



DEVELOPMENT FINANCING APPLICATION FORM

1. Applicant / Ownership Information

- The applicant anticipates being part of the final ownership entity for this project.
- The applicant does **not** anticipate being part of the final ownership entity for this project.
(Note: A **current** owner may not refinance with tax-exempt debt)

Applicant / Owner Name: _____

(Use legal name(s) of entity which will own the project and receive financing from NIFA)

Address: _____
City: _____ State: _____ Zip: _____
Telephone Number: (_____) _____
Facsimile Number: (_____) _____
Email Address: _____

2. Applicant Contact Person Information (Not applicable if same as #(1) above)

Name: _____
Company: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone Number: (_____) _____
Facsimile Number: (_____) _____
Email Address: _____

3. Non-Profit Information

Is the applicant a Nebraska non-profit entity? Choose One
If YES, please show below the type of non-profit determination for this project.

501(c)(3)	<input type="checkbox"/>
501(c)(4)	<input type="checkbox"/>
Exempt from tax under Section 501(a)	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>

4. Principals (Ownership entity will be one of the following)

- General Partnership
- Limited Partnership
- Corporation
- Individual:
- Non-profit organization
- Limited Liability Company
- Other (Specify): _____

Federal Identification Number: _____

(Provide a copy of the Articles of Incorporation, bylaws, partnership agreement and other relevant materials, when available, regarding legal status for categories listed above, and label your documentation "**EXHIBIT 1**").

Please provide the following information regarding the general partner(s), managing shareholders, principal owner(s) or board of director and authorized officers:

Name:	Telephone Number:
Ownership	
Interest/Title:	Email:
Name:	Telephone Number:
Ownership	
Interest/Title:	Email:
Name:	Telephone Number:
Ownership	
Interest/Title:	Email:
Name:	Telephone Number:
Ownership	
Interest/Title:	Email:
Name:	Telephone Number:
Ownership	
Interest/Title:	Email:

Does the ownership entity currently exist? Choose One

If answering NO, provide an estimated date of formation for the ownership entity:

Note: NIFA requires that relevant materials regarding the ownership entity be provided upon formation of said ownership entity.

5. Project to be Financed (check one)

- Hospital, Nursing Home, or related facility (non-profit)
- Manufacturing or Industrial (IDB)
- Service Enterprise (non-profit)
- Office Building (non-profit)
- Environmental Hazard Abatement
- Solid Waste Disposal
- Wastewater Treatment
- Other: _____

Primary standard industrial classification (SIC) code: _____

6. Type of Project (check one)

- Acquisition and Rehabilitation (Percentage of Rehab: _____%)
- New Construction
- New Equipment
- Other: Explain: _____

7. Project Name and Location

Project Name: _____
(As will be referred to in all legal documents)

Project Address: _____
City: _____ County: _____
Zip: _____

Provide a complete legal description or if project consists of equipment, provide the site/address at which the equipment will be located and/or used by the Project Owner, labeled "**EXHIBIT 2**".

Project is located in a blighted area as defined in Neb. Rev. Stat '58-209.01? Choose One

8. Development/Finance Team

For each participant listed below, provide the full name of the firm and/or individual, their street address, city, state, zip code, telephone number, facsimile number, email and the name of a contact person. Please identify which of the following they represent. Provide the documentation and label it **"EXHIBIT 3"**.

- a. Developer/Borrower
- b. Engineer
- c. General Contractor
- d. Developer/Borrower Counsel
- e. Bond Counsel
- f. Consultant (if any)
- g. Underwriter/Placement Agent
- h. Counsel to the Underwriter
- i. Bond Purchaser (if a private/direct placement)
- j. Counsel to the Bond Purchaser
- k. Bond Trustee

Do any members of the Development/Finance team have any direct or indirect, financial, or other interest or relationship with any of the other team members? Choose One

If answering YES, describe the interest or relationship and label it **"EXHIBIT 4"**.

9. Provide a narrative description of the project. The narrative description should include at a minimum the following elements:

- a. include land acreage
- b. proposed buildings
- c. products to be produced
- d. equipment to be purchased
- e. users of your product or services, etc.

Label the project narrative as **"EXHIBIT 5"**.

10. Provide a narrative of the impact of the proposed project on the local economy, and the public purposes to be effectuated by the financing of the project through the Nebraska Investment Finance Authority. The narrative description should include at a minimum the following elements:

- a. What effect will the development of this project have on the economic base of the community/locale/state of Nebraska?
- b. What effect will this project have on the tax base and/or tax revenues of the community/locale/state of Nebraska?
- c. What effect will the project have on employment opportunities in the community/locale/state of Nebraska?
- d. If a hospital, nursing home or related health care project, what will be the projects effect on the provision including the continued provision, of health care and related services?

