



## TEXAS DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS

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GOVERNOR

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August 21, 2026

Writer's direct phone # (512) 475-4065  
Email: [shay.erickson@tdhca.texas.gov](mailto:shay.erickson@tdhca.texas.gov)

Melanie Bailey  
EPT EPC Lakeside Apartments, LLC  
El Paso, Texas 79912  
[mbailey@integrityamc.com](mailto:mbailey@integrityamc.com)

RE: Lakeside

Dear Melanie Bailey:

The Texas Department of Housing and Community Affairs (Department) has reviewed the Housing Facility Corporation (HFC) Audit Report submitted by Stephanie Naquin on July 23, 2026. This review was performed as required by Section 394.9027 (b) of Chapter 394, the Texas Administrative Code (TAC) Chapter 10, Subchapter J, for EPT EPC Lakeside Apartments, LLC.

In accordance TAC §10.1203 (5) enclosed is a copy of the Audit Report summary. No event(s) of noncompliance were identified during the review. Please note that although no event(s) of noncompliance were identified, only a sample of information provided to the Department was reviewed for the purposes of this report. It is the HFC User's responsibility to maintain compliance.

The Department considers this review closed. The next annual Audit Report is due June 1, 2027.

If you have any questions, please contact Shay Erickson toll free in Texas at (800) 643-8204, directly at (512) 475-4065, or email: [shay.erickson@tdhca.texas.gov](mailto:shay.erickson@tdhca.texas.gov).

Sincerely,

Shay Erickson  
PFC Monitor

CC:[stephanie.naquin@novoco.com](mailto:stephanie.naquin@novoco.com); [mbailey@integrityamc.com](mailto:mbailey@integrityamc.com); [lakeside@integrityamc.com](mailto:lakeside@integrityamc.com);  
[countychiefadmin@epcounty.com](mailto:countychiefadmin@epcounty.com); [countyjudge@epcounty.com](mailto:countyjudge@epcounty.com); [commissioner1@epcounty.com](mailto:commissioner1@epcounty.com);  
[commissioner2@epcounty.com](mailto:commissioner2@epcounty.com); [commissioner3@epcounty.com](mailto:commissioner3@epcounty.com); [commissioner4@epcounty.com](mailto:commissioner4@epcounty.com); [econ.dev@cpa.texas.gov](mailto:econ.dev@cpa.texas.gov)



