|  |
| --- |
| Complete this form and send along with attachments listed in section 3 to [housingpartnerships@sa.gov.au](mailto:housingpartnerships@sa.gov.au), Attn: Manager Investment Partnerships. |

# Section 1 – Application Overview

This application only pertains to assets in which the South Australian Housing Trust (SAHT) has an interest.

Please provide details on the Applicant (Community Housing Provider) and Contact, the Financier, proposed finance and assets being used as collateral.

Table 1.1. Overview of Proposal

|  |  |  |
| --- | --- | --- |
| # | Applicant | Provide details here |
| **1** | **Please present a concise summary of the planned transaction, clearly specifying whether the community housing provider is pursuing new or increased debt financing and/or a new or increased collateral pool.** | Click or tap here to enter text. |
| **2** | **Please nominate the projects for which the debt/collateral will be used and whether the project has an executed Project Agreement.** | Click or tap here to enter text. |

Table 1.2. Applicant (i.e. the community housing provider).

|  |  |  |
| --- | --- | --- |
| # | Applicant | Provide details here |
| **1** | **Community housing provider name** | Click or tap here to enter text. |

Table 1.3. Principal Contact.

|  |  |  |
| --- | --- | --- |
| # | Principal Contact | Provide details here |
| **1** | **Name** | Click or tap here to enter text. |
| **2** | **Position / title** | Click or tap here to enter text. |
| **3** | **Contact (phone & email)** | Click or tap here to enter text. |
| **4** | **Applicant’s legal representative**   * **Firm** * **Name** * **Phone** * **Email** | Click or tap here to enter text. |

Table 1.4. Proposed Financier.

|  |  |  |
| --- | --- | --- |
| # | Proposed Financier | Provide details here |
| **1** | **Proposed Financier’s name** | Click or tap here to enter text. |
| **2** | **Proposed Financier’s Contact**   * **Name** * **Phone** * **Email** | Click or tap here to enter text. |
| **3** | **Proposed Financier’s legal representative**   * **Firm** * **Name** * **Phone** * **Email** | Click or tap here to enter text. |

Table 1.5. Finance / Collateral.

|  |  |  |
| --- | --- | --- |
| # | Finance | Provide details here |
| **1** | **Debt Amount** | Click or tap here to insert dollar amount |
| **2** | **Purpose of the debt** | Click or tap here to insert details of what the finance will be used for |
| **3** | **Collateral Amount** | Click or tap here to insert dollar amount |
| **4** | **A) New collateral**  **B) Existing collateral** | 1. Insert dollar amount 2. Insert dollar amount |
| **5** | **List all current debt facilities held by the community housing provider, along with their respective amounts.** | Click or tap here to enter text. |

Table 1.6. Assets used as collateral.

**Property List**

Please use the **approved template** spreadsheet to list the details of the properties that are being proposed to be used as security. Access the template spreadsheet at [Policies | SA Housing Authority](https://www.housing.sa.gov.au/about-us/policies) and [SA.GOV.AU - Property and asset management (www.sa.gov.au)](https://www.sa.gov.au/topics/housing/renting-and-letting/renting-from-a-community-group/working-in-community-housing/managing-a-community-housing-organisation/property-and-asset-management) (no other template will be accepted).

Send the spreadsheet, the other items listed in Section 3, and this form as a complete package to [housingpartnerships@sa.gov.au](mailto:housingpartnerships@sa.gov.au) Attn: Manager Investment Partnerships

## Section 2 – Key Eligibility Requirements

Please respond to the criteria by selecting an option from the respective drop-down menus and entering sufficient details in the text boxes.

Table 2 Key Eligibility Requirements

|  |  |  |
| --- | --- | --- |
| # | Eligibility Criteria | YES / NO  Please provide further details below (or attach a separate page to this application) |
| **1** | **Does the proposed debt and/or increase in the collateral pool solely relate to funding for community housing provider activities in South Australia (ie. not in another jurisdiction)?** | Choose an item.  Click or tap here to enter text. |
| **2** | **Does the proposed debt and/or increase in the collateral pool contribute to improving and/or growing South Australia’s:**   * **social,**   **and / or**   * **affordable housing?** | Choose an item.  Click or tap here to enter text. |
| **3** | **Will the borrowings be used to support projects being undertaken under one of the following:**   * **Social Housing Accelerator Fund?** * **Housing Australia Future Fund?** * **Housing Accord commitment?** | Choose an item.  Click or tap here to indicate which funding source the proposed project will come under: |
| **4** | **Can the SA Housing Authority obtain information relating to assessment of this application from the proposed financier, the SA Office of Housing Regulator and Registrar, and any other bodies?**  **Does the community housing provider give those parties permission to share such information with the Authority?** | Choose an item.  Click or tap here to enter text. |
| **5** | **Under the proposed arrangement with the financier, will the SA Housing Authority be materially prevented from exercising rights under the terms of any lease or other agreement, including those related to any General Security Agreements, under the proposed arrangement with the financier?**  **Note: A General Security Agreement is often required by lenders so they can register their security interest and make a claim over the secured property in the event the borrower defaults on the loan. Security arrangements can include:**  **(a) registered security over titles (i.e. mortgages) for project properties,**  **and**  **(b) a General Security Agreement over all personal property or assets of the organisation.** | Choose an item.  Click or tap here to enter text. |
| **6** | **Does the community housing provider have any unsatisfactory or outstanding contractual or regulatory issues? If so please give details.** | Choose an item.  Click or tap here to enter text. |
| **7** | **Is it possible the community housing provider has any contractual and/or regulatory issues which may compromise the financed project(s) or the provider’s wider operations? If so please give details.** | Choose an item.  Click or tap here to enter text. |
| **8** | **Does the community housing provider have the capacity/ capability to develop and deliver the project(s)?**  **Will taking on this project affect the provider’s ability to successfully meet operational requirements, contracts and service level agreements including for maintenance?** | Choose an item.  Click or tap here to insert evidence and further details of the provider’s capacity/capability |

