



**Section D (Continued) – Information Concerning Land or Property**

10. Off-Site Facilities:	Public	Comm.	At Site	Feet from Site	11. Unusual Site Features	12. Special Assessments
Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ ft.	<input type="checkbox"/> None	a. <input type="checkbox"/> Prepayable <input type="checkbox"/> Non-prepayable
Sewer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ ft.	<input type="checkbox"/> Cuts	b. Principal Balance    \$ _____
Paving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ ft.	<input type="checkbox"/> Fill	c. Annual Payment    \$ _____
Gas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ ft.	<input type="checkbox"/> Erosion	d. Remaining Terms _____ years.
Electrical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ ft.	<input type="checkbox"/> Poor Drainage	
					<input type="checkbox"/> Retaining Walls	
					<input type="checkbox"/> Rock Foundations	
					<input type="checkbox"/> High Water Table	
					<input type="checkbox"/> Other _____	

**Section E – Estimate of Income**

Unit Type	No. of Living Units	No. of Units Assisted	Living Area (Sq. Ft.)	Composition of Units	PBE Not in Rent (\$) *(Sec. F-1)	Unit Rent per Mo. (\$)	Total Monthly Unit Rent (\$)
Employee(s) Liv. Unit(s)							
<b>Totals</b>				<b>2. Total Estimated Monthly Rentals for All Living Units \$</b>			
3. Number of Parking Spaces			4. Parking and Other Income (Not Included in Rent)				
<input type="checkbox"/> Attended			Open Spaces _____ @ \$ _____ per month = \$ _____				
<input type="checkbox"/> Self Park			Covered Spaces _____ @ \$ _____ per month = \$ _____				
<b>Total Spaces</b>			Laundry _____ Sq. Ft. or Living Units @ _____ per month = \$ _____				
			Other _____ per month = \$ _____				
			<b>Total Ancillary Income \$</b>				
5. Commercial Space (Describe)							
Area-Ground Level _____ sq. ft. @ \$ _____ per sq. ft./month = \$ _____							
Other Levels _____ sq. ft. @ \$ _____ per sq. ft./month = \$ _____							
<b>Total Commercial \$</b>							
<b>6. Total Estimated Monthly Gross Income at 100 Percent Occupancy</b>						<b>\$</b>	
<b>7. Total Annual Rent (Item 6 times 12 months)</b>						<b>\$</b>	
8. Gross Floor Area			9. Net Rentable Residential Area			10. Net Rentable Commercial Area	
Sq. Ft.			Sq. Ft.			Sq. Ft.	

**Section F – Equipment and Services (Check Items Included in the Rent, Listed Below)**

Equipment	Services	Gas	Elect.	Oil
<input type="checkbox"/> Range and Oven	<input type="checkbox"/> Heat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Microwave Oven	<input type="checkbox"/> Hot Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Refrigerator	<input type="checkbox"/> Cooking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Laundry Facilities	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> In Common Area	<input type="checkbox"/> Lights, etc., in Units	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> In Living Unit	<input type="checkbox"/> Cold Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> L.U. Hookup Only	<input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Carpet	<input type="checkbox"/> Parking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Drapes				
<input type="checkbox"/> Swimming Pool				
<input type="checkbox"/> Air Conditioning Equip.				
<input type="checkbox"/> Trash Compactor				
<input type="checkbox"/> Disposal				
<input type="checkbox"/> Other				

**Section F-1 – Utilities (Not in Rent)**

\*Personal Benefit Expenses (PBE)  
Check Utilities and Services Not Included in the Rent and Paid Directly by the Tenant.

<input type="checkbox"/> Electricity	<input type="checkbox"/> Heating	<input type="checkbox"/> Gas
<input type="checkbox"/> Decorating	<input type="checkbox"/> Repairs	<input type="checkbox"/> Water
Other _____		

