

# BROCKTON REDEVELOPMENT AUTHORITY



## APPLICATION FOR FEDERAL HOME INVESTMENT PARTNERSHIPS PROGRAM FUNDS FOR DEVELOPMENT PROJECTS

**ROLLING APPLICATION (subject to availability of funds)**

Program/Activity: \_\_\_\_\_

Submit the following:

- 1 signed original copy on 3-hole punch, white paper 8.5" x 11"; **and**
- 1 electronic copy to [zandrade@brocktonredevelopmentauthority.com](mailto:zandrade@brocktonredevelopmentauthority.com).

If you have any questions or need assistance, please contact the Brockton Redevelopment Authority at 508-586-3887.

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**CITY OF BROCKTON  
HOME FUNDING APPLICATION PACKET FOR DEVELOPMENT PROJECTS**

Executive Summary

Please insert an Executive Summary of the Proposed Project no longer than one page. It should provide the Mayor with the ability to understand who is proposing to develop the project, the location of the project, a description of the project, the funding of the project including the amount of HOME funds being requested.

## SECTION A: Developer and Project Information

### Part 1: Applicant Information

**Table 1: Applicant Information**

Name of Organization or Development Entity	Click here to enter text.	
Street Address	Click here to enter text.	
City, State, Zip	Click here to enter text.	
Telephone Number	Click here to enter text.	
Fax Number	Click here to enter text.	
Federal ID Number	Click here to enter text.	
DUNS Number (if available)	Click here to enter text.	
Executive Director	Click here to enter text.	
Project Contact Person	Click here to enter text.	
Telephone Number	Click here to enter text.	
E-Mail Address	Click here to enter text.	
Type of Applicant (Check one)		
Unit of Government (specify)	Click here to enter text.	<input type="checkbox"/>
Public Agency (specify)	Click here to enter text.	<input type="checkbox"/>
Non-Profit Developer (unless CHDO affiliated)		<input type="checkbox"/>
For-Profit Developer (unless CHDO affiliated)		<input type="checkbox"/>
CHDO		<input type="checkbox"/>

Please provide, in the Attachments indicated, the following basic information about the Applicant. The Applicant for this purpose shall include the lead organization any other partners such as non-profit and/or for profit developers. This information does not need to be in an original form; copies of relevant sections from sources such as an organization's basic funding proposals are adequate as long as the needed information is conveyed.

Organizational Information [See Attachment 1]

Please provide the following information as well:

<b>1. <u>Developer Name:</u></b>	Developer's name.				
<b>Address 1</b>	Enter Address 1.				
<b>Address 2</b>	Enter Address 2.				
<b>City</b>	City.	<b>State</b>	State.	<b>Zip</b>	Zip Code
<b>Contact Person First</b>	First.		Last	Last Name.	
<b>Telephone:</b>	Phone #.		<b>Extension</b>	Extension.	
<b>E-mail:</b>	Insert E-Mail.				
<input type="checkbox"/>	Minority Business Enterprise (MBE)				
<input type="checkbox"/>	Women Business Enterprise (WBE)				

2. Other Development Partners (If private, for profit, see section below on joint ventures)

<b>2. <u>Partner # 1 Name:</u></b>	Partner's name.				
<b>Address 1</b>	Enter Address 1.				
<b>Address 2</b>	Enter Address 2.				
<b>City</b>	City.	<b>State</b>	State.	<b>Zip</b>	Zip Code
<b>Contact Person First</b>	First.		Last	Last Name.	
<b>Telephone:</b>	Phone #.		<b>Extension</b>	Extension.	
<b>E-mail:</b>	Insert E-Mail.				
<input type="checkbox"/>	Minority Business Enterprise (MBE)				
<input type="checkbox"/>	Women Business Enterprise (WBE)				
<input type="checkbox"/>	<b>LLC</b>	<input type="checkbox"/>	<b>LLP</b>		

**2. Partner # 2 Name:** Partner's name.

**Address 1** Enter Address 1.

**Address 2** Enter Address 2.

**City** City. **State** State. **Zip** Zip Code

**Contact Person First** First. Last Last Name.

**Telephone:** Phone #. **Extension** Extension.

**E-mail:** Insert E-Mail.

Minority Business Enterprise (MBE)

Women Business Enterprise (WBE)

LLC

LLP

**2. Partner # 3 Name:** Partner's name.

**Address 1** Enter Address 1.

**Address 2** Enter Address 2.

**City** City. **State** State. **Zip** Zip Code

**Contact Person First** First. Last Last Name.

**Telephone:** Phone #. **Extension** Extension.

**E-mail:** Insert E-Mail.

Minority Business Enterprise (MBE)

Women Business Enterprise (WBE)

LLC

LLP

3. Development Consultant [if any]

<b>3. <u>Consultant Name:</u></b> Partner's name.					
<b>Address 1</b>		Enter Address 1.			
<b>Address 2</b>		Enter Address 2.			
<b>City</b>	City.	<b>State</b>	State.	<b>Zip</b>	Zip Code
<b>Contact Person First</b>	First.	<b>Last</b>	Last Name.		
<b>Telephone:</b>	Phone #.	<b>Extension</b>	Extension.		
<b>E-mail:</b>	Insert E-Mail.				
<input type="checkbox"/> Minority Business Enterprise (MBE)					
<input type="checkbox"/> Women Business Enterprise (WBE)					

4. Architect

<b>4. <u>Design Team (Architect/Engineer) Name</u></b> Partner's name.					
<b>Name:</b>					
<b>Address 1</b>		Enter Address 1.			
<b>Address 2</b>		Enter Address 2.			
<b>City</b>	City.	<b>State</b>	State.	<b>Zip</b>	Zip Code
<b>Contact Person First</b>	First.	<b>Last</b>	Last Name.		
<b>Telephone:</b>	Phone #.	<b>Extension</b>	Extension.		
<b>E-mail:</b>	Insert E-Mail.				
<input type="checkbox"/> Minority Business Enterprise (MBE)					
<input type="checkbox"/> Women Business Enterprise (WBE)					

5. Attorney

<b>5. Attorney Name:</b>	Partner's name.				
<b>Address 1</b>	Enter Address 1.				
<b>Address 2</b>	Enter Address 2.				
<b>City</b>	City.	<b>State</b>	State.	<b>Zip</b>	Zip Code
<b>Contact Person First</b>	First.		Last	Last Name.	
<b>Telephone:</b>	Phone #.		<b>Extension</b>	Extension.	
<b>E-mail:</b>	Insert E-Mail.				
<input type="checkbox"/>	Minority Business Enterprise (MBE)				
<input type="checkbox"/>	Women Business Enterprise (WBE)				

6. Management Agent (or plan & schedule for selection)

<b>6. Property Management Name:</b>	Partner's name.				
<b>Address 1</b>	Enter Address 1.				
<b>Address 2</b>	Enter Address 2.				
<b>City</b>	City.	<b>State</b>	State.	<b>Zip</b>	Zip Code
<b>Contact Person First</b>	First.		Last	Last Name.	
<b>Telephone:</b>	Phone #.		<b>Extension</b>	Extension.	
<b>E-mail:</b>	Insert E-Mail.				
<input type="checkbox"/>	Minority Business Enterprise (MBE)				
<input type="checkbox"/>	Women Business Enterprise (WBE)				



