**Non-Rural State Designated Boost Request**

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| **Project Name:** |  |
| **Sponsor Organization:** |  |
| **Project Contact:** |  |
| **Email:** |  |
| **Telephone:** |  |

1. Briefly describe the project, number of units, location and population to be served.
2. Provide a narrative explanation to justify why the state issued basis boost is necessary for this project to be financially feasible.
3. Attach the following forms from the Combined Funders application:

* 6C-LIHTC Budget
* 6D-LIHTC Calculation – PLEASE provide **(2)** separate versions of this form:

1. LIHTC calculation **WITHOUT** the basis boost
2. LIHTC calculation **WITH** the basis boost

* 7A- Financing Sources