Remarks \_\_\_\_\_

Remarks continued on additional page    Yes  No

**Section G – Estimate of Replacement Cost**

Land Improvements	
1. Unusual Land Improvements	\$ _____
2. Other Land Improvements	\$ _____
<b>3. Total Land Improvements</b>	\$ _____
Structures	
4. Main Buildings	\$ _____
5. Accessory Buildings	\$ _____
6. Garage	\$ _____
7. All Other Buildings	\$ _____
<b>8. Total Structures</b>	\$ _____
9. <b>Subtotal</b> (Line 3 plus Line 8)	\$ _____
10. General Requirements (Line 9 x _____%)	\$ _____
<b>11. Subtotal</b> (Line 9 plus Line 10)	\$ _____
Fees	
12. Builder's General Overhead (Line 11 x _____%)	\$ _____
13. Builder's Profit (Line 11 x _____%)	\$ _____
<b>14. Subtotal</b> (Sum of Lines 11 through 13)	\$ _____
15. Bond Premium	\$ _____
16. Other Fees	\$ _____
<b>17. Estimated Total Cost of Construction</b>	\$ _____
18. Architect's Fee-Design (Line 14 x _____%)	\$ _____
19. Architect's Fee-Supervisory (Line 14 x _____%)	\$ _____
<b>20. Total For All Improvements</b> (Sum of Lines 17 through 19)	\$ _____
21. Cost per Gross Square Foot (Line 20 divided by Item 8, Section E)	\$ _____
22. Construction Time _____ Months Plus 2 = _____ Months	
Charges and Financing During Construction	
23. Interest on \$ _____ @ _____% for _____ Months	\$ _____
24. Taxes	\$ _____
25. Insurance	\$ _____
26. HUD/FHA Mtg. Ins. Pre. (0.5%)	\$ _____
27. HUD/FHA Exam. Fee (0.3%)	\$ _____
28. HUD/FHA Insp. Fee (0.5%)	\$ _____
29. Financing Fee (_____%)	\$ _____
30. Permanent Placement Fee (_____%)	\$ _____
31. AMPO (2.0%)	\$ _____
32. Contingency (Sec. 202) (2.0%)	\$ _____
33. Title and Recording	\$ _____
<b>34. Total Charges and Financing</b>	\$ _____
Legal, Organization and Audit Fee	
35. Legal	\$ _____
36. Organization	\$ _____
37. Cost Certification Audit Fee	\$ _____
<b>38. Total Legal, Organization and Audit Fee</b>	\$ _____
39. Builder's and Sponsor's Profit and Risk	\$ _____
40. Consultant Fee (Nonprofit Only)	\$ _____
41. Supplemental Management Fund	\$ _____
42. Contingency Reserve (Rehabilitation Only)	\$ _____
43. Relocation Expenses (Rehabilitation Only)	\$ _____
44. Other	\$ _____
<b>45. Total Estimated Development Cost</b> (Lines 20 + 34 + 38 through 44)	\$ _____
46. Land (Estimated Market Price of Site) _____ sq. ft. @ \$ _____ per sq. ft.	\$ _____
<b>47. Total Estimated Replacement Cost of Project</b> (Line 45 plus Line 46)	\$ _____
48. Average Cost per Living Unit (Line 45 divided by Total in Sec. C, Item 7)	\$ _____

**Section H – Annual Income Computations**

1. Estimated Project Gross Income (Line 7, Sec. E, Pg. 2)	\$ _____
2. Occupancy (Entire Project)	_____ %
3. Effective Gross Income (Line 1 x Line 2)	\$ _____
4. Total Project Expenses (Line 30, Section I)	\$ _____
5. Net Income to Project (Line 3 minus Line 4)	\$ _____
6. Expense Ratio (Line 4 divided by Line 3)	_____ %

**Section I – Estimate of Annual Expense**

Administrative	
1. Advertising	\$ _____
2. Management Fee (_____%)	\$ _____
3. Other	\$ _____
<b>4. Total Administrative</b>	\$ _____

Operating	
5. Elevator Maintenance Exp.	\$ _____
6. Fuel – Heating	\$ _____
7. Fuel – Domestic Hotwater	\$ _____
8. Lighting and Misc. Power	\$ _____
9. Water	\$ _____
10. Gas	\$ _____
11. Garbage and Trash Removal	\$ _____
12. Payroll	\$ _____
13. Other	\$ _____
<b>14. Total Operating</b>	\$ _____

Maintenance	
15. Decorating	\$ _____
16. Repairs	\$ _____
17. Exterminating	\$ _____
18. Insurance	\$ _____
19. Ground Expense	\$ _____
20. Other	\$ _____
<b>21. Total Maintenance</b>	\$ _____

22. Replacement Res.: New Const. = (.006 x Line 8, Sec. G Total Struct.) Rehab = (.004 x Mort/Loan Requested in Sec. M)	\$ _____
<b>23. Subtotal Expenses</b> (Sum of Lines 4, 14, 21 and 22)	\$ _____
24. Real Estate: Est. Assessed Value = \$ _____ at \$ _____ per \$1000 = \$ _____	
25. Personal Prop. Est. Assessed Value = \$ _____ at \$ _____ per \$1000 = \$ _____	
26. Employee Payroll Tax	\$ _____
27. Other	\$ _____
28. Other	\$ _____
<b>29. Total Taxes</b>	\$ _____
<b>30. Total Expenses</b> (Line 23 plus Line 29)	\$ _____
31. Avg. exp. per unit per annum (PUPA) (Line 30 divided by Total Item 7 Sec. C)	\$ _____

