CITC Program Project Completion Report

Please submit via email by January 31st to <u>CITC@thda.org</u>. Completion forms may also be mailed to THDA, Community Investment Tax Credit Program, Andrew Jackson Building, Third Floor, 502 Deaderick Street, Nashville, TN 37243-0200.

Part I: Project information

1.	Application Number:							
2.								
3.	Name of Organization							
4.	Title, Name, Email and Phone number of person con	npleting the form:						
5.	Bank Name:							
6.	Application Date:							
7.	Project Completion Date:							
Part II	: Project Cost- Dollar Amount of Loan, Investment, Gi	rant or Contribution						
	☐ Qualified Loan – (2% below prime rate) \$							
	☐ Qualified Low-rate loan (4% below prime rate) \$							
	\square Qualified Investment (longer than 5 years)	\$						
	☐ Grant or Contribution	\$						
Part III	l: Property Type							
	☐Single ☐Family ☐Multifamily ☐Duplex	☐Manufactured Hous	e \square Other					
Part I\	/: Type of Eligible Activity (Describe activity that was	completed below)						
Preser	vation (Create or Preserve Affordable housing):							
□Con	struction							
□Con	version							
□Reh	abilitation							
□Acq	uisition							
□Land	d							
□Fina	incing							
Activit	ties that help obtain housing:							
□Dow	vn Payment Assistance							
□Pre-	purchase counseling		-					
	s for Homeownership							
Sun	nortive Services							

\square Deposits, Utili	ities & Security					
Activities that b	uild capacity:					
□Operational S	upport					
☐Invest in tech	nology					
☐Training						
☐Technical Assi	stance				·	
Other Activities	:					
□Emergency M	ortgage Assista	nce				
□Improvement	s for accessibili	ty				
☐Acts to help p	revent homeles	ssness				
☐ Post Purchase	e, Foreclosure c	ounseling				
☐Acts to promo	ote Public Awar	eness			<u></u>	
☐Research						
Part V: Househo	old Characterist	ics				
unit in each build	ding along with	the corresponding	eligible activity. Ent income, verification ed in the attached in	method, and		
Activity Address	(Street, City, Z	ip and County)				
Unit and Housel	hold informatio	on				
Address and/or Unit#	Annual Income	Verification Method	Household Size	%of Area Median Income	Occupancy Code	
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Signature of Exe	cutive Director					

USE ADDITIONAL SHEET(S) IF NECESSARY