

# **Attachment 18**

## **Construction Loan Closing Check List**

**Office of Community and Economic Development**  
**Housing Development and Loan Administration Division**  
**Overtown Transit Village I**  
**701 NW 1 Court, 14<sup>th</sup> Floor**  
**Miami, Florida 33136**  
**(786) 469-2100 Fax: (786) 469-2230**

**DEVELOPER:** \_\_\_\_\_

**DEVELOPER ADDRESS:** \_\_\_\_\_

**PROJECT NAME:** \_\_\_\_\_

**PROJECT ADDRESS:** \_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

**PROJECT TYPE:**            New Const. \_\_\_\_ Rehab. \_\_\_\_ Acquisition. \_\_\_\_

**FUNDING SOURCE:** \_\_\_\_\_

**COUNTY COMMISSION RESOLUTION(S):** \_\_\_\_\_

The following items must be submitted to OCED, Housing Development and Loan Administration Division (HDLAD) to the Construction Lending Unit on or before expiration date of your awarded Fiscal Year allocation(s) by the Board of County Commissioner. Your assigned Construction Loan Officer will review your awarded allocation(s) in order to present your loan terms to OCED, Affordable Housing Loan Committee for approval. Please submit three (3) closing binders with the following items in a three (3) ring binder tabbed or labeled in the format below:

**Section 1: Principal Loan Closing Documents**

<b>Item</b>	<b>Item Description</b>	<b>Req'd</b>	<b>N/A</b>	<b>Date Apprv'd</b>
1	Current survey, showing all easements and rights of ways certified to Miami-Dade County.			
2	Site Plan			
3	Fully executed Owner/Architect contract.			
4	Copy of BCC Resolution(s).			
5	Fully executed Owner/Contractor contract.			

Item	Item Description	Req'd	N/A	Date Apprvd.
6	OCED awarded Housing Contract & Budget			
7	Original executed set of Dade County Affidavits.			
8	Current Phase I Environmental Assessment, certified to Miami-Dade County.			
9	Other Environmental Reports: Soils ;Asbestos____; Lead Based Paint____; Termite____; Physical Needs Assessment____; Other <u>Environmental Clearance Letter</u>			
10	Copies of Commitment for Title Insurance, with Miami Dade County as proposed insured.			
11	Letter assignments of contracts agreements and plans from Architect, Engineer and General Contractor.			
12	Certificate of General Liability Insurance with Miami Dade County as additional insured.			
12(a)	Certificate of your Agency Worker's Compensation Insurance.			
12(b)	Binder/Certificate for Builders Risk Insurance with Miami-Dade County as named insured and/or loss payee, with 30-day cancellation clause.			
12(c)	Certificate for Flood Insurance (or letter of availability from insurance broker for new projects).			
12(d)	Certificate of insurance for all owned, hired or non-owned auto.			
12(e)	Professional Liability from G.C. or Architect.			
13	MAI appraisal of land and improvements utilizing identical working plans and specifications, and appropriate financial projections. (certified to Miami-Dade County)			
14	Fully executed commitment letters from all project lenders.			
15	Syndication Agreement (if applicable).			
16	Final Commitment (Check compliance for special condition)			
17	Rental Regulatory Agreement (# of set aside units must be identified)			
18	List of subordinations and other junior liens			
20	Promissory Note and Mortgage Agreement			

<b>Item</b>	<b>Item Description</b>	<b>Req'd</b>	<b>N/A</b>	<b>Date Apprvd.</b>
21	Settlement Statement			
22	Fully executed original or certified copy of multiple obligee Payment & Performance Bond, including power of attorney for agent.			
23	Sources and Uses Statement.			
24	Income & Expense Proforma with debt service coverage for the first year.			
25	30 years Proforma.			
26	Property Deed.			
27	Authorized Condominium Documents (if applicable).			
28	Release Price Schedule (Homeownership only)			
29	Copy of cancelled check for loan commitment fee. (for profit developers only.)			
30	Other lender's loan documents. Notes			
31	Document Correction Agreement			
32	One set of Draft proposed loan closing documents (blacklined)			
33	FHFC Underwriting report (if applicable)			

## **SECTION 2: ORGANIZATIONAL DOCUMENTS**

<b>Item</b>	<b>Item Description</b>	<b>Req'd</b>	<b>N/A</b>	<b>Date Apprvd.</b>
34	Developer Joint Venture Agreement (if applicable)			
35	Copy of General Contractor's current State General license.			
36	Copy of General Contractor's current City and /or County Occupational license.			
37	General Contractor's Qualification Statement (such a AIA Form 305)			
38	Copies of Borrower's corporate documentation, including certificate of good standing, by-laws and borrowing resolution.			

