2024 Homekey+ Program

Notice of Funding Availability (NOFA)

November 26, 2024

Funding Application

State of California

Gavin Newsom, Governor

Business, Consumer Services and Housing Agency

Tomiquia Moss, Secretary

https://www.bcsh.ca.gov/

Department of Housing and Community Development (HCD)

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Homekey+ Program

https://www.hcd.ca.gov

Instructions

When opening this file, a yellow banner at the top may appear with a button that says, "Enable Editing", and/or "Enable Macros". It is essential that you click this box(es) so that the macros are enabled. Enabling macros is necessary for full workbook/application functionality.

WARNING: Partial functionality of this application/workbook **WILL BE LOST** when using **Apple Mac Computers**. The Department **highly** recommends using PC Computers and Microsoft Office 2013 or newer to complete the application.

Document

Microsoft has recently added blocking of macros by default, if this happens when you open the application, please follow the instructions in the Word document added as an icon to the right (double-click to open).

When completing this Application, it is required not to skip/jump to other sheets, start entering data from top to bottom and left to right when selecting a new sheet to work with.

Application materials must be submitted electronically via HCD portal system. Requirements for uploading the Application Workbook and required supporting documentation, including naming conventions, are described in the application instructions available at Homekey+ | California Department of Housing and Community

Homekey applications will be accepted as set forth in the NOFA.

Application must be on the Department's forms and cannot be altered or modified by the Applicant. Excel Application must be in Excel format, not a PDF document.

If the Applicant discover any errors within application, use the Application Support sheet and email the entire workbook to AppSupport@hcd.ca.gov

It is recommended that Applicant(s) start from left to right and top to bottom for a better understanding and functionality of this application.

Additional instructions and guidance are given throughout the Application in "**red**" text and in **cell comments**. Cell Notes/Comments are very important to read as some of these will provide directions for completing your application.

"Yellow" cells	are for Applicant input. It is very important that you answer **ALL** yellow cells, failure to provide all information may disqualify your application from consideration or may negatively impact your point score.
"Orange" cells	are **required** attachments. Failure to provide the required attachments and documentation may disqualify your application from consideration or may negatively impact your point score. Electronically attached files must use the naming convention in the Application.
"Red" cells	indicate the Applicant(s) has failed to meet a requirement of the program, threshold, scoring, upload, or certification.
"Blue" cells	are self-score points awarded in the "Scoring" worksheet. These are automated calculations based on the inputs provided by the Applicant.

Disclosure of Application: The application is a public record, which may be available for public review pursuant to the California Public Records Act (CPRA) (Division 10 (commencing with Section 7920.000) of Title 1 of the Government Code). After final Homekey+ Awards have been issued, HCD may disclose any materials provided by the Applicant to any person making a request under the CPRA. HCD cautions Applicants to use discretion in providing information not specifically requested, including but not limited to bank account numbers, personal phone numbers, and home addresses. By providing this information to HCD, the Applicant is waiving any claim of confidentiality and consents to the potential disclosure of submitted material upon request.

Project Overview

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Homekey Summary (auto populated from "Max Funds & Unit Mix Award", and "Scoring" worksheets)					
Gap Financing Project type?	FALSE	New construction cost containment Project type?	FALSE		
Capital Baseline Award	$0	Additional Contribution	$0	**Total Requested Capital Award**	$0
Operating Subsidy	$0	50% Relocation Costs	$0	**Total Requested Operating Subsidy**	$0
Total Requested Homekey Award (capital + operating + 50% relocation costs)					$0
Number of Doors at Acquisition	0	Number of Units Proposed in the Project	0	Number of Assisted Units	0
Number of At-Risk of Homelessness Units	0	Number of Chronically Homeless Units	0	Number of Homeless Units	0
Number of Homeless Youth or Youth at Risk of Homelessness Units	0	Number of Units accessible to persons with hearing or vision disabilities			0
Number of Units accessible to persons with mobility disabilities	0	Veteran Units	0	Non HK+ units	0

"**Optional answer**" will not affect application review or ranking. Applicant(s) or Joint Venture Entity meets CDLAC Definition of BIPOC Organization? per CDLAC 523(f)(1)(B), TCAC 10327(c)(2)(E)?

Eligible Applicant	Entity name			
Eligible applicant type		Organization type		
File Name	02a. App1 Cert & Legal Disclosure	Reference: Applicant Certification Worksheet.	Uploaded to HCD?	
File Name	02b. App1 Authorizing Resolution	Authorizing Resolution	Uploaded to HCD?	
File Name	02c. App1 Signature Block	Signature Block - upload in Microsoft Word Document.	Uploaded to HCD?	
File Name	02d. App1 TIN Form	Completed Government TIN form.	Uploaded to HCD?	

Co-Applicant #1	Entity name	
Co-Applicant #2	Entity name	
Co-Applicant #3	Entity name	
Co-Applicant #4	Entity name	
Managing General Partner	Entity name	
Administrative General Partner #1	Entity name	
Administrative General Partner #2	Entity name	
Manager of LLC	Entity name	

Are there affiliate or subsidiary entities that provide operational or financial support to the Applicant or Co-Applicants?

Is the Applicant an affiliate or subsidiary of another entity such as a parent company?

Will the Applicant rely on related party entity(ies) to develop, construct, or operate the proposed Project?

Project Development Type		Housing Type	Permanent Housing	Geographic Region	
Project Name		Project Address			
Project County		Project City		State: CA	Project Zip

(APNs):			Census Tract(s)		

Has the Applicant(s) applied, plan to apply, or been awarded other HCD program funds for this proposed Project?

Utilizing Tax Credits?

Is Project located in a Rural Area as defined by H&S Code §50199.21? Applicant must use the TCAC Method for determining rural status. Documentation of rural status (2025)

Project Description: be as specific as possible and be sure to include eligible uses, relocation needs, Homekey+ operating subsidy and match.

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§201. Eligible Uses

Applicants acknowledges the "Eligible Uses" of the Homekey+ funds.

i. The list of eligible uses are as follows: (Applicants, please select all the items below for which the Homekey+ funds will be utilized for. Select "Yes" or "No") to all below.

a. Acquisition or Rehabilitation, or Acquisition and Rehabilitation, of motels, hotels, hostels, apartments or homes, assisted living residences, manufactured housing, commercial properties, and other buildings with existing uses that could be converted to Permanent Supportive Housing (PSH).

b. Master leasing of properties for PSH.

c. Conversion of units from nonresidential to residential PSH. (i.e. adaptive reuse) and conversion of Interim Housing to PSH.

d. New construction of dwelling units (see §501).

e. Gap financing (**Strictly for** §502 ***project types*** **only**, please read and understand this section before selecting "Yes").

f. The purchase of affordability covenants and restrictions for units.

g. Relocation costs for individuals who are being displaced because of the Homekey+ Project.

h. Capitalized operating subsidies for PSH units purchased, converted, constructed, or altered with funds provided pursuant to HSC §50675.1.3.

ii. Applicant acknowledges that the **Ineligible** uses include all those stated at §201(ii).

§202. Eligible Projects

Homekey+ funds Permanent Supportive Housing (PSH) and will require a 55-year affordability term. HCD welcomes and will consider a variety of innovative housing solutions as eligible Projects, including excess state-owned property developments. The following list of eligible Projects is not exhaustive.

Eligible Project Type

§205. Capital Award and Match

i. Additional Contribution Amount – Capital Match

Beyond the baseline amount, the Eligible Applicant may leverage a 1:1 local match to provide up to $100,000 in additional funds per door/Unit. Capital match may be obtained from any source, including any federal, state, local, private, or philanthropic source.

Will the Applicant(s) be providing local match, up to $100,000 in additional funds per door?

§301. Additional Application Materials

In addition to requirements detailed in §300, to be eligible for Homekey+ funding, an application shall demonstrate to HCD the following:

i. Applicants and Co-Applicants must be in good standing with the State of California and all agencies and departments thereof. By way of example and not limitation, an Applicant and Co-Applicant must be qualified to do business in the State of California and must be in good standing with the California Secretary of State and the California Franchise Tax Board. Applicants that are delinquent in meeting the material requirements of previous Department awards may, in the Department's reasonable discretion, fail threshold review. Certificate of Good Standing dated within 30 days of application due date must be submitted with the application.

NOTE: A certificate of good standing from the California Secretary of State is requested above and under the Applicant and Co-Applicants entity name.

ii. Completed Certification and Legal Disclosure Statement

iii. Signature Block for all Applicants entities in Word Format

iv. Payee Data Record STD204 (except for Eligible Applicants)

v. Taxpayer Identification Number (FI$Cal TIN Form)

vi. EIN Verification (IRS form SS-4) (except for Jurisdictions)

vii. Tax-Exempt State from IRS or FTB (if applicable)

NOTE: These items above (**ii-vii**) are requested above and under the Applicant and Co-Applicants entity name.

viii. CEQA Determination (if applicable)

ix. NEPA Authority to Use Grant Funds (if applicable)

NOTE: These items above (**viii-xi**) are requested at the "Project Overview" sheet, starting with row 474.

x. Phase 2 Environmental Report if needed as stated in Phase I ESA report (if Applicable)

NOTE: This item above (**x**) is requested at "Threshold Requirements" sheet at row 123.

xi. A letter from the local county behavioral health department describing the support for the Project (capital, operating or service commitments, referrals, stakeholder collaboration, etc.). If the letter can't be secured, Applicant must describe efforts to obtain the letter.

Will the Applicant secure and provide the Department with letter from the local county behavioral health department describing the support for the Project (capital, operating or service commitments, referrals, stakeholder collaboration, etc.)?

Is the Project a scattered site housing Project? UMR §8303(b)

§304. Recording, Income and Underwriting Requirements

i. Homekey+ may fund all units in a Project or a portion of the units. If seeking Homekey+ funding for a portion of the units in a Project, Applicants must identify committed sources for the non-Homekey+ units. The non-Homekey+ units are not required to serve the Homekey+ Target Population and may therefore be restricted at higher AMI levels, which may help promote Project feasibility.

Will Homekey+ be funding **all units** in the proposed Project?

At time of acquisition, are there tenants residing at the Project site?

iii. Applicant(s) acknowledges and understand that at year 15 from the recordation of the Affordability Covenant, in circumstances where the Grantee has not waived their right and Grantee has exhausted available operating funding and demonstrated to HCD that the Project is no longer feasible, HCD may approve an increase in income levels, to the minimum extent required for fiscal integrity, in five percent increments of Assisted Units up to 50 percent AMI. **AND**

a. HCD reserves the right to set restrictions on the unit mix, rent levels, and other factors deemed necessary. To the maximum extent possible, these changes shall minimize the impact on the lowest income Project residents and shall be phased in as gradually as possible. If, following any increase in rents and income limits, or modification of Target Population occupancy requirements, new resources become available, or market demand changes, allowing reversion to the former income and rent limits or Target Population occupancy requirements, HCD may re- impose these income limits and rent limits or Target Population occupancy requirements, in whole or in part, subject to an analysis of Project

iv. In addition to §300 above, Applicants purchasing Affordability Covenants and restrictions will also be evaluated on the following requirements:

Will the Applicants be purchasing Affordability Covenants and restrictions?

vi. As described in §101, the Project shall comply with the UMRs (Cal. Code Regs., tit. 25, § 8300 et seq.), to the extent those regulations are consistent with Homekey+ requirements, and shall meet the following Homekey+ underwriting requirements:

a. Applicants acknowledges and certifies to the following: In analyzing Project feasibility, Projects planning to use Tenant Based Vouchers (TBV) for rental income/subsidy sources shall limit projected TBV revenue sources to no more than 50% of the Project's assisted housing units in the application. Nothing in this NOFA shall be construed to conflict with or limit the operation of state law prohibiting discrimination against tenants based on source of income. Refer to §508 for non-discrimination policy requirements.

b. Applicants acknowledges that for Projects that do not have debt service, Project cashflow shall not exceed 12 percent of Operating Expenses in the first 15 years of operations.

Article V – Additional Program Requirements

Homekey+ Projects proposing to serve Veterans may also serve other qualifying members of the Target Population. The Veterans units will be funded from the Veterans allocation, and the remaining units will be funded from the other applicable allocation(s).

Per §500 Veterans Assisted Units, is this Application/Project proposing to serve Veteran Units?

Existing Doors versus proposed Units (include Manager's Units)

Beds	0 Bdrm	1 Bdrm	2 Bdrm	3 Bdrm	4 Bdrm	5 + Bdrm	Total # Doors /Units	Total # Bedrooms	Total # Buildings	Total # Mgr. Units	Total # of Parking Spaces
Existing							0	0			
Proposed	0	0	0	0	0	0	0	0			

Building types	New Construction Units	New Construction Stories	New Construction Bldgs.	Rehabilitation Units	Rehabilitation Stories	Rehabilitation Bldgs.
Townhouse/Row House						
One or Two Story Walk-Up						
Mid-Rise (3-5 stories)						
High-Rise (6+stories)						
Detached Single Family						
Duplex/4-Plex						
Non-Residential Bldg(s)						
Totals	0		0	0		0

Unit Size	Baths	Layout	Avg. Sq. Ft.	All Doors / Units
0 Bdrm.				0
1 Bdrm.				0
2 Bdrm.				0
3 Bdrm.				0
4 Bdrm.				0
5 Bdrm.				0
			Total Doors / Units	0

Applicant Notes

Amenities

Unit Amenities/Features

	Air Conditioning		Refrigerator		Range		Microwave		Disposal
	Dishwasher		Walk-In Closet		Fenced Rear Yard		Ceiling Fans		Curtains/Blinds
	Fireplace		Emergency Call		Free Cable TV		Storage Area		Lofts
	Balcony		Patio		(Other)		(Other)		(Other)

Project Amenities

Elevator(s)			Laundry Rms.			Washers			Dryers		

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	Community Room		Community Kitchen		Computer Room		High Speed Internet
	Fitness Room		Picnic/BBQ Area(s)		Tot Lot/Playground		Sports Court
	Tennis Court		Swimming Pool		Jacuzzi/Sauna		Bike Parking
	(Other)		(Other)		(Other)		(Other)

Security & Other

	Gated Entry		Bldg. Card Key		Security Patrol		Security Cameras

Describe any mandatory charges to tenants beyond allowable Rents.

