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### Attachment 1: Application Data Form: Cover Sheet

Existing Development Name(s): \_\_\_\_\_

**Applicant Information**

PHA Number: \_\_\_\_\_

PHA Name: \_\_\_\_\_

PHA Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Main Telephone: \_\_\_\_\_

PHA Executive Director: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

HOPE VI Coordinator: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

HOPE VI Developer (if any): \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

HOPE VI Developer Contact: \_\_\_\_\_ Email Address: \_\_\_\_\_

Program Manager (if any): \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Additional Partner: \_\_\_\_\_ Functional Title: \_\_\_\_\_

Additional Partner: \_\_\_\_\_ Functional Title: \_\_\_\_\_

Street Address, City, State, Zip: \_\_\_\_\_

Existing Project Number(s): \_\_\_\_\_ Neighborhood/  
Area of town: \_\_\_\_\_

New Development Name (if any): \_\_\_\_\_

Mixed Income Proposed? Yes/No \_\_\_\_\_

Mixed Finance Proposed? Yes/No \_\_\_\_\_

**Data Summary**

	Existing	Post-Revitalization
Number of replacement public housing units (on/off-site, including Affordable Lease/Purchase, Affordable Fee Simple Homeownership and Second Mortgage Only--excluding rehabilitated units)		
Number of non-public housing, subsidized units (on/off-site, including homeownership)		
Number of market-rate units (no income restrictions)		
Number of other units		
<b>TOTAL NUMBER OF POST-DEVELOPMENT UNITS</b>		
Number of units to be rehabilitated (excluding acquisition with rehab)		
Number of newly constructed on-site units (including acquisition with rehab)		
Number of newly constructed off-site units (including acquisition with rehab)		
Number of occupied units (at time of application)		
Number of vacant units (at time of application)		

## **Attachment 2: Application Data Form: Existing Units, Occupancy, and Vacancy**

### **Existing Housing Units at Time of Grant Application**

<i>Building Type</i>	<i>Size</i>	<i>Number Occupied</i>	<i>Number Vacant</i>	<i>Total Units</i>	<i>Converted to Non-Dwelling</i>	<i>Demo Planned</i>
<b>Row</b>	0 BR					
	1 BR					
	2 BR					
	3 BR					
	4 BR					
	5 BR					
	6 BR					
	<b>Total</b>					

<b>Detached/ Semi-Detached</b>	0 BR					
	1 BR					
	2 BR					
	3 BR					
	4 BR					
	5 BR					
	6 BR					
	<b>Total</b>					

<b>Walkup</b>	0 BR					
	1 BR					
	2 BR					
	3 BR					
	4 BR					
	5 BR					
	6 BR					
	<b>Total</b>					

<b>Elevator</b>	0 BR					
	1 BR					
	2 BR					
	3 BR					
	4 BR					
	5 BR					
	6 BR					
	<b>Total</b>					

<b>Grand Total</b>						
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### Attachment 3: Application Data Form: Relocation, Income, and Non-Dwelling Structures

**Relocation/Occupancy**

<b>Relocation Strategy</b>	<b>Planned</b>
<i>Original households to be provided Section 8 certificates/vouchers</i>	
<i>Original households to be moved within public housing (on and off-site)</i>	
<i>Original households to move to non-assisted housing/unknown</i>	
<i>Total</i>	

*Number of Section 8 certificates/vouchers requested/received from HUD for this project:*

<b>Requested</b>	<b>Received</b>

*Number of occupied units at time of grant application:*

\_\_\_\_\_

*Projected number of occupied units at time of demolition application approval:*

\_\_\_\_\_

<b>Returning Households</b>	<b>Planned</b>
<i>Number of original households estimated to return to revitalized HOPE VI units (both on-site and off-site):</i>	
<i>Number of these households to be housed in new construction</i>	

