

Intent to Submit Tax Credit Application Fact Sheet

Project Information:

Project Name: _____

Project Address: _____

Municipality: _____ **County:** _____

GPS coordinates: _____

No. of Units: _____ **No. of Buildings:** _____

Target Population (general, senior, preservation, etc.): _____

Type of Site Control:

Deed	_____	Expiration Date:	_____
Agreement of Sale	_____	Expiration Date:	_____
Option	_____	Expiration Date:	_____
Other	_____	Expiration Date:	_____

Project Type:

New Construction _____	Acquisition _____
Rehabilitation _____	Preservation _____

Commercial space: Yes _____ No _____ If yes, describe: _____

Proposed Financing:

Type of financing	Lender	Amount
1 st (amortizing) mtg.	_____	_____
PennHOMES	_____	_____
CDBG	_____	_____
HOME	_____	_____
	_____	_____
	_____	_____

Development Team Information:

Owner/Applicant:

Name: _____

Primary Contact: _____

Phone: _____

E-mail: _____

Qualified Non-Profit: Yes _____ No _____

General Contractor:

Name: _____

Primary Contact: _____

Phone: _____

E-mail: _____

Management Agent:

Name: _____

Primary Contact: _____

Phone: _____

E-mail: _____

Architect:

Name: _____

Primary Contact: _____

Phone: _____

E-mail: _____

Syndicator:

Name: _____

Primary Contact: _____

Phone: _____

E-mail: _____

Supportive Services Provider:

Name: _____

Primary Contact: _____

Phone: _____

E-mail: _____