## 7. Marketing Organization

<b>7. Marketing Organization Name:</b> Partner's name.					
<b>Address 1</b>		Enter Address 1.			
<b>Address 2</b>		Enter Address 2.			
<b>City</b>	City.	<b>State</b>	State.	<b>Zip</b>	Zip Code
<b>Contact Person First</b>		First.	Last	Last Name.	
<b>Telephone:</b>		Phone #.	<b>Extension</b>	Extension.	
<b>E-mail:</b>		Insert E-Mail.			
<input type="checkbox"/> Minority Business Enterprise (MBE)					
<input type="checkbox"/> Women Business Enterprise (WBE)					

*Please attach Affirmative Fair Marketing Plan if the project will contain 5 or more HOME assisted units. (For information see Application Packet Part II Appendix F)*

8. Joint Ventures: If the applicant is involved in a joint venture with a CHDO, provide evidence that the CHDO (partner) controls and will maintain the majority interest in the joint venture.

Click here to enter text.

9. Also please provide, in Attachments 1, 2 and 3 the following basic information about any Partner/s. This information does not need to be in an original form; copies of relevant sections from sources such as an organization's basic funding proposals are adequate as long as the needed information is conveyed.

1. Organizational Information: Attachment 1
2. Financial Information – Attachment 2
3. Capacity Analysis – Attachment 3

**Part 2. Project Information<sup>1</sup>**

Project Title	Click here to enter text.
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**Project Location**

Address 1	Insert Address				
Address 2	Insert Address				
City	City	State	State	ZIP	Zip Code
Census Tract #:	Indicate Census Tract.				

**Table 2: Project Type**

Type of Project (Check one)	
Rental Housing New Construction	<input type="checkbox"/>
Rental Housing Substantial Rehab <sup>2</sup>	<input type="checkbox"/>
Rental Housing Moderate Rehab	<input type="checkbox"/>
Homeownership New Construction	<input type="checkbox"/>
Homeownership Substantial Rehab	<input type="checkbox"/>
Homeownership Moderate Rehab	<input type="checkbox"/>
Homeownership Acquisition only	<input type="checkbox"/>
Other Explain	<input type="checkbox"/>
HOME Funds Requested	\$Amount

<sup>1</sup> If the project is located on more than one site, the following information is needed for each site.

<sup>2</sup> Substantial Rehab refers to projects which under the State Building code must meet new construction standards. Moderate rehab refers to all other rehab projects.

**Table 3: Development Type**

Type of Development (Check all that apply)	
Scattered Site	<input type="checkbox"/>
Town House	<input type="checkbox"/>
Apartment Building	<input type="checkbox"/>
Mixed Use (residential and commercial)	<input type="checkbox"/>
Mixed Income (market and subsidized)	<input type="checkbox"/>
Mixed Subsidy (HOME plus other)	<input type="checkbox"/>
-Specify Other (eg Tax Credits, PBV, etc)	<input type="checkbox"/>
Specify Other Sources	

**Table 4: Project Schedule of Units**

Unit Distribution	Total	1BR	2BR	3BR	4+BR
# of Project Units	Units	Units	Units	Units	Units
# of Project Square Feet	Units	Units	Units	Units	Units
# of HOME Units in Project	Units	Units	Units	Units	Units
Market Rate Unit Rents	\$Rate	\$Rate	\$Rate	\$Rate	\$Rate
Below Market Unit Rents (excluding HOME units)	\$Rate	\$Rate	\$Rate	\$Rate	\$Rate
HOME Unit Rents – High	\$Rate	\$Rate	\$Rate	\$Rate	\$Rate
HOME Unit Rents – Low	\$Rate	\$Rate	\$Rate	\$Rate	\$Rate

**Table 5: Intended Occupants**

Who are the intended occupants of the project? Insert number for each income category <sup>3</sup>	ELI	VLI	LI	Market
Families	Number	Number	Number	Number
Disabled	Number	Number	Number	Number
Special Needs (other than disabled) Specify	Number	Number	Number	Number
Elderly	Number	Number	Number	Number

<sup>3</sup> Market Above 80% of Median  
LI Low Income (50-80%) Occupancy  
VLI Very Low Income (50% or below) Occupancy  
ELI Extremely Low Income (30% or below) Occupancy

Who are the intended occupants of the project? Insert number for each income category <sup>3</sup>	ELI	VLI	LI	Market
Other	Number	Number	Number	Number

**Table 6: Other Project Information**

Other Project Information	
Site area in square feet	Site Area
Hard Cost per square foot	\$Amount
Soft Cost per square foot	\$Amount

Please provide a summary of the financial information below and in Attachment 2 provide details of the sources listed

**Table 7: Sources of Financing**

Major Sources of Funding, Amount and Status	Committed	Applied For	Proposed
CHDO Equity	\$Amount	\$Amount	\$Amount
Partner Equity	\$Amount	\$Amount	\$Amount
Tax Credit Investor/s	\$Amount	\$Amount	\$Amount
Private Loans	\$Amount	\$Amount	\$Amount
HOME Funds	\$Amount	\$Amount	\$Amount
HOME CHDO set-aside funds	\$Amount	\$Amount	\$Amount
Other Funds [list separately below]	\$Amount	\$Amount	\$Amount
Source	\$Amount	\$Amount	\$Amount
Source	\$Amount	\$Amount	\$Amount
Source	\$Amount	\$Amount	\$Amount
Source	\$Amount	\$Amount	\$Amount

Will the project require HOME funds prior to construction? Yes or No

Will the project require relocation of existing tenants or businesses? Yes or No

Please indicate which of the needs and/or strategies identified in the City of Brockton HOME Five-Year Consolidated Plan (Application Packet Part II Appendix H) this project addresses. Please explain how the proposed activity/project will address the need and/or strategy identified above. Applicants may respond in the space provided.

Please indicate whether your activity could be funded with a grant over multiple years, or if the entire amount will be needed in the first year. If multiple, years, how many?

**Table 8: Phasing of Funds**

One Year	Two Years	More than Two Years	If more than Two how Many Years?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Click here to enter text.</a>

**Please answer, in typed form, the questions listed below. If additional sheets are needed please insert and have the relevant question appear above the response.**

1. Site/Zoning:

- a) Describe the site (size, topography, current use, etc.) in narrative.

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- b) Describe what factors went into selecting this location. Indicate current zoning, and describe any zoning changes, environmental approvals, or other regulatory approval required to implement the proposed development project.

- c) Please provide a brief summary sheet of what submittals/permits will be required for this project, which have been submitted, and the status of those submitted e.g. (not submitted as yet, under review, approved).

- d) Document evidence of local municipal regulatory approvals granted and describe support or resistance from neighborhood organizations, abutters or municipal regulatory/permitting authorities.

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e) Please provide evidence of comprehensive permit or ZBA restrictions/decisions regarding project as an attachment.

f) Will the activity disturb land previously not disturbed?

g) To the best of your knowledge, is there anything of historical or archaeological significance in the area? *Please note: An environmental review including historic clearance of the project site must be completed prior to project commitment.*

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- h) If the proposed project does not have adequate infrastructure but has approvals or commitments to provide such, please submit documentation delineating such approvals and/or commitments.