**Section J – Total Settlement Requirements**

1. Development Costs (Line 45, Section G)	\$ _____	<b>Funds Available for Cash Requirements</b>	
2. Cash Req. for Land Debt/Acquisition	\$ _____	15. Source of Cash:	
3. <b>Subtotal</b> (Lines 1 plus 2)	\$ _____	a. _____	\$ _____
4. Mortgage Amount \$ _____		b. _____	\$ _____
5. Development/Cash (Lines 3 minus 4) +/-	\$ _____	c. _____	\$ _____
6. Initial Operating Deficit	\$ _____	<b>Subtotal</b> (a + b + c)	\$ _____
7. Discount Costs	\$ _____	16. Source of Fees and Grants:	
8. Interest Yield Costs	\$ _____	a. _____	\$ _____
9. Working Capital (2% of Mortgage Amount)	\$ _____	b. _____	\$ _____
10. Min. Capital Investment (Sec. 202)	\$ _____	c. _____	\$ _____
11. Off-Site Construction Costs	\$ _____	<b>Subtotal</b> (a + b + c)	\$ _____
12. Non-Mortgagable Relocation Expenses	\$ _____	17. <b>Total Cash, Fees and Grants</b>	
13. Other	\$ _____	(Sum of Items 15 plus 16)	\$ _____
14. <b>Total Estimated Cash Required</b> (Sum of Lines 5 through 13)	\$ _____		

**Note:** Line 17 must equal or exceed Line 14

**Section K – Principal Participants**

1. <input type="checkbox"/> Sponsor, <input type="checkbox"/> Mortgagor, <input type="checkbox"/> Borrower, <input type="checkbox"/> Owner	Name	2. Name	
Address (include zip code)		Address (include zip code)	
Telephone Number (include Area Code)	SSN/EIN	Telephone Number (include Area Code)	SSN/EIN
3. <input type="checkbox"/> Consultant, <input type="checkbox"/> Agent, <input type="checkbox"/> Other Authorized Representative	Name	4. General Contractor Name	
Address (include zip code)		Address (include zip code)	
Telephone Number (include Area Code)	SSN/EIN (Optional)	Telephone Number (include Area Code)	SSN/EIN (Optional)
5. Sponsor's Attorney Name		6. Architect Name	
Address (include zip code)		Address (include zip code)	
Telephone Number (include Area Code)	SSN/EIN (Optional)	Telephone Number (include Area Code)	SSN/EIN (Optional)

**Section L – Application (SAMA and Feasibility Letter)**

A. The Undersigned certifies that: (1) He/She is legally authorized to represent the entity(ies) identified below with respect to all transactions pertaining to this application and all matters related to it; (2) Any and all action(s) by the undersigned is/are legally binding on the principal(s) and the entity(ies) being represented; (3) He/She is familiar with the provisions of the regulations issued by the Department of Housing and Urban Development (HUD) pursuant to the above-identified Section (s) of the respective Housing Act(s); (4) To the best of his/her knowledge and belief, the entity(ies) identified below has/have complied, or will be able to comply, with all the requirements of the regulations which are a prerequisite with respect to participation in the program(s) selected; (5) The principal(s) of the entity(ies) identified below are familiar with the specific provisions of the Right to Financial Privacy Act of 1978; (6) the principal(s) is/are aware that disclosure of certain financial information will be required by HUD in the course of processing this application; (7) That he/she has made a physical inspection of the property and, in his/her opinion, the site plan submitted conveys a concept which can be reasonably followed in practice; (8) The proposed construction will not violate recorded zoning ordinances or restrictions; (9) To the best of his/her knowledge and belief no information or data contained herein or in the exhibits or attachments submitted herewith, are in any way false or incorrect and that they are truly descriptive of the project or property which is intended as security for the proposed mortgage loan and/or is presented for consideration with respect to the request for approval of a Housing Assistance Payments Contract.