List type of furnishings provided in each unit.

Miscellaneous Information

Residential Space

Residential Units		Common Areas		Community Room		Leasing Office		Additional Storage Space	
Subtotal Residential SF	0								
Maintenance Shop		Childcare Center		Service Area		Service Office			
(Other)		(Other)		(Other)		(Other)			
Total Residential SF	0								

Residential Parking

Free Residential Parking Spaces

Uncovered Tenant Parking		Covered Tenant Parking		Enclosed Tenant Parking		Tenant Guest Spaces	
Subtotal Parking Spaces	0						

Extra Spaces Tenants may Rent

Extra Parking Spaces Tenants may Rent		Total Handicap Parking Spaces	
Grand Total Parking Spaces	0		

Commercial Space

Commercial Square Feet

Commercial Area		Offices		Childcare Center		Storage Space		(Other)	
Total Commercial SF	0								

Parking Spaces for Commercial Tenants

Uncovered Parking		Covered Parking		**Total Spaces**	**0**

Describe other available parking for commercial patrons

Income from sources other than residential Rents and subsidies

Laundry

No. of Units Using Central Laundry	
Weekly Assumed Income Per Unit	
Annual Total Laundry Income	$0

Residential Parking

Tenant Rental Spaces	0
Monthly Income Per Space	
Annual Residential Parking Income	$0

Commercial Parking

Number of Rental Spaces	0
Monthly Income Per Space	
Annual Commercial Parking Income	$0

Other Leased Spaces

Residential	Lease Terms		Rent//Mo.	Annual Gross
				$0
				$0
				$0
				$0
Commercial				
				$0
				$0
				$0
				$0
			Total Income from Other Leased Spaces	$0

Monthly utility allowance

Utilities	Type of Utility (Select from dropdown)	Does the owner or tenant pay utilities?	Enter Allowances for Tenant or Homeownership Paid Utilities by Bdrm. Size: 0 bdrm	1 bdrm	2 bdrms	3 bdrms	4 bdrms	≥5 bdrms
Heating								
Cooking								
Other Electric								
Air Conditioning								

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Water Heating								
Water								
Sewer								
Trash								
Other								
Total Tenant Utility Allowance			$0	$0	$0	$0	$0	$0

Source for utility allowances

Local PHA?		Name:						Effective date:	
HUD?		Utility Company (Actual Survey)?		CUAC?		Other?			
Applicant Notes:									
File Name	16. Utility allowance	Schedule of utility allowances.						Uploaded to HCD?	

§504 Housing First

The Eligible Applicant shall certify to employ the core components of Housing First, as set forth at Welfare and Institutions Code §8255, subdivision (b), in its property management and tenant selection practices. Projects shall accept tenants regardless of sobriety, participation in services or treatment, history of incarceration, credit history, or history of eviction in accordance with practices permitted pursuant to Housing First practices, including local Coordinated Entry System prioritization protocols, or other federal or state Project funding sources.

§505 Tenant Referrals

Referrals to Homekey+ Assisted Units shall be made through the local Coordinated Entry System (CES), or another comparable prioritization system based on greatest need for housing and services, to determine the most appropriate referral. Homekey+ units should be reserved for serving the Target Population where households are more appropriately served by PSH, including referrals from persons exiting encampments. Households with lower levels of need may be better served by other housing and less intense service interventions.

Applicants must demonstrate efforts to coordinate with their local county behavioral health department, to ensure the referral process to the Homekey+ units is aligned with the requirements of this NOFA.

If referrals will be made using a prioritization system other than CES, the Applicant must describe the plan for tenant referrals in detail, including which agency is responsible for managing the referral approach and what stakeholders are involved in the prioritization process. Awardees are encouraged to consider an alternative referral system consisting of referrals for persons exiting encampments, incarceration, or treatment facilities. Prioritization for Homekey+ units should be based on greatest need factors and assessments established by the local jurisdiction in collaboration with the Continuum of Care (CoC). CoC collaboration in Project and Supportive Services design is also strongly encouraged to help target and serve those with the greatest need.

Will referrals be made using a prioritization system other than CES?

§505 Participation in the Homeless Management Information System (HMIS)

If awarded Homekey+ funds, Applicants hereby certifies to comply with the following:

Pursuant to Assembly Bill 977 (Statutes of 2021-22), Grantees who have been awarded HCD funding under the Homekey+ program must enter Universal and Common Data Elements as defined by HUD, on the individuals and families served into the Homeless Management Information System (HMIS). For more information about this requirement visit

Homelessness Program Data Reporting | California Department of Housing and Community Development

Any health information provided to, or maintained within, the statewide Homeless Management Information System shall not be subject to public inspection or disclosure under the California Public Records Act (Division 10 (commencing with §7920.000) of Title 1 of the Government Code). “Health information” means “protected health information” as defined in Part 160.103 of Title 45 of the Code of Federal Regulations, and “medical information,” as defined in subdivision (j) of §56.05 of the Civil Code.

§507 Relocation

In addition to the Relocation Assistance Narrative required in §300 submitted at the time of application, before the Homekey+ Award will be disbursed, Grantee must submit either:

a. A Department-approved relocation plan; or

b. An HCD-issued Certification Regarding Non-Application of Relocation Benefits and Indemnification Agreement (certificate of no-relocation), which has been duly executed and approved by HCD.

Grantee must comply with all applicable federal, state, and local relocation law. Pursuant to relocation law, a Grantee must have a relocation plan prior to proceeding with any phase of a Project or other activity that will result in the displacement of persons, businesses, or farm operations. To ensure that displaced persons and entities do not suffer a disproportionate impact as a result of Projects which benefit the public, all notices to vacate and relocation services must be provided to them in accordance with applicable law.

HCD will identify its form, substance, and submittal requirements for these relocation documents in the Homekey+ application materials. Where the Grantee’s activities will or may result in displacement, the Grantee’s development budget shall include enough funds to pay all costs of relocation benefits and assistance. Any modifications to the foregoing process requirements must be approved in advance by HCD in writing.

Does the proposed Project trigger State Relocation Assistance Law?

§508 Non-Discrimination and Accessibility

Grantees shall adopt a written non-discrimination policy requiring that no person shall, on the grounds of race, color, religion, sex, gender, gender identity, gender expression, sexual orientation, marital status, national origin, ancestry, familial status, source of income, disability, age, medical condition, genetic information, citizenship, primary language, immigration status (except where explicitly prohibited by federal law), arbitrary characteristics, and all other classes of individuals protected from discrimination under federal or state fair housing laws, individuals perceived to be a member of any of the preceding classes, or any individual or person associated with any of the preceding classes be excluded from participation in, be denied the benefits of, or be subjected to discrimination under, any program or activity funded in whole or in part with program funds made available pursuant to this NOFA.

NOTE: A written non-discrimination policy is required at "Threshold Requirements" sheet.

Grantees certifies to comply with the requirements of the Americans with Disabilities Act of 1990 (U.S.C § 12101 et seq.). All developments shall adhere to the accessibility requirements set forth in California Building Code Chapter 11A and 11B and the Americans with Disabilities Act, Title II and Title III. In addition, developments shall adhere to either the Uniform Federal Accessibility Standards (UFAS), 24 C.F.R. Part 8, or HUD's modified version of the 2010 ADA Standards for Accessible Design (Alternative 2010 ADAS), HUD-2014-0042-0001, 79 F.R. 29671 (5/23/14) (commonly referred to as "the Alternative Standards" or "HUD Deeming Notice"). Accessible units shall, to the maximum extent feasible and subject to reasonable health and safety requirements, be distributed throughout the Project and be available in a sufficient range of sizes and amenities consistent with 24 CFR part 8.26.

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Applicants are further advised that while Homekey+ incorporates the MHP guidelines, as explained in §101, as a courtesy and point of emphasis, HCD directs prospective Applicants to §7314 (a) and (b) of the MHP guidelines, which further articulates Fair Housing, Nondiscrimination, and Accessibility requirements. HCD also suggests Applicants review its April 2021 Affirmatively Furthering Fair Housing document at the following link.

Fair Housing

§509 Prevailing Wages

Applicant certifies that the Project will comply with California's prevailing wage law (Lab. Code, §1720 et seq.)?

Applicant's contemplated use of Homekey+ funds is subject to California's prevailing wage law (Lab. Code, § 1720 et seq.). Applicant is urged to seek professional legal advice about the law's requirements. Prior to disbursing the Homekey+ funds, HCD will require a certification of compliance with California's prevailing wage law, as well as all applicable federal prevailing wage law, or a certification that the development is exempt from prevailing wage as defined in Government Code 65913.4(a)(9). The certification must verify that prevailing wages have been or will be paid, and that labor records will be maintained and made available to any enforcement agency upon request. The certification must be signed by the general contractor(s) and the Grantee. The Department will not disburse funds for Rehabilitation or construction until the certification is signed by the general contractor.

§510 Environmental Clearances

Projects, including phased Projects, that satisfy the requirements HSC 50675.1.5, shall be exempt from the California Environmental Quality Act (CEQA) Projects under this section are considered a "use by right", which are specifically exempt from CEQA (CA Public Resources Code §21000 et seq.). (HSC 50675.1.5(e)(2)(A)). Moreover, HSC 50675.1.5(c) specifically exempts HCD actions taken to "provide financial assistance or insurance for the development and construction of Projects" from CEQA review. HCD encourages Eligible Applicants to fully engage with HCD's technical assistance and to review the CEQA exemption set forth at HSC §50675.1.5 and the provision for land use consistency and conformity set forth at HSC §50675.1.3, subdivision (i).

Applicants should consult with their counsel for legal advice in construing application of the foregoing exemptions to their Project. It is entirely within an Applicant's discretion to determine whether to use the statutory CEQA exemption, whether the exemption applies to the Applicant's proposed activity, or whether some other mechanism applies and could be used to satisfy obligations under CEQA.

Applicants must provide National Environmental Act (NEPA) clearance, as applicable. According to the National Environmental Policy Act (NEPA), Grantees must consider environmental impacts early in the planning process before decisions are made, and actions are taken. The Project must assess environmental impacts if a Project has applied for HUD assistance (HOME, CDBG, PBVs, Choice Neighborhoods Grant, ShelterCare Plus, etc.). HUD's regulations prohibit grant recipients and their partners/contractors from committing or spending HUD or non-HUD funds on an activity that could limit the choice of reasonable alternatives before completing the environmental review process. The prohibition of choice-limiting actions does not apply to commitments of non-federal funds before the Project has applied for HUD funding.
When an application is submitted for a federal grant/loan, all activity must stop until the environmental review process is complete.

There is no flexibility or waiver of NEPA environmental review requirements. The Project must receive an Authority to Use Grant Funds (AUGF) before the Project proceeds with the acquisition or physical activities, including non-HUD-funded activities. A choice-limiting action can result in a violation that jeopardizes HUD funding for the Project.

The prohibition on choice-limiting actions prohibits physical activity, including acquisition, Rehabilitation, and construction, as well as contracting for or committing to any of these actions before completion of the environmental review. Some examples of choice-limiting actions are: see §510

HCD does not determine which Projects will require NEPA clearance. Applicants shall provide HCD a status of any required NEPA review at the time of application. For more information, visit the HUD Exchange, review HCD's Environmental Review Guidance by clicking, or contact HCD's Environmental Services Team at NEPA@hcd.ca.gov.

HUD Exchange HCD's Environmental Review Guidance

File Name	19. CEQA	Copy of CEQA Determination Documents (if applicable).	Uploaded to HCD?	
File Name	20. NEPA	NEPA Authority to Use Grant Funds issued by the Responsible Entity if the project is proposing use of federal funds. Note: Not required at time of application, but required prior to disbursements.	Uploaded to HCD?	

Project milestones

Please provide the actual or anticipated completion date for the following performance milestones for each applicable Capital Project. If a milestone is not applicable to a Capital Project, please enter "N/A"

Note: It is acknowledged that some of the following milestones may have already been achieved. For those milestones which have previously been met, please enter the month and year completed. For those milestones not yet completed, please provide a projected completion date (MM/DD/YY) for each of the applicable items below. If not applicable to the specific Capital Project, please indicate "NA" below.

Homekey+ milestones	Homekey+ Date
Completion of all necessary environmental clearances, including those required under CEQA and NEPA.	
Obtaining all necessary and discretionary public land use approvals.	
Submission of Final Construction Drawings and Specifications to the appropriate local building department or permitting authority.	
Commencement of construction.	
Construction completion.	
Start lease up	
Complete Occupancy	
Complete capital expenses	
Program funds fully disbursed.	
Have all milestone dates been entered above?	

