

## RIGHT OF FIRST REFUSAL

### APPLICATION FOR QUALIFIED ENTITY DESIGNATION

<b>APPLICANT INFORMATION:</b>		<b>Today's Date:</b>	/ / (mm/dd/yyyy)	
Organization Name				
Profit Status	<input type="checkbox"/> Non-Profit <input type="checkbox"/> For-Profit			
Maryland Business Department ID Number:				
Address:				
City		State:		Zip Code:
Contact Name:		Contact Phone Number:		
Contact Title:		Contact Email:		
Organizational Structure:	<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership (List Partners)	<input type="checkbox"/> Limited Partnership	
	<input type="checkbox"/> LLC	<input type="checkbox"/> Corporation	<input type="checkbox"/> Other	
	If Other, specify:			
<b>Demonstrated Expertise (Required experience in acquiring, maintaining, managing affordable rental housing)</b>				
Project Name:				
Address:		City:		Zip Code:
Project Type:	<input type="checkbox"/> New Construction	<input type="checkbox"/> Renovation	<input type="checkbox"/> Acquisition	
(check all that apply)	<input type="checkbox"/> Single Family (Detached)	<input type="checkbox"/> Townhouse	<input type="checkbox"/> High-rise (8+ stories)	
	<input type="checkbox"/> Low-Rise/Garden Apartment (4 stories or fewer)		<input type="checkbox"/> Mid-rise (5-7 stories)	
Project Description:	Number of Units:			
	Affordability Levels:			
	Project Financing:			
	Years of Involvement:			

Project Description (continued)	Management of the Property:			
	Other Information:			
Project Name:				
Address:		City:		Zip Code: -
Project Type:  (check all that apply)	<input type="checkbox"/> New Construction		<input type="checkbox"/> Renovation	
	<input type="checkbox"/> Acquisition		<input type="checkbox"/> High-rise (8+ stories)	
	<input type="checkbox"/> Single Family (Detached)		<input type="checkbox"/> Townhouse	
	<input type="checkbox"/> Low-Rise/Garden Apartment (4 stories or fewer)		<input type="checkbox"/> Mid-rise (5-7 stories)	
Project Description:	Number of Units:			
	Affordability Levels:			
	Project Financing:			
	Years of Involvement:			
	Management of the Property:			
	Other Information:			
Project Name:				
Address:		City:		Zip Code:
Project Type:  (check all that apply)	<input type="checkbox"/> New Construction		<input type="checkbox"/> Renovation	
	<input type="checkbox"/> Acquisition		<input type="checkbox"/> High-rise (8+ stories)	
	<input type="checkbox"/> Single Family (Detached)		<input type="checkbox"/> Townhouse	
	<input type="checkbox"/> Low-Rise/Garden Apartment (4 stories or fewer)		<input type="checkbox"/> Mid-rise (5-7 stories)	
Project Description:	Number of Units:			
	Affordability Levels:			
	Project Financing:			
	Years of Involvement:			
	Management of the Property:			
	Other Information:			

Add more pages if necessary.

**ATTACHMENT CHECKLIST AND CERTIFICATIONS**

**Qualified Entity Demonstration** – Documentation is required per 53A.00.00.05.2 to be included with the application. Please submit the following list of materials along with the application for qualification. Please check the box provided to confirm item is included:

- License and registration to do business in Maryland.
- Maryland Certificate of Good Standing.
- A list of lenders and equity sources used in prior projects.
- Copies of Affordability Covenants previously recorded on properties listed above.
- A complete certified list of code citations if any, for each property owned, managed, and operated by the applicant for the last five years.
- A complete certified list of judgments issued against the applicant in a landlord/tenant or similar proceeding, if any, related to the applicant’s ownership, management, or operation of any property for the last five years.
- A complete list of management companies and their contact information used at previously listed properties, if applicable.
- Explanation of past resident counseling or neighborhood-based organization experience.

Additionally, to be designated a qualified entity, the applicant must certify certain statements. Please review and sign the following to comply with Section 53A.00.01.05.2 of the Montgomery County Regulations.

**I hereby certify to the following:**

1. I certify to the truth of all the information provided in this application.
2. I certify that for the past ten years, \_\_\_\_\_ (Name of Entity), inclusive of its principals, members, managers, and directors, has complied with all laws related to the acquisition, maintenance, and management of housing.
3. I certify that \_\_\_\_\_ (Name of Entity) has never been in financial default as either a borrower or guarantor, or if to the contrary, I have attached an explanation in complete detail of all circumstances.
4. I certify that \_\_\_\_\_ (Name of Entity) will not disclose any information or document it receives from the Department of Housing and Community Affairs under section 53A, unless required by law.

\_\_\_\_\_  
Signature of Executive Officer of Organization

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title