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Office of Development  
Inclusionary Housing  
100 Gold Street, 5G  
New York, N.Y. 10038  
nyc.gov/hpd

**AFFORDABLE HOUSING PLAN CHECKLIST PURSUANT TO THE MANDATORY INCLUSIONARY HOUSING  
FEE-IN-LIEU PROGRAM**

<b>PROJECT NAME:</b>		<b>AS OF:</b>		<b>TARGETED CLOSING DATE:</b>	
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Requirement	Responsible Party	Notes
<b>A. Application</b>		
Inclusionary Housing Application (Original required) <a href="#">LINK</a>	Development Team	
MIH Application Submission Fee (\$100) <i>Made payable to NYC Dept. of Finance</i>	Development Team	
<b>B. Architectural Submissions</b>		
Building drawings, including zoning analysis sheet	Project Architect	
MIH Architect Affidavit (Original required)	Development Team	
<b>C. Campaign Finance Forms</b>		
Doing Business Data form (Original required) <a href="#">LINK</a>	Development Team	
<b>D. Community Board Notification</b>		
Notification delivered <i>(at least 45 days prior to closing)</i>	Development Team	
<b>E. Supporting Organizational Documents</b>		
Organizational charts for Applicant entity	Development Team	
Employer Identification Number (EIN) for Applicant entity	Development Team	
<b>F. Legal</b>		
Draft MIH Affordable Housing Fund Restrictive Declaration circulated	HPD Legal	
Restrictive Declaration opinion letter submitted (Original required)	Applicant's Counsel	
<b>G. Closing</b>		
Closing date assigned	HPD Team	
Affordable Housing Fund Contribution <a href="#">LINK</a> <i>Made payable to NYC Housing Development Corporation (HDC).</i>	Development Team	



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## AFFORDABLE HOUSING PLAN PROVISIONS PURSUANT TO THE MANDATORY INCLUSIONARY HOUSING FEE-IN-LIEU PROGRAM

### A. Application

Information on the Inclusionary Housing Program can be found here: [nyc.gov/HPD - Inclusionary Housing Program](http://nyc.gov/HPD - Inclusionary Housing Program)

#### **Fees**

All fees must be paid in the form of a certified check, bank check, or money order as follows:

- **\$100 Mandatory Inclusionary Housing Application Submission Fee:** *due at application submission, made payable to the NYC Department of Finance (DOF).*
- **Affordable Housing Fund Contribution:** *due prior to HPD's issuance of a Permit Notice, made payable to the NYC Housing Development Corporation (HDC). For more information on this fee, please see § 41-24 of the Rules of the City of New York.*

### B. Architectural Submissions

#### **Mandatory Inclusionary Housing Architect Affidavit**

Submit certification from an architect that states:

- (1) the amount of residential floor area in the project
- (2) that the MIH Development complies with §23-154 of the New York City Zoning Resolution ("Zoning Resolution") and §41-15 of the Inclusionary Housing Program Guidelines ("Guidelines")

Access the MIH Architect Affidavit and Exhibit A Stacking Charts here: [MIH Architect Affidavit](#)

#### **Building Drawings**

Submit DOB submission-quality drawings that substantiate or verify the Architect's Affidavit for new construction, enlargement or conversion projects. Building drawings must include Zoning Sheet analysis.

*Note: Building plans filed with DOB must be reviewed by a DOB plan examiner. Responses to DOB objections must not be self-certified.*

### C. Campaign Finance Forms

Entities participating in affordable housing transactions with the City must complete and submit Campaign Finance forms with the Application. Please submit a hard copy original and PDF electronic version.

### D. Community Board Notification

A copy of the full MIH Application must be submitted to the Community Board at least 45 days prior to execution of a restrictive declaration. Submit proof, either through proof of mailing or signature of receipt from the Community Board, that the proposed Application was submitted to the Community Board in which the project is located, and the date such plan was submitted.

### E. Supporting Organizational Documents

Submit organizational charts and Employer Identification Number (EIN) for Applicant entity.

### F. Legal

HPD Legal will assign an attorney to review closing documents and draft the Mandatory Inclusionary Housing Affordable Housing Fund Restrictive Declaration.

### G. Closing

#### **Permit Notice Availability**

Upon execution and recordation of the Restrictive Declaration (or proof that the document was submitted to the Office of the City Register for recordation), HPD will generate a Permit Notice, for delivery to DOB. The Permit Notice will state the project has complied with ZR 23-154 (d) (iv).

**THE CITY OF NEW YORK**  
**DEPARTMENT OF HOUSING PRESERVATION AND DEVELOPMENT**  
OFFICE OF DEVELOPMENT  
100 GOLD STREET, ROOM 5G, NEW YORK, NEW YORK 10038  
Inclusionary@hpd.nyc.gov

**AFFORDABLE HOUSING PLAN APPLICATION PURSUANT TO  
THE MANDATORY INCLUSIONARY HOUSING PROGRAM**

*Please indicate "Not Applicable" or "NA" where appropriate. Do not leave any lines blank.*

**1. Applicant:** \_\_\_\_\_

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

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

Email: \_\_\_\_\_

Primary Contact (Name, Phone, Email):  
\_\_\_\_\_

**2. Owner (if different):** \_\_\_\_\_

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

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

Email: \_\_\_\_\_

Primary Contact (Name, Phone, Email):  
\_\_\_\_\_

**3. General Contractor:** \_\_\_\_\_

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

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

Email: \_\_\_\_\_

Primary Contact (Name, Phone, Email):  
\_\_\_\_\_

**4. Architect:** \_\_\_\_\_

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

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

Email: \_\_\_\_\_

Primary Contact (Name, Phone, Email):  
\_\_\_\_\_

**5. Attorney and Firm:** \_\_\_\_\_

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

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

Email: \_\_\_\_\_

Primary Contact (Name, Phone)  
\_\_\_\_\_

**6. Mandatory Inclusionary Housing Area**

(Include Zoning Resolution Appendix F Map Reference): \_\_\_\_\_

Special Permit: \_\_\_\_\_

**7. Address of MIH Development**

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

Borough: \_\_\_\_\_

Block(s)/Lot(s): \_\_\_\_\_

Community Board: \_\_\_\_\_

**8. MIH Option for Compliance with Affordable Housing Requirement – ZR 23-154 (d)(3)(i-iv):**

- Option 1
- Option 2
- Deep Affordability Option
- Workforce Option
- Affordable Housing Fund Contribution

**9. Unit Count in MIH Development:** Total Residential Units: \_\_\_\_\_

**10. Tax Exemption to be requested:**

\_\_\_\_\_

**11. Type of Project (check all that apply)**

Construction type:

- New Construction
- Conversion
- Enlargement

Tenure of Non-MIH Units

- Rental
- Homeownership Condo
- Homeownership Coop
- Not Applicable

**Authorized Signature of Applicant:** \_\_\_\_\_

**Print name:** \_\_\_\_\_

**Date:** \_\_\_\_\_