



U. S. Department of Housing and Urban Development

Rental Assistance Demonstration (RAD) Program

FINANCING PLAN

SUBMISSION REQUIREMENTS	DATE OF CHAP ISSUANCE:	
	FINAL DATE FOR FINANCING PLAN:	
	DATE FINANCING PLAN SUBMITTED:	

APPLICANT

NAME:	
MAILING ADDRESS: (STREET OR P.O. BOX)	
MAILING ADDRESS: (CITY, STATE, ZIP CODE)	
APPLICANT PRIMARY POINT OF CONTACT NAME:	
EMAIL ADDRESS:	
PHONE NUMBER:	

PROJECT

NAME:	
PHYSICAL ADDRESS: (STREET OR P.O. BOX)	
PHYSICAL ADDRESS: (CITY, STATE, ZIP CODE)	



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1. Conversion Overview

Complete and upload the following:

Section 1: General Information					
PHA NAME:				PHA is an MTW Agency:	<input type="checkbox"/> Yes <input type="checkbox"/> No
PHA NOTICE ADDRESS:					
EXISTING NAME AND ADDRESS OF CONVERTING PROPERTY:					
PROPOSED NAME AND ADDRESS OF COVERED PROJECT:					
PIC Development No: <i>(Note: If combining units from multiple PICs into one CHAP, input all PIC Numbers and number of RAD units from each PIC)</i>		Number Units in AMP (Column A)::	Number of Units Converting to RAD to be Removed from AMP (Column B):	Number of Non-Converting Units to be Removed from AMP (if any) (Column C):	Total Number of Units to be Removed from AMP (sums of columns B and C):
Subsidy Type:	<input type="checkbox"/> PBV <input type="checkbox"/> PBRA	Number of HAP Contracts Term Length of Each Contract:		PBV HAP Contract Administrator <i>(PBV only; enter Name of PHA & PHA Code):</i>	
Name of current ownership entity:					
Proposed Project Ownership Entity Name, Address, Contact Phone & Email:			Proposed ownership type:	<input type="checkbox"/> Public Body <input type="checkbox"/> Non-profit <input type="checkbox"/> For-profit (in LIHTC only)	
Financing Type:		<input type="checkbox"/> None or PH Funds Only <input type="checkbox"/> FHA Insured Mortgage <input type="checkbox"/> Conventional <input type="checkbox"/> Tax Credits <input type="checkbox"/> Other: Click here to enter text.			
Scope of Work:		<input type="checkbox"/> Rehab (Length of Rehab: ____ months) <input type="checkbox"/> New Construction (Length of Construction: ____ months) <input type="checkbox"/> Critical Repairs Only <input type="checkbox"/> None			
Special Features <i>(check all that apply):</i>		<input type="checkbox"/> Multiphase Award <input type="checkbox"/> Sole or Remaining Project to Convert <input type="checkbox"/> "Many to One" Conversion <input type="checkbox"/> Rent Bundling <input type="checkbox"/> Portfolio Award <input type="checkbox"/> Existing Mixed Finance <input type="checkbox"/> Choice-Mobility Exemption <input type="checkbox"/> Existing Section 18 Approval			



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	<input type="checkbox"/> CNI <input type="checkbox"/> HOPE VI <input type="checkbox"/> Other: Click here to enter text.
PHA Desired Closing Date:	Click here to enter a date.
Tax Credit Closing Deadline (if applicable):	Click here to enter a date.

Section 2: Narratives

1. Overview of Proposed RAD Conversion: *Provide a detailed description of the proposed conversion. At a minimum, this description should include: the number and type of buildings converting, neighborhood/location, resident type, bedroom types, proposed de minimis unit reduction (if applicable), proposed scope of work, and plans for relocation. Be sure to highlight any unusual or unique aspects including, for example, if this is a partial AMP conversion, if the conversion includes a transfer of assistance, or if demolition/new construction is proposed.*

2. Changes to Bedroom/Unit Configurations: *If the conversion proposes changes to bedroom types (for example, converting efficiencies to 1 Bedrooms or 1 Bedrooms to 2 Bedroom, etc.), please provide a brief description of those changes, including how any "right to return" issues with residents have been addressed:*

3. Transfer of Assistance: *If the conversion proposes to transfer some or all of the assistance to another site, please describe the location of the new site, what will become of the existing site, whether the new site is existing housing, and how this will impact existing tenants at both the original and new sites, including any relocation plans. For example, if Site A has 100 units prior to conversion and the PHA is proposing to keep 40 units on Site A and put 60 units on Site B, please explain if the transactions are occurring simultaneously or in phases:*



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4. Relocation: Please describe any planned relocation of residents, be it temporary or permanent, and whether any residents are waiving their right to return. In the case of a waiver of right to return, please describe the documentation received. If the PHA plans to relocate residents prior to closing, please notate here and be advised that HUD approval is required.

