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Loan Portfolio Unit – Asset Management Division
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hcidla.lacity.org

AMENDMENT REQUEST FOR MULTI-FAMILY PROPERTIES

Thank you for contacting the Los Angeles Housing and Community Investment Department (HCIDLA) regarding an amendment to your loan. Requests to amend/change the terms of your HCIDLA loan must be made in writing. In order to consider for your amendment request, items shown below must be submitted to Loan Portfolio Unit.

All borrowers must be compliant with all of the City's agreements and obligations – including Section 504 and American with Disabilities Act. A background check will be completed to verify borrower compliance and all non-compliance issues must be resolved prior to HCIDLA accepting an application.

1. Signed statement from borrower stating why the City should grant the amendment request. This letter must include your Loan/account number(s), an explanation of your circumstances, the requested changes to the existing loan terms, and your signature. The request should include all supporting documentation.
2. List of ALL Properties owned in City of Los Angeles with addresses and corresponding project or loan numbers, if applicable. **(Attached)**
3. A completed Authorization to Release Information form **(Attached)**
4. Borrower's Certification and Authorization **(Attached)**
5. A completed W-9 Form **(Attached)**
6. Amendment Application Worksheet **(Attached)**
7. Organizational Formation Documents
8. Board roster and Staff list
9. Certificate of Good Standing issued by State of California within past 6 months
10. A current Business Tax Registration Certificate
11. Last three (3) years of project financial statements
12. Proforma (in excel format)
13. Rent Roll
14. Property Operating Statements from Management Company
15. Most Recent Mortgage Statements – 3 Months
16. A completed IRS Form 4506 "Request for Copy of Transcript of Tax Form" **(Attached)**
17. Copy of partnership agreement and any amendments
18. Proof of Real Estate taxes paid
19. Proof of current property and liability insurance for all properties with City Loans
20. Waiver of Notice to Inspect **(Attached)**
21. Other items as requested
22. Accessibility Report by CASp (Certified Accessibility Specialist) may be required.

The City will not finalize the request if the borrower is noncompliant with terms and conditions of the HCIDLA's loan agreement, regulatory agreement or any other applicable terms of the governing agreements, including Section 504 and Americans with Disabilities Act.

All requested documents must be submitted in a single package in order for your request to be considered. Any incomplete applications will be returned. Typical processing time will be between 30-60 days from the submission of a complete application.

Please e-mail your request to: hcidla.requeststoassetmgmt@lacity.org

And your application to: **Los Angeles Housing & Community Investment Department**
Loan Portfolio Unit
1200 W 7th St, 8th Floor
Los Angeles, CA 90017

Rev 7/1/2015

Background Check Information Sheet

Background Check Form

Reviewer's Name:

Extension:

Project Name:

Instructions:

- 1) Type in all the yellow fields, if applicable.
- 2) If not available, type "N/A"
- 3) Save the Excel file.
- 4) Send the file to Thanh Doan (go to "File," "Send To," "Mail Recipient (as Attachment)"). Thank You!

Name of Limited Partnership	
Mailing Address	
Tax ID Number	
Name on Tax Certificate	
City Business Number	

Managing General Partner	IF 501(c)(3)		If Limited Liability Co		If Limited Partnership
Name		Name		Name	
Mailing Address		Mailing Address		Mailing Address	
Tax ID Number		Tax ID Number		Tax ID Number	
Name on Tax Certificate		Name on Tax Certificate		Name on Tax Certificate	
City Business Number		City Business Number		City Business Number	
President		List Managing Members		Name of GP	
Auth Signatory		(w/ SS #'s if available)			
List of Board Members					
				Name of LP	

Co-General Manager (Administrative/ Other)	IF 501(c)(3)		If Limited Liability Co		If Limited Partnership
Name		Name		Name	
Mailing Address		Mailing Address		Mailing Address	
Tax ID Number		Tax ID Number		Tax ID Number	
Name on Tax Certificate		Name on Tax Certificate		Name on Tax Certificate	
City Business Number		City Business Number		City Business Number	
Executive Director		List Managing Members		Name of GP	
Auth Signatory		(w/ SS #'s if available)			
List of Board Members					
				Name of LP	

Limited Partner (Investor/ Equity)	
Name	TBD
Mailing Address	
Tax ID Number	
Name on Tax Certificate	
City Business Number	

Additional Partners	
Name	
Mailing Address	
Tax ID Number	
Name on Tax Certificate	
City Business Number	

**AUTHORIZATION FOR
THE LOS ANGELES HOUSING AND COMMUNITY INVESTMENT
DEPARTMENT
TO RELEASE BORROWER'S
APPLICATION INFORMATION**

In connection with the request for an amendment, I/we authorize the City of Los Angeles, Los Angeles Housing and Community Investment Department at its sole discretion the right to use any/all information contained within the amendment application and other related documents to refer the applicant's package to an alternate lender for analysis and potential offers of competitive financing in order for the City of Los Angeles, Los Angeles Housing and Community Investment Department to protect its security interest as a subordinate lender.

A copy of this authorization may be accepted as an original.

