Rome-Floyd County Housing Team
Rome, Georgia

GICH Point Application

APPLICANT INFORMATION

Developer name:_____

Primary contact person: _____

Address: _____

Phone: _____ Email: _____

DEVELOPMENT EXPERIENCE

Total number of LIHTC developments: _____   Total number of LIHTC units:_____

Did you apply for LIHTC credits in the previous year?   ☐ Yes   ☐ No

    If awarded, where is the project located? _____

    If not awarded, what was your application's score? _____

Have you received a GICH point in the past?   ☐ Yes   ☐ No

    If yes, list the community and year: _____

Do you currently have any LIHTC developments in the City of Rome or Floyd County?   ☐ Yes   ☐ No

    If yes, please list the property name & address(es) below:

    1. _____

    2. _____

PROPOSED DEVELOPMENT & CONSISTENCY WITH LOCAL PRIORITIES

Property name:_____

Address: _____

Total number of units: _____   Tenancy: _____

Is the proposed development within a LMI census tract/area?   ☐ Yes   ☐ No

What is the proposed budget for this project and the funding sources? _____

Will your development use energy efficient measures (i.e. solar panels or LEED standards)?   ☐ Yes   ☐ No

    If yes, please describe: _____

Describe the materials and design attributes you anticipate using for this project. Please attach any renderings

showing streetscapes, façades, frontage elements, and construction materials. _____

_____

COMMUNITY ENGAGEMENT & ACCESSIBILITY

How will you obtain citizen input from residents affected by your project? _____

_____

Is your site near public transportation, recreation areas, or other amenities?   ☐ Yes   ☐ No

If yes, please describe: _____

PARTNERSHIPS

List & describe any partnerships with local affordable housing stakeholders. _____

_____

Please list any partners who will be included in your LIHTC application:

1. _____

2. _____

REFERENCES

Please list two references from previous LIHTC developments.

Property name:_____

Primary contact person: _____

Phone: _____   Email: _____

Property name:_____

Primary contact person: _____

Phone: _____   Email: _____

What is your self-score for this proposed development (*without* the GICH points factored in)? _____

Why should we award your development the GICH points?   Please attach any supporting documents, renderings,

letters, etc. that support your project. _____

_____

_____

_____

What makes this project innovative or distinct? Is it the architecture, materials, collaborations, services, etc.? _____

_____

_____

_____

DISCLAIMER & SIGNATURE

I certify by signing below that my answers are true and complete to the best of my knowledge.

_____   _____

Signature   Date

Please return completed applications to:

Suzanne Parris

Community Development Department

607 Broad St.

Rome, Georgia 30161

sparris@romega.us