<b>Household Income</b>	<b>Existing</b>	<b>Post Development</b>
<i>Average income (as percentage of Median) of public housing residents in development</i>		
<i>Average income (as percentage of Median) of otherwise subsidized residents in neighborhood</i>		
<i>Average income (as percentage of Median) of market-rate residents in the neighborhood</i>		
<b>Resident Profile (not mutually exclusive)</b>		
<i>Total number of residents</i>		
<i>Number of children 6-18 years of age</i>		
<i>Number of senior citizens</i>		
<i>Number of individuals with disabilities</i>		

<b>Non-Dwelling Structure Summary</b>				
<i>Proposed non-dwelling structures (please describe, including type of facility and whether proposing new construction or rehabilitation)</i>	<i>New or Rehab</i>	<i>Square Footage</i>	<i>Total Cost</i>	<i>Cost per Sq. Ft.</i>

**Attachment 4: Application Data Form:  
Proposed Unit Mix Post-Revitalization**

<i>New Construction (include any acquisition w/rehab)</i>						<i>Rehabilitation</i>					
<i>Row: New</i>						<i>Row: Rehabilitation</i>					
<i>Size</i>	<i>Sq. Ft.</i>	<i>ACC Units*</i>	<i>Non-ACC Units**</i>	<i>HOPE VI and/or PH funded HO</i>	<i>Other Home-Ownership</i>	<i>Size</i>	<i>Sq. Ft.</i>	<i>ACC Units*</i>	<i>Non-ACC Units**</i>	<i>HOPE VI and/or PH funded HO</i>	<i>Other Home-Ownership</i>
0 BR						0 BR					
1 BR						1 BR					
2 BR						2 BR					
3 BR						3 BR					
4 BR						4 BR					
5 BR						5 BR					
6 BR						6 BR					
<b>Total</b>						<b>Total</b>					

<i>Detached/Semi-detached: New</i>						<i>Detached/Semi-detached: Rehabilitation</i>					
<i>Size</i>	<i>Sq. Ft.</i>	<i>ACC Units*</i>	<i>Non-ACC Units**</i>	<i>HOPE VI and/or PH funded HO</i>	<i>Other Home-Ownership</i>	<i>Size</i>	<i>Sq. Ft.</i>	<i>ACC Units*</i>	<i>Non-ACC Units**</i>	<i>HOPE VI and/or PH funded HO</i>	<i>Other Home-Ownership</i>
0 BR						0 BR					
1 BR						1 BR					
2 BR						2 BR					
3 BR						3 BR					
4 BR						4 BR					
5 BR						5 BR					
6 BR						6 BR					
<b>Total</b>						<b>Total</b>					

<i>Walkups: New</i>						<i>Walkups: Rehabilitation</i>					
<i>Size</i>	<i>Sq. Ft.</i>	<i>ACC Units*</i>	<i>Non-ACC Units**</i>	<i>HOPE VI and/or PH funded HO</i>	<i>Other Home-Ownership</i>	<i>Size</i>	<i>Sq. Ft.</i>	<i>ACC Units*</i>	<i>Non-ACC Units**</i>	<i>HOPE VI and/or PH funded HO</i>	<i>Other Home-Ownership</i>
0 BR						0 BR					
1 BR						1 BR					
2 BR						2 BR					
3 BR						3 BR					
4 BR						4 BR					
5 BR						5 BR					
6 BR						6 BR					
<b>Total</b>						<b>Total</b>					

<i>Elevator: New</i>						<i>Elevator: Rehabilitation</i>					
<i>Size</i>	<i>Sq. Ft.</i>	<i>ACC Units*</i>	<i>Non-ACC Units**</i>	<i>HOPE VI and/or PH funded HO</i>	<i>Other Home-Ownership</i>	<i>Size</i>	<i>Sq. Ft.</i>	<i>ACC Units*</i>	<i>Non-ACC Units**</i>	<i>HOPE VI and/or PH funded HO</i>	<i>Other Home-Ownership</i>
0 BR						0 BR					
1 BR						1 BR					
2 BR						2 BR					
3 BR						3 BR					
4 BR						4 BR					
5 BR						5 BR					
6 BR						6 BR					
<b>Total</b>						<b>Total</b>					

<b>Grand Total</b>						<b>Grand Total</b>					
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\* ACC units include PH rental, PH/LIHTC, and Affordable Lease/Purchase with HOPE VI and/or PH funds.