B. The Undersigned assures and agrees that: (1) Pursuant to the regulations and the related requirements of HUD neither the entity(ies) identified below nor anyone authorized to act on its/their behalf, will decline to sell, rent or otherwise make available any of the property or housing project, identified herein, to a prospective purchaser or tenant because of race, color, religion, sex, or national origin; (2) The entity(ies) identified below will comply with Federal, State and local laws and ordinances prohibiting discrimination; and (3) Failure or refusal to comply with the requirements of either (1) or (2) shall constitute sufficient basis for the Commissioner to reject requests for future business with the identified entity(ies) or to take any other action that may be appropriate.

C.  Herewith is a check for \$ \_\_\_\_\_ in payment of the required fee for a SAMA letter.

Principal Contact	Signed	Date (mm/dd/yyyy)
Telephone Number (include Area Code)	On Behalf of: <input type="checkbox"/> Sponsor, <input type="checkbox"/> Mortgagor, <input type="checkbox"/> Borrower, <input type="checkbox"/> Owner	

**Section M – To The Federal Housing Commissioner**

**1. Request for Mortgage Insurance:**

Request is hereby made for a  **Conditional Commitment**  **Firm Commitment** to provide mortgage insurance on a loan, which will involve:

Insurance of Advances During Construction  Insurance Upon Completion, with respect to a principal loan of \$ \_\_\_\_\_ which will bear interest at the rate of \_\_\_\_\_% on the Construction Loan and \_\_\_\_\_% on the Permanent Loan. The undersigned mortgagee requests consideration for mortgage insurance pursuant to the provisions of Section \_\_\_\_\_ of the National Housing Act, and the HUD regulations applicable thereto. Said insurance is being requested to cover a loan which is to be secured by a first mortgage on the property described herein. After examining the proposed security, the undersigned considers such project to be desirable and is interested in making a loan in the principal amount and at the interest rate stated above. The loan will require repayment of the principal over a period of \_\_\_\_\_ months (\_\_\_\_\_ years) in accordance with an amortization plan acceptable to you. It is understood and agreed that the actual financing fee (Item G-29) will not exceed \_\_\_\_\_% of your commitment amount. Presented herewith is a check for \$ \_\_\_\_\_ which is in payment of the application fee required by HUD regulations.

**2. Request for Approval of Housing Assistance Payments Contract (Section 8):**

The undersigned owner requests your consideration with respect to approving a Housing Assistance Payments Contract pursuant to Section 8 of the U.S. Housing Act of 1937, as amended, and the related regulations applicable thereto. Submitted herewith is a proposal which defines the scope of the improvements and the type and quality of the housing which will be provided on the property described herein. Said property, upon completion of the improvements, will comply with the applicable standards and related regulations of the Department of Housing and Urban Development. Such proposed housing is being offered for lease, to eligible tenants at the stated contract rents, pursuant to the provisions of the regulations pertaining to the above-referenced U.S. Housing Act.

**3. Request for a Section 202 Loan:** Principal Amount \$ \_\_\_\_\_ @ Permanent Interest Rate of \_\_\_\_\_%

Pursuant to Section 202 of the Housing Act of 1959, as amended, and the regulations applicable thereto, the undersigned borrower hereby requests a loan in the principal amount and at the interest rate stated above. The proceeds of the loan are to be used for development of the property described herein. The scope of the development of the property will be consistent with that information pertaining to improvements, submitted for your consideration. The loan is to be secured by a first mortgage on the property described herein. The principal amount of the loan will be repaid over a period of \_\_\_\_\_ months (\_\_\_\_\_ years) in accordance with an amortization plan acceptable to you.

Name and Address of Mortgagee		Principal Contact	
		Telephone Number (include Area Code)	
Signed (Proposed Mortgagee) (Use with Item 1)	Date (mm/dd/yyyy)	Signed (Owner Item 2) (Borrower Item 3)	Date (mm/dd/yyyy)