Label the narrative as **"EXHIBIT 6"**.

11. Source of Funds and Subsidies

Is any portion of this project to be financed directly or indirectly with Federal, State, or Local Government funding? Choose One

Source of Funds for Project

Tax-Exempt Bonds	\$ _____
Taxable Bonds	\$ _____
Tax Increment Financing	\$ _____
Equity	\$ _____
Grants (i.e. CDBG, etc.)	\$ _____
Other (please describe): _____	\$ _____

12. Proposed effect on Taxes

Property taxes after completion	\$ _____
Present property tax base	\$ _____
Property tax increase	\$ _____
Estimated sales taxes during construction	\$ _____

13. Bond Sale Type

Expected type of bond sale (check one): Private Placement
 Public Sale

Any credit enhancement for bonds? Choose One If YES, what type and provided by whom?

If public sale, will bonds be rated? Choose One
 If YES, what rating is expected from which rating agencies?

Rating Grade _____ Rating Agencies _____

14. Projected loan terms for the Project (NIFA Bonds)

Principal Amount \$ _____
Interest Rate _____% Fixed or Variable? Choose One
Term of loan _____ Years
Amortization _____ Years Level or Balloon? Choose One

15. Loan Security

Project Mortgage Choose One
Assignment of Project Rents Choose One
Personal Guarantees: Choose One If YES, please list: _____
Government Assistance: Choose One If YES, what type? _____
Other, if any, credit or enhancement on the loan or the bonds: _____
(such as bond surety, bond insurance, collateral pledge) _____

16. PROJECT COST SCHEDULE

	Actual or Estimated Costs
Land	\$
Existing structures	\$
Site grading, clearing, etc.	\$
Off site improvements	\$
New building hard costs	\$
Rehabilitation hard costs	\$
Equipment	\$
General requirements	\$
Construction contingency	\$
Architect design	\$
Architect supervision	\$
Survey / Engineer Fees	\$
Construction insurance	\$
Construction loan interest	\$
Origination fee	\$
Credit enhancement fee	\$
Construction Period Taxes	\$
Bridge loan expense	\$
Real Estate Attorney	\$
Property appraisal	\$
Environmental study	\$
Contractor overhead	\$
Contractor profit	\$
Title and recording	\$
Bond premium	\$
Credit report	\$
Perm. loan orig. fee	\$
Perm. loan enhancement	\$
Cost of underwriter	\$
Counsel fee	\$
Organizational	\$
Tax opinion	\$
Application/Issuance/Assumption Fees	\$
Other:	\$
Other:	\$
Other:	\$
Other:	\$
Other:	\$
Total Project Cost	\$

17. Fee Schedule

- a. Application Fee: A non-refundable fee of 1/16th of 1% of the bond amount with a \$1,000 minimum, to be applied to the issuance fee if the bond issue closes.
- b. NIFA Issuance Fee: 1/8th of 1% of the bond amount, with a \$1,000 minimum.
- c. NIFA Legal Counsel Fees: although the amount varies, it usually includes normal hourly rates plus disbursements.
- d. Assumption Fee: 1/8th of 1% of the outstanding bond balance with a \$1,000 minimum.
- e. Bond Allocation Fee: \$150

18. Expression of Intent

Adoption of an intent resolution by the Nebraska Investment Finance Authority (NIFA) does not constitute final approval by NIFA. The intent resolution is only an indication of intent and does not legally obligate NIFA to finance the project. NIFA may require further information from the Applicant (including a feasibility study, if determined necessary) before approval by NIFA. The NIFA Board of Directors must be satisfied that the public purposes of the Nebraska Investment Finance Authority Act are being fulfilled by the proposed financing.

19. Statement and Certification of Applicant/Owner

The undersigned has read and fully understands this Financing Application, particularly the immediately preceding paragraph. The information contained in this Financing Application is, to the best of the applicant's knowledge, true and correct.

Signature of Applicant/Owner

Date (Month/Day/Year)

Name of Applicant

Title

20. Completed Applications

Please provide 4 copies of the applications to:

Steve Clements
Nebraska Investment Finance Authority (NIFA)
1230 "O" Street, Suite 200
Lincoln, NE 68508
Phone (402) 434-3908
Fax (402) 434-3921
Email: steve.clements@nifa.org