

**EXHIBIT C-1 – MANAGEMENT AGENT QUESTIONNAIRE**

**I. The Management Company**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Date of Organization: \_\_\_\_\_

State of Incorporation: \_\_\_\_\_

Number of Professional Employees: \_\_\_\_\_

Number of Maintenance Employees: \_\_\_\_\_

Number of Other Employees: \_\_\_\_\_

Principals, including title and brief personal resume: (attach separate sheet if necessary).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you qualified to do business in the state of Idaho? If not, please explain.

\_\_\_\_\_

\_\_\_\_\_

**II. The Development**

Development Name: \_\_\_\_\_

Development Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**III. Experience (Include subsidy programs such as HUD or RD where applicable)**

A. Provide the following information for all developments if your firm has been approved as the Management Agent but has not yet begun lease-up activities:

<u>Name of Development</u>	<u>Number of Units</u>	<u>Location</u>	<u>Description</u>
_____	_____	_____	_____
_____	_____	_____	_____

**EXHIBIT C-1 – MANAGEMENT AGENT QUESTIONNAIRE (Continued)**

B. If any development described in III.A. is in default, please identify the development and briefly describe the nature and status of the default.

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**IV. Related Parties**

Provide the name(s) of any companies in which your firm or any of its principals has an identity of interest that will be involved with the development.

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**V. References**

Please provide at least three financial and three professional references.

Financial

Professional

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**VI. Management Plan**

Please provide a copy of the comprehensive management plan for the development in accordance with the requirements of the Low-Income Housing Tax Credit Application. Also include a resume for the property manager who will be responsible for this development.

The undersigned acknowledges that the information provided herein is being used in connection with an application for Low-Income Housing Tax Credits and/or HOME Funds.

Name of Firm: \_\_\_\_\_

By: \_\_\_\_\_  
(Signature)

Name: \_\_\_\_\_

Title: \_\_\_\_\_