applicant track record certification

Preliminary Application

development information

Development Name
Development Address

applicant/developer

For the purpose of completing this form, the Applicant/Developer is the Applicant, as defined in the Qualified Allocation Plan and the Middle Income Housing Tax Credit Allocation Plan. If there are multiple developer entities, provide a completed Applicant Track Record Certification for each.

Developer Name			
Developer Entity			
Address			
City		State	Zip
Phone	Email		

Have you had any bankruptcy or foreclosure proceeding? If yes, provide details.	☐ Yes	☐ No	
Have you ever defaulted on a loan? If yes, provide details.	☐ Yes	☐ No	
Have you ever requested an extension to CHFA's Carryover deadline or State Credit Milestone deadline? If yes, provide details.	☐ Yes	☐ No	☐ N/A
Have you ever requested supplemental federal 9 percent Housing Tax Credits (HTC) from CHFA? If yes, provide details.	☐ Yes	☐ No	☐ N/A
Have you ever missed submitting a Placed-in-Service Application deadline? If yes, provide details.	☐ Yes	☐ No	☐ N/A
Have you ever missed submitting a Final Application six months or later from a Placed-in-Service Application? If yes, provide details.	☐ Yes	☐ No	☐ N/A
For awarded projects in process, have you missed quarterly report submissions?	☐ Yes	☐ No	☐ N/A
Have you ever missed a CHFA PAB Pool deadline? If yes, provide details.	☐ Yes	☐ No	☐ N/A
Do any of your Housing Tax Credit (HTC) projects in other states have outstanding noncompliance issues for which an IRS form 8823 has been issued? If yes, provide details.	☐ Yes	☐ No	☐ N/A
Have you submitted or are planning to submit HTC applications this year in other states? If yes, how many?	☐ Yes	☐ No	☐ N/A

required attachments

☐ **Completed Multifamily Development Experience Worksheet (see page three). Applicants may provide their own list of properties, however, the formatting must be followed and requested information provided.**

☐ **Provide details on any "Yes" statements from above.**

applicant certification

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

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

signature

IN WITNESS HEREOF, the applicant(s) has caused this document to be duly executed in its name on this _____ day of _____ , 20__.

_____
Legal Name of Preparer (Company)

_____
By

_____
Name

_____
Title

STATE OF COLORADO)
)ss.
COUNTY OF)

Acknowledged before me this day of , 20 , by
as , of .

Witness my hand and official seal

_____
Notary Public

My commission expires:_____

IN WITNESS HEREOF, the applicant(s) has caused this document to be duly executed in its name on this day of , 20 .

_____
Legal Name of Applicant

_____
By

_____
Name

_____
Title

STATE OF COLORADO)
)ss.
COUNTY OF)

Acknowledged before me this day of , 20 , by
as , of .

Witness my hand and official seal

_____
Notary Public

My commission expires:_____

multifamily development experience worksheet

project name	location	# of units	project type	population	building type	year of award (if applicable)	type of award (if applicable)	syndicator / investor (if applicable)	year built	project status	if stable or in lease-up: percent occupied; if under construction: percent complete; if awarded: projected completion date
			select one	select one	select one		select one			select one	
			select one	select one	select one		select one			select one	
			select one	select one	select one		select one			select one	
			select one	select one	select one		select one			select one	
			select one	select one	select one		select one			select one	
			select one	select one	select one		select one			select one	
			select one	select one	select one		select one			select one	
			select one	select one	select one		select one			select one	
			select one	select one	select one		select one			select one	
			select one	select one	select one		select one			select one	
			select one	select one	select one		select one			select one	
			select one	select one	select one		select one			select one	
			select one	select one	select one		select one			select one	
			select one	select one	select one		select one			select one	

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