Applicant comments:

Development Team Contacts and Legislative Information

Contact Type	Entity Legal Name	Eligible Applicant Type	Organization Type	Address	City	State	Zip Code	Auth Rep Name	Title	Email	Phone #	Contact Name	Title	Email	Phone #	Contact Address	City	State	Zip Code
Eligible Applicant																			
Property Management Agent																			
Financial Consultant																			
Lead (primary) Service Provider																			
Legal Counsel																			
General Contractor																			
Architect																			
Other (Specify)																			
Other (Specify)																			
Other (Specify)																			
Other (Specify)																			

Development Sources

			Construction Totals		$0	$0	$0	Construction Terms			Permanent Terms									Details of Deferred Costs	
			Permanent Totals		$0	$0	$0				Interest Rate		Repayment Terms			$0	$0	$0	$0		
Construction	Committed?	Source Name (**lien priority order**)	Source Type	Lien No.	Residential Amount	Commercial Amount	Total Amount	Interest Rate	Required Payment	Loan Term (months)	Rate	Type	Amortizing Period (yrs.)	Type	Due in (yrs.)	Required Residential Debt Service	Required Commercial Debt Service	Tax-Exempt Amount	Deferred Amount	Description	
Construction	No	Homekey+ Grant	State-HCD		$0	$0															
		Deferred Developer Fees																			
Construction	Yes	Other Deferred Costs			$0																
		Developer Fee Contribution																			
		GP Equity																			
Construction	Yes	Gross Tax Credit Equity																			
Permanent																					
Permanent	No	Homekey+ Grant	State-HCD		$0	$0															
		Deferred Developer Fees																			
		Developer Fee Contribution																			
		GP Equity																			
Permanent	Yes	Gross Tax Credit Equity																			

Applicant Comments: Include a description of unusual or extraordinary circumstances that have resulted in higher than expected Project costs and provide a justification as to why these costs are reasonable.

Annual Income and Expenses

Employee Information

Comments

No.	FTE	Employee Job Title	Salary/Wages	Value of Free Rent	
		On-Site Manager(s)			
		On-Site Assistant Manager(s)			
		Supportive Services Staff Supervisor(s)			
		Supportive Services Coordinator, On-Site			
		Other Supportive Services Staff (inc. Case Manager)			
		On-Site Maintenance Employee(s)			
		On-Site Leasing Agent/Administrative Employee(s)			
		On-Site Security Employee(s)			
		Other (specify)			
		Other (specify)			
		Other (specify)			
		Other (specify)			
		Total Salaries and Value of Free Rent Units	$0	$0	
6711		Payroll Taxes		Show free rent as an expense?	
6722		Workers Compensation			
6723		Employee Benefits			
		Employee(s) Payroll Taxes, Workers Comp. & Benefits	$0		
		Total Employee(s) Expenses	$0		

Employee Units

Income Limit	Job Title(s) of Employee(s) Living On-Site	Unit Type (No. of bdrms.)	Square Footage	
		Total Square Footage	0	

Annual Operating Budget

Acct. No.	Revenue - Income	Residential	Commercial	Comments
5120/5140	Rent Revenue - Gross Potential		$0	
	Restricted Unit Rents	$0		
	Unrestricted Unit Rents	$0		
5121	Tenant Assistance Payments			
	Rental Subsidy Program Name (Specify)	$0		
	Rental Subsidy Program Name (Specify)	$0		
	Rental Subsidy Program Name (Specify)	$0		
	Rental Subsidy Program Name (Specify)	$0		
	Operating Subsidies (Specify)			
	Operating Subsidies (Specify)			
	Operating Subsidies (Specify)			
	Operating Subsidies (Specify)			
	Operating Subsidies (Specify)			
	Operating Subsidies (Specify)			
	Operating Subsidies (Specify)			
	Operating Subsidies (Specify)			
5910	Laundry and Vending Revenue	$0		
5170	Parking Spaces	$0	$0	
5990	Miscellaneous/Other Rent Revenue	$0	$0	
	Gross Potential Income (GPI)	$0	$0	
	Vacancy Rate: Restricted Units	5.0%		
	Vacancy Rate: Unrestricted Units	5.0%		
	Vacancy Rate: Tenant Assistance Payments	5.0%		
	Vacancy Rate: Other (Specify)	5.0%		
	Vacancy Rate: Laundry & Vending & Other Income	5.0%		

Annual Income and Expenses

	Vacancy Rate: Commercial Income		50.0%	
5220/5240	Vacancy Loss(es)	$0	$0	
	Effective Gross Income (EGI)	$0	$0	
Acct. No.	Expenses	Residential	Commercial	Comments
Administrative Expenses: 6200/6300				
6203	Conventions and Meetings			
6210	Advertising and Marketing			
6250	Other Renting Expenses			
6310	Office/Administrative Salaries -- from above	$0		
6311	Office Expenses			
6312	Office or Model Apartment Rent			
6320	Management Fee			
6330	Site/Resident Manager(s) Salaries -- from above	$0		
6331	Administrative Free Rent Unit -- from above	$0		
6340	Legal Expense -- Project			
6350	Audit Expense			
6351	Bookkeeping Fees/Accounting Services			
6390	Miscellaneous Administrative Expenses			
6263T	Total Administrative Expenses	$0	$0	
Acct. No.	Expenses	Residential	Commercial	Comments
Utilities Expenses: 6400				
6450	Electricity			
6451	Water			
6452	Gas			
6453	Sewer			
	Other Utilities (specify)			
6400T	Total Utilities Expenses	$0	$0	
Operating and Maintenance Expenses: 6500				Comments
6510	Payroll -- from above	$0		
6515	Supplies			
6520	Contracts			
6521	Operating & Maintenance Free Rent Unit -- from above	$0		
6525	Garbage and Trash Removal			
6530	Security Contract			
6531	Security Free Rent Unit -- from above	$0		
6546	Heating/Cooling Repairs and Maintenance			
6548	Snow Removal			
6570	Vehicle & Maintenance Equipment Operation/Reports			
6590	Miscellaneous Operating and Maintenance Expenses			
6500T	TOTAL Operating & Maintenance Expenses	$0	$0	
Taxes and Insurance: 6700				Comments
6710	Real Estate Taxes			
6711	Payroll Taxes (Project's Share) -- from above	$0		
6720	Property and Liability Insurance (Hazard)			
6729	Other Insurance (e.g. Earthquake)			
6721	Fidelity Bond Insurance			
6722	Worker's Compensation -- from above	$0		
6723	Health Insurance/Other Employee Benefits--from above	$0		
6790	Miscellaneous Taxes, Licenses, Permits & Insurance			
6700T	Total Taxes and Insurance	$0	$0	
Supportive Services Costs: 6900				Comments
6990	Staff Supervisor(s) Salaries - from above	$0		
6990	Services Coordinator Salaries, On-Site - from above	$0		
6990	Other Supportive Services Staff Salaries - from above	$0		
6990	Supportive Services Admin Overhead			
6990	Tenant Transportation (per SSP)			
6990	Staff training (per SSP)			
6990	Equipment			
6990	Supplies			

Annual Income and Expenses

6990	Travel			
6990	Office Rent/Occupancy Costs (don't include rent/leasing costs for SH units)			
6990	Training			
6990	Other Supportive Services Costs (specify)			
6990	Other Supportive Services Costs (specify)			
6900T	Total Supportive Services Costs	$0	$0	
	Total Operating Expenses	$0	$0	Comments
Funded Reserves: 7200		Residential	Commercial	
7210	Required Replacement Reserve Deposits	$0		
7220	Other Reserves (specify)			
7230	Other Reserves (specify)			
7240	Other Reserves (specify)			
	Total Reserves	$0	$0	
	Ground Lease	Residential	Commercial	
	Ground Lease			
	Total Ground Lease	$0	$0	
	Net Operating Income	$0	$0	
Financial Expenses: 6800				Comments
6820	1st Mortgage Debt Service			
6830	2nd Mortgage Debt Service			
6840	3rd Mortgage Debt Service			
6890	Other HCD .42% (Specify)			
6890	Other HCD .42% (Specify)			
6890	Bond Issuer Fee			
6890	Miscellaneous Financial Expenses (specify)			
6890	Miscellaneous Financial Expenses (specify)			
6890	Miscellaneous Financial Expenses (specify)			
6890	Miscellaneous Financial Expenses (specify)			
6800T	Total Financial Expenses	$0	$0	
	Cash Flow	$0	$0	
7190	Asset Management/Similar Fees			

Total Operating Expenses Per Unit	Per Year	Per Month	
Without any Adjustments	$0	$0	
With the Value of Rent-Free Units Included	$0	$0	
Without RE Taxes, Social Services Coordinator or Social Services/Social Programs and With the Value of Rent Fee Units Included	$0	$0	

Development Budget

DEVELOPMENT COST	Total Project Costs	Residential Costs	Commercial Costs	Comments and explanation of basis changes
LAND COST/ACQUISITION				
Land Cost or Value	$0			
Demolition	$0			
Legal	$0			
Land Lease Rent Prepayment	$0			
Total Land Cost or Value	$0	$0	$0	
Existing Improvements Cost or Value	$0			
Off-Site Improvements	$0			
Total Acquisition Cost	$0	$0	$0	
Total Land Cost / Acquisition Cost	$0	$0	$0	
Predevelopment Interest/Holding Cost	$0			
Assumed, Accrued Interest on Existing Debt (Rehab/Acq)	$0			
Excess Purchase Price Over Appraisal	$0			
REHABILITATION				
Site Work	$0			
Structures	$0			
General Requirements	$0			
Contractor Overhead	$0			
Contractor Profit	$0			
Prevailing Wages	$0			
General Liability Insurance	$0			
Urban Greening	$0			
Other Rehabilitation (Specify)	$0			
Other Rehabilitation (Specify)	$0			
Other Rehabilitation (Specify)	$0			
Total Rehabilitation Costs	$0	$0	$0	
NEW CONSTRUCTION				
Site Work	$0			
Structures	$0			
General Requirements	$0			
Contractor Overhead	$0			
Contractor Profit	$0			
Prevailing Wages	$0			
General Liability Insurance	$0			
Urban Greening	$0			
Other New Construction (Specify)	$0			
Other New Construction (Specify)	$0			
Other New Construction (Specify)	$0			
Other New Construction (Specify)	$0			
Other New Construction (Specify)	$0			
Other New Construction (Specify)	$0			
Other New Construction (Specify)	$0			
Total New Construction Costs	$0	$0	$0	
ARCHITECTURAL FEES				
Design	$0			
Supervision	$0			
Total Architectural Costs	$0	$0	$0	
Total Survey & Engineering	$0			
CONSTRUCTION INTEREST & FEES				
Construction Loan Interest	$0			
Origination Fee	$0			
Credit Enhancement/Application Fee	$0			
Bond Premium	$0			
Cost of Issuance	$0			
Title & Recording	$0			
Taxes	$0			
Insurance	$0			
Employment Reporting	$0			
Other Construction Int. & Fees (Specify)	$0			
Other Construction Int. & Fees (Specify)	$0			
Total Construction Interest & Fees	$0	$0	$0	
PERMANENT FINANCING				
Loan Origination Fee	$0			

Development Budget

DEVELOPMENT COST	Total Project Costs	Residential Costs	Commercial Costs	Comments and explanation of basis changes
Credit Enhancement/Application Fee	$0			
Title & Recording	$0			
Taxes	$0			
Insurance	$0			
Other Perm. Financing Costs (Specify)	$0			
Other Perm. Financing Costs (Specify)	$0			
Total Permanent Financing Costs	$0	$0	$0	
Subtotals Forward	$0	$0	$0	
LEGAL FEES				
Legal Paid by Applicant	$0			
Other Attorney Costs (Specify)	$0			
Other Attorney Costs (Specify)	$0			
Other Attorney Costs (Specify)	$0			
Total Attorney Costs	$0	$0	$0	
RESERVES				
Operating Reserve	$0	$0		
Replacement Reserve	$0	$0		
Transition Reserve Pool Fee	$0	$0		
Rent Reserve	$0			
Other Reserve Costs (Specify)	$0			
Other Reserve Costs (Specify)	$0			
Other Reserve Costs (Specify)	$0			
Total Reserve Costs	$0	$0	$0	
CONTINGENCY COSTS				
Construction Hard Cost Contingency	$0			
Soft Cost Contingency	$0			
Total Contingency Costs	$0	$0	$0	
OTHER PROJECT COSTS				
TCAC App/Allocation/Monitoring Fees	$0			
Environmental Audit	$0			
Local Development Impact Fees	$0			
Permit Processing Fees	$0			
Capital Fees	$0			
Marketing	$0			
Furnishings	$0			
Market Study	$0			
Accounting/Reimbursable	$0			
Appraisal Costs	$0			
Broadband Readiness	$0			
Other Costs (Specify)	$0			
Other Costs (Specify)	$0			
Other Costs (Specify)	$0			
Other Costs (Specify)	$0			
Other Costs (Specify)	$0			
Total Other Costs	$0	$0	$0	
SUBTOTAL PROJECT COST	$0	$0	$0	
DEVELOPER COSTS				
Developer Overhead/Profit	$0			
Consultant/Processing Agent	$0			
Project Administration	$0			
Broker Fees Paid to a Related Party	$0			
Construction Oversight by Developer	$0			
Other Developer Costs (Specify)	$0			
Total Developer Costs	$0	$0	$0	
TOTAL PROJECT COST	$0	$0	$0	
			Eligible Basis:	

