**CALIFORNIA STATEWIDE COMMUNITIES DEVELOPMENT CORPORATION**

**NEW MARKETS TAX CREDIT PROGRAM**

**PROJECT INTAKE FORM**

California Statewide Communities Development Corporation (CSCDC) is a nonprofit organization and certified Community Development Entity dedicated to providing capital to underserved low-income communities throughout the state of California through the federal New Markets Tax Credit (NMTC) program. The NMTC program, authorized by Congress in 2000, encourages investments in low-income communities by providing a tax incentive for community development lenders and the capital markets to invest in communities that historically have had poor access to capital. CSCDC has received three NMTC allocation awards to date, totaling $143 million.

CSCDC is an affiliate of the California Statewide Communities Development Authority (CSCDA), a joint powers authority conduit bond issuer created in 1988 by the League of California Cities and the California State Association of Counties. CSCDA is comprised of over 500 cities, counties and special districts throughout California. Its mission is to provide local governments and private entities access to low-cost, tax-exempt financing for projects that provide a tangible public benefit, contribute to social and economic growth and improve the overall quality of life in California communities.

The purpose of this form is to help CSCDC determine whether your project is an eligible candidate for CSCDC NMTC financing. Please provide as much information as possible. If a particular question is not applicable to your project, please note that it is “N/A”.

**Completed forms may be sent to:**

**Jon Penkower**

**jpenkower@cscda.org**

**(925) 476-5887**

***NOTE: Submission of the requested information is solely for the purpose of determining a project’s potential eligibility for CSCDC’s NMTC program, and not a commitment to provide financing.***

**PROJECT INFORMATION**

**PROJECT SUMMARY**

1. **Project Name:**
2. **Sponsor Name:**
3. **Project Contact**

Name:

Company:

Role:

Email:

Phone Number:

1. **Total Project Cost:**
2. **Total NMTC allocation required:**
3. **Amount of NMTC allocation requested from CSCDC:**
4. **Total Square Footage:**
5. **Square Footage of New Construction:**
6. **Square Footage of Renovation:**
7. **Brief Description of Project:**

**SPONSOR INFORMATION**

1. **Sponsor Organization Type (Non-Profit, Governmental, For-Profit, etc.):**
2. **Describe the Sponsor’s history and mission:**
3. **Describe the Sponsor’s track record of working in the Project community:**
4. **List the members of the development team, and their relevant experience:**

**PROJECT LOCATION**

1. **Street Address:**
2. **County:**
3. **Census Tract (if available):**
4. **Is the project located in any of the following areas? Check all that apply:**

|  |  |
| --- | --- |
|  | **Yes / No / Unknown** |
| Non-Metropolitan County |  |
| Brownfield site |  |
| SBA Designated HUB Zone |  |
| HOPE VI redevelopment area |  |
| Federal Native Area |  |
| HUD-designated Colonias area  |  |
| Federal Medically Underserved Area |  |
| Federally-designated Promise Zone |  |
| State-designated economic development area |  |
| Locally-designated economic development area |  |
| FEMA Disaster Area |  |
| USDA-designated Food Desert |  |

**PROJECT FINANCING**

*Please complete the tables below or, alternatively, please attach a Sources & Uses for the Project.*

|  |
| --- |
| **FUNDING SOURCES** |
| **Source** | **Type\*** | **Amount ($)** | **Status\*\*** | **Est. Closing Date** |
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|  |  |  |  |  |

\*Type: Equity, Debt, Grant, Tax Credits, Other (Describe)

\*\*Status: Funded, Committed, Term Sheet, Pending, Expected, Approvals needed, Other (Describe)

|  |
| --- |
| **USES** |
| **Use** | **Amount ($)** | **Notes** |
|  |  |  |
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**PROJECT STATUS**

1. **Status of site control (owned / under contract / in negotiations / other):**
2. **Please list the status and expected timing of the following development-related items:**

Land use approvals / entitlements:

Design drawings:

Building permit:

Phase I environmental report:

Phase II environmental investigation (if applicable):

Environmental remediation (if applicable):

Appraisal (if applicable):

Contractor selection:

Guaranteed maximum price construction contract:

1. **Expected closing date for NMTC transaction:**
2. **Describe any specific factors that might affect the timing of the NMTC closing:**