221 East 11th Street P.O. Box 13941 Austin, Texas 78711-3941 (800) 525-0657 (512) 475-3800



|                                                                                                                                                                                                                    |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------|------------------------------------------------------------------------------|--|--|--|
| Texas Department of Housing and Community Affairs                                                                                                                                                                  |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Housing Finance Corporation (HFC)                                                                                                                                                                                  |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Preliminary Summary of Audit                                                                                                                                                                                       |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| This is a preliminary summary of the Audit Report. TDHCA's review is ongoing and not final. Findings and any required Corrective Action will be addressed in the official Monitoring Report Letter, if applicable. |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Reporting Details                                                                                                                                                                                                  |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Report Due Date: 6/1/2026                                                                                                                                                                                          |            |                                                        | Current Reporting Year: 2026                                                                                 |                                   |           | Occupancy Period Begin Date: 1/1/2025                                        |  |  |  |
|                                                                                                                                                                                                                    |            |                                                        |                                                                                                              |                                   |           | Occupancy Period End Date: 12/31/2025                                        |  |  |  |
| Development & Regulatory                                                                                                                                                                                           |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| HFC Property Name: Lakeside                                                                                                                                                                                        |            |                                                        | Is the Regulatory Agreement (RA) properly recorded? Yes                                                      |                                   |           | PRE or POST May 28, 2025 Development? PRE                                    |  |  |  |
| HFC Property Street Address: 112 S. Little Flower                                                                                                                                                                  |            |                                                        | Regulatory Agreement Effective Date: 4/21/2025                                                               |                                   |           | Development Type: Acquisition                                                |  |  |  |
| HFC City, State Zip: El Paso, Texas                                                                                                                                                                                |            |                                                        | Does the development participate in other affordable programs? No                                            |                                   |           | Occupancy Type: General/Family                                               |  |  |  |
| Property County: El Paso                                                                                                                                                                                           |            |                                                        | Jurisdictional Boundaries: Within Sponsor Boundaries                                                         |                                   |           | Total Number of Units in the Development (All Restricted & Unrestricted): 64 |  |  |  |
| HFC User Name: EPT EPC Lakeside Apartments, LLC                                                                                                                                                                    |            |                                                        | If Outside Sponsor Boundaries, was the Development acquired by Sept. 1, 2025? NA                             |                                   |           |                                                                              |  |  |  |
|                                                                                                                                                                                                                    |            |                                                        | If Outside Sponsor Boundaries, has approval been obtained or is the Development in the transition period? NA |                                   |           |                                                                              |  |  |  |
| Affordability Requirements - AMI Percentage by Bedroom Size (Post Developments Only)                                                                                                                               |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
|                                                                                                                                                                                                                    | Efficiency | 1 Bedroom                                              | 2 Bedroom                                                                                                    | 3 Bedroom                         | 4 Bedroom | Total                                                                        |  |  |  |
| 60% AMI Units                                                                                                                                                                                                      | 0          | 0                                                      | 0                                                                                                            | 0                                 | 0         | 4                                                                            |  |  |  |
| 80% AMI Units                                                                                                                                                                                                      | 0          | 0                                                      | 0                                                                                                            | 0                                 | 0         | 29                                                                           |  |  |  |
| 160% AMI Units                                                                                                                                                                                                     | 0          | 0                                                      | 0                                                                                                            | 0                                 | 0         | 25                                                                           |  |  |  |
| Market Units                                                                                                                                                                                                       | 0          | 0                                                      | 0                                                                                                            | 0                                 | 0         | 6                                                                            |  |  |  |
| Total Restricted Units                                                                                                                                                                                             | 0          | 0                                                      | 0                                                                                                            | 0                                 | 0         | 58                                                                           |  |  |  |
| Total Units (Restricted + Market)                                                                                                                                                                                  | 0          | 0                                                      | 0                                                                                                            | 0                                 | 0         | 64                                                                           |  |  |  |
| Development Contacts                                                                                                                                                                                               |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Property Name: Lakeside                                                                                                                                                                                            |            | Organization Name: City, State Zip: El Paso, Texas     |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Texas Comptroller: Texas Comptroller                                                                                                                                                                               |            | Appraisal District: El Paso Central Appraisal District |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Individual Auditor: Stephanie Naquin                                                                                                                                                                               |            | HFC User: EPT EPC Lakeside Apartments, LLC             |                                                                                                              |                                   |           |                                                                              |  |  |  |
| HFC Management Company: Integrity Asset Management                                                                                                                                                                 |            | HFC Sponsor: El Paso County                            |                                                                                                              |                                   |           |                                                                              |  |  |  |
| HFC Governing Body of Sponsor: El Paso County Commissioners Court                                                                                                                                                  |            | El Paso County Commissioners Court                     |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Auditor Qualifications & Affiliations                                                                                                                                                                              |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Does the Auditor have a current Certified Occupancy Specialist (COS) or equivalent certification?                                                                                                                  |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Has the Auditor provided a resume demonstrating housing compliance audit experience?                                                                                                                               |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Is the Auditor free from any financial, ownership, or management interest in the Development or any Responsible Party?                                                                                             |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Has the HFC User complied with the three-year rotation and, if applicable, the two-year cooling-off requirement?                                                                                                   |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Income & Rents Limits                                                                                                                                                                                              |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Does the Regulatory Agreement specify income limits?                                                                                                                                                               |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Are the income limits adjusted for household size?                                                                                                                                                                 |            |                                                        |                                                                                                              |                                   |           | NA                                                                           |  |  |  |
| Are the income limits based on HUD income limits?                                                                                                                                                                  |            |                                                        |                                                                                                              |                                   |           | NA                                                                           |  |  |  |
| Did the Development comply with the Available Unit Rule when a household became over-income?                                                                                                                       |            |                                                        |                                                                                                              |                                   |           | NA                                                                           |  |  |  |
| Does the Regulatory Agreement specify rent limits for Restricted Units?                                                                                                                                            |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Are the rent limits based on HUD rental limits?                                                                                                                                                                    |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Are restricted unit rents ≤30% of the applicable income limit (adjusted for household size)?                                                                                                                       |            |                                                        |                                                                                                              |                                   |           | NA                                                                           |  |  |  |
