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## **FREDERICK COUNTY HOUSING INITIATIVE FUND DEFERRED LOAN PROGRAM APPLICATION**

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*Applications are accepted based on funding availability. For further information, contact Susan Brown at:*

Submit application to:  
Frederick County Division of Housing  
401 Sagner Avenue  
Frederick, Maryland 21701  
ATTN: Susan Brown, Community Development Programs  
[SBrown@frederickcountymd.gov](mailto:SBrown@frederickcountymd.gov)  
(301) 600-3530  
[www.FrederickCountyMD.gov](http://www.FrederickCountyMD.gov)

### **SUMMARY INSTRUCTIONS**

#### **APPLICATION COMPLETION**

- Review the DLP Program Description and Associated Scoring Matrix for detailed program information and project priority areas.
- The application must be filled out completely in accordance with the application instructions and all attachments must be current. Label all attachments as they appear on the application checklist (i.e. A.1, A.2, etc.).
- Supply an accurate and up to date timeline from project beginning to end.
- Complete the Project Budget making sure to total across and down and confirming accuracy of totals. Write the budget narrative to back up the Project Budget in the same order as the budget line items.
- Complete the Leveraging Table (B-3). Do not check that funds are “committed” unless a commitment letter is attached. If no commitment letter is available, please explain and/or provide other documentation such as a copy of the application for state or federal funding.
- If you are or plan to apply for state funding, please provide a copy of your 202 submission application.
- Provide copies of all commitment letters from financial, philanthropic or funder institutions.
- Provide evidence of commitment for long-term use of affordable housing (i.e. deed restriction or covenants that will be part of public funding).
- Provide documentation of compliance with applicable county, municipality, land use, zoning and adequate public facilities ordinance requirements.
- Digital pictures or site plans are required with each application. Upon completion, digital pictures of completed project are required.

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## **DEFERRED LOAN PROGRAM APPLICATION**

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### **APPLICANT INFORMATION:**

1. Applicant Name:
2. Address:
3. Executive Director:
4. Contact Name:
5. Contact Phone and Fax:
6. Contact Email:
7. Organization Type:

<input type="checkbox"/> Non-Profit or Not for Profit	<input type="checkbox"/> Public Housing Authority
<input type="checkbox"/> Government Agency	<input type="checkbox"/> Profit motivated entity actively involved in development of affordable housing
8. Project Name:
9. Project Address or Location:
10. Project Type:  New Construction  Acquisition  Rehabilitation  Preservation
11. Type of Completed Project:  Rental  Homeownership
12. Total Number of Units in Project:

Affordable Units:  
Market Rate Units:
13. Clients Served (check all that apply):  
 Below 30% AMI  Below 50% AMI  Below 60% AMI  Persons with Disabilities  Veterans  
 Persons Aged 55+
14. Brief Project Summary:

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## **DEFERRED LOAN PROGRAM APPLICATION**

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15. Value of Deferred Loan Program (DLP) funding requested; Proposed Terms of PILOT (if applicable); and Aggregate Value of Impact Fee waivers sought (if applicable):

DLP:

PILOT:

Impact Fee Waivers:

### **A. PROJECT DESCRIPTION**

1. Project narrative – Fully describe your project and attach as **Attachment A.1**. Please the following in your description:
  - a. How the project will serve eligible households.
  - b. Public benefits and resident support structures (include full tenant service plan if available).
  - c. Provide evidence that project meets one or more of the program objectives per the DLP Program Description.
  - d. Provide a description of building characteristics including LEED Certification and the total number of accessible units (504).
  - e. Describe how the project exhibits innovation in design, community impact, resident engagement and/or construction methods.
2. Current status of project:      Site owned?  Yes  No
  - a. If yes, date of acquisition.
  - b. If no, anticipated settlement date.

(Attach site control document. (**Attachment A.2**))

  - c. If new construction, has construction begun?  Yes  No  N/A

(For a new construction project attach a copy of the site plan and/or architectural drawings. For a rehabilitation project attach before photographs. (**Attachment A.3**))

  - d. Provide documentation of compliance with applicable county, municipality, land use, zoning and adequate public facilities ordinance requirement. (**Attachment A.4**)
3. Project timeline – Provide a realistic timeline to reach completion of the project. List activities involved in developing and implementing the proposed project (i.e., site acquisition, construction schedule, obtaining permits, supervision of rehab or construction, acquisition of materials, the qualifying of eligible applicants, the sale of developed lots, etc.). Please include any anticipated barriers or horizon issues that could affect the project. Please submit a table or spreadsheet. (**Attachment A.5**).
4. Evidence of commitment(s) for long term use as affordable housing per DLP Program Description (minimum of 30 years); for example, deed restriction, covenants. (**Attachment A.6**)

