

# 2025 NHTF APPLICATION MANUAL

# 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 checkmark when all information is entered correctly and saved. Some Tabs will have a red X until each tab with corresponding requirements has 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 <a href="mailto:nationalhousingtrustfund@iowafinance.com">nationalhousingtrustfund@iowafinance.com</a>. The questions and answers will be placed on the 2025 NHTF Round webpage. Please do not contact NHTF staff directly.

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, or a successor in interest in the presentation of the Application, in the event NHTF funds are awarded to a proposed Project. Information outside of the development of the housing units will not be included in the contract unless it is essential to the funded project.

Complete Application. Complete Applications for the current NHTF funding round are required to be submitted through the online Application by 4:00 p.m. C.S.T. on September 26, 2025.

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 within 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 deficiency review period unless specifically requested by IFA.

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

The deficiency review period is the one and only opportunity to respond to items in IFA's deficiency report. You are only allowed to upload your responses one time into the application. Once deficiency responses are submitted, you will no longer have access to the application.

Scoring. Scored 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. PROJECTS MUST ALSO EARN A MINIMUM OF HALF THE AVAILABLE POINTS TO BE CONSIDERED FOR AN AWARD.

# APPLICATION SECTIONS

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

#### **General Information**

This manual is a summary of the application; this is not an all-inclusive document.

#### **Project Name & Description Tab**

- 1. **Project Name.** Complete the name of the project. This project name will remain with your project throughout the period of affordability.
- 2. **Project Type.** From the dropdown box select: New Construction, Gut Rehab, Acquisition/New Construction (Adaptive Reuse), or Acquisition/Rehabilitation.
- 3. Occupancy Type. From the dropdown box select: Family.
- 4. **Targeted Population.** From the dropdown box 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, families experiencing homelessness and persons in recovery from substance use disorder.
- 5. **Designated Units.** From the dropdown box select if any of the units are going to be designated: N/A, persons with HIV/Aids, persons with HIV/AIDS that are chronically homeless, homeless persons and families, or homeless persons and families that are chronically homeless.
- 6. **Total project units.** Fill in the number of all units in the project.
- 7. Total project NHTF units. Fill in the number of NHTF units.
- 8. Type of NHTF units. From the dropdown box select: Fixed or Floating.
- 9. **Number of fully accessible units.** Fill in the number of fully accessible units (minimum 5% of NHTF units, round up).
- 10. **Number of units for the hearing/visually impaired.** Fill in the number of hearing/visually impaired units (minimum 2% of NHTF units).
- 11. **Project-based Assistance.** From the dropdown box select: Yes or No. (Yes, if the project will utilize project-based assistance. If yes, a letter of support/intent must also be provided in the exhibits.

12. **CDC Social Vulnerability Index.** From the dropdown box select: Yes or No. (Yes, if the entire project is located within a community located in a county with the following level of vulnerability, based upon Overall SVI, lowa-Statewide comparison for the most recent year in which data is available at the time of application).

- 13. **Describe the Accessory building and area.** Describe the area where the project will be located. If there are any buildings located on the site, please describe what will be done with those building(s) because of the project.
- 14. **Describe commercial facilities.** Describe if there are any commercial facilities new or on the project site and where the funds will come from for these construction costs.
- 15. **Description of the project**. Provide a brief description of the project that may be released to the public.
- 16. Freestanding structure. NHTF funding cannot be used for the rehabilitation or construction of a freestanding structure including detached garages, and/or community centers. If these structures are included in your project, please describe what sources of funds will be used to rehab or construct these structures. (NHTF funding can only be used for the construction of the NHTF units).
- 17. **Need**. Provide a description of the need for the project. This description needs to be specific about your project. How will your project answer the need for the local housing market? The information will provide IFA reviewers with details and make the project competitive with other projects competing for this round of NHTF.
- 18. **Local Support.** Provide a description of the local support for your project. This should specify who is providing the support and how they have been involved with the development of the proposed project.
- 19. **Iowa Title Guaranty.** From the dropdown box select: Yes or No. (Yes, if the Ownership Entity, at a minimum, will 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).
- 20. **Tenants.** From the dropdown box select: Yes or No. (Yes, if the tenants pay for any of their utilities.
- 21. Flexible Tenant Selection Criteria. From the dropdown box select: Yes or No.
- 22. **Environmental Measures.** From the dropdown box select: Yes or no. Will the project implement one or more of the following environmental measures: No Smoking Policy, Water Conserving Measures, and/or In-Unit Energy efficient Water Heaters.