**Section N – Required Exhibits: Mortgage Insurance and Section 202 Direct Loan Applications**

Item Number	Exhibit Title	SAMA or Feasibility <sup>1</sup>	Conditional Commitment	Firm Commitment
1	Location Map	X		
2	Legal Description of the Property	X		
3	Evidence of Permissive Zoning	X		
4	Sketch Plan of the Site	X		
5	Evidence of Site Control (Option or Purchase)	X		
6	Evidence of Last Arms-Length Transaction and Price, including a Certification by Sponsor that evidence submitted in response to this Item reflects Last-Arms Length Purchase Price	X		
7	Form VA-92010 – Equal Employment Opportunity Certification	X		
8	Form 3433 – Eligibility as Nonprofit Corporation	X		
9	Form HUD-2530 – Previous Participation Certificate	X		
10	Form HUD-92013-E – Supplement to HUD-92013	X <sup>2</sup>	X <sup>2</sup>	X <sup>2</sup>
11	Reserved			
12	Affirmative Marketing Plan		X	
13	Reserved			
14	Grant and/or Loan Commitment Letter (if applicable)		X	X
15	Form HUD-92013 – Supp for Mortgagor Entity, if formed, each Principal of the Sponsor, and the Mortgagor, and General Contractor	X <sup>5</sup>	X <sup>3</sup>	X
16	Certification Approving Release of Banking and Credit Information from all Parties required to submit Form HUD-92013 – Supp	X <sup>5</sup>	X <sup>3</sup>	X
17	Fannie Mae form 1006, Request for Verification of Deposit, for each Bank Reference listed on form HUD-92013 - Supp	X <sup>5</sup>	X <sup>3</sup>	X
18	If applicable, evidence that any delinquent Federal Debt has been satisfied	X <sup>5</sup>	X <sup>3</sup>	X
19	Form HUD-92417 – Personal Financial Statement for each individual involved as a Sponsor and 3 years of Financial Statements and Supporting Schedules for Business Entities involved as a Sponsor and General Contractor	X <sup>5</sup>	X <sup>3</sup>	X
20	Personal and Commercial Credit Report for Mortgagor, if formed, each Principal Sponsor, General Contractor, Housing Consultant (if Nonprofit Mortgagor), and required business concerns in which principal sponsor has a principal ownership interest		X <sup>3</sup>	X
21	Current Resume for each Principal Sponsor and General Contractor	X <sup>5</sup>	X <sup>3</sup>	
22	Signed statement from each Principal Sponsor indicating their contractual and financial relationship(s) with Mortgagor		X	X
23	Owner/Architect Agreement		X	
24	Architectural Exhibits – Preliminary		X	
25	Architectural Exhibits – Final			X
26	Form HUD-92328 – Contractor's and/or Mortgagor's Cost Breakdown			X
27	Certification identifying any Identity of Interest Relationships between the Mortgagor, General Contractor and/or Architect		X <sup>3</sup>	X
28	Form HUD-92457 and Land Survey			X
29	Management Agreement			X

**Notes:**

- Mortgage Insurance Applications Only.
- For Handicapped and Elderly Projects Only.
- If General Contractor is known – Otherwise submit with Firm Commitment Application.
- Submit for Rehabilitation Projects only. Complete Sections A, B, C, D, E, F, G, H and I.
- Applicable at this stage to Nonprofit Sponsors and Mortgagors only. Submit information on General Contractor with Conditional/Firm Commitment Application.

**Required Exhibits: Section 8 Housing Assistance Contract Applications**

The Developer Packet which applies to the specific Notification of Fund Availability (NOFA) identifies the exhibits which are required with the Preliminary and Final Proposal Applications.

The Developer Packet is available at the HUD Field Office which issued the NOFA to which the application is responding.

# Instructions for Completing Application – Multifamily Projects, Form HUD-92013

Items which are self-explanatory are not included.

**Foreword:** This Application is used for rental projects to request: (a) mortgage insurance, (b) a direct loan under Section 202, or (c) a Section 8 Housing Assistance Payments Contract. For mortgage insurance there are a maximum of three stages: (1) a request for a Site Appraisal and Market Analysis letter (SAMA letter) for new construction, or a Feasibility letter for a rehabilitation project. (Application for a SAMA or Feasibility letter may be submitted directly to a HUD Field Office by letter or in person); (2) an application for a Conditional Commitment; and (3) for a Firm Commitment. Both (2) and (3) must be submitted by an approved mortgagee to a HUD Field Office. For a direct loan, under Section 202, this Application is submitted to a HUD Field Office at the Conditional and Firm Commitment stages of processing. If Section 8 is combined with an insured mortgage, the preliminary proposal processing may be combined with SAMA or Feasibility stages of processing. The final proposal is typically processed with the Firm Commitment Application in mortgage insurance.

Except for Rehabilitation Proposals under Section 202, a sponsor may combine two or three stages provided he/she has plans and exhibits that are sufficiently completed.

If a stage of processing is omitted, the exhibits for that stage are submitted with those required for the subsequent stage or stages.

**Information for all stages must be submitted in triplicate.**

HUD Field Office personnel will advise and assist sponsors and potential sponsors at all stages in connection with the submission of applications.

## Application Completion Requirements For:

**I. Insured: SAMA**—Complete Page 1, in its entirety. Page 2, Complete only Section G, Item 46, Land (Estimated Market Price of Site). Page 3, Sections K, L and M.