5. Changes in rent levels: If the conversion proposes changes in rent levels as a result of rent bundling, changes in responsibility for utilities (landlord to tenant or tenant to landlord), the use of MTW authority to supplement rents, different rent levels for similar unit sizes (such as two different rent levels for different types of one-bedroom apartments), the use of local Project Based Vouchers, or if there are any errors shown in the CHAP, please provide a listing of the unit types and proposed rent levels:

6. Ownership: Please describe any changes in ownership and creation of a Single Asset Entity ("SAE") if the PHA is planning to administer the PBVs for the property:



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7. Waivers and other key issues: *Please describe any specific programmatic or regulatory waivers sought, and describe any important or unique transaction features or special approvals that the PHA wishes to communicate to HUD.*

8. Prior Section 18 Approval: *Please explain any prior Section 18 approval and whether it will be applied to any of the units that will be removed from PIC as a reduction in units in the transaction.*

9. Utility Allowance: *Please provide the most current utility allowances in effect at the property that is converting. Identify whether these utility allowance match those in the CHAP. Identify whether these utility allowances will remain in effect once the property is converted.*

Bedroom Type	No. Units	Utility Allowance



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Section 3: Development Budget

1. Are any IOI loans or advances being utilized as a funding source?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. If yes to the above, will the loan or advance be converted to an unsecured surplus cash note at closing?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Will any planned rehab/construction result in an initial operating deficit during the rehab/construction period?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. If yes to the above, describe below how the deficit will be funded (including any operating escrow, reserve or similar fund), what entity will control the fund, the length that the fund will be in place, etc.	

Section 4: Identification of Existing Loans or Debt

Note: Complete this section only if the proposed conversion has existing loans/debts on the property.

1. Describe the type of existing loan(s) or debt(s) on the property. Examples including EPCs, CFFPs, an existing mortgage, etc.	
2. Name of lender(s):	
3. Current loan/debt amount(s):	
4. Is the loan or debt cross collateralized with other properties outside of the proposed RAD conversion?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Will the existing loans(s) or debt(s) be paid off at or before closing as part of the RAD conversion?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. If YES to the above, please describe what funds will be used to payoff the debt(s), the amount to be paid off, the timing of the payoff (before or at closing), the repayment terms, and any impact the payoff may have on other properties.	
b. If NO to the above, please discuss whether the existing lender has agreed to subordinate to the RAD Use Agreement and whether	



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there is sufficient NOI to support the debt/loan payments after closing. Note: Be sure to include the debt/loan payments as part of your operating pro forma submission.	
6. Input any other relevant comments:	

2. Current Conversion Type

Indicate whether your current selection of either Project Based Vouchers or Project Based Rental Assistance has changed by checking the box that reads "check here if this is incorrect."

3. RAD Physical Condition Assessment (RPCA) & Scope of Work

Upload the latest version of the PCA. This includes the written narrative and the EXCEL tool, as applicable.

4. Completed Environmental Review

Upload the completed environmental review.

5. Development Budget

(Reference: Final Notice, Attachment 1A.1.F.)

Update the RAD Resource Desk Transaction Log with the latest sources and uses. Upload the completed subsidy layering review and EPC approval letter, as applicable. (Continued on following page)

SOURCES	\$	USES	\$
New First Mortgage Loan		Acquisition Costs	
Public Housing Operating Reserves		Building and Land Acquisition	
Public Housing Capital Funds		Other Costs	
Replacement Housing Factor		Payoff Existing Loans	
Low Income Housing Tax Credit Equity - 4%		Construction Costs	
Low Income Housing Tax Credit Equity - 9%		Relocation Costs	
HOME		Professional Fees	
CDBG		Architecture	



