



PTAX-350-Schedule II, Qualifying Renovations

Submit this form with Form PTAX-350, Uniform Application for Assessment of Affordable Rental Housing.

USE FOR OPTIONS B AND C - FOR REHABILITATIONS ONLY. TO BE COMPLETED AT INITIAL PROJECT CERTIFICATION. Please provide the information below for each type of qualifying improvement. Applicant must include copies of all approved permits, if applicable, and/or copies of contractor invoices, or must independently certify that the project meets the standards outlined in statute. See instructions for detailed description of qualifying expenditures.

Identify the project:	Owner Name	IHDA Project Identification Number
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APPLICATION YEAR:			
Program being applied for (Must match the selection from Form PTAX-350):	<input type="checkbox"/> Option B1	<input type="checkbox"/> Option B2	<input type="checkbox"/> Option C
Total project size (Sq. ft.):	Year of qualifying construction or rehabilitation:		

1.	Primary building system type:	<input type="checkbox"/> 1. Electrical	<input type="checkbox"/> 2. Heating	<input type="checkbox"/> 3. Plumbing
		<input type="checkbox"/> 4. Roofing	<input type="checkbox"/> 5. Windows/Doors	<input type="checkbox"/> 6. Floors/Walls/Ceilings
		<input type="checkbox"/> 7. Exterior Walls	<input type="checkbox"/> 8. Elevators	<input type="checkbox"/> 9. Health/Safety
		<input type="checkbox"/> 10. Energy Efficiency	<input type="checkbox"/> 11. Accessibility	
	Building system cost:			
	Description of improvements:	<hr/> <hr/> <hr/>		

2.	Primary building system type:	<input type="checkbox"/> 1. Electrical	<input type="checkbox"/> 2. Heating	<input type="checkbox"/> 3. Plumbing
		<input type="checkbox"/> 4. Roofing	<input type="checkbox"/> 5. Windows/Doors	<input type="checkbox"/> 6. Floors/Walls/Ceilings
		<input type="checkbox"/> 7. Exterior Walls	<input type="checkbox"/> 8. Elevators	<input type="checkbox"/> 9. Health/Safety
		<input type="checkbox"/> 10. Energy Efficiency	<input type="checkbox"/> 11. Accessibility	
	Building system cost:			
	Description of improvements:	<hr/> <hr/> <hr/>		

3.	Primary building system type:	<input type="checkbox"/> 1. Electrical	<input type="checkbox"/> 2. Heating	<input type="checkbox"/> 3. Plumbing
		<input type="checkbox"/> 4. Roofing	<input type="checkbox"/> 5. Windows/Doors	<input type="checkbox"/> 6. Floors/Walls/Ceilings
		<input type="checkbox"/> 7. Exterior Walls	<input type="checkbox"/> 8. Elevators	<input type="checkbox"/> 9. Health/Safety
		<input type="checkbox"/> 10. Energy Efficiency	<input type="checkbox"/> 11. Accessibility	
	Building system cost:			
	Description of improvements:	<hr/> <hr/> <hr/>		

4.	Primary building system type:			<input type="checkbox"/> 1. Electrical	<input type="checkbox"/> 2. Heating	<input type="checkbox"/> 3. Plumbing
	<input type="checkbox"/> 4. Roofing	<input type="checkbox"/> 5. Windows/Doors	<input type="checkbox"/> 6. Floors/Walls/Ceilings	<input type="checkbox"/> 7. Exterior Walls		
	<input type="checkbox"/> 8. Elevators	<input type="checkbox"/> 9. Health/Safety	<input type="checkbox"/> 10. Energy Efficiency	<input type="checkbox"/> 11. Accessibility		
	Building system cost:					
Description of improvements:			_____			

5.	Primary building system type:			<input type="checkbox"/> 1. Electrical	<input type="checkbox"/> 2. Heating	<input type="checkbox"/> 3. Plumbing
	<input type="checkbox"/> 4. Roofing	<input type="checkbox"/> 5. Windows/Doors	<input type="checkbox"/> 6. Floors/Walls/Ceilings	<input type="checkbox"/> 7. Exterior Walls		
	<input type="checkbox"/> 8. Elevators	<input type="checkbox"/> 9. Health/Safety	<input type="checkbox"/> 10. Energy Efficiency	<input type="checkbox"/> 11. Accessibility		
	Building system cost:					
Description of improvements:			_____			

6.	Primary building system type:			<input type="checkbox"/> 1. Electrical	<input type="checkbox"/> 2. Heating	<input type="checkbox"/> 3. Plumbing
	<input type="checkbox"/> 4. Roofing	<input type="checkbox"/> 5. Windows/Doors	<input type="checkbox"/> 6. Floors/Walls/Ceilings	<input type="checkbox"/> 7. Exterior Walls		
	<input type="checkbox"/> 8. Elevators	<input type="checkbox"/> 9. Health/Safety	<input type="checkbox"/> 10. Energy Efficiency	<input type="checkbox"/> 11. Accessibility		
	Building system cost:					
Description of improvements:			_____			

