

FORM LLC

South Carolina State Housing Finance and Development Authority

LIMITED LIABILITY COMPANY	Development Name: _____
	City: _____ Zip: _____ County: _____

Name of LLC: _____	LLC includes the following: <input type="checkbox"/> For Profit <input type="checkbox"/> Non-Profit
Address: _____	City: _____ State: _____ Zip: _____
Tax ID Number: _____	or date applied for: _____

Membership	% Ownership
1. Manager (if any): _____ Address: _____ City, State, Zip _____	_____ %
2. Member Name: _____ Address: _____ City, State, Zip _____	_____ %
3. Member Name: _____ Address: _____ City, State, Zip _____	_____ %
4. Member Name: _____ Address: _____ City, State, Zip _____	_____ %
5. Member Name: _____ Address: _____ City, State, Zip _____	_____ %
6. Member Name: _____ Address: _____ City, State, Zip _____	_____ %

NOTE: This form must be completed for each LLC that is involved in the proposed development. If any of the Members are Corporations, Limited Liability Companies, or Limited Partnerships then you must also complete, in addition to this form, one or more of the following, as applicable: FORM CORP, FORM LP, and/or FORM LLC. All necessary forms must be submitted so as to ascertain the Principals of the development.