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Other Federal Funds		Engineering	
Other State/Local Funds		Physical Condition Assessment	
Other Private Funds		Borrower's Legal Counsel	
Seller Take Back Financing (Acquisition)		Lender's Legal Counsel	
Other: <input type="text"/>		Feasibility Studies	
Other: <input type="text"/>		Environmental Reports	
Other: <input type="text"/>		Appraisal / Market Study	
Other: <input type="text"/>		Accounting	
Other: <input type="text"/>		Survey	
Other: <input type="text"/>		Other Costs <input type="text"/>	
Total Sources		Loan Fees and Costs	
		FHA MIP	
		FHA Application Fee	
		FHA Inspection Fee	
		Financing Fee	
		Organizational Costs	
		Title Insurance/Exam Fee	
		Recordation Fee	
		Closing Escrow Agent Fee	
		Prepayment Penalty/Premium	
		Payables	
		Construction Interest	
		Construction Loan Fees	
		Cost of Bond Issuance	
		Other Costs <input type="text"/>	
		Reserves	
		Initial Deposit to Replacement Reserve	
		Initial Operating Deficit Escrow	
		Operating Reserve	
		Tax and Insurance Escrow	
		Other <input type="text"/>	
		Developer Fees	
		Total Uses	

6. Development Team

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Upload an organization chart that details all participants for each entity, a narrative description of each entity including the entity name, its role in the conversion and a description of relevant experience. If converting to PBRA, upload evidence of 2530 approval.

7. Proposed Financing

Upload a copy of the latest lender, investor or grantor engagement letter and submit the following information for all sources of funds:

SOURCE:	
AMOUNT:	
REPAYMENT TERMS:	
INTEREST RATE:	
AMORTIZATION PERIOD:	
MATURITY:	
PREPAYMENT RESTRICTIONS:	
PAY-IN SCHEDULE:	
CONDITIONS TO CLOSING:	<i>(list each condition; be specific)</i>
IMPEDIMENTS TO CLOSING:	
MILESTONES (DATES) TO CLOSING:	<i>(identify each milestone and an estimated date)</i>
ESTIMATED CLOSING DATE:	
LIEN POSITION:	___ FIRST ___ SUBORDINATE
FIRST MORTGAGE LENDER CONSENT TO USE AGREEMENT AND ACKNOWLEDGEMENT THAT FIRST MORTGAGE WILL BE SUBJECT TO THE RAD USE AGREEMENT:	___ YES (UPLOADED) ___ N/A

8. Operating Pro Forma

Upload a complete operating pro forma that projects out for the term of the initial HAP contract as well as supporting documentation for expenses and insurance estimates. If



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applicable, upload a narrative discussion of the energy and water savings that are anticipated as a result of the proposed rehab or construction and the basis for those estimates. If PILOT or other real estate tax exemption will apply after conversion, upload a draft legal opinion based on state and local law of continuation of PILOT after conversion that will be executed at the time of closing. The RAD Transaction Log must also be updated.

OPERATING PRO FORMA	\$
GPR RAD	
GPR Market Rate Apartments	
GPR Affordable Apartments (other than RAD)	
GPR Commercial	
Vacancy Loss	
Bad Debt Loss	
Other Income	
Effective Gross Income	
Administrative	
Ordinary Maintenance and Ops	
Utility Expense	
Insurance	
Real Estate Tax	
Tenant Services	
Asset Management Fee (Non-cash flow expense)	
Other General Expenses	
Total Operating Expenses	
Replacement Reserve Deposit	
Net Operating Income	
First Mortgage Debt Service	
Operating Cash Flow	

9. Market Study

Upload any market study required by any financing source or check the box stating that no financing source required a market study.



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10. Evidence of Approval of PHA/MTW Plan or Significant Amendment to PHA/MTW Plan

Upload a copy of the letter from HUD indicating approval of the Plan or Significant Amendment.

11. Approval of Non-Dwelling Real Property

No upload by the PHA required.

12. Approved Amendment to Attachment A of the MTW Agreement

Upload the executed Amendment A of the MTW Agreement (if applicable).

13. Fair Housing, Civil Rights and Relocation Checklist

Upload the completed FHEO Accessibility and Relocation Plan Checklist and associated approvals obtained prior to financing plan submission.

14. Affirmative Fair Housing Marketing Plan (PBRA & FHA only)

Upload a copy of the fully executed HUD form 935.2A.

15. New Construction Site Selection & Neighborhood Standards Documentation

For new construction, upload the below information as well as documentation that the site meets Site Selection & Neighborhood Standards requirements. This is due prior to Financing Plan submission pursuant to the requirements of the Notice.

Instructions: Submit the information below using this template or in a format of your choosing. Once complete, upload to the RAD Resource Desk Financing Plan grid by selecting “New Construction Site Selection & Neighborhood Standards Documentation” as the Milestone Document type.

