



Request for Volume Cap January 1 to March 31

For applications submitted January 1 to March 31. (Please submit Director's Discretion applications on a separate form.) Email completed form to communications@afa.az.gov with a copy of the inducement resolution or other official action taken by the issuer in connection with the project. Confirmations will not be issued until the application and confirmation fees have been received. This Request and the confirmation shown below are intended to comply with Section 146 of the Internal Revenue Code of 1986, as amended.

Issuer _____ Issuer's EIN _____

Date of Inducement Resolution or other official action _____

Applicant (Issuer, Bond Counsel, or other Interested Party)

Company _____ Work Phone _____

Contact _____ Mobile Phone _____

Title _____ Email _____

Address _____

Project Description

Volume Cap Requested \$ _____

Project Name _____

Project Address _____

Brief Project Description: (if space below is not sufficient please note "see attached" and include it separately)

Type of Project

Mortgage Revenue Bonds and Mortgage Credit Certificates

 Urban city, as designated in A.R.S. §35-901 (24)

 Nonurban area, as designated in A.R.S. §35-901 (14)

Residential Rental

Manufacturing

The undersigned hereby certifies that the information provided for above and attached is accurate to the best knowledge of the Applicant.

Signature

Date

Application and Confirmation Fees

An Application Fee of \$5,000 is due up confirmation of volume cap availability. Within three business days of receipt of this Request for Volume Cap signed by the Arizona Finance Authority, a confirmation fee of \$320 per \$1 million of requested Volume Cap.

Remit check to

Arizona Finance Authority
c/o Office of Economic Opportunity
1810 West Jackson, #68
Phoenix, AZ 85007

Wire Information

Bank of America
Account Name: BNF:OEO/EOA Arizona Finance Authority
Account Number: 000001000985
Routing Number: 026009593

To be completed by the Arizona Finance Authority upon receipt of application

Date/Time Application Received _____ Inducement Resolution Received _____

Invoice # _____

Project ID _____

Invoice Amount \$ _____

AFA Program Manager (Signature)

Date

Receipt of fees and deposits

Date Received _____

Confirmed Allocation Amount: \$ _____

Expiration Date _____