**Feasibility**—A request for feasibility analysis (rehabilitation) must be submitted with this form completed in its entirety.

**Conditional/Firm**—A request for conditional or firm commitment must be submitted with this form completed in its entirety.

**II. Section 202 Direct Loan:** This form must be complete in its entirety when a conditional or firm commitment under the Section 202 direct loan program is being requested.

**III. Section 8: Preliminary Proposal**—Complete Page 1 in its entirety, (indicate type of occupancy, i.e., Elderly (E), Handicapped (H) or Family (F) in Section E, Unit Type). Page 2, Section G, Lines 46 and 47; Section I, Line 30. Page 3, Section K (to extent known) and Section M, Item 2.

**Final Proposal**—Complete this form in its entirety except for Section L.

## Section A – Identification

**Item 1**—Enter project name.

**Items 2 and 3**—Enter HUD project number for mortgage insurance and/or Section 8, if known.

## Section B – Purpose of Application

Indicate actions requested by checking all applicable blocks and/or making entries where appropriate. For example, if an application is being submitted for the first stage of an uninsured project with housing assistance payments under Section 8, the Housing Assistance Payments Section 8 block will be checked as well as blocks for “A Preliminary Proposal”, “Conventional Financing”, and “Item 2 of Section M.” If mortgage insurance will eventually be used “Conventional Financing” is not checked, but instead the block “Mortgage Insurance” is checked and the Section of Act entered in the blank space. In the Section 8 Preliminary Proposal stage do not check SAMA (Site Appraisal and Market Analysis) or feasibility letter, unless SAMA letter or feasibility letter is requested at that time and the SAMA fee is paid. The appropriate block for type of mortgagor (i.e. Profit Motivated, Nonprofit, Limited Dividend, Builder-Seller, or Other) and type of financing (i.e. Conventional, GNMA, Bond, or State Agency must be checked). Also, enter the amount of the requested Mortgage and the Permanent and Construction Interest Rates in the appropriate spaces.

## Section C – Location and Description of Property

**Item 1**— Enter the following, if applicable, in this order: number, direction of address (i.e., North, South, etc. using standard abbreviations), street name (no abbreviations), street type (i.e., St., Dr., Pl., etc. using standard abbreviations), and post direction (i.e., NW, NE, SW, SE).

**Item 5**—Congressional District may be obtained from the Congressional Directory, Maps Of Congressional Districts.

**Item 11**—(a) Detached – A dwelling structure containing one living unit, surrounded by permanent open spaces; (b) Semi-detached – A dwelling structure containing two contiguous living units separated by a vertical division termed a common, party, or lot wall; (c) Row or Townhouse – A non-elevator structure containing three or more contiguous living units separated by a vertical division termed common, party or lot line walls. Row/townhouse units may not be enclosed on more than two sides by party or lot line walls and must have permanent open space contiguous to no fewer than two sides. Units will usually have private entrance and private interior stairs; (d) Walk-up – A multi-level structure of two or more living units which does not contain an elevator, with the units separated horizontally by floor and/or ceiling structural elements. (Note: Structures containing 2 or more dwelling units, whether one story or multi-story, which do not comply with the definitions herein of either a semi-detached/row or an elevator structure, shall be classified as “walkup”). (e) Elevator Structure – A dwelling structure, having four or more stories that contains one or more elevators or any structure in which an elevator is required by local code or the MPS.

## Section D – Information Concerning Land or Property

**In Item 3** insert any cost paid, or contracted, in addition to the stipulated purchase price. If the proposed site will require demolition expense, or other preparatory expense, this should be indicated and explained on an attached sheet.

**Item 9**—If the proposed site is leased, indicate the dollar amount of annual ground rental.

## Section E – Estimate of Income

**Item 1—Unit Type** – The various unit types the proposal will have must be listed in this column. Usually the distinction will be on the basis of number of bedrooms and/or number of baths each unit will have. If there are units with the same bedroom and bathroom count but significantly different living area, or other characteristics, that would normally be reflected in rent differential, they must be listed as a separate unit type. If there are both elevator and non-elevator units, a separate identification for unit type must be made for each. Provision has been made for 5 different unit types. This can readily be doubled by dividing each of the existing lines in half. In the rare instance where additional space is needed, an additional page of another form HUD-92013 or a plain paper listing all of the information shown in Section E for the additional unit types must be attached. (Note: If an attachment is used, a remark asterisked on the original form HUD-92013 must be made so that all parties using the application would be aware that there is an attachment involved.)