Scroll to the Right for more data input (sources) ---------->

Residential Sources and Uses Budget

USES OF FUNDS	Total Cost from Dev Budget	Homekey+ Grant												Deferred Developer Fees	Developer Fee Contribution	GP Equity	Gross Tax Credit Equity	Total Residential Sources	Residential Costs Total	Commercial Costs Total	Commercial Sources		Residential Cost Difference Dev Budget vs. Sources
LAND COST/ACQUISITION																							
Land Cost or Value	$0																	$0	$0	$0			$0
Demolition	$0																	$0	$0	$0			$0
Legal	$0																	$0	$0	$0			$0
Land Lease Rent Prepayment	$0																	$0	$0	$0			$0
Total Land Cost or Value	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Existing Improvements Cost or Value	$0																	$0	$0	$0			$0
Off-Site Improvements	$0																	$0	$0	$0			$0
Total Acquisition Cost	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Total Land Cost / Acquisition Cost	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Predevelopment Interest/Holding Cost	$0																	$0	$0	$0			$0
Assumed, Accrued Interest on Existing Debt (Rehab/Acq)	$0																	$0	$0	$0			$0
Excess Purchase Price Over Appraisal	$0																	$0	$0	$0			$0
REHABILITATION																							
Site Work	$0																	$0	$0	$0			$0
Structures	$0																	$0	$0	$0			$0
General Requirements	$0																	$0	$0	$0			$0
Contractor Overhead	$0																	$0	$0	$0			$0
Contractor Profit	$0																	$0	$0	$0			$0
Prevailing Wages	$0																	$0	$0	$0			$0
General Liability Insurance	$0																	$0	$0	$0			$0
Urban Greening	$0																	$0	$0	$0			$0
Other Rehabilitation (Specify)	$0																	$0	$0	$0			$0
Other Rehabilitation (Specify)	$0																	$0	$0	$0			$0
Other Rehabilitation (Specify)	$0																	$0	$0	$0			$0
Total Rehabilitation Costs	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Total Relocation Expenses	$0																	$0	$0	$0			$0
NEW CONSTRUCTION																							
Site Work	$0																	$0	$0	$0			$0
Structures	$0																	$0	$0	$0			$0
General Requirements	$0																	$0	$0	$0			$0
Contractor Overhead	$0																	$0	$0	$0			$0
Contractor Profit	$0																	$0	$0	$0			$0
Prevailing Wages	$0																	$0	$0	$0			$0
General Liability Insurance	$0																	$0	$0	$0			$0
Urban Greening	$0																	$0	$0	$0			$0
Other New Construction (Specify)	$0																	$0	$0	$0			$0
Other New Construction (Specify)	$0																	$0	$0	$0			$0
Other New Construction (Specify)	$0																	$0	$0	$0			$0
Other New Construction (Specify)	$0																	$0	$0	$0			$0
Other New Construction (Specify)	$0																	$0	$0	$0			$0
Other New Construction (Specify)	$0																	$0	$0	$0			$0
Other New Construction (Specify)	$0																	$0	$0	$0			$0
Total New Construction Costs	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
ARCHITECTURAL FEES																							
Design	$0																	$0	$0	$0			$0
Supervision	$0																	$0	$0	$0			$0
Total Architectural Costs	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Total Survey & Engineering	$0																	$0	$0	$0			$0

CONSTRUCTION INTEREST & FEES

Construction Loan Interest	$0																	$0	$0	$0			$0
Origination Fee	$0																	$0	$0	$0			$0
Credit Enhancement/Application Fee	$0																	$0	$0	$0			$0
Bond Premium	$0																	$0	$0	$0			$0
Cost of Issuance	$0																	$0	$0	$0			$0
Title & Recording	$0																	$0	$0	$0			$0
Taxes	$0																	$0	$0	$0			$0
Insurance	$0																	$0	$0	$0			$0
Employment Reporting	$0																	$0	$0	$0			$0
Other Construction Int. & Fees (Specify)	$0																	$0	$0	$0			$0
Other Construction Int. & Fees (Specify)	$0																	$0	$0	$0			$0
Total Construction Interest & Fees	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0

PERMANENT FINANCING

Loan Origination Fee	$0																	$0	$0	$0			$0
Credit Enhancement/Application Fee	$0																	$0	$0	$0			$0
Title & Recording	$0																	$0	$0	$0			$0
Taxes	$0																	$0	$0	$0			$0
Insurance	$0																	$0	$0	$0			$0
Other Perm. Financing Costs (Specify)	$0																	$0	$0	$0			$0
Other Perm. Financing Costs (Specify)	$0																	$0	$0	$0			$0
Total Permanent Financing Costs	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Subtotals Forward	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0

LEGAL FEES

Legal Paid by Applicant	$0																	$0	$0	$0			$0
Other Attorney Costs (Specify)	$0																	$0	$0	$0			$0
Other Attorney Costs (Specify)	$0																	$0	$0	$0			$0
Other Attorney Costs (Specify)	$0																	$0	$0	$0			$0
Total Attorney Costs	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0

RESERVES

Operating Reserve	$0																	$0	$0	$0			$0
Replacement Reserve	$0																	$0	$0	$0			$0
Transition Reserve Pool Fee	$0																	$0	$0	$0			$0
Rent Reserve	$0																	$0	$0	$0			$0
Other Reserve Costs (Specify)	$0																	$0	$0	$0			$0
Other Reserve Costs (Specify)	$0																	$0	$0	$0			$0
Other Reserve Costs (Specify)	$0																	$0	$0	$0			$0
Total Reserve Costs	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0

CONTINGENCY COSTS

Construction Hard Cost Contingency	$0																	$0	$0	$0			$0
Soft Cost Contingency	$0																	$0	$0	$0			$0
Total Contingency Costs	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0

OTHER PROJECT COSTS

TCAC App/Allocation/Monitoring Fees	$0																	$0	$0	$0			$0
Environmental Audit	$0																	$0	$0	$0			$0
Local Development Impact Fees	$0																	$0	$0	$0			$0
Permit Processing Fees	$0																	$0	$0	$0			$0
Capital Fees	$0																	$0	$0	$0			$0
Marketing	$0																	$0	$0	$0			$0
Furnishings	$0																	$0	$0	$0			$0
Market Study	$0																	$0	$0	$0			$0
Accounting/Reimbursable	$0																	$0	$0	$0			$0
Appraisal Costs	$0																	$0	$0	$0			$0
Broadband Readiness	$0																	$0	$0	$0			$0
Other Costs (Specify)	$0																	$0	$0	$0			$0
Other Costs (Specify)	$0																	$0	$0	$0			$0
Other Costs (Specify)	$0																	$0	$0	$0			$0

Other Costs (Specify)	$0																	$0	$0	$0			$0
Other Costs (Specify)	$0																	$0	$0	$0			$0
Total Other Costs	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
SUBTOTAL PROJECT COST	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0

DEVELOPER COSTS

Developer Overhead/Profit	$0																	$0	$0	$0			$0
Consultant/Processing Agent	$0																	$0	$0	$0			$0
Project Administration	$0																	$0	$0	$0			$0
Broker Fees Paid to a Related Party	$0																	$0	$0	$0			$0
Construction Oversight by Developer	$0																	$0	$0	$0			$0
Other Developer Costs (Specify)	$0																	$0	$0	$0			$0
Total Developer Costs	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
TOTAL PROJECT COST	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0

TOTAL PROJECT COSTS	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0

Explain unusual or extraordinary circumstances that have resulted in higher than expected Project costs; provide a justification as to why these costs are reasonable.

| ed | Target Population | | |

Supportive Services Plan

§302 Supportive Services Requirements

To be eligible to receive funding, all applications must include a Project-specific Supportive Services plan, that shall be consistent with any representations made in the application, and it shall meet the Homekey+ Program Requirements. HCD in its sole discretion shall make the determination (1) if the Supportive Services plan is sufficiently complete to pass threshold and (2) if the Supportive Services plan and property management plan is compliant with Housing First and other evidence-based practices for each unique Target Population served by the Project. For example, Projects serving Veterans must incorporate evidence-based practices specific to Veterans.

Part I. Tenant Selection

The plan is required by Section §302(d)(a) and must be compliant with Section §504 and §508. Using the titled sections below, the narrative should be as specific as possible, delineating the roles of property management and the support service provider and how these functions will be coordinated. Your description should clearly and conclusively document processes to ensure compliance with the Homekey+ NOFA for Tenant Selection and Housing First Practices.

Section 1: Tenant Selection Criteria

Target Population and Eligibility Criteria

a. Do you use Housing First Practices?

b. Describe the criteria that will be used to ensure that tenants are eligible to occupy the Homekey+ Assisted Units.

c. Description of the Target Population to be served, and identification of any additional subpopulation target or occupancy preference for the Project (all sub-population targeting must be approved by HCD prior to standard agreement issuance and must be consistent with federal and state fair housing requirements).

d. Describe any additional eligibility criteria other than those indicated above, i.e., information needed to determine if the tenant can comply with lease terms. NOTE: Selection criteria designed to assess anything other than the ability to comply with lease terms generally run afoul of fair housing laws designed to protect equal access to housing for people with disabilities.

See Between the Lines: A Question and Answer Guide on Legal Issues in Supportive Housing Chapter 4.

e. Identify all disclosures that will be provided to applicants/tenants. Example: Megan's Law disclosures, HMIS reporting, etc.

Section 2: Referrals (NOFA §505, Tenant Referrals)

The following prompts address the required use of the Coordinated Entry System (CES) for all referrals into Homekey+ Assisted Units or an alternate comparable prioritization system based on greatest need. Note that use of standard waiting lists is prohibited, in that both of these systems must prioritize referrals based on highest acuity needs, rather than first-come first served. Applicants must demonstrate efforts to coordinate with their local county behavioral health department to ensure the referral process to the Homekey+ Assisted Units is aligned with the requirements of this NOFA.

a. Describe how the local CES will be used to fill Homekey+ Assisted Units based on the use of a standardized assessment tool which prioritizes those with the highest need and the most barriers to housing retention. Include the CES agency's name, primary staff person's name, and contact information. If the local CES is not yet operational, describe when it will be established and the plan to use it.

b. If using a separate comparable prioritization system than CES please describe that system. Prioritization for Homekey+ units should be based on greatest need factors and assessments established by the local jurisdiction in collaboration with the Continuum of Care (CoC). CoC collaboration in Project and Supportive Services design is also strongly encouraged to help target and serve those with the greatest need.

Section 3: Housing First Certification §504

The Eligible Applicant shall certify to employ the core components of Housing First, as set forth at Welfare and Institutions Code §8255, subdivision (b), in its property management and tenant selection practices. Complete the checklist below to certify compliance with Housing First.

Tenant Screening

1. If the project cannot serve someone, it works through the coordinated entry process to ensure that those individuals or families have access to housing and services elsewhere.
2. The project does everything possible not to reject an individual or family based on poor credit or financial history, poor or lack of rental history, minor criminal convictions, or behaviors that are interpreted as indicating a lack of "housing readiness."
3. Access to the project is not contingent on sobriety, minimum income requirements, lack of a criminal record, completion of treatment, participation in services, or any other unnecessary condition not imposed by the terms of the funding itself.
4. People with disabilities are offered clear opportunities to request reasonable accommodations within applications and screening processes and during tenancy. Building and units include physical features that accommodate disabilities.

Housing-Based Voluntary Services

1. If serving youth experiencing homelessness, services use a positive youth development model and culturally competent services to engage with tenants.
2. Services are informed by a harm-reduction philosophy that recognizes that substance use/ addiction are a part of some tenants' lives. Tenants are engaged in non-judgmental communication regarding substance use and are offered education regarding safer practices and how to avoid risky behaviors.
3. Case managers and service coordinators who are trained in and actively employ evidence-based practices for client engagement, including, but not limited to, motivational interviewing and client-centered counseling.
4. Participation in services or compliance with service plans are not conditions of tenancy but are reviewed with tenants and regularly offered as a resource to tenants. Housing and service goals and plans are highly tenant driven.
5. Supportive services emphasize engagement and problem-solving over therapeutic goals.

Housing Permanency

1. Substance use in and of itself, without other lease violations, is not considered a reason for eviction.
2. Tenants in supportive housing are given reasonable flexibility in paying their share of rent on time and offered special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements.
3. Every effort is made to provide a tenant the opportunity to transfer from one housing situation, program, or project to another if tenancy is in jeopardy. Whenever possible, eviction back into homelessness is avoided.
4. Program Requires Housing Providers to Provide Tenants with Leases and Reflects Tenants' Rights & Responsibilities Of Tenancy Under CA Law (including eviction protections).
5. §302(d)(b) Applicants certifies to provide and maintain written policies and procedures covering: §302(d)(b)(1-5)

Part II. Supportive Services Detail

Section 1: Lead Service Provider Information

If already identified, list the supportive service provider(s) for the Target Population and any proposed sub-populations to be served by the Project. If more than one Provider will be offering services, clearly identify who the Lead Service Provider is and describe how services will be coordinated.

Provider Name	Populations the Provider will serve	Services Provider will offer

Describe any known conflicts and/or the mitigation strategy for when Homekey+ funding or other program requirements conflict with Housing First practices, as applicable.

If your tenant households will include minor children and/or adult dependents, describe any additional criteria that will be used to ensure prospective tenants are eligible to occupy the Homekey+ Assisted Units.

Section 2: Supportive Services Chart

Required Services List and describe all services as required in §302 to be offered to tenants of the Homekey+ Assisted Units.

