

Please complete a separate form for each of the bids you intend to submit for Oxfordshire's Affordable Housing Programme Funding. Please complete both parts of the form fully.

**Part 1 Registered provider and scheme descriptions**

**1.1 Registered Provider**

Housing Association Registered Provider Name	<input type="text"/>
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Housing Association/ Registered Provider contact details	T:	<input type="text"/>
	M:	<input type="text"/>
	E:	<input type="text"/>
	Postal Address	<input type="text"/>

Development partner/contractor	<input type="text"/>
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Bid year	<input type="text"/>
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**1.2 Scheme identification**

Scheme name	<input type="text"/>
Scheme address	<input type="text"/>
Planning Reference (where applicable)	<input type="text"/>

### 1.3 Scheme details for affordable or social rent

Number of units	<input type="text"/>
General needs/supported	<input type="text"/>
Type	<input type="text"/> (e.g. house, flat, bungalow)
Floor area (m <sup>2</sup> )	<input type="text"/>
Rent per week	<input type="text"/>
Type of rent	<input type="text"/> (e.g. social, intermediate, affordable)
Open market rent per week	<input type="text"/> (Applicable if affordable rent to check if below 80%)
Open Market Value	<input type="text"/>

### 1.4 Scheme details for affordable home ownership

Number of units	<input type="text"/>
General needs/supported	<input type="text"/>
Type	<input type="text"/>
Floor area (m <sup>2</sup> )	<input type="text"/>
Percentage initial tranche sale	<input type="text"/>
Percentage rent on unsold equity	<input type="text"/>
Open Market Value	<input type="text"/>

Target/client group	<input type="text"/>
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### 1.5 Proposed milestones

Contractual start on site date	<input type="text"/>
When is grant payment requested?	<input type="text"/>
Expected date of completion	<input type="text"/>

## 1.6 Grant Appraisal

Total Grant requested from Part 2 section 3

Is the housing provided over and above S106 requirements

Yes

No

Indicate that signed copy of S106 is attached

Is the housing provided over and above agreed site viability

Yes

No

Please provide required information from the Appraisal Criteria for Registered Providers in the prospectus as pdf files, and indicate they are attached with this submission

### Quality

1. Housing proposal

2. Deliverability of programme statement

3. Social Value proposal

### Cost and Value for Money

4. Financial appraisal

5. BCC Grant requirement document

## 1.7 Declaration

The Registered Provider agrees to the terms set out in the Oxfordshire Affordable Housing Programme Prospectus

Signature

Date

Position

## Part 2 Financial information

### 2.1 Scheme Costs

	£	
Land acquisition price (if applicable)	<input type="text"/>	
Works/purchase cost	<input type="text"/>	Will enable calculation of £/m <sup>2</sup> from info above
On costs	<input type="text"/>	
Total Scheme Costs (TSC)	<input type="text"/>	

### 2.2 Capital Funding

	£	
Loan supportable from rental income	<input type="text"/>	For both rent and shared ownership
Receipts from first tranche sales of shared ownership properties	<input type="text"/>	For shared ownership only
RP/LHC own reserves	<input type="text"/>	
Public subsidy	<input type="text"/>	
Cross subsidy from sales income	<input type="text"/>	
Other e.g. S106	<input type="text"/>	
GRANT from AHGD	<input type="text"/>	
Total capital income	<input type="text"/>	Should equal TSC

### 2.3 Certification of Grant to be paid

	Grant per unit £	Total per tenure £
Number of S/R units	<input type="text"/>	<input type="text"/>
Number of A/R Units	<input type="text"/>	<input type="text"/>
Number of S/O Units	<input type="text"/>	<input type="text"/>
Total	<input type="text"/>	<input type="text"/>