

# STATE REVOLVING FUND LOAN PROGRAMS

## DUE DILIGENCE CHECKLIST FOR SRF PARITY BOND CONSENT

**Qualified Entity** \_\_\_\_\_  
**Caption of Original SRF Bond Issue(s)** \_\_\_\_\_  
**Contact Person (Name)** \_\_\_\_\_ **Phone #** \_\_\_\_\_  
**Financial Advisor (Name)** \_\_\_\_\_ **Phone #** \_\_\_\_\_  
**Anticipated Closing Date** \_\_\_\_\_

### Consent Checklist

- \_\_\_ **State Board of Accounts audit (2 most recent audits)**
- \_\_\_ **All Annual Financial Reports since last audit year**
- \_\_\_ **Original SRF bond ordinance**
- \_\_\_ **Proposed parity bond ordinance**
- \_\_\_ **Rate ordinance**
- \_\_\_ **Rate Consultant's report and Parity Report**
- \_\_\_ **Sources and Uses of funds statement**
- \_\_\_ **Preliminary Official Statement or Offering Circular**
- \_\_\_ **Pro forma or projected financial statements**
- \_\_\_ **Debt service coverage calculation reflecting 1.25x coverage**
- \_\_\_ **Amortization schedules of all outstanding debt & proposed debt**
- \_\_\_ **Proof of Current Balance of SRF Debt Service Reserve Fund  
(Include bank statement or investment report)**

#### State Use Only

SRF Reviewer (Name/Date): \_\_\_\_\_  
Consent Approved (Date): \_\_\_\_\_