#### **Site Description**

Enter the information for the project site. Please add the legal description of the land. This is needed by IFA to complete documents if the project is to be funded.

**Location near Services.** From the dropdown box select: Yes or no. Will the project be located near the following services: Full-service grocery store, Senior Center, Medical Services, Public Library, Park (city, state or local), Licensed Day Care Center (family projects only), Pharmacy, Community College, Convenience Store.

#### Site Control

Enter the information for the site control entity and if the owner has fee simple ownership and the date of the ownership. Please ensure that if a purchase agreement is needed for the site, that it is good from 9 months after the IFA Board makes 2025 awards.

#### Zoning

Enter the zoning information for the project. If the project is not zoned correctly, please provide a timeline for when the project will be zoned correctly. The project will be held to this timeline, so the project remains on the overall time schedule for the proposed project.

#### **Ownership Entity**

#### Company Name

Address

City

State

Zip

Phone

#### **General Information**

**Entity Type** 

Is the Ownership Entity a non-profit?

UEI#

Tax Identification #

#### **Contact Person**

First and Last Name

Address

City

State

Zip

Phone

Email (Deficiencies will be sent to this address. Ensure that this is an accurate email address, and that this person will be responsible for responding to the deficiency report).

#### **Project Team**

Enter each team member that will be working on the development of the housing project. There should be adequate team members involved to ensure the success of the project. Ensure that each team member listed will have an active role in the proposed project. Indicate the length of partnership between team members. Be sure to add the authorized signatory for the project. NOTE: Only 1 person per team member type can be listed except for team member type "Other".

A developer shall have completed at least one NHTF Project, in Iowa, in which all NHTF Units have been leased and has provided IFA with the completion form for the project before being allowed to submit a subsequent Application. This includes being listed on any Application in any team member role.

#### **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. *From the dropdown box select*: Yes or No. Explain if yes; name the team member and explain.
- 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. From the dropdown box select: Yes or No. Explain if yes; name the team member and explain.
- 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. From the dropdown box select: Yes or No. If yes, name the team member and explain.
- 8. Have the following Project Team members worked on any housing project/program that currently has an outstanding non-compliance issue for a federal, state, or local program. From the dropdown box select: Yes or No. If yes, name the team member and explain.

9. Have the following Project Team members experienced any turnover in key staff positions in the past two years. From the dropdown box select: Yes or No. If yes, name the team member and explain.

- 10. Name the Project Team member that has completed a National Environmental Protection Act (NEPA) process for HUD. An experienced staff or consultant must be prepared to start the environmental immediately, once awards are made. Provide name, title, company, number of years, and the number of environmental ERRs completed.
- 11. Does the Project Team represent capacity with developer experience, marketing experience, property management experience, NEPA experience, and contract management experience? From the dropdown box select: Yes or No. If yes, enter the experience under the applicable category found in the "Staffing Experience For Proposed Project" section. A competitive application should include Team Members who have had a successful development of rental units, including experience in developing, marketing, managing, environmental, and construction.

#### **Staffing Experience for Proposed Project**

Enter individual or company information in each area where there is staffing experience. Type of position held must fall into one of the following defined categories:

- Staff. 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. Individuals who are paid but not entitled to receive benefits.
- **3. Partners.** Legally or contractually defined role in the control of the project decision-making (e.g. tax credit investors, joint ventures, etc.).
- 4. Others. Consultants, architects, marketing firms, etc.

#### **Developer Experience**

Rental Projects 1-11 units; 12-48 units; 49-100 units; and/or 100+ units

#### Marketing

Advertising, sales/leasing

#### **Property Management**

Compliance (program regulations, building codes, and contractual responsibilities)

Property Management

**Property Maintenance** 

Lease/tenant relations (including rent collection, re-leasing, termination, and other tenant-related issues)

Financial Management (bookkeeping, profit & losses, and balance sheets)

Capital Planning (focuses on long term capital replacement, planning, annual updates, and management of replacement reserves)

#### **Contract Management**

Design (engineer and architect)
Construction
Marketing
Property Management

#### **Owner Experience**

Experience in providing any type of housing or supportive services Experience in providing housing or supportive services to extremely

Experience in providing housing or supportive services to extremely low-income households

Experience in providing housing or supportive services to extremely low-income households in the proposed project's market area

#### **Project Timetable**

If awarded funds, the project must be completed within 24 months of the executed contract. Enter your dates into the project timetable.

