### FINANCING APPLICATION

### HOSPITALS, HEALTH CENTERS AND EDUCATIONAL FACILITIES

Allegheny County Hospital Development Authority
Allegheny County Higher Education Building Authority
One Chatham Center, Suite 900
112 Washington Place
Pittsburgh, Pennsylvania 15219

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### FINANCING APPLICATION CHECKLIST

	Check if included
Financing Application	
Attachments: Borrower Certification	
Exhibits:	
(Please attach to Application in the order listed below)	
Borrower Resolution	
Certificate of Need (Only for Health Care Institutions)	
Letter of Non-Reviewability (Only for Health Care Institutions)	
Financial Letter of Commitment	
Audited Financial Statements	
Application Fee	

#### FINANCING APPLICATION INSTRUCTIONS

#### **INSTRUCTIONS**

Please complete all financing application sections; do not attach information sheets or brochures in place of answers. If a question does not apply to your project, type "Not Applicable".

If additional space is needed to answer a question, please attach additional sheets behind the page on which the question appears.

All responses should be typewritten.

#### **EXHIBITS**

The Borrower's Resolution should be a certified resolution of the Borrower Board of Directors authorizing the execution of the Financing Application and its submission to the Authority.

Either a Certificate of Need, a completed Certificate of Need Application, or a Letter of Non-Reviewability is required for Board Approval. If a Certificate of Need is not required for the project, an opinion from Borrower counsel attesting to this may be necessary. This exhibit is only applicable to hospital and health center projects.

The Financial Letter of Commitment must be from a financial institution or a firm of underwriters and should indicate their willingness to assist the Borrower with the necessary financing arrangements for the project. This letter must include, but not be limited to, the following information:

- a) the not-to-exceed amount of financing;
- b) the type of financing: public offering, private placement, etc.;
- c) type of credit enhancement, if any, to be utilized: letter of credit, bond insurance, guarantor, etc.;
- d) proposed maturity of bonds;
- e) proposed interest rate range;
- f) fixed or variable rate (or combination); and
- g) proposed date of closing.

The most recently audited financial statements of the Borrower are required. Audited financial statements of the guarantor institutions, where applicable, are also required.

The Application Fee in the amount of \$500 should be made payable to the appropriate Authority. The Application Fee represents the costs incurred by the Authority including but not limited to, the cost of advertising for a Public Hearing (TEFRA) and other related agenda costs.

### SECTION I. BORROWER/OCCUPANT INFORMATION

Address	
City/State/Zip Code	
Contact	Title
Telephone	FAX No
Email	Cell
Occupant	
Address	
City/State/Zip Code	
Contact	Title
Telephone	FAX No
Email	Cell
Non-Profit Status	
Date of IRS Determination Letter	
Federal Tax-Exempt Identification Number	

Please provide a brief description of your governance, historic, and current activities.

# SECTION II. LIST OF PROJECT PRINCIPALS

Bond Counsel		
Address		
City/State/Zip Code		
Contact	Title	
Telephone	FAX No	
Email	Cell	
Underwriter		
Address		
City/State/Zip Code		
Contact	Title	
Telephone	FAX No	
Email	Cell	
	Tid.	
	Title FAX No	
Trustee		
Address		
City/State/Zip Code		
Contact	Title	
Telephone	FAX No	
Email	Cell	

5.	Trustee's Counsel		
	Address		
	City/State/Zip Code		
	Contact	Title	
	Telephone	FAX No	
	Email	Cell	
6.	Liquidity/Credit Provider		
	Address		
	City/State/Zip Code		
	Contact	Title	
	Telephone	FAX No	
	Email	Cell	
7.	Borrower's Counsel		
	Address		
	City/State/Zip Code		
	Contact	Title	
	Telephone	FAX No	
	Email	Cell	

## SECTION III. PROJECT PLAN

1.	Description	
	Please provide a brief description of the proposed	project.
2.	PROJECT SCHEDULE	Projected Date
	Land/Facility Acquisition	
	Renovation/Construction	
	Construction Commencement	
	Construction Completion	
	Equipment	
	Equipment Ordered	
	Equipment Delivered	
	Has any part of the acquisition, construction, or or provide a brief description.	rdering begun?If yes, please

3.	La	and Use and Planning	
	a)	Does the proposed project comply with the current zoning regulations? no, please explain what steps will be taken to obtain the appropriate zoning.	If
	b)	What was the previous use of the land and are there any environmental problems associated with that use?	
	c)	Will the proposed structure compliment the existing surroundings?Please explain.	
	d)	Does the proposed project comply with the master plan of the neighborhood, city, municipality, or county (whichever document is appropriate)?Please explain.	

4.	Community	y Impact	

5.

a) Is the project acceptable to the surrounding community? Please explain.
b) Will there be temporary or permanent relocation of individuals as a result of the project? If yes, how will this be administered?
c) Please identify below the project impact on employment:
Applicant's Current Number of Employees
Applicant's Current Annual Payroll
Number of New Jobs Anticipated After Project Completion
Number of Existing Jobs that will be Retained as a Result of this project
Number of construction jobs to be employed  During the construction or renovation  Phase of the project
d) Will your project be LEED certified or will it fit standards equivalent to LEED certification?
Benefit of Tax-Exempt Savings
a) Please provide an estimate of the savings realized from the use of tax-exempt bonds for this financing.
b) How will students/patients benefit from the savings realized from the use of tax-exempt bonds?

### SECTION IV. PROJECT FINANCING

1. List all costs of the project to be paid by either the Borrower or the Occupant.

## **Sources of Funds**

	Authority	E	C	TOTAL
Use of Funds	(Bonds)	Equity	Grants/Loans	PROJECT COST
Land				
Bldg Acq				
			<del></del>	
Const			<del></del>	
Renovation				
New Equip				
Used Equip				
Work Cap				
Debt S Res				
Cap Int/ Const Per				
Reim Prior Cap Exp				
Budget Cap Expend				
Liq/Cr Enh				
Closing Costs		- <u></u>		
Misc Cost (exp below)				
TOTAL				
Interest Rate:		Loan Term:		
Miscellaneous Co	osts:			

2.	Description
	Please provide a general description of the proposed financing.
3.	Refunding
	Is this financing to be a refunding of outstanding debt?If yes, please attach a copy of IRA Form 8038 filed with respect to the outstanding debt to be refunded. If yes, is the Annua Fee due the Authority for the outstanding debt current?
4.	Liquidity/Credit Enhancement
	What is the type of liquidity/credit enhancement which will be utilized?

# 5. **Prior Authority Issues**

Please provide a list of bond issues completed by the Authority on behalf of the Borrower/Guarantor. Information should include the amount of each issue, the closing date and the principal amount of the obligation remaining outstanding.

#### **CERTIFICATION BY BORROWER**

The	e undersigned, being the duly	authorized			of
				, (the B	orrower) in a
per	nding financing as described in	the attached Financing Applic	ation here	eby certifies	as follows:
1.		n the foregoing Financing Apportunent submitted	plication a to	and in any the	information, Allegheny
		Authority in co	nnection	with this	s Financing
	Application are true and corn	rect to the best of my knowledg	ge.		
2.	That I am authorized to mak	e this Certification.			
		Date			
		Borrower's Signature			
		Print Name and Title			