

**ICCR - Clearinghouse on Alternative Investments**

**Catholic Healthcare West Community Investments  
Housing Application Form**

**I. Basic Organizational Information**

1. Date of Application \_\_\_\_\_ Contact Person \_\_\_\_\_
2. Name of Borrower \_\_\_\_\_
3. Address \_\_\_\_\_
4. Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_
5. Name of Sponsor Organization (if any) \_\_\_\_\_
6. Address \_\_\_\_\_
7. Explain the relationship between borrower and sponsor.
8. What is the legal structure of the borrower?
9. Amount requested \_\_\_\_\_ Interest Rate range \_\_\_\_\_ Term \_\_\_\_\_
10. Total project cost \_\_\_\_\_

**II. History of Organization**

1. Give a brief description of the borrower's philosophy and mission.
2. When was the organization incorporated?
3. How many paid staff members are there? List the primary staff positions.
4. What type of community is served by your organization/project?  
\_\_\_\_\_ rural      \_\_\_\_\_ urban      \_\_\_\_\_ suburban
5. Describe the geographic area that your organization serves. [include information about the population, median family income and any other information that would be helpful in understanding your service area].
6. If your organization has members in addition to the Board [i.e. tenant's council], describe the qualifications for membership and the extent of their involvement.

7. Social Criteria: The following statements constitute CHW's social criteria. Describe an event or activity of your organization that actualizes CHW's social criteria. You need not address every one.

How does your organization/project:

Empower low-income people to create, manage and own enterprises;

Target chronically unemployed groups for employment and management opportunities;

Re-invest in decaying urban areas or revitalizes rural areas, i.e. housing, small business development;

Contribute toward integration (racial, economic, urban-rural, inner city-suburbs);

Demonstrate a commitment to a community-based agenda;

Target resources to low-income and minority communities especially women;

Safeguard the environment;

Demonstrate a commitment to social justice issues

### III. Project Information

1. Site Address: \_\_\_\_\_

2. Has the site been inspected?  Yes – By whom? \_\_\_\_\_  No

3. Do you have site control?  Yes \_\_\_\_\_  No

4. Has the site been appraised?  Yes – please send copy \_\_\_\_\_  No

5. Are any taxes owed on the site?  Yes \_\_\_\_\_  No

If yes, amount \_\_\_\_\_ Who is responsible?

6. Describe this project. (neighborhood, community support, long-term affordability, etc.)

7. Are there any challenges or road blocks to the success of this project? If so, please describe.

8. If a new project, do you have a development team? If so, please complete the following:

Project director within your organization \_\_\_\_\_

Architect \_\_\_\_\_

Construction manager/consultant \_\_\_\_\_

Attorney \_\_\_\_\_

Financial Consultant/bookkeeper \_\_\_\_\_

General contractor \_\_\_\_\_

Property management (post construction) \_\_\_\_\_

9. Are there any other technical assistance advisors connected with the project or needed for the project?  
Please identify and indicate if they are committed or needed.

10. What is the timetable for completion of this development? Give starting date and months to complete.

	Start date	No. of months to complete
Pre-development phase	_____	_____
Construction phase	_____	_____
Rent-up/Occupancy phase	_____	_____

#### IV. Development Plan and Financing

1. Please include a complete pro-forma for the project's development phase 9if applicable0 and for five years of operations.
2. Indicate the other sources of financing for this project.
3. How will this loan be secured?
4. What is the source of repayment on this loan?
5. If this loan is for construction of rehab financing, pre-development or start up costs, what is the source and status of take our financing?
6. List any other matters that you believe pertinent to our understanding of this project and loan request.
7. Please include the following documents as applicable:
  - Rental Project**
    - Marketing Plan
  - Homeownership project**
    - Marketing Plan
    - Homebuyer's mortgage qualification plan
  - Emergency shelter/transitional housing/SRO projects**
    - Social service/management plan

## Environmental Questionnaire

### Property Usage:

1. The present owner(s) of the property is/are:
  
2. The present occupant(s) of the property is/are:
  
3. The previous and present use of the property is/are:

*Present:* \_\_\_\_\_

*Previous:* \_\_\_\_\_

4. The previous and present use of all adjacent the properties is/are:

*Present:* \_\_\_\_\_

*Previous:* \_\_\_\_\_

5. Has the property or any adjacent property ever been used for industrial, manufacturing, refining or processing purposes? \_\_\_\_Yes \_\_\_\_No  
If yes, please describe:

### Asbestos

1. Does the building or its improvements contain asbestos? \_\_\_\_Yes \_\_\_\_No  
If yes, please describe:
  
2. Has a survey or study ever been conducted to assess the type, amount, location, condition, and/or the cost or desirability of removal or encapsulation of asbestos?  
\_\_\_\_Yes \_\_\_\_No \_\_\_\_Not applicable  
If yes, please attach a copy of the survey, study and/or report

### Storage tanks or drums

1. Are any above or below ground gasoline, diesel or other storage tanks located on the property? \_\_\_\_Yes \_\_\_\_No  
If yes, please describe:
  
2. Have any tanks been inspected or tested for leakage?  
\_\_\_\_Yes \_\_\_\_No \_\_\_\_Not applicable  
If yes, please attach a copy of the results.