- i) Is the proposed project new construction? If so, a Site and Neighborhood Standards review will be completed by the City of Brockton. See Part II of the Application Packet Appendix A.

2. Site and Unit Plans, Maps: Provide one set of site plan, locus map, floor plans and elevations. Include on the plans the square footage of the various unit types.



3. Site Control: Provide status of ownership, and describe plans to acquire site control. If site control has been established, provide evidence of option, purchase and sale or title.<sup>4</sup>

4. Purpose of Assistance Requested: Describe the need (gap), type and amount of funding requested from HOME and how funds will further the progress of the proposed project.

5. What is the proposed schedule for the development?

**Table 9 – Pre-Construction Period Schedule**

Proposed Item	Submitted	Approved
Planning and Zoning Approvals	Click here to enter a date.	Click here to enter a date.
Construction/Development Loan	Click here to enter a date.	Click here to enter a date.
Other Pre-construction approvals(Specify)	Click here to enter a date.	Click here to enter a date.
1.	Click here to enter a date.	Click here to enter a date.
2.	Click here to enter a date.	Click here to enter a date.

<sup>4</sup> In the case of a purchase and sale agreement or option or other contingent purchase plan, note that there must be access to the site for environmental and other reviews and the term of the agreement including renewals must match the projected period for selection by the City of Brockton through issuance of a building permit.

3.	Click here to enter a date.	Click here to enter a date.
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**Table 10 – Development Schedule**

Construction Start Date	Click here to enter a date.
Certificate of Occupancy Date	Click here to enter a date.
Marketing Commences	Click here to enter a date.
Sale of All Units (Homeownership Projects) is Completed	Click here to enter a date.
Rent-Up or Sustaining Occupancy Reached	Click here to enter a date.
Rental Property Management Commences	Click here to enter a date.
Other (Specify)	Click here to enter a date.

6. Has the project been assessed for lead-based paint? Choose an item.

If yes, does the project contain lead-based paint? Choose an item.

If the project contains lead-based paint, attach an explanation detailing how it will be addressed, and who will be responsible for such. *Please note: you will be required to provide documentation of proper inspections and certification for any LBP work prior to project commencement and a letter of full de-leading compliance or dust wipe clearance will be required prior to occupancy.*

If no, is a lead-based assessment planned? Choose an item.

If a lead-based assessment is not planned, why not?

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7. Has the project been assessed for asbestos content? Choose an item.

If yes, does the project contain asbestos? Choose an item.

If the project contains asbestos, attach an explanation detailing how it will be removed or addressed, and who will be responsible for such. *Please note: you will be required to provide documentation of proper inspections and certification for any asbestos work prior to project commencement and air quality and disposal certification/documentation required before occupancy.*

If no, is an asbestos assessment planned? Choose an item.

If an asbestos assessment is not planned, why not?

8. Has the project been assessed for other hazardous materials?<sup>5</sup> Choose an item.

If yes, what other hazards exist?

\_\_\_\_\_  
If the project contains other hazards, attach an explanation detailing how the hazards will be removed or addressed, and who will be responsible for such. *Please note: you will be required to provide documentation of any fore-mentioned hazards and how they were remediated and/or disposed of prior to occupancy of building.*

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<sup>5</sup> Please note that the City of Brockton will conduct an Environmental Assessment of the project before the execution of the HOME Agreement. All project costs should be included in the development pro-forma. The HOME administrator can provide an estimated cost.

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If no, are any other assessments planned? \_\_\_\_\_ Yes \_\_\_\_\_ No

If other assessments are not planned, why not?

9. Market Analysis: Provide data and information as required in Attachment 4

10. Accessibility/Adaptability: Describe plans for handicapped accessibility and/or adaptability if appropriate for population to be served and how project will comply with 504 regulations.

11. Special Needs: If in Table 4 you indicated that you will serving a special needs population indicate why this group was chosen what supportive services will be provided and who will be providing them?



14. Affirmative Contracting Action: Describe and document what steps will be taken to affirmatively solicit the selection of contractors and buyers/renters for this project. Include experience and record of affirmative action on prior projects.<sup>6</sup>

15. Affirmative Fair Marketing Plan: Describe and document what steps will be taken to affirmatively solicit and market to buyers/renters for HOME assisted units in this project (if applicable). Attach any approved plan. Include experience and record of affirmative marketing on prior projects.<sup>7</sup>

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<sup>6</sup> Please note that a Section 3 Compliance Plan may be required. See Application Packet Part II Appendix D

<sup>7</sup> As noted above, if the number of units in the project exceed 4, an Affirmative Fair Housing Marketing Plan will be required.

16. Labor Rates: What labor rates are being used? Projects of 12 or more units Davis Bacon rates are required.

17. Section 3 Plan: Is there a Section 3 Plan? See Part II of the Application Packet Appendix D for a Summary Guide.

18. Provide Interim Management Plan: Interim management is the period during development when units become occupied and when the contractor has finished the construction and CofOs have been issued for all the property.

19. Provide Permanent Management Plan: Permanent management is the period from CofO through the affordable housing restriction period ends. Attach a description of who will be managing the development and how they will handle the maintenance, the finances, any capital replacement, tenant relations (including leasing, evictions, issues etc.) and other property management functions.



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## SECTION B. Applicant Certification and Commitment of Responsibility

As the official designated by the Applicant, I hereby certify that if approved by the City of Brockton for a HOME funding allocation, that [Click here to enter text](#). (Applicant name) assumes the responsibilities specified in the HOME regulations and certifies that:

- A. It possesses the legal authority to apply for the allocation and to execute the proposed activity;
- B. It has resolved any audit findings for the prior fiscal year to the satisfaction of the City of Brockton or any other federal agency by which a finding was made;
- C. It is not currently suspended or debarred from receiving federal funds;
- D. If a CHDO, its board composition complies with and will continue to comply with the requirements for CHDOs in the definition contained in 24 CFR Section 92.2;
- E. It will comply with all statutes and regulations governing the HOME program;
- F. The information, statements and attachments contained in support of this application is given for the purpose of obtaining financial assistance from the City of Brockton is true and correct to the best of my knowledge and belief. Representations made in the application will be the basis of the written HOME agreement if funding is awarded. All information contained in this application is acknowledged to be public information;
- G. The applicant understands and agrees that if false information provided in this application has the effect of increasing the applicant's competitive advantage, the City of Brockton will disqualify the applicant and may hold the applicant ineligible to apply for HOME funds until any issue of restitution is resolved;

- H. If false information is discovered after the award of HOME funds, the City of Brockton may terminate the applicant's written agreement and recapture all HOME funds expended;
- I. The applicant shall not, in the provision of services, or in any other manner discriminate against any person on the basis of race, religion, sex, national origin, familial status, or handicap.
- J. The applicant agrees that verification of any of the information contained in this application may be obtained from any source named herein.
- K. The applicant will at all times indemnify and hold the City of Brockton harmless against all losses, costs, damages, expenses, and liabilities of any nature directly or indirectly resulting from, arising out of or relating to the City of Brockton's acceptance, consideration, approval, or disapproval of this request and the issuance or non-issuance of HOME funds herewith.

