

LURA REQUEST INFORMATION

*This portion of the request will be used by KHC's legal department to prepare the LURA.
Each block corresponds to a specific section in the LURA.*

<p>Project Name: <i>This is the name of the project as shown on property signage. If it has changed since application, provide the previous name as well as the new name.</i></p>	<p>KHC Tax Credit Project Number: <div style="text-align: center;">KY- _ _ - _ _ _</div> <i>This is the KY number that was assigned by KHC to your project at the initial conditional commitment.</i></p>
<p>Owner Legal Name and Mailing Address: <i>This is the owner name as filed with Kentucky's Secretary of State and should match what is shown in the Partnership Agreement, Articles of Incorporation or Articles of Organization.</i></p>	<p>Owner's Signature Block: <i>Provide the signature information from your attorney as it should appear in the signature area of the LURA</i></p>
<p>Owner Tax ID Number: <i>This is the tax ID number assigned to the legal owner.</i></p>	<p>State of Formation: <i>This is the state in which the ownership entity was created. Was it created in Kentucky or is it a foreign entity which was created in another state.</i></p>
<p>Entity Type:</p> <p><input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company</p> <p><input type="checkbox"/> Limited Liability Limited Partnership</p> <p><input type="checkbox"/> Limited Partnership</p> <p><input type="checkbox"/> General Partnership <input type="checkbox"/> Individual</p>	<p>Property Owner Name and Address (if leasehold): <i>If the property has a long term lease, provide the name and address of the owner/leaseholder.</i></p>
<p>Lender(s) Name, Mailing Address and Contact (all lenders): <i>Provide this information for all lenders that currently hold a mortgage. These lenders should also be shown on the Title Policy.</i></p>	<p>Project Location:</p> <p>City:</p> <p>County:</p>
<p>Total Number of Units: <i>This is the AMI of the population served and should match the application, and housing credit election.</i></p>	<p>Amount of Credit: <i>Provide the amount of the credit allocation. Any changes as a result of the final cost certification will be reflected on the 8609.</i></p>
<p>Area Median Income: <i>This is the AMI of the population served and should match the application, and housing credit election.</i></p>	<p>Percentage of LIHTC Restricted Units: <i>This is the AMI of the population served and should match the application, and housing credit election.</i></p>

<p>FHA Rider Information (required for all FHA funded or insured loans): <i>If there is a HUD loan on the property, provide the information below for that loan.</i></p> <p>FHA Project No:</p> <p>Date of Loan Closing:</p> <p>Date Recorded:</p> <p>Recording Information from the Mortgage and Regulatory Agreement (book and page number):</p>	<p>4(a) Percentage Election:</p> <p><input type="checkbox"/> 20% of the units at or below 50% AMI OR <input type="checkbox"/> 40% of the units at or below 60% AMI</p> <p><i>This should be the same election that was selected on the application and that is shown in the partnership or operating agreement.</i></p>
<p>4(b) Actual Percentage Election (same as percentage of LIHTC restricted units above): <i>The percent entered here should match the percentage shown in Percent of Restricted Units entered above.</i></p>	<p>4(c) Rent Limit Election:</p> <p><input type="checkbox"/> Yes _____% <input type="checkbox"/> No</p> <p>If yes, how many units? _____ <i>Check "yes" if you elect to further restrict your rent below the applicable limit for the AMI of the population served.</i></p>
<p>5(a) <input type="checkbox"/> 30 year affordability OR 5(b) <input type="checkbox"/> 40 year affordability OR _____ years (specify if greater than above)</p> <p><i>Check the affordability period associated with your project. This is normally 30 years, but may be different in some cases.</i></p>	<p>5(c) Project Attributes:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Elderly Set-Aside <input type="checkbox"/> Elderly Amenities <input type="checkbox"/> Elderly Supportive Services <input type="checkbox"/> Handicapped Accessible Units <input type="checkbox"/> Family Amenities <input type="checkbox"/> Large Family Units (3 or more bedrooms) <input type="checkbox"/> Homeless Units <input type="checkbox"/> Special Needs Set-Aside <input type="checkbox"/> ____ Special Needs Units (per application) <input type="checkbox"/> Other: _____