

**State Housing Initiatives Program (SHIP) – Multi-Family Rental Rehabilitation
Request for Proposal Checklist**

Completed Application with all attachments	
Plans, specifications, and/or bids for construction or rehabilitation	
Cost Estimate (Budget) and timeline for completion	
Ability of the Developer/Owner to complete the construction within the time frame established under the SHIP	
The extent to which the construction of these units has on the effect of the preservation of decent, safe, sanitary affordable housing in Osceola County	
Proposed Property free and clear of existing liens other than a required mortgage	
List of all general and limited partners and officers, directors, and shareholders	
Proof of 501(c)3 status or 501(c)4	
Described role of non-profit organization in the development	
If joint application, submit documentation for both agencies and designate a lead agency and contact	
List of names and addresses of the governing board of the non-profit organization	
Articles of Incorporation	
Narrative of the proposed development	
Map showing the development's location	
Most recent (24) months audited financial statements	
Recent (2) years Management Review	
Current year approved budget	
Inspection and/or Environmental Reports (if applicable)	
<i>*Items that are not applicable, please mark as such</i>	