\*\* Non-ACC units have no PH or HOPE VI funds and will not be under ACC.

**Attachment 5: Application Data Form: Units, Accessibility, and Concentration**

**Planned  
Units**

<b>Rental Units: ACC</b>							
<i>PH Only</i>		<i>PH/LIHTC</i>		<i>PH/Other</i>		<i>Total ACC</i>	
<i>On-Site</i>	<i>Off-Site</i>	<i>On-Site</i>	<i>Off-Site</i>	<i>On-Site</i>	<i>Off-Site</i>	<i>On-Site</i>	<i>Off-Site</i>

<b>Rental Units: Non-ACC</b>							
<i>LIHTC</i>		<i>CDBG, HOME, or other subsidy</i>		<i>No Income Restrictions</i>		<i>Total Non-ACC</i>	
<i>On-Site</i>	<i>Off-Site</i>	<i>On-Site</i>	<i>Off-Site</i>	<i>On-Site</i>	<i>Off-Site</i>	<i>On-Site</i>	<i>Off-Site</i>

<b>Homeownership Units</b>											
<i>Affordable Lease/Purchase with HOPE VI and/or PH funds</i>		<i>Affordable Fee Simple Homeownership with HOPE VI and/or PH funds</i>		<i>Second Mortgage Only with HOPE VI and/or PH funds</i>		<i>Homeownership with other subsidies (No HOPE VI or PH funds)</i>		<i>Market Rate Homeownership (No subsidies)</i>		<i>Total Homeownership</i>	
<i>On-Site</i>	<i>Off-Site</i>	<i>On-Site</i>	<i>Off-Site</i>	<i>On-Site</i>	<i>Off-Site</i>	<i>On-Site</i>	<i>Off-Site</i>	<i>On-Site</i>	<i>Off-Site</i>	<i>On-Site</i>	<i>Off-Site</i>

<b>Other Units (operating subsidy only, etc)</b>							
<i>Type:</i>		<i>Type:</i>		<i>Type:</i>		<i>Total Other Units</i>	
<i>On-Site</i>	<i>Off-Site</i>	<i>On-Site</i>	<i>Off-Site</i>	<i>On-Site</i>	<i>Off-Site</i>	<i>On-Site</i>	<i>Off-Site</i>

<b>Grand Total</b>	
<i>On-Site</i>	<i>Off-Site</i>
<b>Grand Total - All Units</b>	

**Accessibility**

	<i>Rental Units (including Lease/Purchase) % of Category</i>	<i>Homeownership Units % of Category</i>	<i>Total % of Category</i>
<b>New Construction</b>			
<i>Mobility-Impaired (wheelchair)</i>			
<i>Hearing-Impaired</i>			
<i>Sight-Impaired</i>			
<i>Visitability</i>			

	<i>Rental Units (including Lease/Purchase) % of Category</i>	<i>Homeownership Units % of Category</i>	<i>Total % of Category</i>
<b>Rehabilitation</b>			
<i>Mobility-Impaired (wheelchair)</i>			
<i>Hearing-Impaired</i>			
<i>Sight-Impaired</i>			
<i>Visitability</i>			

**Concentration**

	<i>Pre-Development</i>	<i>Post-Development</i>
Density of on-site development (units per acre)		
Percent of very low income households in the development (30% of median or below)		

