

Project Summary'Hqto

Project Name: _____

Project Street Address(es): _____

Developer: _____

Types of Units: Family___ Individuals ___ Elderly ___ Special Needs___

Other? (Describe) _____ Commercial ___ Yes ___ No

Number of Units _____ Number of Affordable Units _____ Homeless Units _____

Number of Units	SRO	Studio	1-Bdr	2-Bdr	3-Bdr	4-Bdr	Total
<30% AMI							
<60% AMI							
<80% AMI							
Market							

Rents	SRO	Studio	1-Bdr	2-Bdr	3-Bdr	4-Bdr
<30% AMI						
<60% AMI						
<80% AMI						
Market						

Housing Budget

TDC: \$ _____

Hard Cost/sf \$ _____

Operating Exp/unit \$ _____

TDC Per Unit: \$ _____

Hard Cost/unit \$ _____

Reserves/unit \$ _____

Developer Fee and Overhead \$ _____

Funding Sources: (Check all that apply)

- | | | | | | | | |
|------------------|--------------------------|-------------|--------------------------|-----------------|--------------------------|---------|--------------------------|
| DND – HOME | <input type="checkbox"/> | DHCD-HOME | <input type="checkbox"/> | DHCD-CIPF | <input type="checkbox"/> | Others: | <input type="checkbox"/> |
| HSNG BOSTON 2030 | <input type="checkbox"/> | DHCD-HSF | <input type="checkbox"/> | 9% LIHTC | <input type="checkbox"/> | _____ | <input type="checkbox"/> |
| NHT | <input type="checkbox"/> | DHCD-HIF | <input type="checkbox"/> | 4% LIHTC | <input type="checkbox"/> | _____ | <input type="checkbox"/> |
| IDP | <input type="checkbox"/> | DHCD-TOD | <input type="checkbox"/> | New Market TC | <input type="checkbox"/> | _____ | <input type="checkbox"/> |
| FHLB | <input type="checkbox"/> | DHCD-CATNHP | <input type="checkbox"/> | Historic TC | <input type="checkbox"/> | _____ | <input type="checkbox"/> |
| AHTF | <input type="checkbox"/> | DHCD-CBH | <input type="checkbox"/> | MA State TC | <input type="checkbox"/> | _____ | <input type="checkbox"/> |
| MTC Grants | <input type="checkbox"/> | DHCD-FCF | <input type="checkbox"/> | HUD-Section 202 | <input type="checkbox"/> | _____ | <input type="checkbox"/> |