Resident Service	Service Description	Frequency	Hours	Service Provider	Off-site Service Location
List each service separately	Describe service, including the degree to which services are provided.	Frequency of services provided	Provide the hours of availability	Provider's Name	If service is on-site, leave blank. Enter distance, in miles, to off-site service and list resident commuting options. Reasonable access is access that does not require walking more that one-half mile.
Case management					
Peer support activities					
Mental health care					
Substance use services					
Behavioral health services					
Physical health services					
Assistance obtaining benefits and essential documentation					
Education and employment services					
If applicable, Veteran specific Supportive Services (required for Veteran serving projects)					
Supportive Services for people with co-occurring conditions					
Recreational and social activities					
Potential out-placements for higher level of care					
Other services, such as housing retention skills, legal assistance, family connection services, access to food and clothing, representative payee services, adult day care, financial counseling, etc.					
Parenting education, childcare, DV support in compliance with required services in Sect 302					
Other Residential Services (specify)					
Other Residential Services (specify)					
Other Residential Services (specify)					

File Name:	22. LSP Contract	Lead Service Provider Contract, Agreement or Letter of Intent.	Uploaded to HCD?
File Name:	22. LSP NonApplicant Contract	Lead Service Provider Contract, Agreement or Letter of Intent (non-Applicant provider).	Uploaded to HCD?

Section 3: Supportive Services Coordination

1. Describe the accessibility of Supportive Services, whether they are on-site or off-site, the frequency, and travel time required to access the Supportive Services including both public and private transportation services (e.g. van owned by the provider). Ensure transportation costs for off-site Supportive Services are reflected in the Project budget.

2. Describe how the Supportive Services will be provided in a manner that is culturally and linguistically competent for persons of different races, ethnicities, sexual orientations, gender identities, and gender expressions. This includes explaining how services will be provided to Homekey+ tenants who do not speak English, or have other communication barriers, including sensory disabilities, and how communication among the services providers, the property manager and these tenants will be facilitated. Additionally, describe how services will accommodate trauma-based, barriers to services. Responses should be as specific as possible in addressing the specific populations served by the Project. For example, if the Project will have Veteran serving units, responses should evidence competency in Supportive Service delivery to Veterans. If available, provide documentation, in the form of Memorandum of Understanding, Memorandum of Agreement, letters of support or contracts demonstrating who will be responsible for ensuring access to services and how accessibility will be accomplished.

Describe initial and periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.

3. Describe how you will engage with tenant and/or participant to encourage voluntary participation in services as well as in community building, such as resident councils or similar forums. Included a description of tenant/participant outreach, engagement and retention strategies to be used.

Describe initial and periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.

4. Describe how the Supportive Services will be provided in a manner that demonstrates cultural competency in working with families with children, including single parent households.

Describe initial and periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.

5. Describe how the Supportive Services will be provided in a manner that demonstrates cultural competency in working with people who identify as female.

Describe initial and periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.

6. Describe how the Supportive Services will be provided in manner that demonstrates cultural competency in working with people identifying as LGBTQ.

Describe initial and periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.

7. Describe how the Supportive Services will be provided in a manner that demonstrates cultural competency in working with people experience Post Traumatic Stress Disorder or sexual trauma (or military sexual trauma as applicable).

Describe initial and periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.

8. Describe how the Supportive Services will be provided in a manner that demonstrates cultural competency in working with people who have survived domestic violence and clients with trauma histories.

Describe initial and periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.

9. Provide a description of plans and measures to ensure the safety and security of residents and staff (e.g., guest and visitor policies, policies on the violation of safety rules, staff training, and building design features intended to promote security).

10. The property manager and LSP shall have three or more years of experience serving persons of each unique Target Population of people with Behavioral Health Challenges. If a property manager or LSP is not yet selected for the proposed Project, the Eligible Applicant shall certify that this requirement will be reflected in any future solicitation or memorandum of understanding (MOU) (see Section 305 for points awarded). If the property management and/or LSP has three or more years serving persons experiencing homelessness, but not Veterans experiencing homelessness, HCD in its sole discretion may deem the property manager and/or LSP to have met this requirement, provided the property manager and/or LSP agrees to completing a training provided by CalVet.

Projects with Youth-Assisted Units must jointly apply and/or partner with a nonprofit corporation(s), including community-based organization(s), with at least three years of experience serving current or former Foster Youth, Homeless Youth, or Youth at Risk of Homelessness.

Describe how your experience meets this criteria, including any need for training by CalVet.

Part III. Staffing

Section 1a: Staffing Description

Describe the overall staffing pattern, including the roles and responsibilities for each position listed in the Staffing Chart below. List the target populations served through each position.

Section 1b: Staffing Chart

List all staff positions that will provide services to the tenants of the Homekey+ Assisted Units. Include any staff positions of partnering organizations who have committed time to the Project. Include the services coordination staff. For each position, list the position title, minimum requirements, the full-time equivalent (FTE), the organization under which the position resides, and the location of the position (on-site or off-site). Do not include staff which serve non-Homekey+ Units and supervisors, peer support positions, or HMIS Administration positions. If a staff position serves both tenants in Homekey+ and non-Homekey+ units, include only that portion (i.e., % FTE) of the staff position dedicated to Homekey+ Assisted Units. Attach a copy of each positions duty statement, if these documents are available.

NOTE: Indicate which staff position will be responsible for Homeless Management Information System data entry and CoC coordination.

Title	Minimum requirements	Total FTE: 0.0	Employing Organization	Location
List each staff position	List minimum required staff preparation include (education & experience).	Indicate FTE staff positions for Homekey+ units (half-time is 0.5)	List which organization will employ each staff position	Select "On-Site" or "Off-Site"

File Name:	23. LSP resumes	Provide resumes of Supportive Services staff who will be overseeing Case Managers on the Project. Not required for Assisted Units with Veterans Affairs Supportive Housing (HUD-VASH) vouchers	Uploaded to HCD?	

Section 2: Staffing Ratios

1. Complete case manager staffing ratio chart to show how many staff are assigned per client (for example 2:1, 3:1, etc.). Include all case management. Provide only the number of ongoing direct service staff positions that will provide services to the tenants of the Homekey+ Assisted Units, (for example, case manager, psychiatric nurse, services coordinator, etc.). Do not include supervisors, peer support positions, or HMIS Administration positions.

Population Type:	Chronically Homeless (cannot exceed 20 to 1 ratio)	Homeless (cannot exceed 15 to 1 ratio)	At-Risk of Homelessness (cannot exceed 40 to 1 ratio)	Homeless Youth, or Youth at Risk of Homelessness (cannot exceed 15 to 1 ratio)	Veterans Chronically Homeless (cannot exceed 20 to 1 ratio)	Veterans Homeless (cannot exceed 15 to 1 ratio)	Veterans At-Risk of Homelessness (cannot exceed 40 to 1 ratio)	Veterans Homeless Youth, or Youth at Risk of Homelessness (cannot exceed 15 to 1 ratio)	Totals Units
Units Serving Subpopulation	0	0	0	0	0	0	0	0	**0**
Staff Serving Subpopulation									**0**
Case Manager Ratio									

Describe staffing ratio special circumstances below.

Part IV. Supportive Services and Property Management Budget

Provide a line item supportive services budget for the Project using the format below. Complete both income and expense portions of the budget on a yearly basis. Include all costs associated with implementing your SSP, including any in-kind services. Include income and expenses for all staff positions and partnering organizations who have committed time to the Project. Total expenses should equal total income. Add expense item categories & lines as necessary. Don't include costs associated with providing services in non-Homekey+ Assisted Units. If costs are associated with both Homekey+ & non-Homekey+ Assisted Units, include only the Homekey+ Assisted Units portion.

Staff Salaries: List by title of position. (This list must match the Staffing Chart above.)

Expense Item			Amount	Type	Funding Status	% of Total Budget
On-Site Manager(s)	FTE	0.00	$0			0.00%
On-Site Assistant Manager(s)	FTE	0.00	$0			0.00%
Supportive Services Staff Supervisor(s)	FTE	0.00	$0			0.00%
Supportive Services Coordinator, On-Site	FTE	0.00	$0			0.00%
Other Supportive Services Staff (inc. Case Manager)	FTE	0.00	$0			0.00%
On-Site Maintenance Employee(s)	FTE	0.00	$0			0.00%
On-Site Leasing Agent/Administrative Employee(s)	FTE	0.00	$0			0.00%
On-Site Security Employee(s)	FTE	0.00	$0			0.00%
Other (specify)	FTE	0.00	$0			0.00%
Other (specify)	FTE	0.00	$0			0.00%
Other (specify)	FTE	0.00	$0			0.00%
Other (specify)	FTE	0.00	$0			0.00%
Fringe Benefits			$0			0.00%
Total Staff Expenses			**$0**			**0.00%**

Expense Item	Amount	Type	Funding Status	% of Total Budget
Tenant Transportation (per SSP)	$0			0.00%
Staff training (per SSP)	$0			0.00%
Equipment	$0			0.00%
Supplies	$0			0.00%
Travel	$0			0.00%
Office Rent/Occupancy Costs (don't include rent/leasing)	$0			0.00%
Training	$0			0.00%
Other Supportive Services Costs (specify)	$0			0.00%
Other Supportive Services Costs (specify)	$0			0.00%
Supportive Services Admin Overhead	$0			0.00%
Security Contract	$0			0.00%
Total Expenses	**$0**			**0.00%**

Part V. Property Management Plans and Tenant Selection

Section 1: Property Management Plans and Tenant Selection

The Property Management Plan and tenant selection policies submitted with the Homekey+ application will be evaluated for the following consistent with state Housing First requirements. These documents must identify, describe, and utilize Housing First and low-barrier tenant selection processes that prioritize those with the highest needs for available housing. The descriptions of the use of Housing First and tenant selection in this SSP must be consistent with the Property Management Plan and the tenant selection policies. The Property Management Plan and tenant selection policies should address the following and be consistent with state Housing First requirements, as well as and other Homekey+ program requirements:

1. Applicant eligibility and screening standards	Included in Property Management Plan?	
2. Confidentiality	Included in Property Management Plan?	
3. Substance abuse policy	Included in Property Management Plan?	
4. Communication between property manager and supportive services staff	Included in Property Management Plan?	
5. Eviction policies and eviction prevention procedures	Included in Property Management Plan?	
6. Process for assisting tenants to apply for different forms of cash and non-cash benefits to aid the household in retaining their housing, if needed	Included in Property Management Plan?	
7. How applicants and residents will be assisted in making reasonable accommodation requests, in coordination with the services provider and persuasive to outside entities, such as Housing Authorities, to ensure that persons with disabilities have access to and can maintain housing	Included in Property Management Plan?	
8. Policies and practices to facilitate Voluntary Moving On strategies	Included in Property Management Plan?	
9. Appeal and Grievance Procedures	Included in Property Management Plan?	
10. Payment of rent by residents during periods of hospitalization.	Included in Property Management Plan?	
11. Coordination with property management for resolution of complaints from tenants or on behalf of tenants.	Included in Property Management Plan?	
12. Use of best practices in service delivery for each unique Target Population served by the Project, including but not limited to critical time intervention; trauma-informed care and de-escalation; motivational interviewing; peer support; case conferencing; and providing care in a culturally competent manner.	Included in Property Management Plan?	
13. Supportive Services for Youth Assisted Units must also include a Positive Youth Development (PYD) model and trauma-informed care. Services may include, but are not limited to, case management, income supports, educational and employment counseling, life skills, legal assistance, health and wellness, and family connection services. Youth Assisted Units occupied by a tenant over age 25 shall be replaced with a comparable unit in the same Project, if available. When a tenant older than 25 moves out of a unit restricted for Youth, the Youth Assisted Unit shall go back to serving Homeless Youth.	Included in Property Management Plan?	

File Name	24. Property Management Plan	Submit Property Management Plan and Tenant Selection Policies	Uploaded to HCD?	

Part VI. Measurable Outcomes and Plan for Evaluation

Specific target populations will likely have varying outcomes and evaluation strategies. List outcomes and evaluations plans specific to each target population.

Section 1: Measurable Outcomes

Outcomes are what you expect to happen for the people served by your Project. Outcomes are sometimes called results. Outcome objectives are time-specific measurable goals that identify how you know if you are achieving your desired results. Outcome objectives are sometimes called outcome benchmarks or indicators. Categorize the outcomes for your Project into the following three categories:

Category	Outcomes	Outcome Objectives
Residential Stability: Tenants maintain permanent housing (see examples in cell comments to the right)		
Increased Skills and/or Income: Tenants gain job-related skills, participate in job-related training and/or education, gain at/paid part-time or full-time supported employment, gain access to mainstream service/income support Programs for which they are eligible (see examples in cell comments to the right)		
Greater Self- Determination: Tenants gain daily living skills and ability to plan and advocate for themselves to maximize independence and self-sufficiency (see examples in cell comments to the right)		
Other (specify)		

Section 2: Plan for Evaluation

Describe your evaluation plan, including how you intend to collect, track and analyze data on the effectiveness of your Project, including the outcomes Projected above. Indicate who will analyze the data and perform your Program evaluation. (e.g., staff, consultant, etc.).