3. Are any tanks known to leak now or to have leaked in the past?  
 Yes  No  Not applicable If yes, please describe.
4. Are any chemicals stored on the property?  
 Yes  No  
If yes, please describe.
5. Have there been any spills, leaks, or other releases of chemicals on the property?  
 Yes  No  
If yes, please describe the chemicals and quantities released, any cleanup measures taken, and the results of any soil or ground water samples performed to detect the presence of the chemicals spilled, leaked or released on the property:
6. Please attach copies of any permits or licenses pertaining to any tanks or to the use, storage, handling or disposal of chemicals on the property.

### **General Environmental Information**

1. Please attach a complete dated copy of each test, study, report or assessment which has been performed or prepared with respect to the property's soil, air or water conditions or quality or with respect to any other environmental condition or contamination affecting the property.
2. Has any public agency ever investigated or cited the property for violation or possible violation of any federal, state or local environmental law or commenced an enforcement or clean up action under environmental law with respect to the property?  
 Yes  No If yes, please describe.
3. Has any public agency ever listed the property as a site requiring or qualifying for clean up under any federal, state or local environmental law?  Yes  No  
If yes, please describe.

## APPLICATION CHECK LIST

Please include the following items with your completed application:

- \_\_\_\_\_ Certification, Corporate Resolution to Borrow and Incumbency Certificate of the Board of Directors [form enclosed] of the borrower authorizing the loan, indicating the amount, indicating the security and naming the person(s) designated to sign documents on your behalf.
- \_\_\_\_\_ Descriptive brochure of the borrower and/or project (if available)
- \_\_\_\_\_ Certified Articles of Incorporation by the Secretary of State. [The Secretary of State should certify that this is a true copy of your articles including any amendments, if applicable].
- \_\_\_\_\_ Certified by-laws of the borrower by your corporate secretary [Your Corporate Secretary should certify that this is a true and correct copy of your by-laws].
- \_\_\_\_\_ **Current** letter [**dated within the last six months**] from the IRS and from the State Tax Authority authorizing your tax exempt status
- \_\_\_\_\_ Organizational flowchart of the borrower and the project if distinct from the borrower. Resume of Project Director for this project.
- \_\_\_\_\_ Audited financial statements (past 3 years) and Form 990 filings (past 2 years)
- \_\_\_\_\_ Financial statements for current year that compares actual to budget and lists borrower's sources of income and expenses
- \_\_\_\_\_ Next year's organizational budget if your fiscal year ends within three months of the filing date of this application.
- \_\_\_\_\_ Appraisal
- \_\_\_\_\_ List of your board of directors with occupation/affiliation, term of office, indication if member is a person of low income, indication if elected or appointed
- \_\_\_\_\_ Letters of Support (One letter should be from the CHW facility in your area)

Development and operating pro-formas as outlined in Section IV, Items 1 and 2.

Housing documents as applicable and outlined in Section IV, Item 11.

### **Supporting documents required before funding and not with application:**

- Attorney's Certification [form enclosed]
- Current Certificate of Good Standing for the state in which you are incorporated and for all states where you are qualified to conduct business

## CERTIFICATION

The board certifies that this organization does not deny services, employment or membership to persons based on race, religion, age, sex, sexual orientation, handicap or marital status.

It further certifies that the information and representations contained in this application and attached hereto are true and accurate to the best of its knowledge. We understand that intentional misrepresentation of facts may be the basis for a denial of credit.

\_\_\_\_\_  
Signature of Board President

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Organization

Approved at the Board meeting of \_\_\_\_\_ by a vote of \_\_\_\_\_ to \_\_\_\_\_.  
(date)

**CORPORATE RESOLUTION TO BORROW**

\_\_\_\_\_ (Name of Organization) \_\_\_\_\_

The Board of Directors of \_\_\_\_\_(organization)\_\_\_\_\_ hereby authorized the submission of a Loan Application, the incurring of indebtedness, the execution of a Loan Agreement and any Agreements thereto, a Promissory Note, a Deed of Trust and any other documents necessary to secure a loan from Catholic Healthcare West ("CHW").

**WHEREAS,**

A. \_\_\_\_\_(organization)\_\_\_\_\_ is a nonprofit corporate entity established under the laws of the State of California and empowered to own property, borrow money, and give security for loans.

B. CHW is authorized to make loans as part of its alternative investment policy to nonprofit corporations for charitable purposes.