**NOTE:** It is taking projects five to seven months to complete the environmental process. Please be prepared to start your environmental process immediately to keep your project on a 24-month schedule.

#### **Buildings**

Buildings. Click Add New Building. You will be prompted to enter the following information:
 Address Information. Enter the address and all other requested information for the project address.

**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.

**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. NHTF units are. Select fixed or floating.
- 3. All units entered with similar bedroom counts are within 20 square feet in area. Select Yes/No
- 4. Do all units have similar amenities (fixtures, appliances, floorcoverings, etc.). Select Yes/No.

NOTE: If the units are not comparable in size or amenities the units then must be fixed.

- 5. Total Hard Cost of construction/rehab for NHTF-Assisted Units (not per unit).
- 6. Total Hard Cost of construction/rehab for non-NHTF-Assisted Units (not per unit).

#### **Funding Sources & Leverage**

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

**NOTE:** During this time of uncertain economic stability, it is most likely that other funds will be needed to ensure that the project is successful in getting through construction and rent up, but to also have a stable project through the period of affordability of thirty years.

#### **Budget**

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

- 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** (cannot exceed 15% of the site work, construction, and soft cost items)
- 9. Project Reserve

#### **Projected Annual Operating Costs**

Input cost for annual operating cost.

#### **Projected Cash Flow**

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

#### **Exhibits**

Upload all exhibits that are required for your project.

#### Requirements

Read ALL requirements. Check the box that states "I agree" to the requirements listed on the page. Webinar. Did a member of the applying entity attend or view the NHTF Application webinar?

NOTE: Applicants are *required* to view the webinar. A recording will be posted on the NHTF resources page.

#### **Overview**

This tab provides a summary of your application from the information entered into the application.

#### **NHTF Unit Analysis**

This provides analysis for units from information entered into the application.

#### Scoring Criteria to Projects that pass Threshold.

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

When entering each building's address, please ensure that the number and street name, city, and nine-digit zip code, are correct. If the address does not have a current address provide a parcel number or another way to identify the location of the proposed site.

There are 10 scoring categories:

- 1. Targeted Populations
- 2. Fully Accessible Units
- 3. Utilization of Project-Based Rental Assistance
- 4. CDC Social Vulnerability Index
- 5. Leverage
- 6. Local Support
- 7. IFA Iowa Title Guaranty Certificate
- 8. Zoning
- 9. Nonprofit Ownership
- 10. HTF Subsidy Per Unit
- 11. Successful completion of the Iowa Supportive Housing Institute

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	<u>Points</u>
Targeted Populations	Project Name &	Application has a	0, 10 or 15 pts
	Description	targeted population of:	
		Category A: Families	<b>15 points:</b> Category A
		Experiencing	
		Homelessness	10 points: Category B
		(Homeless persons,	
		including homeless	
		individuals, families,	
		youth and/or veterans,	
		families experiencing homelessness; and/or	
		Category B: persons in	
		recovery from substance	
		use disorder.	
Fully Accessible Units	Buildings	The required percentage	0, 2, 5 or 10 pts.
, / 1000001010 011110		of the HTF-assisted units	-, <u>-</u> ,,
		must be fully accessible	<b>2 pts:</b> At least 10% but
		(not adaptable) as shown	less than 25% of the
		in the plans submitted	HTF-assisted units will be
		with the application.	fully accessible
		"Fully accessible units"	<b>5 pts:</b> At least 25% but
		means a unit designed	less than 50% of the
		and constructed for full	HTF-assisted units will be
		accessibility in	fully accessible
		accordance with Section	<b>10 pts:</b> 50% or more of
		1002 of the International	the HTF-assisted units
		Code of Council (ICC)	will be fully accessible
Litilization of Draigat	Project Name &	A117.1. Points will be awarded to	0, 5, 10 or 15 pts
Utilization of Project- Based Assistance	Description	projects providing	υ, ε, τυ οι τε ρις
Dased Assistance	Description	Exhibit H-30 that show it	<b>5 pts:</b> At least 25%of the
		has Federal Project-	total project units are
		Based Rental	covered by a project-
		Assistance, HUD-VASH	based rental assistance
		Voucher Assistance, or	contract.
		Local Project-Based PHA	<b>10 pts:</b> At least 50% of
		(Public Housing	project units are covered
		Authority) Voucher	by a project-based rental
		Assistance.	assistance contract.
			<b>15 pts:</b> At least 75% of
			the total Project Units are
			covered by a project-
			based rental assistance
			contract