Applicant Comments

End of Document

Project Name		Number of Project Units:	0

HCD Reserve Requirements

Replacement Reserve Calculator UMR §8309

(a)	0.6% of New construction costs (structures excluding contractor profit, overhead, and general requirements and insurance):	$0	$0
	$500 per unit: (This is a placeholder for rehab projects and may be subject to higher amount)	$500	$0
(b)	Replacement Reserve Amount = *New construction: lesser of (a) and (b); Rehab: (b)*		$0
	HCD Required Replacement Reserve Amount - *included in "Operating budget"* tab		$0

Operating Reserve Calculator

1	Total Operating Expenses Excluding On-Site Service Coordinator Salaries.				TAX CREDIT Project 3 Month Reserve Required	NON-TAX CREDIT Project 4 Month Reserve Required
	(a) Total Operating Expenses:	$0	Amount subject to reserve calculation: *(a - b)*	$0	**$0**	**$0**
	(b) *Minus:* On-Site Service Coordinator Salaries*:*	$0				
2	Replacement Reserve amount from *above* : *(Cell AJ10)*			$0	**$0**	**$0**
3	Debt Service (including all HCD 0.42% Fees and Bond Issuer Fee)					
	Name of Lender *Operating Budget cells (D138 to D147)*			Annual Debt Service Amount	TAX CREDIT Project 3 Month Reserve Required	NON-TAX CREDIT Project 4 Month Reserve Required
	1st Mortgage Debt Service			$0	$0	$0
	2nd Mortgage Debt Service			$0	$0	$0
	3rd Mortgage Debt Service			$0	$0	$0
	Other HCD .42% (Specify)			$0	$0	$0
	Other HCD .42% (Specify)			$0	$0	$0
	Bond Issuer Fee			$0	$0	$0
	Miscellaneous Financial Expenses (specify)			$0	$0	$0
	Miscellaneous Financial Expenses (specify)			$0	$0	$0
	Miscellaneous Financial Expenses (specify)			$0	$0	$0
	Miscellaneous Financial Expenses (specify)			$0	$0	$0
	Other (Specify)				$0	$0
	Totals			$0	**$0**	**$0**
	UMR Required Operating Reserve Amount:				**$0**	**$0**

If Reserve amounts are different than the required amount, enter Reserve amounts and how they are calculated below:

Construction Hard Cost Contingency Calculator UMR §8310

Program Threshold Requirements

Article III. Threshold and Scoring Criteria

§300. Threshold Requirements

Applicants acknowledges that to be eligible to receive Homekey+ funding, all applications must meet the threshold requirements of this Section. HCD reserves the right to request clarification of unclear or ambiguous statements made in an application and other supporting documents.

i. Applicant(s) acknowledges that Applications may be submitted independently by an Eligible Applicant, as defined in §200 and Article VII. Alternatively, each Eligible Applicant may apply jointly with a Co-Applicant, as specified.

Applicant(s) acknowledges that no additions of Co-Applicants or special purpose entities will be considered subsequent to the date of application, including after Standard Agreement execution.

§200. Eligible Applicants

iii. Pursuant to CA HSC § 50237 and 50241, HHAP Homekey+ Supplemental eligible applicants are:

a. California's 14 largest cities with a population of 300,000 or more as of January 1, 2022.

Is the Applicant or Co-Applicant one of these 14 largest cities, mentioned below, with a population of 300,000 or more as of January 1, 2022?

Anaheim	Irvine	Oakland	San Diego	Santa Ana
Bakersfield	Long Beach	Riverside	San Francisco	Stockton
Fresno	Los Angeles	Sacramento	San Jose	

b. California's 58 Counties — County

c. The entities in a. and b. must have:

1 A compliant housing element as defined in Government Code §65589.9, at the time a Homekey+ application is submitted; and

Applicant(s) certifies to have a compliant housing element as defined in Government Code §65589.9.

2 An approved HHAP regionally coordinated homelessness action plan.

Applicant(s) certifies to have an approved HHAP regionally coordinated homelessness action plan.

d. Tribal Entities

ii. Applicant(s) certifies that the proposed Projects must serve persons qualifying or households that include persons qualifying as members of the Target Population?

iii. Applicant(s) certifies to submit a completed application workbook with all worksheets, documents and supplemental information.

iv. Applicant(s) certifies to include a Project-specific Supportive Services Plan, that shall be consistent with any representations made in the application, and it shall meet the Homekey+ Program Requirements noted in NOFA §302?

v. Project Ownership Structure submitted with the application workbook that demonstrates the relationship of the Applicants, Co-applicants and project entities within the ownership structure.

Article VI – Definitions

xxxix. "Project Ownership Structure" means a Project-specific entity organizational chart that shows the ownership relationship between the Project Applicants and all Project entities (including the special purpose entity). This document is used by HCD to connect the Project Ownership Structure with the provided legal organizational documents (i.e. Operating Agreement, Limited Partnership Agreement, By Laws, etc.) to ensure the Primary Applicant or Co-Applicant has legal control over the Project site. This is NOT a staff organizational chart. The Project Ownership Structure chart must be provided with the application.

File Name	26. Project Ownership Structure	Provide a "Project Ownership Structure" chart.	Uploaded to HCD?	

vi. Applicant(s) certifies to submit all required documents from each Eligible Applicant and Co-Applicant as applicable, including but not limited to:

a. A duly executed resolution authorizing the entity to apply for funds and to participate in the Homekey+ Program in connection with each discrete Project; attested to by a person other that the person identified as the authorized signatory. If there is more than one authorized signatory identified, state whether one or all signatories are required to submit and execute program documents. If the application is being signed by a designee of the authorized signatory, the Applicant must also submit a designee letter or other proof of signing authority. The resolutions should materially comport with the Homekey+ resolution templates that will be available on the Homekey+ website when the application is released.

b. Organizational documents supporting the resolutions submitted with the application. Eligible Applicants are exempted from this requirement. Notwithstanding the foregoing, HCD reserves the right to request additional documentation at any point to verify any entity's authority and/or organizational structure. For a complete list of organizational documents, refer to Appendix B.

NOTE: These documents are requested at "Project Overview" sheet under the Applicant and Co-Applicant entity names.

vii. Applicants shall provide a written non-discrimination policy that complies with the requirements in §508 - Accessibility and Non-Discrimination.

viii. Applications shall provide a statement how the Project will address equity that must answer the following question: *What specific actions will the Applicant take to ensure equitable access to housing and services for groups that are overrepresented among residents experiencing homelessness in its jurisdiction and region*? Examples of what applicants should consider include race, ethnicity, age (e.g. youth, elderly), disability status, LGBTQ+ status, etc. The response shall reference the latest Continuum of Care (CoC) Homelessness Management Information System (HMIS) demographics data to explain. Please see the Homekey+ website for the template at the time of Application release. Homekey + website

File Name	28. Equity Statement	Provide Racial & Gender Equity statement by answering the above question.	Uploaded to HCD?	

ix. Applications shall provide a statement how the Project will engage the Target Population that must answer the following question: *How did/will the Applicant engage with the Target Population to inform the design of the Project operations and Supportive Services*? Please see Homekey+ website for guidance documents at the time of Application release. Homekey + website

File Name	29. Engaging the Target Population Statement	Provide a response to the question above.	Uploaded to HCD?	

x. The Applicant shall have site control of the property at the time of application, and such control shall not be contingent on the approval of any other party. The status and nature of the Applicant's title and interest in the property shall be subject to HCD's approval. Site control may be evidenced by one of the following:

Site Control UMR §8303 and §8316

At time of application, does Applicant, or its wholly controlled affiliate have site control pursuant to UMR §8303?

Type of site control:	Date	Expires	Extensions Available	Purchase Price	Total Land Area	
						acres
						acres
						acres
						acres
						acres
						acres
						acres
						acres

Current owner	Current owner street address	City	State	Zip code

Below, provide details for unusual site control special circumstances, and for applications with multiple or non-contiguous parcels, scattered sites, lot line adjustments, air rights parceling, phased projects, or other complex land transactions, including unique value calculations and explanations as applicable:

Below, describe planned and completed property transfers occurring in connection with development of the proposed Project.

Ground Lease planned?

File Name	30. Site Control	Documentation of site control in accordance with UMR §8303, including a summary explanation of site control and values for applications with multiple or non-contiguous parcels, scattered sites, lot line adjustments, phased projects, or other complex land and acquisition transactions, see Article III, §300(x)(a-h).	Uploaded to HCD?	

§300(h). For Applicants proposing sites that will require a use change, lot split or other local approvals for permanent housing, include a commitment and plan to facilitate or expedite those processes, to not delay expenditure and occupancy requirements.

Does the proposed Project require a use change, lot split or other local approvals for permanent housing?

xi. A preliminary title report **for each site**, dated within 90 days of application submission.

File Name	34. Preliminary Title Report	Provide a preliminary report dated within 90 days of application due date. For projects developed in Indian country, an attorney's opinion regarding chain of title and current title status is acceptable in lieu of a title report.	Uploaded to HCD?	

xii Applicant(s) certifies to provide a detailed development plan that supports acquisition of a site, completion of rehabilitation or construction, occupancy, and fund expenditure before all program deadlines, factoring in entitlements, permits, procurement, potential construction delays and supply chain issues, and demonstrates evidence of strong organizational and financial capacity to develop the Project. Please see Homekey+ website for guidance at the time of application release.

File Name	35. Development Plan	Provide a detailed development plan that supports acquisition of a site, completion of rehabilitation or construction, occupancy, and fund expenditure before all program deadlines, factoring in entitlements, permits, procurement, potential construction delays and supply chain issues, and demonstrates evidence of strong organizational and financial capacity to develop the Project.	Uploaded to HCD?	

viii Applicants shall provide an appraisal for **each** site if necessary, prepared no earlier than 12 months prior to application submission date for all Projects seeking acquisition funds from Homekey+ or if property value will be used as local match. The appraisal must comply with the Homekey+ requirements outlined in the Homekey+ Appraisal Guidance document, which will be available on the Homekey+ website.

File Name	36. Appraisal	Applicants shall provide an appraisal prepared no earlier than 12 months prior to application submission date for all Projects seeking acquisition funds from Homekey+ or if property value will be used as local match. The appraisal must comply with the Homekey+ requirements outlined in the Homekey+ Appraisal Guidance document, which will be available on the Homekey+ website.	Uploaded to HCD?	

Add comments with regards to Appraisal. Homekey+ Appraisal Guidance.

xv. For Projects seeking funding for master leasing and purchase of Affordability Covenants, Applicant shall provide a market study prepared no earlier than 12 months prior to application submission which conforms to TCAC guidelines, and/or a rent roll, and/or other supporting documentation.

Is the Applicant(s) seeking funding for master leasing and purchase of Affordability Covenants?

xvii Relocation Assistance Narrative. Applicant shall submit a concise, sufficiently detailed narrative to demonstrate its consideration of, and early engagement with, applicable relocation assistance laws and requirements. An Applicant's unsupported conclusion that relocation law does not apply or that the Project Site is vacant does not sufficiently demonstrate such consideration and engagement. The Applicant must support any representation that relocation law does not apply or that the Project Site is vacant by including either an explanation that supports this representation or supporting documentation that establishes that the property is vacant. This Relocation Assistance Narrative will be evaluated by HCD to determine whether a relocation plan is required by law or whether a certificate of no-relocation can be issued.

The Relocation Assistance Narrative does not take the place of these two documents. Grantee shall submit either a relocation plan or a certificate of no-relocation as a condition of disbursement. See §507 and Homekey+ website for more information and template, which will be uploaded when the application is released.

Template on the Homekey website.

File Name	42. Relocation narrative	Applicant's Relocation Assistance Narrative shall include or identify the following: §300(xvii)(a-i)	Uploaded to HCD?	

xviii Applicant(s) certifies to provide all Enforceable Funding Commitments (EFCs) as defined by Article VII (xviii) for:

a. Development costs with specific funding sources, including federal, state, local, private, or philanthropic sources for the proposed Project.

b. Rental subsidies, operations, and service costs with specific funding sources, including federal, state, local, private, or philanthropic sources for ongoing sustainability. For projects applying for a program operating Award (see §206) EFCs must be fully committed to match the numbers of years of the operating award. Please see §305(3)(a) for potential points and the Homekey+ website for EFC templates, which will be posted at the time of application release.

Homekey + website

xix Applicant(s) acknowledges that the Eligible Applicant or Co-Applicant applying for Homekey+ funding is the entity that HCD relies upon for experience and capacity, and will control the Project during acquisition, development, and occupancy?

The Eligible Applicant or Co-Applicant shall demonstrate the following minimum experience and capacity requirements:

a. Development, ownership, or operation of a Project similar in scope and size to the proposed Project; or development, ownership, or operation of at least two affordable rental housing Projects in the last 10 years, with at least one of those Projects containing at least one unit housing a tenant or who qualifies as a member of the Target Population.

Applicant(s) certifies that it has successfully Developed, owned, or operated a Project similar in scope and size to the proposed Project?

b. The property manager and Lead Service Provider (LSP) shall have three or more years of experience serving persons of the Target Population. If a property manager or LSP is not yet selected for the proposed Project, the Eligible Applicant shall certify that this requirement will be reflected in any future solicitation or memorandum of understanding.

Has the Applicant(s) selected a **property manager** for the proposed Project?

Has the Applicant(s) selected a **Lead Service Provider** for the proposed Project?

c. Statement confirming experience administering a Project in accordance with the core components of Housing First (Welfare & Institutions Code § 8255).

File Name	44. Housing First Statement	Provide relevant experience administering a Project in accordance with the core components of Housing First (Welfare & Institutions Code § 8255).	Uploaded to HCD?	

d. Current capacity to develop, own, and operate the proposed Project. For purposes of satisfying this requirement, an Applicant has "capacity" if it has adequate staff, capital, assets, and other resources to efficiently meet the operational needs of the Project; to maintain the fiscal integrity of the Project; and to satisfy all legal requirements and obligations in connection with the Project. Evidence of permanent supportive housing experience and capacity must be reasonably acceptable to the Department in form and substance.

Applicant)s) certifies to have current capacity to develop, own, and operate the proposed Project.

xx Did the Eligible Applicant and all Co-Applicants attended a pre-application consultation with HCD prior to applying, as required in §401?