| Are rent limit adjusted for family size, as determined by HUD?                                                                                                                                                     |            |                                                        |                                                                                                              |                                   |           | NA                                                                           |  |  |  |
| What is the family-size adjustment specified by the Development's Regulatory Agreement?                                                                                                                            |            |                                                        |                                                                                                              |                                   |           | NA                                                                           |  |  |  |
| Units & Occupancy                                                                                                                                                                                                  |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Restricted Units Occupied by Voucher Holders: N/A for Reporting YR 2025                                                                                                                                            |            | Restricted Occupied Units: 11                          |                                                                                                              | Non-Restricted Occupied Units: 49 |           |                                                                              |  |  |  |
| Total Units (ALL): 64                                                                                                                                                                                              |            | Restricted Vacant Units: 0                             |                                                                                                              | Non-Restricted Vacant Units: 4    |           |                                                                              |  |  |  |
|                                                                                                                                                                                                                    |            | Total Restricted Units: 11                             |                                                                                                              | Total Non-Restricted Units: 53    |           |                                                                              |  |  |  |
| Triggering Events: Acquisition and Ownership Transfer                                                                                                                                                              |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Did a triggering event occur during the reporting period or any prior Tax Year?                                                                                                                                    |            |                                                        |                                                                                                              |                                   |           | No                                                                           |  |  |  |
| Set Asides                                                                                                                                                                                                         |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Date first occupied by one or more tenants? N/A-Acquired 4/21/2025                                                                                                                                                 |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Is the Development currently in lease up? Yes                                                                                                                                                                      |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Do Restricted Units have comparable square footage and floor plans as Non-Restricted Units? NA                                                                                                                     |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Are Restricted Units equal in finishes and equipment to Non-Restricted units? NA                                                                                                                                   |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Do Restricted Units have equal amenity and program access as Non-Restricted Units? NA                                                                                                                              |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Are Restricted Units proportionally distributed by unit type and income category? NA                                                                                                                               |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Did the Auditor receive photographic evidence and written certification confirming unit comparability? NA                                                                                                          |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Set-Aside - Select Only One Option                                                                                                                                                                                 |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Option 1:                                                                                                                                                                                                          |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| At least 10% of units reserved for HH not earning more than 60% AMI                                                                                                                                                |            | NA                                                     |                                                                                                              |                                   |           |                                                                              |  |  |  |
| At least 40% of units reserved for HH not earning more than 80% AMI                                                                                                                                                |            | NA                                                     |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Option 2:                                                                                                                                                                                                          |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| At least 10% of units reserved for HH not earning more than 50% AMI                                                                                                                                                |            | NA                                                     |                                                                                                              |                                   |           |                                                                              |  |  |  |
| At least 40% of units reserved for HH not earning more than 100% AMI                                                                                                                                               |            | NA                                                     |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Audit Sample Summary                                                                                                                                                                                               |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Overall Sample meets minimum requirements?                                                                                                                                                                         |            | Audit Sample                                           |                                                                                                              | Item                              |           |                                                                              |  |  |  |
| Move-In Sample meets minimum requirements?                                                                                                                                                                         |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Recertification Sample meets minimum requirements?                                                                                                                                                                 |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Is the Development currently in lease-up?                                                                                                                                                                          |            |                                                        |                                                                                                              |                                   |           | NA                                                                           |  |  |  |
|                                                                                                                                                                                                                    |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Texas Department of Housing and Community Affairs (TDHCA) Observations - DEPARTMENT USE ONLY                                                                                                                       |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Preliminary summary. TDHCA review is ongoing and not final.                                                                                                                                                        |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Report Due Date: 6/1/2026                                                                                                                                                                                          |            |                                                        | Current Reporting Year: 2026                                                                                 |                                   |           | Audit Received Date: 7/23/2026                                               |  |  |  |
| PRELIMINARY COMPLIANCE INDICATORS                                                                                                                                                                                  |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Reporting                                                                                                                                                                                                          |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Is the Development required to submit an Audit Report?                                                                                                                                                             |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Did the Development submit an Audit Report by the deadline, with approved extensions?                                                                                                                              |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Does the Audit Report cover the full prior reporting year ending December 31 and include a rent roll for the same period?                                                                                          |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Does the Audit Report include contact information for all Responsible Parties?                                                                                                                                     |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Was the Audit Report submitted in the Department-prescribed manner through the Department's file transfer system (Serv-U/File Serve)?                                                                              |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Was the annual service fee (\$35 per Restricted Unit in the sample or \$500 minimum) submitted with the Audit Report?                                                                                              |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Did the Audit Report include a one-time exemption application submitted to the Texas Comptroller's Office?                                                                                                         |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Did the first Audit Report include all required supporting documentation?                                                                                                                                          |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Auditor                                                                                                                                                                                                            |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Does the Auditor meet independence and qualification standards and comply with applicable rotation and cooling-off requirements?                                                                                   |            |                                                        |                                                                                                              |                                   |           | Yes                                                                          |  |  |  |
| Geographic Boundaries                                                                                                                                                                                              |            |                                                        |                                                                                                              |                                   |           |                                                                              |  |  |  |
| Is the Development within sponsor boundaries, or—if outside those boundaries—has required approval been obtained or is the Development within the applicable transition period?                                    |            |                                                        |                                                                                                              |                                   |           | NA                                                                           |  |  |  |
| Overall Chapter 394 Status:                                                                                                                                                                                        |            |                                                        |                                                                                                              |                                   |           | Compliant                                                                    |  |  |  |
| TDHCA Notes/Notations:                                                                                                                                                                                             |            |                                                        |                                                                                                              |                                   |           | None                                                                         |  |  |  |