## **SECTION 3: CONSTRUCTION DOCUMENTATION**

Revised 6/23/2009 MJ

Item	Item Description	Req'd	N/A	Date Apprvd.
39	Floor plans for all typical units <u>with measurements</u> (1/4" scale) and project specifications.			
40	Copies of current building permits. /utility letters			
	Copy of recorded Notice of Commencement			
41	Construction Progress Schedule (Bar Chart, C.P.M. or similar)			
42	Construction Schedule of Values, with subcontractors identified (such as AIA forms 6702 and 6703)			
43	Signage compliance, Memo from County's Construction Manager confirming compliance. & \$650.00 signage fee.			
44	Construction Loan Agreement			
45	Scope of Work for Rehab Project			
46	Disbursement Plans			
47	Evidence of prevailing wage rates paid during construction			
48	Architects Certificates of ADA Compliance for Rehab Projects			

#### **SECTION 4: PROPERTY MANAGEMENT APPROVALS**

Item	Item Description	Req'd	N/A	Date Apprvd.
49	Property Management Contract			
50	Current Affirmative Fair Housing Marketing Plan			
51	Relocation Plan with evidence of compliance (if applicable)			

#### **SECTION 5: FINANCIAL REPORTING REQUIREMENTS**

Item	Item Description	Req'd	N/A	Date Apprvd.
52	W-9's forms for all applicable payees.(must be original)			

#### **SECTION 6: CONTACT INFORMATION**

Please provide us with the contacts of all parties involved in closing this project.

**Borrower information:**

Company/Agency Name: \_\_\_\_\_  
Sponsor/Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Email: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Address: \_\_\_\_\_

Attorney: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_

**Title Information**

Title Officer: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Title company: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Address: \_\_\_\_\_ Policy #: \_\_\_\_\_  
Email: \_\_\_\_\_

Escrow Officer: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Escrow Company: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Address: \_\_\_\_\_ Escrow #: \_\_\_\_\_  
Email: \_\_\_\_\_

**Construction Lender**

Company/Agency Name: \_\_\_\_\_  
Sponsor/Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Email: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Address: \_\_\_\_\_

Attorney: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_

**All Locality Contacts/Subordinate Financing (i.e. City/State/Federal) Attach separate sheet if needed)**

Agency Name: \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Email: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Address: \_\_\_\_\_

Attorney: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_

Agency Name: \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Email: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Address: \_\_\_\_\_

Attorney: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_

**OCED Request For Disbursement Checklist**

Name of Sub recipient: \_\_\_\_\_ Date: \_\_\_\_\_

Payment request to: \_\_\_\_\_ Resolution #: \_\_\_\_\_

Name of Activity: \_\_\_\_\_ Project # (US HUD): \_\_\_\_\_

Funding Source: \_\_\_\_\_ Loan or Grant Amount: \$ \_\_\_\_\_ Loan #: \_\_\_\_\_

Index Code: \_\_\_\_\_ Request #: \_\_\_\_\_ Payment Request: \$ \_\_\_\_\_

Type:  Land Acquisition  Building Acquisition  Construction  Rehabilitation

Status:  Pre-Development  Pre-Bid  Post-Bid / Pre-Construction  Construction

	On File Filed	Attached	Not Rec'd	N/A	Items Required for:			
					Land Acquisition only	Building acquisition and Rehab.	Rehab. and/or construction	Land Acquisition / Const. / Rehab.
<b>DOCUMENTS &amp; VERIFICATION REQUIRED WITH EVERY PAYMENT REQUEST</b>								
1		R			X	X	X	X
2		R			X	X	X	X
3		R			X	X	X	X
4		R			X	X	X	X
5		R			X	X	X	X
6		R			X	X	X	X
7		R			X	X	X	X
8		R			X	X	X	X
9		R				X	X	X
10		R				X	X	X
11		R				X	X	X
12		R				X	X	X
13		R				X	X	X
14		R				X	X	X
15		R				X	X	X
16		R				X	X	X

COMMENTS (If applicable): \_\_\_\_\_

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**Davis-Bacon, Labor Standards & Section 3 Requirements Reviewed  
Recommended for Approval by Labor Standards Coordinator**

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Signature & Date

**Construction Achievements Reviewed  
Recommended for Approval by Professional / Technical Services Unit**

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Signature & Date

**Required Documents Reviewed  
Recommended for Approval by Contracts Officer CDD**

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Signature & Date

**Post Audited by:  
Fiscal**

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Signature & Date

**Legend:** Filed = Document previously provided to Finance, Risk Management, OCED and/or SHPD  
Attached = included in RFD or accompany RFD  
On File = Document in OCED's Possession  
N/A = Not applicable at this time  
R = Required