## Attachment 6: Application Data Form: Self-Sufficiency, Page 1

**NOTE:** If property is vacant, describe previous residents.

	During Last 12 Months	At Time of Application	At Grant Award	Projected One Year after Grant Award	Projected Two Years after Grant Award	Projected at Close of Grant
<b>A. Graduation from Public Assistance</b>						
Number of households whose primary monthly source of income is:						
Wages/Salary						
TANF						
Other						
<b>B. Employment/Obstacles to Employment</b>						
Number of TANF participants enrolled in job training programs						
Number of non-TANF participants enrolled in job training programs						
Number of unemployed residents placed in:						
Section 3 jobs						
Non-Section 3 jobs						
<b>C. Economic Development</b>						
Number of resident-owned businesses						
<b>D. Section 3</b>						
Dollar amount of HOPE VI contracts going to Section 3 firms						
<b>E. Education</b>						
Number of residents without a high school diploma or G.E.D.						
Number of residents with a high school diploma, G.E.D., or higher degree						
<b>F. Homeownership</b>						
Number of residents in homeownership counseling						
<b>G. Case Management</b>						
If you have a Family Supportive Services program:						
Number of residents enrolled in FSS program						
Dollar amount in escrow accounts						
<b>H. Youth Programs</b>						
Number of youth participating in youth programs						
Number of children participating in day care programs						
<b>I. Health</b>						
Number of partnerships with healthcare agencies (e.g., clinics, hospitals, universities)						
<b>J. Transportation</b>						
Number of residents who use public transportation to get to work or services						



## Attachment 7: Application Data Form: Sources and Uses, Page 1

Uses (\$)*	HOPE VI Uses (\$)	+	Non-HOPE VI Uses (\$)	=	Total
<b>Administration</b>					
Administration	_____		_____		_____
<b>Management Improvements</b>					
Management Improvements - Dev	_____		_____		_____
Management Improvements - CSS	_____		_____		_____
<b>Acquisition</b>					
Site Acquisition	_____		_____		_____
Building Acquisition, Turnkey	_____		_____		_____
Building Acquisition, Rehabilitation	_____		_____		_____
Building Acquisition, Non-Dwelling	_____		_____		_____
<b>Building Remediation/Demolition</b>					
Remediation, Dwelling Units	_____		_____		_____
Demolition, Dwelling Units	_____		_____		_____
Remediation, Non-Dwelling Units	_____		_____		_____
Demolition, Non-Dwelling Units	_____		_____		_____
Demolition, Other	_____		_____		_____
<b>Site Improvements</b>					
Site Remediation	_____		_____		_____
Site Infrastructure	_____		_____		_____
Off-site Improvements	_____		_____		_____
<b>Construction</b>					
Dwelling Structures - Hard Costs	_____		_____		_____
Non-Dwelling - Hard Costs	_____		_____		_____
General Requirements	_____		_____		_____
Builder's Profit	_____		_____		_____
Builder's Overhead	_____		_____		_____
Bond Premium	_____		_____		_____
Hard Cost Contingency	_____		_____		_____
<b>Equipment</b>					
Dwelling Equipment	_____		_____		_____
Non-Dwelling Equipment	_____		_____		_____
<b>Professional Fees/Consultant Services</b>					
Program Management Services	_____		_____		_____
Architectural	_____		_____		_____
Engineering	_____		_____		_____
Construction Management Services	_____		_____		_____
Appraisal	_____		_____		_____
Environmental	_____		_____		_____
Market Study	_____		_____		_____
Historic Preservation Documentation	_____		_____		_____
Other	_____		_____		_____
<b>Legal</b>					
Organizational	_____		_____		_____
Syndication	_____		_____		_____
PHA Outside Counsel	_____		_____		_____
Other	_____		_____		_____
<b>Tax Credit</b>					
Accounting	_____		_____		_____
Tax Credit Application	_____		_____		_____
Tax Credit Monitoring Fee	_____		_____		_____
Consultant	_____		_____		_____
Other	_____		_____		_____
<b>Page 1 Total</b>	\$ _____		\$ _____		\$ _____

