



Eric Garcetti, Mayor Rushmore D. Cervantes, General Manager

Loan Portfolio Unit – Asset Management Division 1200 West 7<sup>th</sup> Street, 8<sup>th</sup> Floor, Los Angeles, CA 90017 tel 213.808.8801 | fax 213.808.8606 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: <u>hcidla.requesttoassetmgmt@lacity.org</u>

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

#### **Background Check Information Sheet**

#### Background Check Form

#### Reviewer's Name: Extension: **Project Name:**

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

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!

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					
	the second s				
and the second state of the second				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 to protect its security interest as a subordinate lender.

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

and the second sec		· · · · · · · · · · · · · · · · · · ·	
Applicant/Borrower Signature	SSN/Fed Tax ID #	Date	
×			
Applicant/Borrower Signature	SSN/Fed Tax ID #	Date	

Rev 7/1/2015

# **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:
Bollowel Signature.	 Date.

Rev 7/1/2015

	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.		
age 2.	2 Business name/disregarded entity name, if different from above		
e is on page	Check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes: Individual/sole proprietor or C Corporation S Corporation Partnership single-member LLC	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):	
ğ jo	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partners	ship) 🕨	Exempt payee code (if any)
Print or type Instruction	Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in		Exemption from FATCA reporting
int	the tax classification of the single-member owner.		code (if any)
۲ <u></u>	Other (see instructions) ►		(Applies to accounts maintained outside the U.S.)
Print or type Specific Instructions	5 Address (number, street, and apt. or suite no.)	Requester's name a	and address (optional)
See S	6 City, state, and ZIP code		
	7 List account number(s) here (optional)		
Par	t I Taxpayer Identification Number (TIN)		
Enter	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to av	oid Social se	curity number
reside	p withholding. For individuals, this is generally your social security number (SSN). However, f ant alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For othe es, it is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>	·	
TIN o	n page 3.	or	
Note.	If the account is in more than one name, see the instructions for line 1 and the chart on page	4 for Employer	identification number
guide	lines on whose number to enter.		_
Par	t II Certification		

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- 3. I am a U.S. citizen or other U.S. person (defined below); and
- 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of		
Here	U.S. person ►	Date ►	
			_

### **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted. **Future developments**. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at *www.irs.gov/fw*9.

#### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- · Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*? on page 2 for further information.

# 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/L ife CAPS	CLTV	Prepay Penalty
1 <sup>st</sup>										
2 <sup>nd</sup>						~				
3 <sup>rd</sup>										
4 <sup>th</sup>										
Total				-		e-decthoirs	-10			

# AFTER PROPOSED AMENDMENT:

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

	Mortgage Holder	Present Balance	Monthly Payment	Loan Term	Interest Rate	Loan Index	ARM Margin	Annual/L ife CAPS	CLTV	Prepay Penalty
1 <sup>st</sup>										
2 <sup>nd</sup>										
3 <sup>rd</sup>										
4 <sup>th</sup>										
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:

DATE:

# **Request for Transcript of Tax Return**

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.

<b>1a</b> 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, stat	te, and ZIP code (see instructions)
4 Previous address shown on the last return filed if different from line	3 (see instructions)

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, 5 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.

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

а	<b>Return Transcript</b> , 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	~
с	<b>Record of Account,</b> 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.	
	n. 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 our return, you must use Form 4506 and request a copy of your return, which includes all attachments.	

q 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 taxpaver. 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.

	 Act and Depenvery Deduction Act Nation and page 2	0-t N- 07007N	Form 4506-T (Dov 9 2014)
	Spouse's signature	Date	
Here	Title (if line 1a above is a corporation, partnership, estate, or trust)		
Sign			
	Signature (see instructions)	Date	
			Phone number of taxpayer on line 1a or 2a

For Privacy Act and Paperwork Reduction Act Notice, see page 2.

Т

# 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:	- E	

Signature: \_\_\_\_\_