**This certification must be signed by the individual authorized to submit the application as determined by applicant's governing board of directors and who will be authorized to execute HOME Program agreements. Please attach authorization certification.**

\_\_\_\_\_  
Authorized Signature

Click here to enter text.  
Title

Click here to enter text.  
Print Name

Click here to enter a date.  
Date

## ATTACHMENT 1: ORGANIZATIONAL INFORMATION

**NOTE: If developer is requesting CHDO set-aside funds, complete Attachment 1A, otherwise complete Attachment 1B**

### ATTACHMENT 1A: CHDO ORGANIZATIONAL INFORMATION

Evidence of CHDO status:

Yes       No       Has your organization been designated in the past as a CHDO for the City of Brockton? If yes, please provide a copy of the designation letter.

Yes       No       Has your organization received City of Brockton CHDO set-aside funds in the past 3 years? If yes, when were the funds received?

\_\_\_\_\_

If you answered “No” to **EITHER** question above your organization must be designated as a CHDO for the City of Brockton prior to the commitment of CHDO set-aside funds. Please contact the Brockton Redevelopment Authority at (508) 586-3887 to obtain the City of Brockton’s CHDO Certification Application.

If you answered “Yes” to **BOTH** of the questions above your organization must be recertified as a CHDO. Please contact the Brockton Redevelopment Authority (508)586-3887 for the City of Brockton’s CHDO Recertification Application.

Describe any proposed or existing Partnership structure with the CHDO - identifying owner and/or general partners as registered with the Secretary of State or proposed to be registered.<sup>8</sup>

### **CHDO History of Performance**

On a separate sheet, please list all projects the applicant has participated in or administered (regardless of whether they were funded with HOME funds) in the last ten (10) years. *Insert list after this page in submittal.*

Indicate the following for each project:

- Project Name
- Project Type (Ownership or Rental)
- Indicate whether the CHDO owns and manages, owns only or manages only
- Funding Sources
- New construction or Rehabilitation

<sup>8</sup> Please be advised the CHDO must maintain controlling interest in any Partnership, (see HOME regulations for CHDO role as owner, sponsor, or developer).

- Number of units
- Low income housing
- Project Status (Abandoned, underway, or completed)
- Performance – Identify if any projects have been foreclosed or restructured

*Insert items requested above after this page in submittal.*

Please refer to Appendix J for CHDO Requirements, including Checklists.

#### **ATTACHMENT 1B: DEVELOPER AND/OR PARTNERS**

1. Corporation Papers of any Developers or Partners

*Insert items requested above after this page in submittal.*

#### **Development Entities' History of Performance [Insert separate charts for each Partner if more than one]**

On a separate sheet, please list all projects the applicant has participated in or administered (regardless of whether they were funded with HOME funds) in the last ten (10) years.

Indicate the following for each project:

- Project Name
- Project Type (Ownership or Rental)
- Funding Sources
- New construction or Rehabilitation
- Number of units
- Low income housing
- Project Status (Abandoned, underway, or completed)
- Performance – Identify if any projects have been foreclosed or restructured

*Insert list after this page in submittal.*

## ATTACHMENT 2: FINANCIAL INFORMATION

***To be completed by all developers, including CHDOs.***

1. Financial profile - provide documents as requested in the Application Packet.
2. Evidence of Chapter 180, 501(c) (3) or other tax status.
3. Most recent A-133 audit (if applicable)
4. Provide a lender reference. The Lender should be familiar with the Developer/CHDO/Partner/s professional development experience, and not just the developer's credit worthiness.
5. List below the entities that are financially involved in this project

Name of Entity	Address	Contact Information	Documents verifying involvement attached Y/N <sup>9</sup>
Click here to enter text.	Click here to enter text.	Click here to enter text.	Choose an item.
Click here to enter text.	Click here to enter text.	Click here to enter text.	Choose an item.
Click here to enter text.	Click here to enter text.	Click here to enter text.	Choose an item.
Click here to enter text.	Click here to enter text.	Click here to enter text.	Choose an item.

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<sup>9</sup> Attach additional documentation, such as Memoranda of Understanding, award letters, agreements, etc. If the applicant has submitted a One-Stop Application to the Commonwealth of Massachusetts, please submit a copy the application and the status of (approved or under consideration) the application.

**ATTACHMENT 3: CAPACITY ANALYSIS**

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## CAPACITY ANALYSIS FOR HOME PROJECTS

The information required below is the City of Brockton's assessment of what is needed in order to determine that the proposed project for HOME investment is proposed by a team which has the capacity to make the proposed project successful.

The City of Brockton needs information from you which will enable it to assess the experience of the team and ensure that all the critical components for developing and managing a HOME assisted project have corresponding team and staff members able to manage them successfully at least through the affordability period which the HOME investment will require.

In the table below, it is important that you understand the policy of the City of Brockton HOME Program.

For all developers, the City of Brockton expects that there will be team members with experience in all the components of the project, including permitting, construction, financing, sales and property management as well as regulatory compliance. The City of Brockton also needs to know whether the team members are staff or third party contractors. In both cases it also needs to know what the expected percentage of work time (based on 40 hour week) that will be committed on average to this project from the identified persons.

For a CHDO, there is an additional requirement that there be paid staff with relevant experience employed by the CHDO which have the required development experience. HUD defines CHDO staff as paid employees who are responsible for the day-to-day operations of the CHDO. The City of Brockton requires that the identified CHDO staff be paid at least half-time (20 hours per week average). While it will accept that all developers including CHDOs may assemble a team which includes third parties, it needs to know that the CHDO staff person(s) have experience in managing such third parties in a development project. If for example, the CHDO staff person identified has never managed a development project similar to the one classified in Tables 2 and 3 on pages 16 and 17, respectively, (either directly or as a manager of a development team) that will result in the City of Brockton classifying the Applicant as unacceptable.

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### **City of Brockton Evaluation Criteria**

1. The staff persons of the development team identified in Table 11 must have experience which covers all areas A through G.

In Section A, no experience in any category will be scored as unacceptable; any experience in all categories will be scored as acceptable; any staff with experience as a developer will be scored as superior.

In Sections B, C and E no experience will be scored as unacceptable; any experience will be scored as acceptable; specific experience in a similar type project will be scored as superior.

In Section D, no experience in any of the four categories will be scored as unacceptable; any experience in any of the categories will be scored as acceptable.

In Section F, no experience in either category will be scored as unacceptable; any experience in either of the categories will be scored as acceptable.

In Section G, no experience in any category will be scored as unacceptable; in Sections G1-G3 any experience in all 3 categories is required and will be scored as acceptable. For Projects in Categories A and B, experience is desirable in Sections G4 and G5. For projects in Categories C and D, experience is required in Sections G4 and G5.

For a CHDO, there must be at least one paid staff person with experience in categories A, C, D, F and G and assigned to the project at least 10% of their time for projects in Category A (1-2DU), 15% for projects in Category B (2-4DU), 20% for projects in Category C (5-11DU) and 25% of their time for projects in Category D (12+DU).

