

Applicant Name: _____ Date: _____

Project Name and Location: _____

Eligible Applicants must demonstrate experience and capacity to develop an eligible SRDP project as evidenced by the ability to own, construct, or rehabilitate rental housing developments. Applicants must demonstrate the capacity to develop the type of units being proposed in the 2019 SRDP application.

- Applicants proposing to develop single family rental homes must have experience within the last eight years of successfully developing no less than either: (a) two single family rental developments of at least two homes, or (b) one single family rental development of at least four homes.
- Applicants proposing to develop multifamily rental housing must have experience within the last eight years of successfully developing no less than either (a) two multifamily rental developments of at least two units each, or (b) one multifamily rental development with at least four units.

Successfully developing means coordinating the development team in planning, financing and constructing a development through the receipt of Certificates of Occupancy (COs) and reaching stabilized occupancy.

Please choose a statement below appropriate for the Applicant listed above:

- Information in the table below evidences experience and capacity needed to be an Eligible Applicant.
- Information in the table below evidences experience and capacity needed to be an Eligible Applicant **AND** claim points for previous development experience of rental properties per page 19 of the SRDP Manual.
- Information in the table below evidences experience and capacity needed to be an Eligible Applicant **AND** claim points for previous development experience of rental properties using at least one (1) governmental funding source per page 19 of the SRDP Manual.

Owner Entity & Ownership Interest	Project/Development Name & Address	Funding Source(s) & Contact Information	# Units	SF or MF	Placed in Service Date	Date of Stabilized Occupanc

Use additional sheets if needed

Applicant Name: _____

Authorized Rep's Signature: _____

Date: _____