CDC Social Vising and hills	Duildings	Dointo will be awarded	0.2 5 0 10 -4-
CDC Social Vulnerability	Buildings	Points will be awarded	0, 2, 5 or 10 pts
Index		based upon the project located within a	O mto class
			0 pts: low
		community located in a	2 pts: low to moderate
		county with the following	<b>5 pts:</b> moderate to high
		level of vulnerability,	10 pts: high
		based upon Overall SVI,	
		Iowa – Statewide	
		Comparison for the most	
		recent year in which data	
		is available at the time of	
		application submitted.	
		The Social Vulnerability	
		Index (SVI): Interactive	
		Map   CDC	
Leverage	Funding Sources &	The total amount of local,	0, 3, 6, 9 or 15 pts
	Leverage	non-federal funds	
		designated as leverage	<b>0 pts:</b> 0-4% eligible HTF
		(as approved by IFA) will	leverage
		be divided by the amount	3 pts: 5-9% eligible HTF
		of total HTF funds	leverage
		requested.	<b>6 pts:</b> 10-14% eligible
			HTF leverage
		Exclude deferred	<b>9 pts:</b> 15-20% eligible
		developer fee and	HTF leverage
		estimated value of	<b>15 pts:</b> 21% or more
		property tax abatement	eligible HTF leverage
Local Support	Funding Sources &	Points will be awarded if	0 or 5 pts
	Leverage	the applicant	•
		demonstrates a	
		commitment to the	
		proposed Project for	
		property tax abatement	
		or exemption.	
		·	
		A letter signed by the city	
		with the amount	
		committed to the project.	
		Include Resolution if	
		available	
IFA Iowa Title Guaranty	Project Name &	Points will be awarded if	0 or 2 pts
Certificate	Description	the applicant selects on	·
		the application that the	
		Ownership Entity shall	
		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.	
		Cosis of the Floject.	

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 <b>Exhibit</b> , <b>H-31</b> is uploaded with the 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 pts: nonprofit owner with experience providing any type of housing or supportive services 10 pts: nonprofit owner with experience providing housing or supportive services to extremely low-income households 15 pts: nonprofit owner with experience 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.	0 to 10 pts  0 pts: Project with highest subsidy per unit 10 pts: Project with lowest subsidy per unit 1-9 pts: Remaining projects on a sliding scale.
Successful completion of the lowa Supportive Housing Institute	Project Team	Team successfully attended the Institute and received a certificate from Corporation for Supportive Housing.	0 to 5 pts

Tiebreakers	Project Name & Description	If the final scores of more than one application are	TIEBREAKERS
	2.5.5.4	identical, the following tiebreakers criteria will be used:	A: Project is in a community that has not received a HTF award for the longest period of time.
			<b>B:</b> Application requesting the least amount of HTF subsidy per unit.
			C: Board Discretion.

# **RESOURCES**

**IFA Website:** Notices, Application Package, NHTF Exhibits, 2025 NHTF Allocation Plan, NHTF Webinar, and Appendices.

### **NHTF Appendices**

Appendices	Description
Α	Tip Sheet
В	Links
С	NHTF Maximum Per Unit Subsidy Limit
D	Leverage Contribution Information
Е	Underwriting Standards
F	CDC Social Vulnerability Index
G	Appraisal Information
Н	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

#### **NHTF Exhibits**

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

Exhibit #	Description	Required
NH-1	Application Certification – IFA required form	Yes
NH-2	Assurances Signature Page - IFA required form	Yes
NH-3	Applicant/Recipient Disclosure/Update Form (HUD 2880)	Yes
NH-4	W-9 Form (Request for Taxpayer ID number & Certification)	Yes
NH-5	Minority Impact Statement – IFA required form	Yes
NH-6	No Lobbying Certificate – <b>IFA required form</b>	Only if requesting over \$100,000 in NHTF funds
NH-7	Disclosure of Lobbying Activities	If applicable
NH-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
NH-9	Nonprofit Status  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.	Only if Ownership Entity is a nonprofit.
NH-10	Current good standing letter from the Iowa Secretary of State's Office (i.e., a Certificate of Existence or a Certificate of Authority.)	Yes

Exhibit #	Description	Required
NH-11	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 the 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.	Yes
NH-12	Submit all color photos as ONE PDF file.  Letters of Intent from lending institutions for private construction & 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.	Yes
NH-13	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
NH-14	PHA Utilities If tenants pay for any of their utilities, provide a current PHA utilities dated within one year of the NHTF round closing date. If the 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.
NH-15	Market Information for Proposed Project- <b>IFA required form</b> If the project is located in multiple primary market areas, one form is required for each primary market area.	Yes
NH-16	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