2. In addition to this matrix of experience, the capacity of the developer will include the financial strength of the developer. For this purpose, the Balance Sheet and Profit and Loss statements submitted by the developer for the last three years should show an ability to fund the development costs prior to the construction loan closing and the operational start-up costs not covered by the construction and permanent loans.



**Table 11: Staffing Experience Matrix for Expected Development Period and Assigned to the Team Assembled for this Project (Application through Affordability Period)<sup>10</sup>**

Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
<b>A. Contract Management Experience<sup>15</sup></b>								
1.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
2.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
3.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.

<sup>10</sup> The default “affordability” period will be based on the regulatory requirement of the HOME regulations for the project proposed. The affordability period may be longer than the HOME affordability regulatory restriction depending upon the term of the mortgage securing the HOME loan.

<sup>11</sup> Staff means paid 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

<sup>12</sup> Contract Employees means those individuals who are paid but not entitled to receive benefits

<sup>13</sup> Partners mean those with a legally or contractually defined role in the control of the project decision making (e.g., tax credit investors, joint ventures etc).

<sup>14</sup> Others might include third parties such as architects, marketing firms etc.

<sup>15</sup> Experience managing organizations and people in a contractual relationship with the development

Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
4. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
5. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<i>Add more rows as needed</i>								
<b>B. Design - A&amp;E Planning Experience</b>								
<i>1. Insert Person's Name and check relevant box to the right</i>								
1. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
2. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
3. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.

<b>Category of Experience</b>	<b>Staff with Experience<sup>11</sup></b>	<b>% of Time to this Project</b>	<b>Contract Employees with experience<sup>12</sup></b>	<b>% of Time to this Project</b>	<b>Partners with Experience (Specify)<sup>13</sup></b>	<b>% of Time to this Project</b>	<b>Others with Experience (Specify)<sup>14</sup></b>	<b>% of Time to this Project</b>
4.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
1.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<i>Add more rows as needed</i>								
<b>C. Planning &amp; Zoning Permitting Experience</b>								
<i>1. Insert Person's or Organization's Name and check relevant box to the right</i>								
1.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
2.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
3.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.

Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
4.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
5.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<i>Add more rows as needed</i>								
<b>D1. Financing - HOME</b>								
<i>1. Insert Person's Name and check relevant box to the right</i>								
1.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
2.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
3.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.

Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
4.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
5.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<i>Add more rows as needed</i>								
<b>D2. Financing – Other Affordable from Table 3 above. Specify code from Mixed Subsidy column</b>								
<i>Type of Financing insert code</i>								
<i>1. Insert Person’s Name and check relevant box to the right</i>								
1.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
2.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.

Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
3.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
4.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
5.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<i>Add more rows as needed</i>								
<b>D3. Financing - Bonds</b>								
<i>1. Insert Person's Name and check relevant box to the right</i>								
1.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
2.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.

Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
3.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
4.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
5.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<i>Add more rows as needed</i>								
<b>D4. Financing – Other Private</b>								
<i>1. Insert Person’s Name and check relevant box to the right</i>								
1.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
2.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.

Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
3. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
4. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
5. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<i>Add more rows as needed</i>								
<b>E. Construction</b>								
<i>1. Insert Person's Name and check relevant box to the right</i>								
1. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
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Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
3. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
4. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
5. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<i>Add more rows as needed</i>								
<b>F1. Marketing - Advertising</b>								
<i>1. Insert Person's or Organization's Name and check relevant box to the right</i>								
1. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
2. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.

Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
3. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
4. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
5. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<i>Add more rows as needed</i>								
<b>F2. Marketing – Sales/Leasing<sup>16</sup></b>								
<i>1. Insert Person's or Organization's Name and check relevant box to the right</i>								
1. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.

<sup>16</sup> This would be initial leasing experience

Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
1.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
2.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
3.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
4.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<i>Add more rows as needed</i>								
<b>G1. Property Management - Regulatory Compliance especially HOME<sup>17</sup></b>								
<i>1. Insert Person's Name and check relevant box to the</i>								

<sup>17</sup> Program regulations, building codes and CITY OF BROCKTON HOME Program contractual responsibilities

Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
1. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
2. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
3. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
4. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
5. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<i>Add more rows as needed</i>								
<b>G2. Property Management - Property Maintenance</b>								
<i>1. Insert Person's Name and check relevant box to the right</i>								

Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
1.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
2.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
3.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
4.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
5.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<i>Add more rows as needed</i>								
<b>G3. Property Management - Lease/Tenant Relations<sup>18</sup></b>								

<sup>18</sup> This includes rent collection, re-leasing, termination, other tenant related issues

<b>Category of Experience</b>	<b>Staff with Experience<sup>11</sup></b>	<b>% of Time to this Project</b>	<b>Contract Employees with experience<sup>12</sup></b>	<b>% of Time to this Project</b>	<b>Partners with Experience (Specify)<sup>13</sup></b>	<b>% of Time to this Project</b>	<b>Others with Experience (Specify)<sup>14</sup></b>	<b>% of Time to this Project</b>
<i>1. Insert Person's Name and check relevant box to the right</i>								
<b>1.</b> Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<b>2.</b> Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<b>3.</b> Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<b>4.</b> Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<b>5.</b> Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<i>Add more rows as needed</i>								

Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
<b>G4. Property Management - Financial Management<sup>19</sup></b>								
<i>1. Insert Person's Name and check relevant box to the right</i>								
1.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
2.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
3.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
4.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
5.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.

<sup>19</sup> This is more focused on bookkeeping, P&Ls and Balance Sheets

Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
<i>Add more rows as needed</i>								
<b>G5. Property Management - Capital Planning<sup>20</sup></b>								
<i>1. Insert Person's Name and check relevant box to the right</i>								
1.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
2.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
3.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
4.Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.

<sup>20</sup> This focuses on long term (20 year) capital replacement planning, annual updates and management of replacement reserve



Category of Experience	Staff with Experience <sup>11</sup>	% of Time to this Project	Contract Employees with experience <sup>12</sup>	% of Time to this Project	Partners with Experience (Specify) <sup>13</sup>	% of Time to this Project	Others with Experience (Specify) <sup>14</sup>	% of Time to this Project
5. Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.	Choose an item.	Click here to enter text.
<i>Add more rows as needed</i>								

**For each person identified in Table 11 above, please supply that person’s resume, and/or job description if more appropriate, with the relevant experience underlined for verification of the person’s experience in the chart above.**

**Additional information needed:**

**Table 12: Financial Information**

Documents Required	List Documents Submitted by Name
Certified Balance Sheet (3 years) <sup>21</sup>	Click here to enter text.
Profit and Loss (3 years) through end of month prior to the due date for application to the City of Brockton	Click here to enter text.
Current Annual Budget and the proposed budgets for the period of development through sustaining occupancy or rent-up for the Applicant. <sup>22</sup>	Click here to enter text.
List of all real estate assets owned in part or in whole by Applicant including current P&L and current reserves	Click here to enter text.

<sup>21</sup> If audited statements are available please submit them. If neither audited or certified statements are available, please indicate who prepared the Balance Sheet and their relationship to the Applicant.

<sup>22</sup> This is a threshold item for CHDOs.