**Care must be exercised to ensure that excessive unit types are not created on the basis of minor unit market characteristics**, such as a difference of only a few square feet between units that are otherwise the same.

**No. of Living Units** – Enter here, for each unit type, the number of that unit type the project will have.

**No. of Units Assisted** – Show number of each unit type to receive Section 8 Housing Assistance Payments, if any.

**Living Area (Sq. Ft.)** is the area of each living unit measured from the inside faces of corridor and exterior walls and from the inside faces of partitions separating the living unit from other living or commercial areas.

**Composition of Units** – List here in abbreviated form, the rooms within each unit type, (i.e., L for living room, D for dining room, K for kitchen, BR for bedroom) (precede BR with number of bedrooms—e.g., 0BR, 1BR, or 2BR), B for bath (precede the B with 1 for each full bath, a 1/2 for each halfbath, or any combination appropriate), Bal. for balcony, etc.).

**PBE Not in Rent (Sec. F-1)** – Personal Benefit Expense (PBE), sometimes referred to as a Utility Allowance in the Section 8 program, is an estimate of the utilities or other expense to be paid by tenants that are not included in the owner's monthly contract rent estimate. This estimate must be compatible with the entries in Item F-1, Utilities (Not in Rent).

**Unit Rent Per Mo. (\$)** – Enter here the proposed rent for each unit type. If elevator units are involved, the issue of proposed rental difference per floor, if appropriate for the market, must be addressed. Usually the midpoint rents in a high-rise structure are reflected. The dollar difference per floor, if any, must be communicated by the applicant.

**Total Monthly Unit Rent is the Unit Rent Per Month (\$)** times the No. of Living Units of that type and represents the Gross Income that can be anticipated for those units.

**Employee(s) Living Unit(s)** – List the number of employee living units for which rental income will not be received, the square foot area of each unit, and its unit composition. Employee living units must be included in the total units for the project, since they affect project operating expense estimates.

**Item 8**—At SAMA or feasibility stage insert the estimated gross floor area which is the sum of all floor areas of headroom height within the exterior walls. When completing a request for Conditional or Firm Commitment, insert the gross floor area computed from the plans.

**Items 9 and 10** – Net Rentable Residential Area/Net Rentable Commercial Area is the sum of all living/commercial areas within the exterior walls, measured from the interior faces of the exterior walls, corridor walls, and partitions separating the area from other living or commercial areas. Existing comparable structures should be used as a guide by the sponsor in making these estimates at SAMA stage. At the Conditional or Firm Commitment stages, these areas should be calculated from the floor plans.

### Section G – Estimate of Replacement Cost

**Line 1**—Unusual Land Improvements – Enter cost for unusual site preparation such as pilings, retaining walls, fill, etc.

**Line 2**—Other Land Improvements – Enter cost of other land improvements such as on-site utilities, landscape work, drives and walks.

**Line 10**—General Requirements – See Uniform System for Construction Specifications, Data Filing and Cost Accounting. Pages 1.3 and 1.4.

**Line 21**—Enter the estimated cost per gross square foot of building area (Line 20 divided by Item 8 of Section E, page 1).

**Line 22**—Enter the estimated period that will be reflected in the construction contract. The construction time plus the two months equals the total estimated "construction period".

**Line 23**—Interest is the amount estimated to accrue during the anticipated construction period. It is computed on one-half of the loan amount for new construction and one-half of "as is" value for substantial rehabilitation.

**Line 24**—Taxes which accrue during the construction are estimated and included as the tax amount.

**Line 25**—Insurance includes fire, windstorm, extended coverage, liability, and other risks customarily insured against in the community. It does not include workmen's compensation, or public liability insurance, which are included in the cost estimate.

(Note: Lines 23, 26 through 31, and 39 are not applicable to Section 202 Capital Advance applications.)

**Line 26**—HUD/FHA mortgage insurance premium is the amount to be earned during the estimated construction period. The amount should be computed on the requested loan amount at 1/2 of 1% per year or fraction of a year. If the estimated construction period exceeds one year, the premium will be based on a two-year period.

**Line 27**—HUD/FHA examination fee is computed at \$3 per \$1000 of the requested loan amount.

**Line 28**—HUD/FHA inspection fee is computed at \$5 per \$1000 of the requested loan amount when the project involves new construction, and on the estimated cost of rehabilitation when the project involves the rehabilitation of an existing structure.

**Line 29**—Financing fee is computed at a maximum of 2% on the loan amount. It is an initial service charge. This fee is not to be confused with discounts.

