

FULL APPLICATION

Please use this application only if the Trust has approved your pre-application. Applicants should submit a copy of the completed application, along with any supporting documents to the Trust via email at ArlingtonAHT@gmail.com. If you have already provided the requested information in a funding request to another entity (e.g. EOHLC, CPAC, FHLB, etc.), please feel free to note that in the space provided below and attach a copy of the other application.

APPLICAN	T/ORGANIZATION NAME:			
Prim	ary Contact Person:			
Maili	ng Address:			
Tele	phone Number:			
Emai	il Address:			
PROJECT N	IAME:			
PROJECT LOCATION/ADDRESS:				
PROJECT SUMMARY: Provide a brief description of the proposed project.				

TYPE OF PROJE	ECT: Circle o	r underline the	e type of proj	ect being devel	oped.	
Acquisition	New Construction – Multifamily			New Construction - ADU		
Rehabilitation/R	enovation	Other:				
TYPE OF HOUS	ING: Circle o	or underline the	e type of hou	sing being deve	eloped.	
Rental	Homeownership SRO/			Group Residence		
Permanent Supp	oortive Hous	ing	Shelter	Other:		
TARGET POPU	LATION: Cire	cle or underlin	e the target p	oopulation.		
Individual/Family	/	Age-Restricte	d	Homeless/At	Risk of Homele	essness
Special Needs/D	isabilities	Other:				
UNIT MIX: Pleas	se indicate th	ne anticipated	number of ur	nits at each targ	et income leve	el. Other:
	AMI	AMI	AMI	AMI	AMI	
SRO						
1 Bedroom						
2 Bedroom						
3 Bedroom						
4+ Bedroom						
Total						
but not limited to			-			_

PROJECT STATUS : What level of planning has already been undertaken to evaluate the potential
development opportunity? Note any progress made since submission of pre-application.
SITE INFORMATION : Provide a brief description of the current site characteristics. Note status o
site control as well as any zoning relief or permitting needed. Describe any environmental or
regulatory constraints. Please attach site control agreement, appraisal/market study, title
rundown, or environmental site assessment, if any.
COMMUNITY OUTREACH/SUPPORT : Provide a description of any current or planned efforts to
engage the community through outreach, neighborhood meetings, etc.
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DEVELOPMENT SCHEDULE : Describe the antic	
FUNDING REQUEST: Provide a description of how	
BUDGET : Please attach a development budget. N	lote the status of any funding requests.
Signature Name:	Date