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## **DEFERRED LOAN PROGRAM APPLICATION**

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### **B. PROJECT BUDGET.**

1. Budget Summary

ITEMS	DLP	Other Sources (see #3 below)	Total Project Budget
Land Costs			
Permits and Fees			
Construction			
Architect/Design			
Engineering			
Legal			
Materials & Supplies			
Equipment			
Other			
<b>TOTAL</b>			

2. Budget narrative – Write the budget justification in the same order as the line items. Explain fully how each figure was calculated in the budget summary above. (**Attachment B.1**)

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## **DEFERRED LOAN PROGRAM APPLICATION**

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3. Leveraging- In accordance with the DLP Program Description, the project must leverage non-DLP funding and in-kind sources (i.e., donated labor or material). Please provide commitment letters for funding and fair market value commitment of in-kind sources. For uncommitted funding, please provide any applications for other funding source (i.e. state, federal, or foundation grant/loan) or in-kind source. **(Attachment B.2)**

#	Other Sources	Amount	Committed?	If no, anticipated date of award
a			<input type="checkbox"/> Yes <input type="checkbox"/> No	
b			<input type="checkbox"/> Yes <input type="checkbox"/> No	
c			<input type="checkbox"/> Yes <input type="checkbox"/> No	
d			<input type="checkbox"/> Yes <input type="checkbox"/> No	
e			<input type="checkbox"/> Yes <input type="checkbox"/> No	
f			<input type="checkbox"/> Yes <input type="checkbox"/> No	
g			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Attach additional sheet(s) if necessary.

Calculate the ratio of leveraged funds to DLP request: \_\_\_\_\_

Calculate the per affordable unit DLP investment requested: \_\_\_\_\_

### **C. ORGANIZATIONAL DOCUMENTS (if already submitted, do not re-submit)**

1. Indicate applicant entity's legal status.

Corporation       Limited Liability Company  
 Limited Partnership  
 Other \_\_\_\_\_

2. Provide organizational documents:

Bylaws       Articles of Incorporation  
 Articles of Organization  
 Other \_\_\_\_\_

3. Provide evidence of experience with similar projects, including either:

Evidence of 3+ existing developments and at least \$500,000 in liquid assets; or  
 Evidence of 1 development with the same or more units as the proposed project; or  
 A narrative description of relevant experience and ability to undertake to proposed project

### **D. AUTHORIZATION/RELEASE/CERTIFICATIONS**

To the best of my knowledge and belief, all information and data in this application and attachments are true and correct. No material has been omitted, including financial information. If funded, I certify that the applicant is willing and able to adhere to policies and procedures specified by the Department of Housing and Community Development (DHCD). Further, I understand that this is not an agreement for grant funding and

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## **DEFERRED LOAN PROGRAM APPLICATION**

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cannot encumber funds until DHCD issues a commitment letter and/or the individual authorized to execute agreements on behalf of the applicant has signed the agreement.

I authorize DHCD to request information from entities identified in this application and attachments, and I authorize those entities to provide information to DHCD to facilitate verification of information related to this application. I am aware that any misrepresentation will result in the forfeiture of my right to be eligible for the DLP and possible legal action.

Availability of this information for public inspection is governed by the provisions of the Maryland Public Information Act, State Government Article, Sections 10-611 et. seq. of the Annotated Code of Maryland. This information will be disclosed to appropriate staff of DHCD, and participating mortgage lenders (if applicable), for purposes directly connected with administration of the loan and the loan program. Such information is not routinely shared with state, federal or local government agencies, but would be made available to the extent consistent with the Maryland Public Information Act. You have the right to inspect, amend or correct personal records in accordance with the Maryland Public Information Act.

### **Certifications**

1. This is to certify that the project will serve households earning 60% or less of the HUD Area Median Income.
2. This is to certify that the project will comply with County, municipality, land use, zoning, and Adequate Public Facilities Ordinance requirements (as applicable).
3. This project is a portion of a larger undertaking:  Yes  No

(This is to certify that if this project is a portion of a larger undertaking, the applicant will provide project residents equal access to all amenities and common areas within the larger undertaking. In addition, units in the project must have amenities that are comparable to those in the unit(s) available in the rest of the undertaking.)

4. \_\_\_\_\_ Initial if your organizational documents (see Section D.) are on record from a previous round and no changes have been made.

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Authorized Signature (sign in blue ink)

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Type Authorized Signature

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Title

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Date

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Witness/Attest

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Type Name

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Date