1) General Project Information:

PIC Development Number:	
Name of Project:	
Address (or cross-streets) of project:	
Financing Plan Submission Date: (expected or actual)	
Total Number of Units at the project by type of assistance for the units (e.g., number of PBV/PBRA units, LIHTC,	



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market rate units):	
Occupancy Type of Project (e.g., elderly, family, disabled):	
The neighborhood¹ of the project:	
The housing market area² of the Project:	

- 1) The racial/ethnic characteristics of the census tract and the MSA from the most recent Decennial Census (2010 Census, DP-1).³ The following format may be used:

Hispanic or Latino and Race	Census Tract %	MSA %
Hispanic or Latino (total)		
Not Hispanic or Latino		
Black or African American alone		
American Indian and Alaska Native alone		
Asian alone		
Native Hawaiian and Other Pacific Islander alone		
Two or More Races		
Some Other Race		
<i>Total</i>		

- 2) The PHA's determination of whether the site is located in an area of minority concentration, based on the racial/ethnic data for the census tract and MSA and the definition of minority neighborhood.⁴

☐ The site is not located in an area of minority concentration. Skip the rest of this question and continue to item #4.

☐ The site is located in an area of minority concentration. Identify and provide a complete justification of which of the following exceptions applies: (1) sufficient, comparable opportunities or (2) overriding housing need. For a definition of these

¹ In general, the analysis should use the Census Tract as a proxy for the neighborhood. To identify your Census Tract, enter the address here: <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?ref=addr&refresh=t>

² A housing market area is the geographic region from which it is likely that residents of the housing at the proposed site would be drawn for a given multifamily project. A housing market area generally corresponds to, as applicable: (1) the Metropolitan Statistical Area (MetroSA), (2) the Micropolitan Statistical Area (MicroSA), or (3) if the site is in neither a MetroSA or a MicroSA, either (x) the county or statistically equivalent area or (y) the PHA's service area, whichever is larger. To identify your MetroSA or MicroSA, enter the address here: <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?ref=addr&refresh=t>

³ DP-1 is available here: http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=DEC_10_DP_DPDP1&src=pt

⁴ See https://www.huduser.gov/portal/glossary/glossary_all.html for a definition of "Minority Neighborhood."



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exceptions, please see 24 CFR 983.57 for PBV or Appendix III of the RAD Notice for PBRA. The PHA must submit a narrative discussion of how it determined that the site meets the applicable exception and the information that it relied upon to make this determination.

3) The PHA's determination of whether the site is located in a racially mixed area. A racially mixed area is an area that is neither minority concentrated, nor a non-minority area. A non-minority area is an area in which the minority population is lower than 10 percent.

- ☐ The site is not located in a racially mixed area. Skip the rest of this question.
- ☐ The site is located in a racially mixed area. The PHA must demonstrate that the project will not cause a significant increase in the proportion of minority to non-minority residents in the area.

16. Unit Reduction or Configuration Change

Upload the below information if the conversion includes a reduction in the number of units or a change in the unit configuration as a result of conversion. A description of the proposed change, justification for the change, a discussion of compliance with accessibility requirements, and a discussion on how the residents' right to return will be impacted should also be included.



RAD Scenario: *Reduction of units or change in unit configuration, including when occurring during a transfer of assistance*

Instructions: Complete items 1-10 below. Once complete, upload to the RAD Resource Desk Financing Plan grid by selecting “Unit or Configuration Change” as the Milestone Document type.

- 1) Financing Plan Submission date (expected or actual): [Click here to enter a date.](#)
- 2) PHA Name:
- 3) PIC Development Number: [Click here to enter text.](#)
- 4) Project Name: [Click here to enter text.](#)
- 5) Project Address: [Click here to enter text.](#)
- 6) Complete the grid below with information on current and proposed unit changes. Except where indicated, all fields should be completed for a single converting property.
- 7) Please identify the occupancy type of the overall housing stock, the UFAS accessibility and the waiting list and if the applicable occupancy type is mixed, please also provide the bedroom information by occupancy type.