Exhibit #	Description	Required
NH-17	Documentation for General Partner/Managing Member & Co-	Only if the Project
	GP/Co-MM	Team includes a
	For LP, LLP, provide:	GP/MM or Co-GP
	- Current Certificate of Limited Partnership	MM
	- Current Signed Partnership Agreement	
	For LC, 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	
NH-18	Document(s) providing evidence of control or ownership of site(s)	Yes
	Provide purchase agreement, the title of the property, title opinion,	
	etc. Must be good through 9 months following the NHTF round	
	closing date.	
NH-19	Map with Site Location(s)	Yes
	Provide a 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	
NH-20	Site Plan(s)	Yes
	Clearly list the following:	
	- Site dimensions	
	- Easements & setbacks	
	- All buildings (including manager's & Accessory Bldgs.)	
	- Parking	
	- Play area	
	- Pool	
NH-21	- Other items	
INH-ZI	Plans & Specifications	Yes
	Clearly list the following:  - Use of all rooms in the bldg. (i.e. exercise room, computer	NOTE: If
	learning center, manager's office, library, craft room, maintenance	requesting points
	room, dining room, etc.)	for fully accessible
	- The square footage of each room in the bldg.	units, this must be
	- Use of all rooms in the units (i.e. bedroom, bathroom, kitchen,	demonstrated on
	living room, etc.)	the plans & specs
	- The square footage of each unit	
	- Designate all handicap accessible units	
NH-22	Leverage Documentation (Both items required)	If applying for
	1) Provide the <b>IFA required form</b>	points for
	Provide a letter from each entity providing leverage (must	Leverage
	be on their letterhead). Each letter must include:	
	- Date	
	<ul> <li>Name of the entity providing the leverage</li> </ul>	
	- Dollar amount of leverage	
	- Description of leverage	
	- Language specifying that the leverage is for the	
	proposed NHTF project	
	Signature of the person authorizing the commitment of leverage	
	funds	

Exhibit #	Description	Required
NH-23	Noise Abatement & Control (1 item required and 2 required if applicable)  1) Provide the IFA required form - Noise Abatement & Control 2) If checked that any noise-sensitive conditions exist, in form 1 above, must also provide a noise assessment that meets HUD federal requirements.	Yes
NH-24	Sellers Acknowledgement Form – IFA required form	Yes
NH-25	Relocation Plan – IFA required form	If there is an occupied existing bldg.(s) on the site
NH-26	Site & Neighborhood Standards IFA required form	Yes
NH-27	Flood Zone Provide FEMA FIRMette map of each site Link: How to Find Your FIRM and Make a FIRMette	Yes
NH-28	3 Yrs. Balance Sheets/Profit & Loss Statements or Non-Profit Audits Provide documentation for the ownership entity. Alternative financial information may be accepted if IFA deems it sufficient.	Yes
NH-29	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
NH-30	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
NH-31	Zoning Provide documentation on the 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 the construction of the proposed project.	If requesting points for zoned correctly at the time of application
NH-32	Iowa Supportive Housing Institute- Provide a letter from the Corporation for Supportive Housing (CSH) denoting completion of the Iowa Supportive Housing Institute.	If requesting points for completing the ISH Institute at the time of application

# THRESHOLD ITEMS

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

Code Reference	<u>Description</u>	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.  Complete Application	Yes
Application	Wetland	Yes
Application	No assisted rental unit may be located in a designated wetland	
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 nine months following the NHTF round closing date.	Yes
Application	Zoning The 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 test at over 4.0 pCi/L or over, a mitigation system must be installed. Suggestion: if new construction a passive system should be installed and then if over the 4.0 pCi/L, then the system could be made active.	Yes
Application	Local Support The application shall demonstrate local support for the proposed activity.	Yes
Application	NHTF Certification The application shall include the NHTF certification, which states 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. If any housing studies have been completed for the area include that information.	Yes

