

Name of Recipient

Address of Recipient

Total amount of TCAP Award: _____ Total amount of Section 1602 Subaward: _____

Date TCAP Agreement Entered: _____ Date Subaward Agreement Entered: _____

Name of Development:: _____

Address of Development : Street
City, Zip Code
County

Development Description: New Construction or Acquisition/Rehabilitation
Number and configuration by bedroom size of total units
Number and configuration by bedroom size of low-income housing units
Number and configuration by bedroom size of market rate housing units

Total amount of projected development costs: _____ Final development costs: Pending

Date of projected placed in service date: _____ Actual Placed in Service Date: Pending

Date and amount of Request:

TCAP			Section 1602 Subward	
Date	Amount		Date	Amount

Date of inspection by Authority

Date and amount of Payment:

TCAP			Section 1602 Subward	
Date	Amount		Date	Amount

Jobs Estimate:

	Retained	Created
Construction:		
Non-Construction:		

Recapture amount to date: None