	Public Housing Information: All conversions that involve a reduction of units or change in unit configuration must complete this section.					UFAS Information: Complete this section only if the conversion will involve a reduction of units or change in unit configuration of UFAS units.			
	PHA's Public Housing Stock				Public Housing Waiting List	UFAS-Accessibility			UFAS Waiting List
Bedrooms	PHA's Public Housing Stock	Current # of public housing units at the property	# of occupied units	Post-conversion # of RAD units at the property	# of families on the public housing waiting list	PHA's UFAS Public Housing Stock	Current # of UFAS accessible public housing units at the property	Post-conversion # of UFAS accessible units at the property	# of families on the waiting list requesting UFAS units



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	General	Mixed	Elderly Only	Disabled Only				Total	Elderly	Disabled	General	Mixed	Elderly Only	Disabled Only			Elderly	Disabled	Family
0																			
1																			
2																			
3																			
4																			
5																			
Total																			

8) A narrative description of the proposed change:

--

9) A justification for the changes, including data from the Consolidated Plan or Census that support the need for the proposed changes:

--



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- 10) Describe the impact that the reduction or reconfiguration of UFAS units will have on the ability of the PHA to be in compliance with the requirement that a minimum of 5% of units be accessible to persons with mobility impairments and 2% be accessible to persons with hearing/vision impairments and the requirement that accessible units be available in a range of bedroom sizes:

- 11) Describe whether any families that need an accessible unit reside in any of the UFAS units being eliminated or reconfigured. If yes, describe how the PHA will accommodate the family so that they can return to the project, if they choose. A family requiring an accessible unit cannot be denied their right to return to the project due to the lack of an accessible unit.:



- 12) Describe whether any families that currently reside at the project will not be able to return due to a reduction in units or change in bedroom distribution. If yes, provide the demographic information (i.e., race, national origin, disability, familial status) below:
- For reductions in units, provide the demographic characteristics of the residents of the units being eliminated, the residents of the project, the residents of the PHA, the census tract of the site, and the PHA's jurisdiction.
 - For changes in bedroom distribution, provide the demographic characteristics of the residents that will not be able to return due to the change in bedroom distribution, the residents of the project, the residents of the PHA, the census tract of the site, and the PHA's jurisdiction.

- 13) If you are eliminating or reconfiguring units resulting in a loss of four bedroom or larger units, please provide data on the racial/ethnic characteristics of the families occupying those unit sizes at the project, as well as the racial/ethnic characteristics of the families in the public housing portfolio, the census tract and the MSA:



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- 14) Would the unit reduction or reconfiguration significantly reduce or eliminate certain types of units (e.g. units of particular bedroom size or occupancy type or UFAS-accessible units) from the public housing stock? If yes, does the PHA have comparable units in its other programs (e.g. PBV or PBRA)?:



17. Change in Occupancy

Upload the below information if your conversion includes a change in occupancy type. A description of the proposed change, justification for the change, a description of any alternative housing resources that are available to the group that will no longer be eligible to reside at the project at a comparable rent/size, a discussion on how the residents' right to return will be impacted should also be included.

Instructions: Complete items 1-9 below. Once complete, upload to the RAD Resource Desk Financing Plan grid by selecting "Change in Occupancy" as the Milestone Document type.

- 1) Financing Plan Submission date (expected or actual): [Click here to enter a date.](#)
- 2) Name of PHA:
- 3) PIC Development Number: [Click here to enter text.](#)
- 4) Project Name: [Click here to enter text.](#)
- 5) Project Address: [Click here to enter text.](#)
- 6) Current occupancy type
- 7) Proposed occupancy type
- 8) Complete the grid below with information on current and proposed unit changes. Except where indicated, all fields should be completed for a single converting property.
- 9) Please provide a separate chart for each subsidy type (public housing, PBV and PBRA).

PHA's Public Housing Stock					Public Housing Waiting List	UFAS-Accessibility				UFAS Waiting List
Bedrooms	PHA's Public Housing Stock	Current # of public housing units at the	Type of families in occupied units at the property	Type of families in occupied units PHA-wide	# of families on the public housing waiting list	PHA's UFAS Public Housing Stock	Current # of UFAS accessible public housing units at the property	Types of families occupying UFAS units at the property. (Provide this information	Types of families occupying UFAS units PHA-wide. (Provide this information only for families that need	# of families on the waiting list requesting UFAS units



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					property														only for families that need the accessible features of the unit.)			the accessible features of the unit.)					
	General	Mixed	Elderly Only	Disabled Only		Family	Elderly	Disabled	Family	Elderly	Disabled	Total	Elderly	Disabled	General	Elderly Only	Disabled Only			Family	Elderly	Disabled	Family	Elderly	Disabled	Family	Elderly
0																											
1																											
2																											
3																											
4																											
5																											
Total																											

10) A narrative description of the proposed change:

11) A justification for the changes, including data from the Consolidated Plan or Census that support the need for the proposed changes:



