

**2019 MAXIMUM PER UNIT
Total DEVELOPMENT COST (TDC)
WAIVER FORM**

Instructions:

1. Please complete this Maximum Per Unit Total Development Cost Waiver Form in its entirety.
2. All fees (\$1,500) are due at the time of the Pre-Determination/Waiver Submission. **Please make all checks payable to Georgia Housing and Finance Authority (GHFA).** DCA will not accept any requests without the appropriate fees.
3. All waiver requests should include this completed form, support documentation (if any), and the waiver fee on or before 3/7/19 for the 2019 9% Competitive Scoring Round. For 4% Bond Applications, the waiver request should include this completed form, support documentation (if any), and the waiver fee as part of the Pre-Application Submission no later than 30 days prior to the submittal of the 4% application. Waiver requests should be mailed to DCA Offices.
Attention: Henrietta Mitchell, 60 Executive Park South, NE, Atlanta, Georgia 30329.

APPLICANT/OWNER INFORMATION:

Ownership Entity Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Person: _____

Phone: _____

Fax: _____

Email: _____

PROJECT INFORMATION:

Project Name: _____

Street Address: _____

City: _____ County: _____

Rehab _____ New Construction: _____ # of Buildings: _____ # of Units: _____

Total Units per Type: SRO: _____ Eff: _____ 1BR: _____ 2BR: _____ 3BR: _____ 4BR: _____

Total Square Footage Residential Uses: _____

Total Square Footage - Support/Community Uses: _____

Acquisition Cost: _____

Proposed Total Development Budget: _____

Proposed Construction Hard Costs: _____

(Include and identify Contractor Overhead, Contractor Profit, and General Conditions. Attach construction budget on a separate sheet if desired.)

PROPOSED PER UNIT COST:

Unit Type: SRO: _____ Eff: _____ 1BR: _____
2BR: _____ 3BR: _____ 4BR: _____

REASON FOR EXCEEDING MAXIMUM PER UNIT COST LIMITS:

Please describe below in detail each specific factor and each specific condition that result in the project exceeding the maximum DCA per unit cost limitation:

SIGNATURE:

By signing this form, I certify that I understand all of the questions on this form, and that all of my answers represent a truthful and informed statement of conditions and costs.

Signed: _____
Applicant/Owner

Date: _____