|  |  |  |
| --- | --- | --- |
| # | Eligibility Criteria | YES / NO  Please provide further details below (or attach a separate page to this application) |
| **9** | **Taking into account the resultant borrowings under the proposed debt facility, will the community housing provider maintain:**   * **a gearing ratio of not more than 30 per cent; and** * **an interest coverage ratio of no less than 1.5 times?** | Choose an item.  Click or tap here to enter text. |
| **10** | **Has the community housing provider attached the latest available Financial Performance Report to review a provider’s gearing ratio (required for all applications)?** | Choose an item.  Click or tap here to enter text. |
| **11** | **Has the community housing provider attached an overlay of the proposed debt facility on the provider’s Gearing and Interest Coverage Ratio (required for applications unless determined otherwise by the SA Housing Authority).** | Choose an item.  Click or tap here to enter text. |

## Section 3 – Attachments

Table 3 Attachments

Please send the following attachments together with this form as a complete package to [housingpartnerships@sa.gov.au](mailto:housingpartnerships@sa.gov.au) Attn: Manager Investment Partnerships

|  |  |
| --- | --- |
| Attachment | Comments (If relevant) |
| **Heads of Agreement/Terms Sheet with financier.** | Click or tap here to enter text. |
| **Property List (spreadsheet detailed in section 1.6, available to download from** [**SA.GOV.AU - Community Housing Master Agreement (www.sa.gov.au)**](https://www.sa.gov.au/topics/housing/renting-and-letting/renting-from-a-community-group/working-in-community-housing/community-housing-agreements) **and** [**Policies | SA Housing Authority**](https://www.housing.sa.gov.au/about-us/policies)**).** | Click or tap here to enter text. |
| **Financial Performance Report to review a provider’s Gearing and Interest Coverage Ratio (required for all applications).** | Click or tap here to enter text. |
| **Overlay of the proposed debt facility on the providers Gearing and Interest Coverage Ratio (required for applications unless determined otherwise by the SA Housing Authority).** | Click or tap here to enter text. |

|  |
| --- |
| Any additional comments. |
| Click or tap here to enter text. |

## Section 4 – Statutory Declaration

The community housing provider must complete the following statutory declaration. Once the declaration has been made in front of an authorised witness in accordance with the *Oaths Act 1936*, please send the declaration (together with the relevant annexures attached) to [housingpartnerships@sa.gov.au](mailto:housingpartnerships@sa.gov.au) Attn: Manager Investment Partnerships.

**STATUTORY DECLARATION**

State of South Australia – *Oaths Act 1936*

**I,**

....................................................................................................................................................................

[full name]

**DO SOLEMNLY AND SINCERELY DECLARE** that:

1. I am a [*insert position – e.g. director or other office holder authorised to make this statutory declaration on behalf of the community housing provider*] of [*insert name of community housing provider*] (the “**community housing provider**”) and I am duly authorised to make this statutory declaration on the community housing provider’s behalf.
2. The community housing provider is the applicant referred to in the document titled ‘Application form – Collateralisation of SAHT Interests’, which is annexed to this statutory declaration and marked ‘Annexure A’ (the “**Application Form**”).
3. All information provided in:
   1. the Application Form; and
   2. all attachments to the Application Form, including:
      1. the ‘Property List’ spreadsheet;
      2. the 'Heads of Agreement’ and/or ‘Terms Sheet’ with the relevant financier;
      3. the ‘Financial Performance Report’ (specifically, with respect to the gearing ratio and the interest coverage ratio set out in the Financial Performance Report); and
      4. the ‘overlay’ of the proposed debt facility on the community housing provider’s gearing ratio and interest coverage ratio,

are true and correct to the best of my knowledge and belief.

1. I am aware the SA Housing Authority may rely on this statutory declaration and the information provided in the Application Form and its attachments.
2. The community housing provider will notify the SA Housing Authority in writing immediately if any statement in this statutory declaration is or becomes incorrect, with full details.

**And I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the Oaths Act 1936.**

|  |  |
| --- | --- |
| Declared at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| in the State of South Australia, this \_\_\_\_\_\_\_\_ day of |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_\_ | ……………………………………………………… |
| Before me, | Signature of person making this declaration  [to be signed in front of an authorised witness] |
| …………………………………………………..  Signature of authorised witness |  |