- 12) Describe any alternative housing resources that are actually available to the group that will no longer be eligible to reside at the project (i.e., families with children or non-elderly disabled families) at a comparable rent to the designated public housing units and of a comparable size to those being designated:

- 13) Indicate whether any families that currently reside at the project will not be able to return due to a change in occupancy. If yes, provide the demographic characteristics of the residents that will not be able to return due to the change in occupancy type, the residents of the project, the residents of the PHA, the census tract of the site, and the PHA's jurisdiction. Also, provide the demographic characteristics of the group that will no longer be eligible (i.e., families with children or non-elderly disabled families) in the PHA's programs, the census tract of the site, and the PHA's jurisdiction, and the demographic characteristics of the elderly population in the PHA's programs, the census tract of the site, and the PHA's jurisdiction.



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- 14) Provide the demographic characteristics of the group that will no longer be eligible (i.e., families with children or non-elderly disabled families) in the PHA's programs, the census tract of the site, and the PHA's jurisdiction, and the demographic characteristics of the elderly population in the PHA's programs, the census tract of the site, and the PHA's jurisdiction.

- 15) If you are changing to elderly occupancy, please provide data on the racial/ethnic characteristics of the households occupying the project, as well as the racial/ethnic characteristics of the elderly population in the public housing portfolio, the census tract and the MSA:



18. Estimate of Public Housing Funds Available for Housing Assistance Payment (HAP) Subsidy

Upload a copy of the completed RAD Initial Year Funding Tool.



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HUD Form 52614

Step 1: Enter RAD Conversion Data

PIC Development Number of Converting Units:

Converting Units:

Enter Estimated or Actual HAP Contract Effective Date: - Months Remaining

Step 2: Review Calculatuon of Capital Fund Subsidy Available for HAP in the Initial Year

FY 16 Development \$ Amount		Converting Units	Capital fund "Standing Units" at AMP	Remaining Portion of Year	Calculated Maximum Capital Funds for Initial Year
\$ -	x	0	÷	0/12	= \$ -

Step 3: Enter Estimate of Operating Fund Subsidy Data

Enter the Operating Fund Eligibility in 2016 based on your submitted or revised HUD -52723 "Operating Fund Calculation for Operating Subsidy" (Section 3, Part E, Line 01)		Converting Units	#N/A	Months Remaining in CY	Enter the estimated 2016 Operating Fund Pro-ration level
	x	-	÷	0/12	x 89.76
		-	=	"RAD Operating Fund Percentage"	

Step 4: Enter Estimate of Tenant Rents for the Remaing Months of the Calendar Year

Total Estimated Project Revenue in the Initial Year

Step 5: Certification

Monthly Project Revenue in the Initial Year

I acknowledge the estimate of funds that will be available for this property commencing on the effective date of the HAP

Name of PHA Signatory
Official Title

Name of Transferee
Official Title

19. Transfer of Assistance

If proposing a transfer of assistance to a new site, the PHA should upload documentation containing the address or geographical description of the new site, the poverty concentration of the zip code in which the site is located, a brief description of the proposed transaction, a description of the existing public housing site(s) from which assistance is being transferred (including whether conversion on-site is economically non-viable and whether the existing site is physically obsolete or severely distressed), and a description of the impact the transfer will have on residents of the existing site. If the assistance will be transferred to an existing LIHTC property, a description of whether the transfer is necessary to help with



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the de-concentration of poverty and/or the de-densification of a public housing project with extensive capital needs should also be included. The PHA should also indicate if the DOT will be released in conjunction with closing or at a later date, including all supporting documentation.



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HUD Form 52614



20. Resident Comments

Upload copies of the responses to resident comments on the proposed conversion that were received in connection with the resident meeting (or meetings, where applicable) held following the issuance of the CHAP.

21. Title Report

Upload a complete Title Report, as well as a summary of whether the Converting Project is currently encumbered under a DOT and any other liens, encroachments, easements, or other recordation against the property.

22. Other Documents

The PHA may upload any additional documents not covered by the items above.

23. Financing Plan Certification and Submission

Upload a copy of the executed certification.

CERTIFICATION OF APPLICANT AND APPROVAL OF SUBMISSION

Warning: HUD will prosecute false claims and statements. Convictions may result in criminal or civil penalties. 18 USC Sections 1001, 1010; 31 USC Sections 3729, 3802.

I have reviewed this RAD Program Financing Plan and all uploaded files and certify that the information is correct to the best of my knowledge. I agree to notify HUD if any new or conflicting information comes to my attention after this date.

PHA Executive Director

Date

Printed Name: _____