7.	Primary building system type:			<input type="checkbox"/> 1. Electrical	<input type="checkbox"/> 2. Heating	<input type="checkbox"/> 3. Plumbing
	<input type="checkbox"/> 4. Roofing	<input type="checkbox"/> 5. Windows/Doors	<input type="checkbox"/> 6. Floors/Walls/Ceilings	<input type="checkbox"/> 7. Exterior Walls		
	<input type="checkbox"/> 8. Elevators	<input type="checkbox"/> 9. Health/Safety	<input type="checkbox"/> 10. Energy Efficiency	<input type="checkbox"/> 11. Accessibility		
	Building system cost:					
Description of improvements:			_____			

8.	Primary building system type:			<input type="checkbox"/> 1. Electrical	<input type="checkbox"/> 2. Heating	<input type="checkbox"/> 3. Plumbing
	<input type="checkbox"/> 4. Roofing	<input type="checkbox"/> 5. Windows/Doors	<input type="checkbox"/> 6. Floors/Walls/Ceilings	<input type="checkbox"/> 7. Exterior Walls		
	<input type="checkbox"/> 8. Elevators	<input type="checkbox"/> 9. Health/Safety	<input type="checkbox"/> 10. Energy Efficiency	<input type="checkbox"/> 11. Accessibility		
	Building system cost:					
Description of improvements:						

9.	Primary building system type:			<input type="checkbox"/> 1. Electrical	<input type="checkbox"/> 2. Heating	<input type="checkbox"/> 3. Plumbing
	<input type="checkbox"/> 4. Roofing	<input type="checkbox"/> 5. Windows/Doors	<input type="checkbox"/> 6. Floors/Walls/Ceilings	<input type="checkbox"/> 7. Exterior Walls		
	<input type="checkbox"/> 8. Elevators	<input type="checkbox"/> 9. Health/Safety	<input type="checkbox"/> 10. Energy Efficiency	<input type="checkbox"/> 11. Accessibility		
	Building system cost:					
Description of improvements:						

10.	Primary building system type:			<input type="checkbox"/> 1. Electrical	<input type="checkbox"/> 2. Heating	<input type="checkbox"/> 3. Plumbing
	<input type="checkbox"/> 4. Roofing	<input type="checkbox"/> 5. Windows/Doors	<input type="checkbox"/> 6. Floors/Walls/Ceilings	<input type="checkbox"/> 7. Exterior Walls		
	<input type="checkbox"/> 8. Elevators	<input type="checkbox"/> 9. Health/Safety	<input type="checkbox"/> 10. Energy Efficiency	<input type="checkbox"/> 11. Accessibility		
	Building system cost:					
Description of improvements:						

11.	Primary building system type:			<input type="checkbox"/> 1. Electrical	<input type="checkbox"/> 2. Heating	<input type="checkbox"/> 3. Plumbing
	<input type="checkbox"/> 4. Roofing	<input type="checkbox"/> 5. Windows/Doors	<input type="checkbox"/> 6. Floors/Walls/Ceilings	<input type="checkbox"/> 7. Exterior Walls		
	<input type="checkbox"/> 8. Elevators	<input type="checkbox"/> 9. Health/Safety	<input type="checkbox"/> 10. Energy Efficiency	<input type="checkbox"/> 11. Accessibility		
	Building system cost:					
Description of improvements:						

12.	Code Violations: If property was purchased within 90 days of this application, describe any code violations repaired. Attach all pertinent documentation.					
	Cost of remediation:					
	Description of repairs:					

SCHEDULE II - FOR OFFICE USE ONLY

a.	Cumulative number of qualifying building system updates:	
b.	Total primary building system costs (Add all "Building system costs" lines from boxes 1 – 11.):	
c.	Total project size (sq. ft.) from page 1 of this schedule:	
d.	Qualifying project value per sq. ft. (Divide Line b by Line c.):	
e.1.	Code violations (Divide the cost of remediations from the code violations on Line 12 by Line c.):	
e.2.	Multiply \$2.00 by the Consumer Price Index (CPI):	
e.	Enter the lesser of Line e.1. and e.2.	
f.	Total project qualifying costs per square foot (Add Line e to Line d.):	

Option B1:	Must meet or exceed two (2) renovations of primary building systems. Total qualifying costs must exceed \$8.00 per square foot times the Consumer Price Index (CPI) from the base year of 2022.				Mark if the option qualifies
	\$8.00	×	CPI	=	Qualifies <input type="checkbox"/>
Option B2:	Must meet or exceed two (2) renovations of primary building systems. Total qualifying costs must exceed \$12.50 per square foot times the Consumer Price Index (CPI) from the base year of 2022.				
	\$12.50	×	CPI	=	Qualifies <input type="checkbox"/>
Option C:	Must meet or exceed five (5) renovations of primary building systems. Total qualifying costs must exceed \$60.00 per square foot times the Consumer Price Index (CPI) from the base year of 2022.				
	\$60.00	×	CPI	=	Qualifies <input type="checkbox"/>

Verified by: _____ Date: _____