Date of pre-application consultation:

xxi One-for-one replacement of assisted housing.

a. If the acquired housing or site is to be redeveloped/repositioned as part of the Local Public Entity's overall goal to address the needs of the Target Population and the community, the Applicant shall provide as part of the application a commitment to ensure one-for-one replacement of units.

Will the acquired housing or site be redeveloped/repositioned as part of the Local Public Entity's overall goal to address the needs of the Target Population and the community?

In addition to the Threshold Requirements above, Applicant(s) acknowledge, understand, and agree to comply, with the following sections of the 2024 Homekey+ NOFA.

§200 Affordability Covenant
§203 Allocations and Geographic Distribution
§204 Program Deadlines
§400 Application Process and Submission

Cash Flow Analysis

Is Income from Restricted Units based on Restricted or Proposed Rents? Restricted Rents

INCOME FROM HOUSING UNITS	Inflation	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15	Year 16	Year 17	Year 18	Year 19	Year 20
Restricted Unit Rents	2.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Unrestricted Units	2.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Rental Subsidy Program Name (Specify)	2.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Rental Subsidy Program Name (Specify)	2.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Rental Subsidy Program Name (Specify)		$0																			
Rental Subsidy Program Name (Specify)		$0																			
Operating Subsidies (Specify)	2.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Operating Subsidies (Specify)	2.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Operating Subsidies (Specify)	2.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Operating Subsidies (Specify)																					
Operating Subsidies (Specify)																					
Operating Subsidies (Specify)																					
Operating Subsidies (Specify)																					
Operating Subsidies (Specify)																					
GROSS POTENTIAL INCOME - HOUSING		$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0

OTHER INCOME	Inflation	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15	Year 16	Year 17	Year 18	Year 19	Year 20
Laundry & Vending	2.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Other Income	2.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Commercial Income	2.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
GROSS POTENTIAL INCOME - OTHER		$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
GROSS POTENTIAL INCOME - TOTAL		$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0

VACANCY ASSUMPTIONS	Inflation	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15	Year 16	Year 17	Year 18	Year 19	Year 20
Vacancy Rate: Restricted Units	5.0%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Vacancy Rate: Unrestricted Units	5.0%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Vacancy Rate: Tenant Assistance Payments	5.0%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Vacancy Rate: Other (Specify)	5.0%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Vacancy Rate: Laundry & Vending & Other Income	5.0%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Vacancy Rate: Commercial Income	50.0%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
TOTAL VACANCY LOSS		$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
EFFECTIVE GROSS INCOME		$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0

OPERATING EXPENSES & RESERVE DEPOSITS	Inflation	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15	Year 16	Year 17	Year 18	Year 19	Year 20
Residential Exp. (w/o Real Estate Taxes & Sup. Services)	3.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Real Estate Taxes	3.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Supportive Services Costs	3.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Replacement Reserve	0.0%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Other Reserves	0.0%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Ground Lease	2.0%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Commercial Expenses	3.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
TOTAL EXPENSES & RESERVES		$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
NET OPERATING INCOME		$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0

DEBT SERVICE	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15	Year 16	Year 17	Year 18	Year 19	Year 20
1st Mortgage Debt Service	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Bridge Loan (repaid from Investor equity)																				
2nd Mortgage Debt Service	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
3rd Mortgage Debt Service	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Other HCD .42% (Specify)	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Other HCD .42% (Specify)	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Bond Issuer Fee	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Miscellaneous Financial Expenses (specify)	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Miscellaneous Financial Expenses (specify)	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Miscellaneous Financial Expenses (specify)	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Miscellaneous Financial Expenses (specify)	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
TOTAL REQUIRED DEBT SERVICE	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0

CASH FLOW after all debt service	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15	Year 16	Year 17	Year 18	Year 19	Year 20
	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
DEBT SERVICE COVERAGE RATIO	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**

USE OF CASHFLOW AFTER DEBT SERVICE		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15	Year 16	Year 17	Year 18	Year 19	Year 20
Asset Mgmt./ Similar Fees		$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Deferred Developer Fee prior to distributions & residual receipt payments		$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Cash available for residual receipts loans and sponsor/Applicant distributions		$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Sponsor Distributions	50%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
HCD Residual Payment	50%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Other Residual Payments	0%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Other Residual Payments	0%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Other Residual Payments	0%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Other Residual Payments	0%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
12% of Operating Expenses		$0																			
Asset Mgmt/Similar Fees	3.5%	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Cumulative paid Deferred Dev. Fee		$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0

Total Deferred Developer Fee budgeted for payment prior to distributions and residual receipt payments	

Comments

Total Project/**Self** Score: **0.00**
Total **Possible** Score: **176.00**

§305. Scoring Criteria

In addition to meeting the other minimum Homekey+ Program Requirements outlined in Article III, ***Applicants must score a minimum of 100 points to be eligible for funding***. Points earned from the application scoring criteria will be incorporated into the project report and the Standard Agreement. Applicants should select criteria based on what accurately represents the Project and is achievable. By earning these points, the Applicant commits to the deliverable throughout the tenure of Homekey+ Project. Scores will be based on the following:

1. Site Control (**Up to 20 Points**) — **0**

a. Identification of the site suitable for development and evidence of site control, or a plan and timeline for obtaining site control along with other supporting evidence (e.g., letter of intent, an exclusive negotiating agreement, ground lease, etc.). **NOTE**: §300-303 of this NOFA further outline site control requirements related to specific Project type. — 0

Type of site control	1	
Type of site control	2	
Type of site control	3	
Type of site control	4	
Type of site control	5	

2. Cost Containment (**Up to 15 Points**) — **0**

a. For any Project where the average total cost per Assisted Unit is below baseline per door of $200,000, one (1) point will be assigned for every $10,000 under the baseline amount. (**up to 10points**)

Total Units: 0 | Total Development Costs: $0 | Average total cost per Assisted Unit: $0 | Points Assigned: 0

b. Utilizing Publicly Owned Land: **5 points** will be awarded to Project that is located on a site selected under Excess Sites (Executive Order N-06-19) or any land declared as Surplus Land by a local agency. — 0

New Construction or Conversion Project? FALSE

Is Project located on a site selected under Excess Sites (Executive Order N-06-19) or any land declared as Surplus Land by a local agency?

3. Sustained Operating Leverage (**Up to 45 Points**) — **0**

Documented commitment of non-Homekey+ rental or operating subsidies (including funded services) that will be used to maintain the ongoing affordability and sustainability of operations of the Project. Sources include, but not limited to, Project-based vouchers, VASH vouchers, Mainstream vouchers, Faircloth to RAD conversions, tenant-based vouchers, or locally funded rental assistance.

a. Score is based on weighted subsidy type, percentage of costs covered, and length of commitment. Applications will need to score at least 10 points to be prioritized by the Homekey+ Program. See §400 on the process and determination for Projects that will be prioritized in Homekey+. — 0.00

Does the proposed project score at least 10 points to be prioritized by the Homekey+ Program. — No

- Project operation subsidies: Up to one (1) point for each year through year fifteen (15). (**up to 15 points**)

Applicant certifies that for each point assigned below, documentation meeting the EFC requirements in Article VII of this NOFA will be provide along with the Application for verification/score purposes?

Complete sheets "Operating Budget" & "Cash Flow" before this chart.				Yearly score -->	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Subsidy Name	Subsidy Type	Weight	Years	# Units	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
N/A					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
N/A					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
N/A					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
N/A					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
N/A					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
N/A					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
N/A					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
N/A					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
N/A					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
N/A					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
N/A					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
				Funding Required	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
				Gap	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE

b. Homekey+ Award Utilization: — 0

Applications that request less Homekey+ Operating Award than the Maximum Eligible Award amount will earn more points. Applications that do not request an operating Award will automatically earn 20 points. (**up to 20 points**):

- Two (2) points for each 10% increment of Maximum Eligible Homekey+ Operating Award not utilized.

Maximum Eligible Award amount (for this Project) for Homekey operating funds. $0

Homekey+ Operating Award/request for this Project: $0 | Percentage of Unutilized Amount: 0.00%

- No Homekey+ Operating Award Requested (**20 points**) | Applicant requesting an operating Homekey+ subsidy award

c. Mental Health Services Act or Behavioral Health Services Act funds committed to the Project as evidenced by a letter from the local county behavioral health department meeting the EFC requirements in Article VII of this NOFA. (**10 points**) — 0

Does the Applicant have a Mental Health Services Act or Behavioral Health Services Act funds committed to the Project?

4. Experience and Coordination (**Up to 40 Points**) — **0**

a. Demonstration of Applicant or member(s) of development team's experience in development, ownership, or operation of a Project(s) similar in scope and size to the proposed Project. **NOTE**: §300-303 of this NOFA further outline threshold experience requirements.

- Five (5) points awarded for each additional Project beyond the base threshold requirement (development, ownership, or operation of affordable rental housing or interim Projects in the last ten (10) years serving at least one member of the Target Population). (**up to 15 points**) — 0

Does the Applicants have additional Projects beyond the base threshold requirement (development, ownership, or operation of affordable rental housing or interim Projects in the last ten (10) years serving at least one member of the Target Population)?

b. Documented evidence of LSP's experience helping persons address barriers to housing stability and providing other support services, not necessarily within a housing Project. The LSP may be an Applicant, or a member of the development team described in Applicant's response to point category 4.c., below. LSP experience must be with the specific population(s) with Behavioral Health Challenges housed within the Homekey+ units to count toward points in this section (e.g., families, singles, veterans, Homeless Youth, Chronically Homeless) and must describe how the Supportive Services are culturally and linguistically competent for persons of different races, ethnicities, sexual orientations, gender identities, gender expressions, ages, and disabilities. **NOTE**: §300-303 of this NOFA further outline threshold experience requirements.

- One point awarded for each year of service experience, after 3 years. (**up to 10 points**) — 0

How many lines/rows would you need to show the LSP experience?

Name of the LSP providing experience	Exp. **Not** within a housing project?	Project Name and Address	Project completion date	Date LSP started providing services.	Project Development Type	# of Units	Housing Type	Target Population	Other Population Type(s)	# of Units restricted to Target Population	Years providing services

c. Commitment letter(s), MOU(s) or other formal agreement between the Primary and Co-Applicant(s) and/or other involved partners documenting how the complete development and management team (which includes the Applicant, developer, property manager, LSP, etc.) are connected and will work together on the Project. Applicants are encouraged to complete due diligence checklists to ensure all members of the team are aware of roles and responsibilities. (**15 Points**) — 0

File Name:	52. Commitment Letters, MOU(s) or other formal agreement	Provide documentation as stated above, be sure to include all as described therein this section.	Uploaded to HCD?

5. Community Impact (**Up to 40 Points**) — **0**

a. Assisted Units include units for large family housing types (10 points)

- At least 25% of the Assisted Units in the Project shall be two-bedroom or larger units, consistent with TCAC Regulations (4 CCR § 10325(g)(1)(A-I)). (**10 points**) — 0

Points will be provided based on just this single TCAC Regulation (4 CCR § 10325(g)(1)(A). Applicants should still meet to meet the below (B-H)

Percentage of Assisted Units with **two-bedroom** or larges Units: 0.00%

Applicant(s) certifies that one-bedroom Low-Income Units must include at least 450 square feet and two bedroom Low-Income Units must include at least 700 square feet of living space. Three-bedroom Low-Income Units shall include at least 900 square feet of living space and four-bedroom Low-Income Units shall include at least 1,100 square feet of living space, unless these restrictions conflict with the requirements of another governmental agency to which the project is subject to approval. These limits may be waived for rehabilitation projects, at the discretion of the Executive Director prior to the application submission. Bedrooms shall be large enough to accommodate two persons each and living areas shall be adequately sized to accommodate families based on two persons per bedroom;

b. Applicant waives any potential accommodation by HCD to increase income limits at year 15 from the recordation of the Affordability Covenant, as described in §304(iii). (**up to 20 points**) — 0

Applicants certifies to waive any potential accommodation by HCD to increase income limits at year 15 from the recordation of the Affordability Covenant, as described in §304(iii).

c. The extent to which the Project commits to being accessible to persons with disabilities. (**up to 10 points**) — 0

- Exceeds the state and federal accessibility requirements set forth in §508, specifically providing a minimum of 15 percent of units with features accessible to persons with mobility disabilities, as defined in 24 C.F.R. §8.22 and the parallel ADAAG 2010 and CBC provisions; (**5 points**)

Number of Units that Exceeds the state and federal accessibility requirements for persons with mobility disabilities: 0% of total Project Units

- A minimum of 10 percent of units with features accessible to persons with hearing or vision disabilities, as defined in 24 CFR Part 8.22 and the parallel ADAAG 2010 and CBC Chapter 11B provisions. (**5 points**)

Number of Units that Exceeds the state and federal accessibility requirements for persons with hearing or vision disabilities: 0% of total Project Units

6. Site Selection (**Up to 40 Points**) — **0**

File Name:	53. Amenities Map	If applicable, provide a radius map with the amenities identified by markers	Uploaded to HCD?

