



VACANT PROPERTY HOUSING DEVELOPMENT APPLICATION

PO Box 1027, Savannah, GA 31402

New
 Renovation
 Home Buyer
 Renter
 Persons Experiencing Homelessness

Date :			
Developer Name :			
Company Name :			
Mobile Number :		Office Number:	
Email:			
Mailing Address :			

PROJECT DETAILS

Address:		PIN :	
Lot Width:		Lot Depth :	
House Plan:		Roof Option :	
Heated Sq. Ft :		#Bedrooms :	
		#Baths :	

Development Details

CHSA/SG Development Fee:

Developer's Fee (Your Fee)	Lot Cost	Site Costs	Construction Cost	Soft Costs	Realtor Fees	Total Dev Costs	Proposed Sales Price

Is Developer seeking development financing from SAHF? Y N If yes, how much? \$ _____

Is Developer seeking development financing from City of Savannah Y N If yes, how much? _____

Source and Amount of Remaining Financing? Source: _____ Amount:\$ _____

Closing Attorney: _____ Phone: _____

Builder's Risk insurance:

Mortgagee Clause:
 Community Housing Services Agency, Inc.
 Attn: Executive Director
 P O Box 1027
 Savannah, GA 31402

If you have any questions, contact:

Anita Smith-Dixon
 Executive Director
 P: 912-651-2169
 F: 912-525-1764
 asmithdixon@chsainc.org

Signature: _____

Retainage of 10% of City Funds will be held until home Certificate of Occupancy is obtained. By signing you agree to the above requirements.