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Documents Required	List Documents Submitted by Name
Other (Specify)	<a href="#">Click here to enter text.</a>

**City of Brockton Evaluation Criteria**

Documents must be submitted for the Application to be accepted.

Resources available for expenditure on pre-development and development costs must match the cash flow budgets submitted and the timing of the availability of development and permanent loan proceeds. Failure to match will be unacceptable. The purpose of this is that the City will be examining the financial capacity of the developer to cover cash flow gaps not covered by loans and grants.

Resources available for expenditure on post-development or operational costs must match the cash flow budgets submitted and the timing of the availability of development and permanent loan proceeds. Failure to match will be unacceptable.

**ATTACHMENT 4: MARKET ANALYSIS**

**MARKET ANALYSIS FOR HOME PROJECTS**

The information required below is the City of Brockton’s assessment of what is needed in order to determine that the proposed project for HOME investment is needed and that it will likely be successful.

The City of Brockton understands that there are significant differences between proposed developments which are small and those which are larger. The matrix below lowers the burden on smaller projects.

It should be noted that if the Applicant intends to use professional third parties for its market study, it should provide that organization with this matrix so that the study meets City of Brockton requirements.

The market study should look at all the units proposed whether assisted by HOME or not, as the viability of the HOME investment can be affected by a failure to have sufficient market need as well as insufficient below market need. In the Marketing Matrix Tables below, most of the instructions are in footnotes to the item. If at any point you are unsure of what is needed, contact the BRA at (508) 586-3887.

Table 13 below, is where you select your project classification. Thereafter you use the appropriate key. For example if the project proposed consists of 2 total units both of which are to be HOME assisted, you choose Project Size Code A. If the project consists of 24 total units of which 6 are to be HOME assisted, you choose Project Size Code D.

**Table 13: Study Analysis Classification Matrix (Circle applicable Project Size Location Code below)**

<b>Proposed Development</b>	<b>Size 1-2 units</b>	<b>Size 3-4 units</b>	<b>Size 5-11 units</b>	<b>Size 12+ units</b>
	<b>Project Size (all units) Code</b>			
<b>Location Code</b>	A	B	C	D
Urban Location with Population over 15,000	Use Matrix Column A	Use Matrix Column B	Use Matrix Column C	Use Matrix Column D

In the following Table 14, you will be checking on what is required for your project's marketing study. Some items are optional. It is recommended that you consider them and if feasible do them. If you do these optional items, you should include them in your submission. Please note that if items which are required are missing, the City of Brockton will consider the application for HOME to be deficient and may not proceed to consider it for funding.

**The market study should be a separate report submitted with the funding application.**

Most of the data is related to the market area definition, especially the primary market area. So it is important that you choose the area boundaries carefully. In addition, much of the data can be found in the locality's government offices and especially in web sites. For example, there is a lot of information on sites such as [www.city-data.com/](http://www.city-data.com/) , [www.realtytrac.com](http://www.realtytrac.com), [www.hud.gov](http://www.hud.gov) and <http://egis.hud.gov/cpdmaps/>.

**Table 14: Market Analysis Data Template**

<b>Market Study Item</b>	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>
<b>Description of Market Area<sup>23</sup></b>				
Size (total population based on most recent Census data)	Required <sup>24</sup>	Required <sup>25</sup>	Required	Required
<b>Map of Market Area showing</b>				
Primary, Secondary and Tertiary market areas	Required	Required	Required	Required
Topographical features	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required

<sup>23</sup> Market Area definition for housing

Primary (more than 50% of buyers/renters expected)

Secondary (90% of all buyers/renters expected)

Tertiary (regional and no more than 10% of buyers/renters outside of primary and secondary)

The market area will be used for analysis of supply and demand. Any application which proposes a primary market area to which it will focus most of its marketing and from which it will draw less than 50% of its renters, will be required to justify that decision with additional market data and supply that justification in a cover letter.

<sup>24</sup> Please note that the Primary Market area for 1-2 units is a 1 mile radius of the site. A larger primary area must be justified.

<sup>25</sup> Please note that the Primary Market area for 3-4 units is a 1 mile radius of the site. A larger primary area must be justified.

<b>Market Study Item</b>	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>
Transportation arteries and travel (street) connections to site	Required	Required	Required	Required
School locations by type and performance	Required	Required	Required	Required
Primary 'necessity' shopping (larger grocery, pharmacy etc)	Required	Required	Required	Required
Major shopping centers	<i>Optional</i>	<i>Optional</i>	Required	Required
Major employers	<i>Optional</i>	<i>Optional</i>	Required	Required
Social and medical Service centers	Required	Required	Required	Required
Parks and recreation facilities	<i>Optional</i>	<i>Optional</i>	Required	Required
Rental projects in <u>defined primary market area</u> with tab showing total units and unit distribution	<i>Optional</i>	<i>Optional</i>	Required	Required
Subsidized rental projects in <u>defined primary market area</u> with tab showing total units, unit distribution (by bedroom size) and type of subsidy <sup>26</sup>	<i>Optional</i>	Required	Required	Required
<b>Economics of Market Area</b>				
Brief history of growth and development	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required
Analysis of office and retail markets, strength and weakness	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required
Employment types and trends	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required
Unemployment current levels and previous 3 year trends	Optional	Optional	Required	Required
Median household income both current levels and previous 3 year trends	Required	Required	Required	Required
Median housing prices both current levels and previous 3 year trends. <i>(Only for Homeownership projects)</i>	Required	Required	Required	Required
Housing Price/Income ratio <i>(Only for Homeownership projects)</i>	Required	Required	Required	Required
Median rental prices both current levels and previous 3 year trends	Required	Required	Required	Required
Rental Price/Income ratio	Required	Required	Required	Required

<sup>26</sup> Note that this focuses on other providers of affordable housing which have the potential to or actually do compete for similar households.

<b>Market Study Item</b>	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>
<b>Demographics of Primary Market Area</b>				
Distribution by age	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required
Distribution by education	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required
Distribution by household size	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required
Special features, for example, military-connected, developmentally disabled etc., households	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required
<b>Conditions of Market in General</b>				
Housing supply: characteristics by type (rental/ownership), size of building, unit distribution (bedroom size) and structural condition (if known)	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required
List of housing projects in the <b>primary</b> market area similar to the proposed project in terms of age of development, development size, building profile, project amenities, type of units, area of units, rental rates, other included/excluded costs, location (in terms of proximity to transportation nodes and corridors, proximity to stores, schools, commute time to work)	Required <sup>27</sup>	Required <sup>28</sup>	Required	Required
Extracted or sub-list of projects which compete for the same renters subsidized or unsubsidized	Required <sup>29</sup>	Required <sup>30</sup>	Required	Required
<b>Primary</b> market area planned by type (rental/ownership), size of building, unit distribution	Required <sup>31</sup>	Required <sup>32</sup>	Required	Required
Extracted list of these planned projects which compete for the same renters subsidized or unsubsidized	Required <sup>33</sup>	Required <sup>34</sup>	Required	Required

<sup>27</sup> Reminder that 1-2-unit projects require this for only a 1-mile radius of the site.

<sup>28</sup> Reminder that 2-4-unit projects require this for only a 1-mile radius of the site.

