

COMMUNITY FACILITIES LOAN PROGRAM (CFL)

APPLICATION

- Applicants should read the CFL program guidelines document before completing this application.
- If you need support in a language other than English, please contact Community Development Division: cdd@cityofmadison.com who will help coordinate translation services.
- Applicants <u>must</u> be an already established non-profit corporation (Non-stock Corporation) organized under Chapter 181 of Wisconsin Statutes and in compliance with the Wisconsin Department of Financial Institutions (DFI).

Please note: the CFL program has a budget of \$1,500,000. Once funds are exhausted, applications will no longer be accepted. Applications are considered on a first-come, first-served basis.

Questions can be directed to <u>cdd@cityofmadison.com</u> or to Community Development Grants Supervisor, Linette Rhodes, at <u>Irhodes@cityofmadison.com</u> or 608-261-9240.

| Organization Name: | |
|--|--------------------------|
| Contact Name: | Phone: |
| Contact Email: | _ |
| SAM/ Unique Entity Identifier # | |
| Please select the option that best describes the nature of your project: | |
| □ Acquisition □ New Construction □ Rehabilitation- property own | ed |
| □ Rehabilitation- Leased Space (5 year lease) □ Rehabilitation- Lease | ed Space (10 year lease) |
| | |
| Project Address: | Zip Code: |
| Amount requested: \$ | |
| Please describe, in detail, the proposed project: | |
| | |
| | |
| | |

How will this project affect your organization?

How will this project impact the community you serve?

How will this project impact your operations?

Project Timeline

| Description | Projected Dates (Mo/Yr) |
|------------------------------------|-------------------------|
| Acquisition/Real Estate Closing | |
| Rehab/Construction Bid Publishing | |
| Construction/Rehab Start | |
| Construction/Rehab Completion | |
| Services or Programming Start Date | |

SOURCES AND USES OF FUNDS

This is a statement of how much money is required to complete the project, its source, and how it will be used. By definition, sources must equal uses.

| SOURCES OF FUNDS | Amount | Source: Lender, Grantor, etc. |
|-----------------------------|--------|-------------------------------|
| Permanent Loan: | | |
| Subordinate Loan: | | |
| Subordinate Loan: | | |
| City Financing Requested: | | |
| Project Equity (own funds): | | |
| Other: | | |
| TOTAL SOURCES: | | |
| Construction Financing | | |
| Construction Loan: | | |
| Bridge Loan: | | |
| Other: | | |
| TOTAL: | | |

| USES OF FUNDS | Amount | Source |
|------------------------------|--------|--------|
| Purchase Building: | | |
| Build-out (if new purchase): | | |
| Renovations/improvements | | |
| (existing building): | | |
| Equipment purchase: | | |
| Other: | | |
| TOTAL USES: | | |

All Applications:

- All applications must submit an Operating Plan, Offer to Purchase or Contractor Bids, and executed Lease, if applicable.
- All applications must submit evidence of other funding sources secured for the project.
- Funded applicants are responsible for complying with all of the terms and conditions outlined in the CFL Program Guidelines.
- Applications to the Community Facilities Loan Program will be considered on a first-come, firstserved basis.
- Final approval of funds will be awarded, via a Resolution, by the City's Common Council with recommendations from the CDBG Committee. Timeline for a commitment of funds is contingent upon committee's schedule.

APPLICATION CERTIFICIATION

The Applicant certifies that all information in this application, and all information furnished in support of this application, is given for the purpose of the City of Madison Community Facilities Loan Program and is true and complete to the best of the applicant's knowledge and belief.

Signature _____

Date: _____

Applications must be submitted to the Community Development Division by email: cdd@cityofmadison.com