_____ Applicant/Borrower Signature	_____ SSN/Fed Tax ID #	_____ Date
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_____ Applicant/Borrower Signature	_____ SSN/Fed Tax ID #	_____ Date
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BORROWER'S CERTIFICATION AND AUTHORIZATION

CERTIFICATION:

I/We certify that the information provided in this application package is true and correct as of the date set forth opposite my/our signature(s) on this application and acknowledges my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application may result in civil liability and/or criminal penalties and/or liability for monetary damages to the Lender, its agents, successors and assigns, insurers and any other person who may suffer any loss due to reliance upon any misrepresentation which I/we have made on this application. The lender, its agents, successors and assigns will rely on the information contained in the application. I/We understand we have a continuing obligation to amend and/or supplement the information provided in this application, if any of the material facts which I/we have represented herein should change prior to closing.

AUTHORIZATION:

I/We have applied for an amendment. As part of the application process, lender may verify information contained in my/our loan application and in other documents required in connection with the loan. I/we authorize you to provide to Lender any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income: bank, money market and similar account balances; credit history, and copies of income tax returns. A copy of this authorization may be accepted as an original.

Borrower Signature: _____ Date: _____

Borrower Signature: _____ Date: _____

AMENDMENT APPLICATION: WORKSHEET

- Please complete the following and submit this form with the amendment application.
- Please type or print clearly.
- **If this form is incomplete, completed improperly, unsigned, or if any spaces are left blank, the Amendment request will not be processed.**

Borrower Name _____ SSN/Fed Tax ID # _____

Borrower Name _____ SSN/Fed Tax ID # _____

Mailing Address _____

Property Address _____

Annual Property Taxes \$ _____ Annual Insurance \$ _____

CURRENT STATUS:

Exclude property taxes and homeowner's insurance from the monthly payment.

	Mortgage Holder	Present Balance	Monthly Payment	Loan Term	Interest Rate	Loan Index	ARM Margin	Annual/Life CAPS	CLTV	Prepay Penalty
1 st										
2 nd										
3 rd										
4 th										
Total										

AFTER PROPOSED AMENDMENT:

Exclude property taxes and homeowner's insurance from the monthly payment.

	Mortgage Holder	Present Balance	Monthly Payment	Loan Term	Interest Rate	Loan Index	ARM Margin	Annual/Life CAPS	CLTV	Prepay Penalty
1 st										
2 nd										
3 rd										
4 th										
Total										

If Adjustable Rate Loan, please attach detailed explanation regarding starting interest rate, initial fixed period, adjustment schedule, floor rate and fully indexed rate. Additionally, please make sure all the above applicable information is provided.

I, THE UNDERSIGNED, CERTIFY THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND CORRECT AS OF THE DATE SET FORTH OPPOSITE MY SIGNATURE ON THIS APPLICATION. I ACKNOWLEDGE THAT ANY MISREPRESENTATION(S) OF THE INFORMATION CONTAINED HEREIN WHICH RESULTS IN CIVIL LIABILITY AND/OR A LOSS TO THE CITY OF LOS ANGELES, THE LOS ANGELES HOUSING AND COMMUNITY INVESTMENT DEPARTMENT, ITS AGENTS, SUCCESSORS, ASSIGNS, INSURERS AND ANY OTHER PARTY WHO MAY SUFFER A LOSS DUE TO RELIANCE UPON ANY INFORMATION CONTAINED HEREIN MAY RESULT IN CIVIL RECOURSE AGAINST THE UNDERSIGNED. I FURTHER ACKNOWLEDGE THAT THE LOS ANGELES HOUSING AND COMMUNITY INVESTMENT DEPARTMENT AT ITS SOLE DISCRETION SHALL HAVE THE RIGHT TO USE THE INFORMATION CONTAINED HEREIN TO REFER THE APPLICANT TO AN ALTERNATE LENDER FOR ANALYSIS AND POTENTIAL OFFERS OF COMPETITIVE FINANCING IN ORDER FOR THE CITY OF LOS ANGELES, LOS ANGELES HOUSING AND COMMUNITY INVESTMENT DEPARTMENT TO PROTECT ITS SECURITY INTEREST AS A SUBORDINATED LENDER.

BORROWER SIGNATURE: _____

Print Name

DATE: _____

Request for Transcript of Tax Return

OMB No. 1545-1872

▶ **Request may be rejected if the form is incomplete or illegible.**
 ▶ **For more information about Form 4506-T, visit www.irs.gov/form4506t.**

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get Transcript of Your Tax Records" under "Tools" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return**. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
4 Previous address shown on the last return filed if different from line 3 (see instructions)	
5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.	

Caution. If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

6 Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ _____

a Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days

b Account Transcript, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 10 business days

c Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days

7 Verification of Nonfiling, which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days

8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2011, filed in 2012, will likely not be available from the IRS until 2013. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days

Caution. If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

9 Year or period requested. Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately. _____

Caution. Do not sign this form unless all applicable lines have been completed.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note.** For transcripts being sent to a third party, this form must be received within 120 days of the signature date.

	Phone number of taxpayer on line 1a or 2a
Signature (see instructions)	Date
Title (if line 1a above is a corporation, partnership, estate, or trust)	
Spouse's signature	Date

WAIVER OF NOTICE TO INSPECT

Borrower/Seller

As owner of this building, I agree to waive the usual "30 day Notice to Inspect" in order to expedite the City's Systematic Code Inspection of my property located at _____ . As owner, I will abide by and provide the required Notice to all my tenants and schedule the inspection time with both tenants and City Housing inspectors who may, after the date of this waiver, inspect the common areas, all vacant areas and the interior of any tenant's unit.

Date: _____

Print Name: _____

Signature: _____