**Greater Fremont Development Council**

**Application for Rural Workforce Housing Funds**

**A. Business (Borrower) Information:**

 Name of Business:

 Address:

 City State Zip

 Contact Person: Telephone No: FAX No: ­­\_\_\_\_\_\_\_\_\_\_\_\_\_

 E-mail: Cell phone No.

 Business Organization: □ Sole Proprietorship □ “S” Corporation □ “C” Corporation

 □ General Partnership □ Limited Partnership

 □ Limited Liability Company

 Federal ID #: DUNS #:

 **Have any of the individuals listed above, ever been convicted of a felony? □ Yes □ No**

 **If yes, please provide brief explanation.**

**B. Project Information:**

 **USES OF FUNDS: Total Project Cost**

Land Acquisition

 Building Acquisition

 Renovation (existing)

 New Construction

 Infrastructure

 Working Capital

 Other (Specify)

 **Total:**

**C. SOURCES OF FUNDS:**

*\*Please note any federal or state low-income housing tax credits, Community Development Block Grants, HOME funds or funds from the Affordable Housing Trust Fund are not permissible and can NOT be used as a funding source to this fund.*

 **Participating Lender Information:**

Name of Lending Institution:

 Address:

 Contact Person: Phone: ( )

 Loan Amount: $ Loan Term: (Yrs)

 Interest Rate: % **□** Variable **□** Fixed

 Collateral Required: Equity Required:

 **Equity Information:**

Amount available from business or owners for investment: $

 Source of owner’s equity into project:

 **Project Location cost limits:** (all must be checked to qualify for funding):

 **□** Within the extraterritorial zoning jurisdiction of a community in Dodge County

 **□** New owner-occupied housing costing no more than $275,000 to construct

 **□** New rental housing units costing no more than $200,000 per unit to construct

 **□** Owner-occupied or rental housing units for which the cost to substantially rehabilitate exceeds 50% of a unit’s assessed value

**D. ATTACH THE FOLLOWING:**

**□** Project Summary

**□** Detailed Cost Estimates

**□** Proforma – projection of cash flow for the project

**□** Personal tax returns of the applicant (20% or more ownership) for the past two years

**□** Business tax returns for the past three years, profit/loss statements/balance sheet of the business (if existing)

**□** Bank Pre-Approval Letter

**□** Letters of commitment from other funding sources

**□** Site plan of housing development

**□** Housing plans of proposed housing project

**□** Environmental information as required by each funding source

**□** Copy of a Credit report from Financial Institution **OR □** Credit History Authorization (Attached)

**□** Attestation Form (Attached)

Once all documents have been received the Fund Administrator will review the application to determine if it meets the eligibility requirements to be considered by the advisory committee. If eligible, a meeting will be scheduled with you and the items on the Full Application Checklist will be requested. If the loan will be presented to the loan committee, a $250.00 processing fee will be collected. If we are not able to provide further assistance, your processing fee will not be collected.

**The above information is accurate to the best of my knowledge and belief. The above information is provided to help you evaluate the feasibility of obtaining public financial assistance. It is further understood that the submission of this form does not constitute a formal loan application and that the form will be used for analysis and assessment purposes only.**

Dated: Signature:

**□** I have received and read the Greater Fremont Development Council’s Rural Workforce Housing Fund Investment Plan and will adhear to all requiremements outlined in the Fund Investment Plan.

Dated: Signature:

**Credit History Search Authorization**

By signing this agreement, I hereby give full authorization to the Greater Fremont Development Council’s Rural Workforce Housing Fund Administrator to perform a credit history search on my past and current credit history. Also, I hereby give full authorization to utilize the information that I have supplied on this form for the purpose of performing a credit history search.

Applicants Full Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

dba: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FAX: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Security #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fed I.D. #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **United States Citizenship Attestation Form**For the purpose of complying with Neb. Rev. Stat. §§ 4-108 through 4-114, I attest as follows:

|  |  |
| --- | --- |
|  | I am a citizen of the United States. |
| **— OR —** |
|  | I am a qualified alien under the federal Immigration and Nationality Act, my immigration status and alien number are as follows: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and I agree to provide a copy of my USCIS documentation upon request. |

**I hereby attest that my response and the information provided on this form and any related application for public benefits are true, complete, and accurate and I understand that this information may be used to verify my lawful presence in the United States.**

|  |  |
| --- | --- |
| **PRINT NAME** |  (first, middle, last)  |
| **SIGNATURE** |  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| **DATE** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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