

REQUEST FOR TRAVIS COUNTY FAIR HOUSING SCREEN for RESOLUTIONS OF NO OBJECTION

**4% Non-Competitive Low Income Housing Tax Credits and
9% Competitive Low Income Housing Tax Credits**

This sheet provides instructions for Applicants requesting resolutions required by the Texas Department of Housing and Community Affairs for 9% and 4% Low Income Housing Tax Credit applications.

Please note: All resolutions being requested are subject to approval by the Travis County Commissioners Court. Submissions must provide at least 30 days for consideration.

For the request to be considered, the following information will be required.

- 1) Please complete the Fair Housing Screen Form
- 2) The Applicant must submit the following with its completed Fair Housing Screen form, which will be reviewed by the Transportation and Natural Resources Department to assess the site's suitability:
 - a) Documentation identifying any Undesirable Site Features identified in 10 Tex. Admin. Code Section 10.101, of the site and how any such features will be mitigated.
 - b) Evidence of zoning of the site as required by 10 Tex. Admin Code Section 10.204(11).
 - c) The Site Design and Development Feasibility Report required by 10 Tex. Admin. Code Section 10.204(15).
 - d) Information that demonstrates that the site is or will be located on a road accepted for maintenance by Travis County, the municipality in which the access road or site is located, or the Texas Department of Transportation.
 - e) Information as to the safety of access to and exit from the site in times of flood or fire for ordinary and emergency vehicles demonstrating that access roads:
 1. will not cross an area having a high wildland fire protection rating determined in accordance with the National Fire Protection Association Bulletin NFPA 299, Protection of Life and Property from Wildfire, 1992;
 2. will not cross a special flood hazard area as identified by the Federal Insurance and Mitigation Administration of the Federal Emergency Management Agency in the most current Flood Insurance Study and accompanying Flood Insurance Rate Maps and flood boundary-floodway maps; and
 3. are of all-weather construction and have a width necessary for simultaneous ingress and egress of fire and emergency vehicles.
- 3) Provide information about the Developer's Experience and Development Background.

Requests should be submitted to Travis County Health and Human Services, CDBG Office, P.O. Box 1748, Austin, TX 78767 to the attention of Fair Housing Screen. E-mail submissions are acceptable as long as they are within the size limit of the County's e-mail system for attachments (approximately 15MB). For more information, contact the CDBG Office at 512-854-3460 or by e-mail at cdbg@traviscountytx.gov.

I certify that, to the best of my knowledge the information provided is true and correct.

Authorized Representative _____

Date _____

TRAVIS COUNTY FAIR HOUSING SCREEN FORM for RESOLUTONS OF NO OBJECTION

Applicant Information

1. Developer Contact Information*

Name: _____

Address: _____

Email: _____

Phone: _____

2. For Profit or Non-Profit Partner*

Name: _____

Address: _____

Email: _____

Phone: _____

3. Circle One: Non Profit or For Profit

4. Bond Issuer:

Name: _____

Address: _____

Development Information

5. Name of Project: _____

6. Project Address: _____

7. Commissioner Precinct: 1 2 3 4

8. Have you contacted the Commissioner in which the project is located about this project? Yes No

9. Census Tract: _____ Block Group: _____

10. Please select one: 4% tax credit development 9% tax credit development

11. Please select one: New Construction Rehabilitation

12. Estimated Completion Date: _____

13. If your project already has an application number in the MyPermitNow system, please provide the case #: _____

21. Permanent Supportive Housing (PSH) or Housing First populations to be served. Please indicate the number of units and population to be served.

a. Number of PSH units: _____

b. Description of population: _____

c. Description of services: _____

22. Please identify the distance from the closest transit stop: _____

23. If appropriate, please detail any discussions with CapMetro or CARTS to extend transit: _____

24. Please describe any services or apartment community attributes the Applicant would like to highlight: _____