<sup>29</sup> See footnote 5 above.

<sup>30</sup> See footnote 6 above.

<sup>31</sup> See footnote 5 above.

<sup>32</sup> See footnote 6 above.

<sup>33</sup> See footnote 5 above.

<sup>34</sup> See footnote 6 above.

<b>Market Study Item</b>	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>
List of housing projects in the <b>secondary</b> market area similar to the proposed project in terms of age of development, development size, building profile, project amenities, type of units, area of units, rental rates, other included/excluded costs, location (in terms of proximity to transportation nodes and corridors, proximity to stores, schools, commute time to work)	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required
Extracted list of projects which compete for the same renters subsidized or unsubsidized	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required
<b>Secondary</b> market area planned by type (rental/ownership), size of building, unit distribution	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required
<b>Specific Conditions of Market Competition for all <u>primary</u> market area projects</b>				
Annual turnover rate for all rental projects in primary area listed above	<i>Optional</i>	<i>Optional</i>	Required	Required
Annual vacancy rate for all rental projects in primary area listed above	<i>Optional</i>	<i>Optional</i>	Required	Required
Absorption rate ( <b>rent up rate</b> for new <b>rental</b> projects in previous 3 years or average duration of vacancies in previous 3 years) for all projects in primary area listed above	Required	Required	Required	Required
Absorption rate ( <b>sale rate</b> for new <b>homeownership</b> projects in previous 3 years) for all projects in primary area listed above	Required	Required	Required	Required
<b>Specific Conditions of Market Competition for all <u>secondary</u> market area projects</b>				
Annual turnover rate for all projects in lists above	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required
Annual vacancy rate for all projects in lists above	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required
Absorption rate ( <b>rent up rate</b> for new <b>rental</b> projects in previous 3 years or average duration of vacancies in previous 3 years) for all projects in secondary area listed above	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required

<b>Market Study Item</b>	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>
Absorption rate ( <b>sale</b> rate for new <b>homeownership</b> projects in previous 3 years) for all projects in secondary area listed above	<i>Optional</i>	<i>Optional</i>	<i>Optional</i>	Required
<b>Special characteristics of subsidized projects in extracted primary market area list</b>				
Size of Waiting list and type of project (e.g., elderly, family, disabled, other) and type of subsidy (e.g., HCV (Section 8), Public Housing, Tax Credit, HOME and Other subsidized (specify))	Required	Required	Required	Required
Special amenities such as services in these projects	<i>Optional</i>	<i>Optional</i>	Required	Required
<b>Special characteristics of subsidized projects in extracted secondary market area list</b>				
Size of Waiting list and type of project (e.g., elderly, family, disabled, other) and type of subsidy (e.g., HCV (Section 8), Public Housing, Tax Credit, HOME and Other subsidized (specify))	<i>Optional</i>	<i>Optional</i>	Required	Required
Special amenities such as services in these projects	<i>Optional</i>	<i>Optional</i>	Required	Required

In Table 15 below and in a narrative summary, the Applicants needs to draw conclusions from the market study which are then used in the design of the project and its amenities, in the financial assumptions such as rental rates, vacancy rates, market absorption rates (time to rent the units after a Certificate of Occupancy is issued). **NOTE: The Brockton Redevelopment Authority will review the market study data and confirm that the conclusions are valid and most importantly, that these conclusions are used in the design of the project and in the proformas.**

**The Applicant shall provide a checklist of the items in Table 15 referencing where the information can be found in the market study by page number.**

**Table 15: Market Study Conclusions Applicable to the Proposed Project**

<b>Competitive features for market absorption</b>	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>
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<i>Projects currently competitive for the same target population<sup>35</sup></i>	Required <sup>36</sup>	Required <sup>37</sup>	Required	Required
<i>Competitive features (location<sup>38</sup>, rental rates, amenities etc)</i>	Required	Required	Required	Required
<i>Size of competition<sup>39</sup></i>	Required	Required	Required	Required
<i>Alternative options which will be competitive<sup>40</sup></i>	<i>Optional</i>	<i>Optional</i>	Required	Required
<b>Market potential for subsidized /non-subsidized units<sup>41</sup></b>				
<i>Estimated total affordable housing demand</i>	<i>Optional</i>	<i>Optional</i>	Required	Required
<i>Estimated demand from project defined households (Household characteristics)</i>	<i>Optional</i>	<i>Optional</i>	Required	Required
<i>Current residential locations for expected households</i>	Required	Required	Required	Required
<i>Expected means of advertising and marketing to reach expected households</i>	Required	Required	Required	Required
<b>Recommended bedroom mix, amenities, rents, etc.<sup>42</sup></b>	Required	Required	Required	Required
<i>Projected vacancy loss<sup>43</sup></i>	Required	Required	Required	Required

<sup>35</sup> From market conditions lists above

<sup>36</sup> See footnote 5 above.

<sup>37</sup> See footnote 6 above.

<sup>38</sup> This factor should evaluate proximity to relevant amenities and opportunities. For elderly it would be transportation, basic retail stores, social services, medical facilities etc. For Families it would be schools (and the performance ranking), basic retail stores, employment etc. Reminder: For Projects type A&B this is within a 1-mile radius.

<sup>39</sup> Number of available units from turnover in existing projects, expected from projects in construction and from projects in planning approval, during the expected marketing period. Reminder: For Projects type A&B this is within a 1-mile radius.

<sup>40</sup> E.g., home ownership for rental project expected households and vice versa, negatives of HOME project regulations etc

<sup>41</sup> For mixed use projects this must assess vacancy rates, turnover-rates, absorption rates, rent levels, other costs, amenities etc., for both market and affordable units. Reminder: For Projects type A&B this is within a 1-mile radius.

<sup>42</sup> The recommended configuration of the project must be supported by the market study. Projects planned must either match the characteristics of the strongest demand or must show that there are planned features and other amenities which compensate. All assisted units shall rent at the lesser of the fair market rents or a rent that does not exceed 30% of 65% of the area median family income and, for projects with 5 or more units, 20% of the assisted units shall rent at the lesser of the fair market rent or a rent that does not exceed 30% of 50% of the area median family income. Exceptions for certain types of projects using Tax Credits or Project Based Vouchers may be noted and granted.

<sup>43</sup> The vacancy loss must be carried within a range of 10% - 20% for projects in categories A and B: 8%-15% for projects in category C and within a range of 8%-10% for projects in category D.

Projected absorption rates <sup>44</sup>	Required	Required	Required	Required
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**ATTACHMENT 5: UNDERWRITING ANALYSIS**

**UNDERWRITING ANALYSIS MATRIX FOR HOME PROJECTS**

The information required below is the City of Brockton’s assessment of what is needed in order to determine that the proposed project for HOME investment is feasible and likely to be successful.

The City of Brockton needs information from you which will enable it to conduct an underwriting analysis of the proposed project. It will use information supplied by you in the Application for HOME Investment Funds as well as the information in the table below.

In the following Table 16, you will provide the City of Brockton with documentation you have attached in the Application.

