

**South Carolina State Housing Finance and Development Authority  
Multifamily Tax Exempt Bond Program  
Quarterly Progress Report**

Progress Reports are due three months following the bond closing and every quarter thereafter not later than the 7<sup>th</sup> day of the month following the end of each calendar quarter. Reports must be submitted until the development submits a placed in service application to the Authority. Progress Reports may be mailed, faxed or e-mailed to the attention of the Development Division.

Development Name: _____		
Development Address: _____		
(street)	(city)	(zip)
Owner/Housing Sponsor: _____		
Contact Person: _____	Phone #: _____	
Email Address: _____	Fax #: _____	

New Construction/Rehabilitation will start/was started on \_\_\_\_/\_\_\_\_/\_\_\_\_

If construction/rehabilitation has not started, explain why? \_\_\_\_\_

Currently the development is \_\_\_\_\_% complete.

Briefly describe the development's progress to date:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

It is estimated that the **FIRST BUILDING** will be available for occupancy on \_\_\_\_\_, 20\_\_\_\_

It is estimated that the **LAST BUILDING** will be available for occupancy on \_\_\_\_\_, 20\_\_\_\_

It is estimated that the **PLACED IN SERVICE APPLICATION** will be submitted \_\_\_\_\_, 20\_\_\_\_

It is estimated that the **INITIAL LEASING DATE** will be \_\_\_\_\_, 20\_\_\_\_

Project is currently \_\_\_\_\_% leased.

Explain any lack of progress in any of the above categories since your last Progress Report: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that all of the above information is true and accurate. I/We recognize and accept our obligation to notify **SCSHFDA** immediately if I/We become aware of any subsequent events or information which would change any statements or representations in the application previously submitted to **SCSHFDA**.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Authorized Representative