Application & Federal	Pro-Rata or Fair Share	Yes
24 CFR 93.300	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.	
Federal	Ineligible Parties	Yes
		res
24 CFR 5, subpart A	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.	
Federal	Site & Neighborhood Standards	Yes
24 CFR 93.150	Incorporate the site and neighborhood standards	
	of the NHTF Program as an integral part of the	
	project evaluation process.	
Federal	NHTF Income Limits	Yes
		res
24 CFR 93.250	All NHTF-assisted units shall be rented to	
	extremely low-income households (at or below	
	30% AMI).	
HOTMA Act of 2016	The HOTMA regulation was issued by HUD to	
Sections 102, 103, 104	implement Sections 102, 103, and 104 of the	
, ,	Housing Opportunity Through Modernization Act of	
	2016. This updates HUD's regulations of income	
	reviews, definitions of income and assets, and	
	income determinations for families.	
	Implementation of HOTMA begins January 1,	
	2026.	
Federal	GAP Financing	Yes
24 CFR 93.300	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.	
Federal	NHTF Subsidy Layering	Yes
24 CFR 93.300	IFA shall evaluate the project in accordance with	
2 : 3: 1: 33.333	subsidy layering guidelines adopted by HUD for	
Fadana	this purpose.	Vac
Federal	Property Standards	Yes
24 CFR 93.301	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.	
	HUD has recently released the NSPIRE	
Federal 24 CFR 5.70(c		
1 euclai 24 CFR 5.70(C	regulations, which replace the HQS regulations.	
)	Implementation will begin with any NHTF contract	
	signed after October 1, 2025.	
Federal	Handicapped Accessibility Requirement	Yes
24 CFR 93.301	If the project is new construction or adaptive	
	reuse, the project must have at least 5%	
	Handicapped Accessible units.	
Federal	Handicapped Accessibility Requirement	Yes
24 CFR 93.301	If the project is new construction or adaptive	- 55
24 OFR 93.301		
	reuse, the project must have at least 2% Visual/Hearing Handicapped Accessible units.	

Federal	Lead-Based Paint Requirements	If pre-1978 project
24 CFR 93.301 &	Applicants agree to use a Lead-Safe Renovator for	
24 CFR 35	lead-based paint issues. (Only required for pre-	
	1978 buildings)	
Federal	Noise Abatement and Control	Yes
24 CFR 93.301 &	The requirements set out in Section 51.104(a) are	
24 CFR 51, subpart B	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)	
Federal	NHTF Rent Limits	Yes
24 CFR 93.302	NHTF-assisted units meet NHTF rent limits. If a	
	unit receives Federal or State project-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 project-	
	based rental subsidy program.	1.5
Federal	BABA Act	Yes
BABA Act, 41 USC	Grantee must comply with the requirements of the	
8301	Build America, Buy America (BABA) Act, 41 USC	
	8301 note, and all applicable rules and notices, as	
	may be amended, if applicable to the Grantee's	
	infrastructure project. Pursuant to HUD's Notice,	
	"Public Interest Phased Implementation Waiver for	
	FY 2022 and 2023 of Build America, Buy America	
	Provisions as Applied to Recipients of HUD	
	Federal Financial Assistance" (88 FR 17001), any funds obligated by HUD on or after the applicable	
	listed effective dates (August 23, 2024), are	
	subject to BABA requirements, unless excepted by	
	a waiver.	
Federal	Project Timeline	Yes
24 CFR 93.400	The Activity Timeline for completing the project is	103
24 01 10 00.400	within allowed HUD guidelines.	
State HTF Allocation	Eligible NHTF Applicant	Yes
Plan	The application is from a qualified, eligible NHTF	
1 1611	applicant.	
State HTF Allocation	Eligible NHTF Activities	Yes
Plan	Funds requested are for eligible NHTF	
. 1911	activity/activities.	
State HTF Allocation	Per Unit Dollar Limits	Yes
Plan	The total amount of NHTF funds awarded on a	• • •
1	per-unit basis may not exceed the per-unit dollar	
	limitations established in the State of Iowa HTF	
	Allocation Plan.	
State HTF Allocation	Award Limit	Yes
Plan	An award shall be limited to HUD's cap-per unit.	
	The 2025 HUD award is \$2.3 million.	
State HTF Allocation	NHTF Purpose and Consolidated Plan	Yes
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.	
<u> </u>	1	<u>.                                    </u>

State HTF Allocation	Capacity	Yes
Plan	The application shall document the applicant's	
	capacity to administer the proposed activity. Such	
	documentation may include successful	
	administration of three years of prior housing	
	activities.	

# 2025 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 the 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 NHTF application submission.

**Families Experiencing Homelessness** is defined for NHTF 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

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 NHTF Grantee's Administrative Plan. The Project shall maintain use of the lease addendum throughout the Period of Affordability.

Replacement Reserve: Initial deposit of \$800 per unit will be required to establish the replacement reserve account at construction completion. Annual deposits of \$400 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 the "gross monthly rent amount for all units x 6 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.