**Table 16: Financing Items**

Item	Information Attached [ <input checked="" type="checkbox"/> ]	Specify Type as per footnote instructions if applicable to this item
<u>Financing</u>		
<ul style="list-style-type: none"> <li>• Attach a Detailed Uses and Sources Excel Spread Sheet<sup>45</sup></li> </ul>	<input type="checkbox"/>	Click here to enter text.
<ul style="list-style-type: none"> <li>• Construction (commitments and terms)<sup>46</sup></li> </ul>	<input type="checkbox"/>	Click here to enter text.

<sup>44</sup> The absorption rate must match the market experience documented in the study and must match the cash flow budget. The rate is expected to be no more than 60 days for projects in categories A, B and C and no more than 90 days for projects in category D.

<sup>45</sup> The Uses and Sources attachment will cover all soft and hard costs and all sources of construction financing for the period from Application Submission through Rent-Up or Sustaining Occupancy. Costs will be displayed as totals, per unit and per square foot. Applicants may use the One-Stop application available on the MHC website ([http://www.mhic.com/onestop\\_downloads.cfm](http://www.mhic.com/onestop_downloads.cfm)) Section 3 if such an application has been submitted to a Massachusetts agency. Otherwise use the appropriate pro forma on the BRA’s web-site at [www.brocktonredevelopmentauthority.com](http://www.brocktonredevelopmentauthority.com).

<sup>46</sup> The Construction or Development Financing sources submitted in the Uses and Sources attachment, must be further documented in terms of their status. I.e., are the loans and/or grants approved and committed? If so include copies of the commitments. If they are pending approval, provide evidence of submission for funding and expected date of the lender/grantor decision. If they have not been applied for, provide a schedule for submission of an application and expected date of approval.

Item	Information Attached [√]	Specify Type as per footnote instructions if applicable to this item
• Monthly Revenue and Expenses Pro forma <sup>47</sup>	<input type="checkbox"/>	Click here to enter text.
• Revenue analysis and proof of assumptions for rental income [market analysis] and other income (e.g., laundry) <sup>48</sup>	<input type="checkbox"/>	Click here to enter text.
• Proof of assumptions for major operating expense line items <sup>49</sup>	<input type="checkbox"/>	Click here to enter text.
• Adequacy of reserves for long term operating feasibility <sup>50</sup>	<input type="checkbox"/>	Click here to enter text.
• Permanent (commitments and terms) <sup>51</sup>	<input type="checkbox"/>	Click here to enter text.
• Regulatory Compliance/Requirements <sup>52</sup>	<input type="checkbox"/>	Click here to enter text.

There will be a Subsidy Layering Review Analysis conducted on the project. See Part II of the Application Packet Appendix E for more information. Your Sources and Uses and Revenue and Expense Pro forma should include information on the ratios set forth in Appendix E.

<sup>47</sup> The Revenue and Expenses Pro forma should continue from the issuance of Certificate of Occupancy through the 240<sup>th</sup> month. Applicants may use the One-Stop application available on the MHIC website ([http://www.mhic.com/onestop\\_downloads.cfm](http://www.mhic.com/onestop_downloads.cfm)) Section 4 or if such an application has been submitted to a Massachusetts agency, that One Stop Application should be submitted. Otherwise use the appropriate pro forma by contacting the BRA at 508-586-3887.

<sup>48</sup> The rents will need to be keyed to the Marketing Analysis by page reference or to other documents submitted by page reference.

<sup>49</sup> For example the electricity costs should be keyed to the source of the estimate (such as the utility company, the A&E team, and experience with a similar project).

<sup>50</sup> The Applicant should identify the likely capital items which will need major repair or replacement over the 30 years and show that the Capital Reserves will be sufficient at that time to meet the estimated cost.

<sup>51</sup> The Permanent Financing sources must be identified in the Revenue and Expenses Pro forma

<sup>52</sup> If other sources of financing are used (such as Tax Credits, or FHLB, HIF, HPSTF, HSF etc.) provide a statement indicating how the regulatory requirements of these sources will not conflict with the HOME requirements of HUD and the City of Brockton.

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PROJECT FINANCIAL INFORMATION AND PRO FORMAS

For Development Projects, please complete the following:

**A. If you are developing a rental project which requires the use of the One-Stop application of DHCD (Massachusetts) such as a tax credit project, then use the following:**

The Massachusetts ONE STOP Application available from the MHIC website ([http://www.mhic.com/onestop\\_downloads.cfm](http://www.mhic.com/onestop_downloads.cfm)).<sup>53</sup>

**NOTE:** This submission must be in the Excel format that the One Stop Application uses.

**B. If you are developing a rental project which does not or will not require the use of the One-Stop application of DHCD (Massachusetts), then use the following:**

The Project Pro forma available from the BRA website.<sup>54</sup>

**C. If you are developing a Homeownership project which does not or will not require the use of the One-Stop application of DHCD (Massachusetts), then use the following:**

The Homeownership Project Pro forma available from the BRA in Brockton.<sup>55</sup>

The pro forma should be developed for a typical or average buyer in each of the proposed target populations, such as an ELI or a VLI or a LI or a market rate homebuyer.

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<sup>53</sup> ***Submitted budgets must include information indicating whether funds other than the HOME funds are secured or requested/pending.***

<sup>54</sup> ***Submitted budgets must include information indicating whether funds other than the HOME funds are secured or requested/pending.***

<sup>55</sup> ***Submitted budgets must include information indicating whether funds other than the HOME funds are secured or requested/pending.***

**NOTE:** This submission may be in print format but must also include the completed Excel pro forma that the City requires.

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## **ATTACHMENT 6: HOMEOWNERSHIP REQUIREMENTS**

### Supplemental Policy and Procedures for Homebuyer Projects

The policy and procedures referenced in the 2013 HOME Final Rule not only include rental projects but also homebuyer projects whether new, acquired or rehabbed. In the case of homebuyer projects there is an additional requirement that homebuyer projects be under “contract for sale” within nine months of completing construction (this date being evidenced with the issuance of a Certificate of Occupancy). If not then the project must be converted to rental or the funds repaid to the City of Brockton.

The proposed capacity analysis, marketing analysis and underwriting analysis will still be appropriate for homebuyer projects. What will be needed as a supplement or modification would be as follows:

1. The Underwriting Analysis references to rental projects, rental proformas, rental experience are appropriate as they would apply in the case where sales have not occurred within the 9 month period and conversion to rental is required. For Homebuyer projects there must be a homebuyer pro forma as well as a rental conversion pro forma.
2. The Capacity Analysis needs to have not only homebuyer development and marketing experience but also rental experience in case of conversion. Hence the Capacity Analysis in Attachment 3 is also required for homebuyer projects.
3. The Marketing Analysis in Attachment 4 needs to look at homebuyer data as well as rental data.
4. It might be appropriate for a homebuyer project to have a percentage of units “pre-sold” prior to drawdown of HOME investment funds (entry into IDIS triggers the drawdown of HOME funds). In the private homebuyer development world there have been periods in which the lenders have required as much as 75% of the units to be presold prior to the release of funds for the first sold unit. Such a requirement is used by the lender as a confirmation of the market analysis which would have made the case for sufficient demand. The City of Brockton is **not** requiring this pre-sold component, but it recommends that the developer consider it as a prudent step.