**COMMUNITY OUTCOMES**

**JOB CREATION | QUALITY OF JOBS | ACCESSIBILITY OF JOBS**

**Construction Jobs**

1. **How many full-time equivalent (FTE)[[1]](#footnote-1) temporary construction jobs are expected to be created for the Project? *(Note: if available, the total # of labor hours is also acceptable).***
2. **What % of the FTE construction jobs are expected to provide a living wage?[[2]](#footnote-2)**
3. **Average hourly wage/annual salary for construction jobs:**
4. **Will the construction jobs be union jobs?**
5. **Will the construction jobs be subject to prevailing wage requirements?**
6. **What % of the FTE construction jobs are expected to provide benefits to employees (i.e., medical, paid leave, retirement, etc.):**
7. **Please provide an estimate regarding the % of FTE construction jobs that are expected to be “accessible jobs.”[[3]](#footnote-3)**
8. **What % of construction contracts do you expect will go to MBE/WBE firms?**
9. **Describe any other noteworthy features regarding the construction jobs that are not already described above.**
10. **Describe how the construction jobs data was determined.**

**Permanent Jobs**

***If your project involves an expansion/rehabilitation of an existing facility or business, please answer #1-2 below. Otherwise, please skip to #3.***

1. **How many full-time employees (FTEs[[4]](#footnote-4)) do you currently have?**
2. **How many of the current FTE jobs will be retained after the Project is complete?**
3. **How many new permanent FTE jobs will be created for the Project over the course of the 7-year NMTC compliance period? *(Note: please include all jobs to be created by both the Owner/QALICB, and the tenants).***
4. **Of the total # of permanent FTE jobs that will be created and/or retained by the Project, how many will earn a living wage?[[5]](#footnote-5)**
5. **Please list the benefits (medical, retirement, paid leave, etc.) that will be provided to employees. Please specify if certain benefits will only be available to full-time employees.**
6. **Will employees have access to professional development, on-the-job training, opportunities for upward advancement or continuing education? If yes, please describe.**
7. **Of the total # of permanent FTE jobs that will be created and/or retained by the Project, how many are expected to be “accessible jobs”?[[6]](#footnote-6)**
8. **Describe any specific outreach or recruiting plans to ensure that Project jobs are accessible jobs.**
9. **Please complete the table below regarding the new/retained permanent FTE jobs for the Project.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Job Title / Category | Total FTEs (#) | Retained FTEs (#) | New FTEs (#) | Starting Wage | Average Wage | Benefits? (Y/N) | Minimum education level or certification required |
| *Example: Manager* | ***2*** | *N/A* | *2* | *$16/hr* | *$18.50/hr* | *Y* | *HS Diploma* |
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**GOODS OR SERVICES FOR LOW-INCOME COMMUNITIES**

1. **Please complete the table below regarding all applicable commercial or community goods or services that will be provided to low-income persons and/or low-income community residents as a result of the Project.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Goods or Services | Square feet of space | # clients – currently served | # clients - projected | % served who are low-income | Notes |
| **Health Services** |  |  |  |  |  |
| **K-12 Education** |  |  |  |  |  |
| **Adult Education** |  |  |  |  |  |
| **Childcare** |  |  |  |  |  |
| **Youth After-School Programs**  |  |  |  |  |  |
| **Social Services** |  |  |  |  |  |
| **Mental Health Services** |  |  |  |  |  |
| **Job/Vocational Training** |  |  |  |  |  |
| **Grocery Store** |  |  |  |  |  |
| **Other Healthy Foods (Describe):** |  |  |  |  |  |
| **Restaurant** |  |  |  |  |  |
| **Pharmacy** |  |  |  |  |  |
| **Other Retail (describe):** |  |  |  |  |  |
| **Arts or cultural opportunities** |  |  |  |  |  |
| **Other (Describe):**  |  |  |  |  |  |
| **Other (Describe):**  |  |  |  |  |  |

1. **Please describe the programs and services that will be provided by the Project. Why are these needed in this community?**
2. **What is your methodology for tracking the number of people served? What specific outcomes do you track related to your programs? How do you measure success of your programs?**
3. **Who are your targeted beneficiaries? Please describe your typical client, customer or service recipient.**

**OTHER COMMUNITY BENEFITS**

**Housing**

1. **Does your project include residential units? If yes, please complete the table below.**

|  |  |  |
| --- | --- | --- |
|  | **Rental Units - #** | **For Sale Units - #** |
| **Total Units** |  |  |
| **Total # of Units affordable to persons at or below 80% of AMI[[7]](#footnote-7)** |  |  |
| **Projected # of individuals who will be housed in the units** |  |  |

1. **Will the housing units be financed with NMTCs, or through separate financing?**
2. **If separate financing will be used for the housing portion of the project, please describe the financing status.**

**Minority Businesses**

1. **Are any “minority-owned businesses” or “minority-controlled businesses”[[8]](#footnote-8) involved in this Project, as developer, sponsor, contractor, subcontractor, architect, or tenant? If yes, please list the businesses, and how they qualify as minority-owned or controlled.**

**Flexible Lease Rates**

1. **Will the Project involve leases to third-party tenants?**
2. **If yes, are any of the current or anticipated tenants…**

Locally-owned businesses?