C. \_\_\_\_\_(organization)\_\_\_\_\_ wishes to obtain from CHW a Loan for the purpose of \_\_\_\_\_

**BE IT RESOLVED THAT**

1. \_\_\_\_\_(organization)\_\_\_\_\_ shall submit to CHW an application for a loan in the form requested by CHW.

2. If the Loan is approved, \_\_\_\_\_(organization)\_\_\_\_\_ is hereby authorized to incur indebtedness in an amount not exceeding \$\_\_\_\_\_, and to enter into a Loan Agreement with CHW for the purposes set forth in the loan application and Loan Agreement as approved by CHW. \_\_\_\_\_(organization)\_\_\_\_\_ may execute a Promissory Note, a Deed of Trust and such other instruments necessary as required by CHW to evidence and secure the indebtedness.

3. \_\_\_\_\_(organization)\_\_\_\_\_ authorizes \_\_\_\_\_(person, title)\_\_\_\_\_, to execute in the name of \_\_\_\_\_(organization)\_\_\_\_\_, the Loan Application and the Loan Agreement, Promissory Note, a Deed of Trust and such other instruments necessary or required by CHW for the making and securing of the Loan, and any amendments thereto.

4. \_\_\_\_\_(organization)\_\_\_\_\_ authorizes \_\_\_\_\_(person, title)\_\_\_\_\_ to execute any and all documentation required by CHW in the disbursement of funds during the term of the Loan.

Passed and adopted on \_\_\_\_ day of \_\_\_\_\_, 200\_\_, by the following vote:

Ayes: \_\_\_\_\_

Nays: \_\_\_\_\_

Abstain: \_\_\_\_\_

Absent: \_\_\_\_\_

**CERTIFICATE OF SECRETARY**

The undersigned \_\_\_\_\_, Secretary of \_\_\_\_\_(organization)\_\_\_\_\_, does hereby attest and certify that the foregoing is a true and full copy of a Resolution of the Board of Directors adopted at a duly convened meeting on the date above-mentioned, which has not been altered, amended or repealed.

**INCUMBENCY CERTIFICATE**

The undersigned \_\_\_\_\_, Secretary of \_\_\_\_\_(organization)\_\_\_\_\_, does hereby attest and certify that the signature(s) below are those of the person(s) authorized pursuant to the above resolution to execute in the name of \_\_\_\_\_(organization)\_\_\_\_\_, the Loan Application and the Loan Agreement, Promissory Note, a Deed of Trust and such other instruments necessary or required for the making and securing of the Loan, and any amendments thereto.

\_\_\_\_\_  
(person, title)

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(person, title)

\_\_\_\_\_  
(signature)

Dated: \_\_\_\_\_

\_\_\_\_\_  
Secretary  
(Name of Organization)

## **ATTORNEY'S CERTIFICATION**

I \_\_\_\_\_, legal counsel for \_\_\_\_\_ ("the Borrower") am duly authorized to practice law in the State of California, and have sufficient knowledge and experience to give the opinions contained herein. I am personally knowledgeable about the status and affairs of the Borrower and hereby certify that the following are true and correct to the best of my knowledge. This opinion is provided in connection with the entering into of a debt transaction between the Borrower and Catholic Healthcare West (the "Loan Agreement"), and the associated Promissory Note (the "Note").

1. The Borrower is a nonprofit public benefit corporation, duly organized and validly existing under the laws of the State of California.
2. The Borrower is duly licensed or qualified and in good standing in all jurisdictions where the nature of the business conducted or assets owned or leased by it requires such licensing or qualifying.
3. The Borrower is incorporated as a nonprofit public benefit corporation under the laws of the State of California. The Borrower is recognized by the Internal Revenue Service as an organization described in Section 501(c)(3) of the Code, and is not a private foundation as defined in Section 509(a) of the Code, because it is an organization described in Section 509(a)(1) and 170(b)(1)(A)(vi) of the Code. I have no knowledge of any circumstances under which such exempt status may be jeopardized; the Borrower has received no notice of impending audit or investigation of its tax exemption, nor is any such audit or investigation currently under way.
4. The Borrower is legally empowered to incur indebtedness and to enter into the Loan Agreement with Catholic Healthcare West for the purposes set forth in the Loan Agreement.
5. This Loan Agreement has been duly approved and authorized by the actions of the governing body of The Borrower.
6. The Borrower has full power and authority to own property, conduct its business as now conducted and execute, deliver and perform the Loan Agreement and the Note and to perform each and all of the matters and things therein provided for.
7. The Borrower is not currently in bankruptcy or subject to court supervised insolvency proceedings.

8. The Borrower is not currently subject to investigation, claims or actions by a person, firm, court or government agency as the result of a staff and/or board member violating any laws or regulations. There is no legal action or proceedings pending or to the Borrower's or my knowledge threatened against the Borrower.

Date: \_\_\_\_\_

Legal Counsel

Firm Name

Firm Address

Phone Number