**Line 30**—Enter FNMA/GNMA fee here. HUD Field Office personnel will advise interested sponsors and mortgagees of the current maximum allowable rate for this fee and the conditions pursuant to which such fee may be included.

**Line 31**—AMPO is the Allowance to Make Project Operational and is computed at 2% of the maximum Mortgage insurance amount. It is allowable in cases involving nonprofit mortgagors (not including cooperative mortgagors).

**Line 33**—Title and Recording Expenses – This is the cost typically incurred for these items, by mortgagor, in connection with a mortgage transaction. This cost generally includes such items as recording fees, mortgage and stamp taxes, cost of survey, and title insurance including all title work involved between initial and final endorsement.

**Lines 35, 36 and 37**—Legal, Organizational and Cost Certification Audit Fee – This estimate is to be based upon the typical cost usually incurred for these services in the area where the project is to be located. These items must be recorded separately.

**Line 39**—Builder's and Sponsor's Profit and Risk Allowance – This is based on total estimated cost of on-site utilities, landscape work, structures, general over-head expenses, architect's fees, carrying charges, financing, legal, organization and audit expenses. It is allowable in 220, 221(d) (3) Limited Distribution or profit-motivated, 221(d)(4), and 231 profit-motivated projects. It is in lieu of, and not in addition to, builder's profit.

**Line 40**—Consultant's Fee, if any, enter amount to be charged the non-profit sponsor by a qualified consultant.

**Line 41**—Supplemental Management Fund for subsidized living units only – Allowance must not exceed \$100 per assisted unit, excluding non-revenue producing units, if any.

**Line 42**—Contingency Reserve – An amount allowable for rehabilitation projects only, not to exceed 10% of the sum of Line 11 in Section G.

**Line 46**—Land (Estimated Market Price of Site) – Enter sponsor's estimate of market price of site including off-site costs. If site was purchased from public body, for a specific re-use, enter purchase price plus holding cost and any other cost that the purchaser is required to pay, pursuant to specific conditions of the contract of sale. For Rehabilitation interline the "As Is" Value of Property.

### Section I – Estimate of Annual Expense

**Line 13**—Other – Reflect expense not specifically listed, such as, project security. Contract Security if provided should include contract guard service, performed either part or full-time, in connection with project operation. If security services are performed by staff employees, their salaries are included under Line 12, Payroll expense.

In housing for the Elderly, Line 23, will include only the expenses resulting from supplying tenants with shelter and utilities included in the rent. Separate income and expense budgets for supplying tenants with non-shelter services must be shown on Form HUD-92013-E, supplement to this application and used with all Elderly/Handicapped Housing proposals.

### Section J – Total Settlement Requirements

**Line 2**—Enter amount required to clear title to site. If land is to be acquired, the unpaid balance of the purchase price shall be entered. If leasehold, or land owned free and clear of encumbrances, enter "none." Indebtedness against land must be supported by options, purchase agreements, pay-off balances, etc.

**Line 3**—Enter the sum of "Development Cost" and "Land Indebtedness."

**Line 4**—Enter principal amount of mortgage requested.

**Line 6**—Enter the amount required to meet operating and debt service expense from project completion until such time as income is adequate to provide a self-sustaining operation.

**Line 7**—Enter discount to be paid for placement of the permanent mortgage as well as any discount required by the construction lender.

**Line 8**—Enter the maximum interest yield cost.

**Line 9**—Enter 2 percent of the mortgage amount requested. No entry is required for nonprofit mortgagors.

**Line 10**—Enter one-half of one percent (0.5%) of the total loan requested or \$10,000, whichever is the lesser.

**Line 11**—Enter the cost of required improvements beyond property lines, such as streets and utilities, etc., which will not be installed at public or utility company expense.

**Line 12**—Enter relocation expenses in excess of amount allowed in replacement cost.

**Line 13**—Other – Enter any and all cost not identified elsewhere.

**Line 15**—Enter principal(s) cash contribution.

**Line 16**—Identify fees waived or deferred during construction or paid by means other than cash, i.e., BSPRA, builder's profit; identify grants/loans and the respective amounts.

### Section K--Principal Participants

**Items 1 through 6**--For individuals, enter last name, first name, middle initial. When entering business names, avoid using abbreviations if possible. Follow the instructions for Item 1 in Section C when entering address information. The Social Security Number (SSN) is applicable for all individuals and the Employer Identification Number (EIN) for all businesses. Providing the SSN is mandatory for the sponsor, mortgagor, borrower, and the owner. Providing the SSN for all other participants is voluntary.