Minority-owned or Minority-controlled businesses?

Nonprofit organizations?

1. **Will these tenants benefit from discounted lease rates? If yes, please provide the anticipated percentage of discount as compared to market lease rates.**
2. **Please describe any other flexible lease features that will apply to the tenant leases (i.e., access to shared resources, purchase option, etc.).**

**Environmentally Sustainable Outcomes**

1. **Do you intend to see LEED Certification for this Project? If yes, what LEED Certification level or other similar Green Building Standard do you expect to achieve?**
2. **Will the Project incorporate green building elements? If yes, please describe, and quantify impacts to the extent feasible.**
3. **Does the Project include remediation of environmental contamination? If yes, briefly describe the remediation required. Please provide quantified data to the extent feasible (i.e., volume of soil to be removed, estimated cost of the environmental remediation, etc.).**
4. **Will the Project result in any other environmentally sustainable outcomes? If yes, please describe and quantify any impacts to the extent feasible.**

**Community Engagement & Support**

1. **What are the current uses of the site where the Project will be located?**
2. **How did you determine that your Project aligns with community priorities? How did you verify the need for the Project in this particular community?**
3. **Is the project expected to catalyze additional private investment in the surrounding area? If yes, describe any anticipated development/investments.**
4. **Is the project part of a larger neighborhood plan, revitalization effort, or community needs assessment? If yes, list any applicable plans or community efforts.**
5. **Does the project have the demonstrated support of community stakeholders? If yes, identify community supporters, and attach letters/statements of support, if available.**

**NEED FOR NMTCS**

1. **Why are New Markets Tax Credits essential for this project’s success?**
2. **Describe whether other private financing, public financing or other capital was sought and rejected as a substitute for NMTC financing.**
3. **Describe the process for determining the specific requested amount of total NMTC allocation.**
4. **Describe whether additional allocation has been secured or is being solicited from third-party CDEs and indicate the amounts.**
5. **What will happen with the Project if NMTC allocation is not obtained?**
1. FTE = 35 hours per week. Part-time jobs can be combined to determine an FTE figure; for example, two part-time employees working 17.5 hours per week each would be equal to 1 FTE. [↑](#footnote-ref-1)
2. CSCDC’s living wage standard is based on the MIT Living Wage Calculator data for 1 Adult in the County in which the project is located. Please see <http://livingwage.mit.edu/>. [↑](#footnote-ref-2)
3. Accessible jobs are jobs that will be targeted and/or available to low-income persons, low-income community residents, people with lower levels of education (HS Diploma or less), or people who face other barriers to employment (longer-term unemployed, disabled persons, formerly incarcerated individuals, etc.) [↑](#footnote-ref-3)
4. FTE = 35 hours per week. Part-time jobs can be combined to determine an FTE figure; for example, two part-time employees working 17.5 hours per week each would be equal to 1 FTE. [↑](#footnote-ref-4)
5. CSCDC’s living wage standard is based on the MIT Living Wage Calculator data for 1 Adult in the County in which the project is located. Please see <http://livingwage.mit.edu/>. [↑](#footnote-ref-5)
6. Accessible jobs are jobs that will be targeted and/or available to low-income persons, low-income community residents, people with lower levels of education (HS Diploma or less), or people who face other barriers to employment (longer-term unemployed, disabled persons, ex-convicts, etc.) [↑](#footnote-ref-6)
7. Per NMTC program requirements, if NMTC financing is used for the development or rehabilitation of housing units, at least 20% of the units must be affordable to households with incomes at or below 80% of area median income (AMI). Rent restrictions will be required, with the maximum monthly rent not to exceed 30% of the adjusted income of a family earning 80% of AMI. [↑](#footnote-ref-7)
8. Minority-owned businesses are defined by the CDFI Fund as for-profit entities that have at least 51% ownership by individuals who identify themselves as Black American, Asian American, Hispanic American or Native American. Minority-controlled businesses are defined as nonprofit entities with at least 51% of its Board of Directors comprised of individuals who identify themselves as Black American, Asian American, Hispanic American or Native American. [↑](#footnote-ref-8)