checkbox"/> Railroad tracks w/in 300ft <input type="checkbox"/> Industrial Site <input type="checkbox"/> Creek, river, or lake frontage	
Is the site properly zoned?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
If no, describe the current process and steps taken to resolve the zoning and provide an estimate of when zoning will be resolved.	

### PROPOSED BUDGET

Describe the single-family project budget including how many homes and the amount requested for each home.
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Provide a summary of the project costs including site acquisition, construction/rehabilitation costs, soft costs and developer profit. Total developer fee cannot exceed 15% of the total development costs.

[illegible]

### Per Unit Subsidy Calculation

Total development costs per unit	
Minus the lessor of the sales price per unit, the maximum construction loan per unit or appraised value	
Equals the development subsidy gap per unit	

## Sources of Funds

### Identify all Sources of Funds

[illegible]

## PROJECT TIMETABLE

Provide an estimate of the following project milestones.

Activity	MM/DD/YY
Acquisition	
Zoning/Plat Approval	
Tax Abatement Approval	
Environmental Start Date	
Site Plan Approval	
Building Permit	
Closing and Disbursement of Bridge or Pre-Development Financing	
Closing and Disbursement of Construction Financing	
Construction Start	
Construction Completion	
Sale of Unit	

## APPLICANT CERTIFICATION

The Undersigned Hereby Acknowledges the Following:

1. That this application provided by NDHFA to applicants for funding, including all sections herein relative to project costs, operating costs, and determinations of the amount of assistance necessary to make the project financially feasible, is provided only for the convenience of NDHFA in reviewing applications; that completion hereof in no way guarantees eligibility for the funding; and that any notations herein describing the requirements are offered only as general guides and not as legal authority;
2. That the undersigned is responsible for ensuring that the proposed project will, in all respects, satisfy all applicable requirements of the HIF program and any other requirements imposed upon it by NDHFA at the time of commitment, should one be issued;
3. That NDHFA may request or require changes in the information submitted herewith, and may substitute actual figures for any estimated figures provided therein by the undersigned and may commit assistance, if any, in an amount different from the amount requested;
4. That commitments are not transferable without prior approval by NDHFA;
5. That the requirements for applying for assistance and the terms of any commitment thereof is subject to change at any time by federal or state law, federal, state or NDHFA regulation, or other binding authority; and
6. That a commitment will be subject to certain conditions to be satisfied prior to closing and disbursement of funds.
7. The Applicant shall not, in the provision of services, or in any other manner, discriminate against any person on the basis of race, color, creed, religion, sex, national origin, age, familial status or handicap; and

### Further, the Undersigned Hereby Certifies the Following

8. The applicant shall ensure that all construction complies with the accessible and adaptive design and construction requirements of the Fair Housing Act; and

9. That, to the best of its knowledge and belief, all factual information provided herein or in connection herewith is true and correct and all estimates are reasonable and can be obtained from any source named herein; and
10. That it will at all times indemnify and hold harmless NDHFA against all losses, costs, damages, expenses, and liabilities of any nature or indirectly resulting from, arising out of or relating to NDHFA's acceptance, consideration, approval, or disapproval of this request and the issuance or non-issuance of HIF assistance in connection herewith; and
11. That it provides NDHFA the right to exchange information with other parties as deemed appropriate by NDHFA.
12. **That the applicant, developer, sponsor, contractor, or any other member of the Development Team, including any of their owners, partners, or board members have not been convicted of, entered an agreement for immunity from prosecution for, or pleaded guilty, including a plea of nolo contendere, to a crime of dishonesty, moral turpitude, fraud, bribery, payment of illegal gratuities, perjury, false statement, racketeering, blackmail, extortion, falsification or destruction of records, nor are they currently debarred from contracting opportunities by any agency of the federal or state of North Dakota governments.**

IN WITNESS WHEREOF, the undersigned, being a duly authorized agent of the Applicant, has caused this document to be executed in its name on this      day of      , 20      .

I declare and affirm under the penalties of perjury that the information contained in this application is, to the best of my knowledge and belief, in all things complete, true, and correct.

Legal Name of Applicant	By (Name of Authorized Representative)
Title	
Signature	Date