Site Selection (**Up to 12 points**; for Rural Projects: **up to 16 points**; for Youth Projects: **up to 15 points**) — 0

a. Is the Project site located within 1/2 mile of a bus rapid transit station, light rail station, commuter rail station, ferry terminal, bus station, or public bus stop? (4 points)

The Project site is in proximity to essential services:

b. Grocery store – a full-scale grocery store/supermarket where staples, fresh meat, and fresh produce are sold. (**up to 2 points**)

The Project site is in proximity to

NOTE: If applying for TCAC, it is advisable that the grocery store be at least 25,000 gross interior square feet.

c. Health facility – a medical clinic (not merely a private doctor's office) with a physician, physician's assistant, or nurse practitioner on-site for a minimum of 40 hours each week, or hospital (health facilities operated by Veterans Health Administration qualify if project is veteran serving). (**up to 1 point**)

The Project site is in proximity to

NOTE: A qualifying medical clinic must accept Medi-Cal payments, or Medicare payments, or Health Care for the Homeless, or have an equally comprehensive subsidy program for low-income patients.

d. Library – a book-lending public library. (**up to 1 point**)

The Project site is in proximity to

e. Pharmacy – may be included in a grocery store or health facility. (**up to 2 points**)

The Project site is in proximity to

f. A public park or a community center accessible to the general public. (**up to 1 point**)

The Project site is in proximity to

g. High speed internet service, with a minimum average download speed of 25 megabits/second must be made available to each Unit for a minimum of 15 years, free of charge to the tenants, and available within six months of the Project's placed-in-service date. Documentation of internet availability must be included in the application. (**up to 3 points**)

At proposed Project site, Applicants certifies to provide High speed internet service as described above?

h. For Projects with units serving Homeless Youth: community colleges, universities, trade schools, apprenticeship programs, employment programs, childcare centers for parenting youth, and/or community centers for youth (e.g., LGBTQ+ centers, drop-in youth centers). (up to 2 points)

Number of Homekey Assisted Units for Homeless Youth | Are there at least **two amenities** located within 1 mile radius as described above?

7. Relocation Impacts (**Up to -20 Points**) — **0**

a. For any Project resulting in the permanent displacement of residents (not businesses or farm operations).

Does the proposed Project trigger State Relocation Assistance Law? 0 | Total Project Units

Will the proposed Project be resulting in the **permanent** displacement of residents?

8. Negative Points

a. Negative Points assessed by HCD to the Applicant pursuant to the Department's Negative Points Policy.

General NOTE: In the event of program oversubscription, where Applicants have the same score and the same date and time stamp, HCD may consider additional criteria as a tiebreaker, including, but not limited to, cost-effectiveness, community impact (i.e. meeting the needs of individuals with behavioral health challenges), affirmatively furthering fair housing, innovative housing types, tenant stability and proximity to transit, and services and amenities.

End of Document

2025 TCAC Threshold Basis Limit (TBL) for HCD Developer Fee UMR §8312(b)&(c) and HCD High Cost Test for HCD Limits on Development Costs 2017 UMR §8311(a) & (b) Complete all yellow shaded cells below.

Project Name: County: Project's Proposed Tax Credits:

HCD Phase: Origination

Unit Size	2025 TCAC Threshold Basis Limits (TBL)	# of Units	Basis x Number of Units		
				TOTAL **UNADJUSTED** THRESHOLD BASIS LIMIT (TBL):	$0
SRO/Studio	$0	0	$0	TOTAL **HCD** ADJ. THRESHOLD BASIS LIMIT:	$0
1 Bedroom	$0	0	$0	Adjusted Threshold Basis Limit multiplied by 160%:	$0
2 Bedrooms	$0	0	$0	HCD HIGH COST TEST RESULT:	0%
3 Bedrooms	$0	0	$0		
4+ Bedrooms	$0	0	$0	**Total Eligible Basis**	$0

Manager Units in Project:	0	TOTAL UNITS:	0

ADJUSTMENTS Cal Code of Reg §10327(c)(5)(A-F)

(A)	Adjustment for Projects paid in whole or part out of public funds subject to a legal requirement for the payment of state or federal prevailing wages or financed in part by a labor-affiliated organization requiring the employment of construction workers who are paid at least state or federal prevailing wages (20%).		$0
	For Projects certifies that (1) they are subject to a Project labor agreement within the meaning of §2500(b)(1) of the Public Contract Code, or (2) they will use a skilled and trained workforce as defined by §25536.7 of the Health and Safety Code to perform all onsite work within an apprenticeable occupation in the building and construction trades (5%).		$0
(B)	For New construction Projects required to provide parking beneath residential units (not "tuck under" parking) or through construction of an on-site parking structure of two or more levels (10%).		$0
(C)	For Projects where a day care center is part of the development (2%).		$0
(D)	For Projects where 100 percent of the units are for Special Needs populations (2%).		$0
(E)	Project applying under §10325 or §10326 of the TCAC regulations that includes one or more of the features below (up to 10%).		$0
(F)	Project requires seismic upgrading of existing structures, and/or requires toxic or other environmental mitigation as certified by the Project architect/ engineer (lesser of costs or 15% basis adjustment).		$0
	If Yes, select type of work:	Enter Certified Costs of Work:	
(G)	Local development impact fees required to be paid to local government entities. Certification from local entities assessing fees also required. **WAIVED IMPACT FEES ARE INELIGIBLE.**		
(H)	Projects where at least 95% of the Project's upper floor units are serviced by an elevator (10%).		$0
(I)	Projects wherein at least 95% of the building(s) is constructed as Type I as defined in the California Building Code, in which case, the Type III 10% increase below is not allowed (15%).		$0
(J)	Projects wherein at least 95% of the building(s) is constructed as (1) a Type III as defined in the California Building Code, or (2) a Type III/Type I combination, in which case, the Type I 15% increase above is not be allowed (10%).		$0
(K)	Projects within a county with an unadjusted 9% threshold basis limit for a 2-bedroom unit equal or less than $500,000 and within a census tract designated on the TCAC/HCD Opportunity Map as Highest or High Resource (10%).	No	$0
	County Eligibility:	TCAC/HCD Opportunity Area Map Tract ID #:	Opportunity Map Resource Level:

End of Document

2 4
3 5
4 6
5 7
6 8

2025 BASIS LIMITS

County	SRO & STUDIO	1 BEDROOM	2 BEDROOMS	3 BEDROOMS	4+ BEDROOMS
Alameda	$473,390	$545,814	$658,400	$842,752	$938,878
Alpine	$352,022	$405,878	$489,600	$626,688	$698,170
Amador	$352,022	$405,878	$489,600	$626,688	$698,170
Butte	$319,236	$368,076	$444,000	$568,320	$633,144
Calaveras	$352,022	$405,878	$489,600	$626,688	$698,170
Colusa	$352,022	$405,878	$489,600	$626,688	$698,170
Contra Costa	$473,390	$545,814	$658,400	$842,752	$938,878
Del Norte	$352,022	$405,878	$489,600	$626,688	$698,170
El Dorado	$331,890	$382,666	$461,600	$590,848	$658,242
Fresno	$307,732	$354,812	$428,000	$547,840	$610,328
Glenn	$352,022	$405,878	$489,600	$626,688	$698,170
Humboldt	$352,022	$405,878	$489,600	$626,688	$698,170
Imperial	$324,988	$374,708	$452,000	$578,560	$644,552
Inyo	$352,022	$405,878	$489,600	$626,688	$698,170
Kern	$307,732	$354,812	$428,000	$547,840	$610,328
Kings	$307,732	$354,812	$428,000	$547,840	$610,328
Lake	$352,022	$405,878	$489,600	$626,688	$698,170
Lassen	$352,022	$405,878	$489,600	$626,688	$698,170
Los Angeles	$437,727	$504,695	$608,800	$779,264	$868,149
San Francisco	$689,665	$795,177	$959,200	$1,227,776	$1,367,819
San Joaquin	$307,732	$354,812	$428,000	$547,840	$610,328
San Luis Obispo	$404,366	$466,230	$562,400	$719,872	$801,982
San Mateo	$532,060	$613,460	$740,000	$947,200	$1,055,240
Santa Barbara	$404,366	$466,230	$562,400	$719,872	$801,982
Santa Clara	$532,060	$613,460	$740,000	$947,200	$1,055,240
Santa Cruz	$404,366	$466,230	$562,400	$719,872	$801,982
Shasta	$319,236	$368,076	$444,000	$568,320	$633,144
Sierra	$352,022	$405,878	$489,600	$626,688	$698,170
Siskiyou	$352,022	$405,878	$489,600	$626,688	$698,170
Solano	$384,234	$443,018	$534,400	$684,032	$762,054
Sonoma	$384,234	$443,018	$534,400	$684,032	$762,054
Stanislaus	$307,732	$354,812	$428,000	$547,840	$610,328
Sutter	$331,890	$382,666	$461,600	$590,848	$658,242
Tehama	$352,022	$405,878	$489,600	$626,688	$698,170
Trinity	$352,022	$405,878	$489,600	$626,688	$698,170

Tulare	$307,732	$354,812	$428,000	$547,840	$610,328
Tuolumne	$352,022	$405,878	$489,600	$626,688	$698,170
Ventura	$404,366	$466,230	$562,400	$719,872	$801,982
Yolo	$331,890	$382,666	$461,600	$590,848	$658,242
Yuba	$331,890	$382,666	$461,600	$590,848	$658,242

HCD 2024 Developer Fee Calculator - 04/03/2024

TCAC regulations - 04/03/2024

Project Name:

Project Phase: Origination

ADMINISTRATIVE NOTICE NO. 24-03

Per "ADMINISTRATIVE NOTICE NO. 24-03", does the proposed Project have a previous HCD award to which the new Developer Fee not apply?

Certification & Legal Disclosure

On behalf of the entity identified in the signature block below, I certify that:

1. The information, statements and attachments included in this application are, to the best of my knowledge and belief, true and correct.

2. I possess the legal authority to submit this application on behalf of the entity identified in the signature block.

3. The following is a complete disclosure of all identities of interest - of all persons or entities, including affiliates, that will provide goods or services to the Project either (a) in one or more capacity or (b) that qualify as a "Related Party" to any person or entity that will provide goods or services to the Project. "Related Party" is defined in Section 10302 of the California Code of Regulations (CTCAC Regulations):

4. As of the date of application, the Project, or the real property on which the Project is proposed (Property) is not party to or the subject of any claim or action at the State or Federal appellate level.

5. I have disclosed and described below any claim or action undertaken which affects or potentially affects the feasibility of the Project.

In addition, I acknowledge that all information in this application and attachments is public, and may be disclosed by the State.

Printed Name	Title of Signatory	Signature	Date

Legal Disclosure

For purposes of the following questions, and with the exceptions noted below, the term “Applicant” shall include the applicant and joint applicant, and any subsidiary of the applicant or joint applicant if the subsidiary is involved in (for example, as a guarantor) or will be benefited by the application or the project.

In addition to each of these entities themselves, the term “Applicant” shall also include the direct and indirect holders of more than ten percent (10%) of the ownership interests in the entity, as well as the officers, directors, principals and senior executives of the entity if the entity is a corporation, the general and limited partners of the entity if the entity is a partnership, and the members or managers of the entity if the entity is a limited liability company. For projects using tax-exempt bonds, it shall also include the individual who will be executing the bond purchase agreement.

The following questions must be responded to for each entity and person qualifying as an "Applicant," or "joint applicant" as defined above.

Explain all positive responses on a separate sheet and include with this questionnaire in the application.

Exceptions:

Public entity applicants without an ownership interest in the proposed project, including but not limited to cities, counties, and joint powers authorities with 100 or more members, are not required to respond to this questionnaire.

Members of the boards of directors of non-profit corporations, including officers of the boards, are also not required to respond. However, chief executive officers (Executive Directors, Chief Executive Officers, Presidents or their equivalent) must respond, as must chief financial officers (Treasurers, Chief Financial Officers, or their equivalent).

Civil Matters	
1. Has the applicant filed a bankruptcy or receivership case or had a bankruptcy or receivership action commenced against it, defaulted on a loan or been foreclosed against in *past ten years*?	
2. Is the applicant currently a party to, or been notified that it may become a party to, any civil litigation that may materially and adversely affect (a) the financial condition of the applicant’s business, or (b) the project that is the subject of the application?	
3. Have there been any administrative or civil settlements, decisions, or judgments against the applicant within the past ten years that materially and adversely affected (a) the financial condition of the applicant’s business, or (b) the project that is the subject of the application?	
4. Is the applicant currently subject to, or been notified that it may become subject to, any civil or administrative proceeding, examination, or investigation by a local, state or federal licensing or accreditation agency, a local, state or federal taxing authority, or a local, state or federal regulatory or enforcement agency?	
5. In the past ten years, has the applicant been subject to any civil or administrative proceeding, examination, or investigation by a local, state or federal licensing or accreditation agency, a local, state or federal taxing authority, or a local, state or federal regulatory or enforcement agency that resulted in a settlement, decision, or judgment?	
Criminal Matters	
6. Is the applicant currently a party to, or the subject of, or been notified that it may become a party to or the subject of, any criminal litigation, proceeding, charge, complaint, examination or investigation, of any kind, involving, or that could result in, felony charges against the applicant?	
7. Is the applicant currently a party to, or the subject of, or been notified that it may become a party to or the subject of, any criminal litigation, proceeding, charge, complaint, examination or investigation, of any kind, involving, or that could result in, misdemeanor charges against the applicant for matters relating to the conduct of the applicant’s business?	
8. Is the applicant currently a party to, or the subject of, or been notified that it may become a party to or the subject of, any criminal litigation, proceeding, charge, complaint, examination or investigation, of any kind, involving, or that could result in, criminal charges (whether felony or misdemeanor) against the applicant for any financial or fraud related crime?	
9. Is the applicant currently a party to, or the subject of, or been notified that it may become a party to or the subject of, any criminal litigation, proceeding, charge, complaint, examination or investigation, of any kind, that could materially affect the financial condition of the applicant’s business?	
10. Within the past ten years, has the applicant been convicted of any felony?	
11. Within the past ten years, has the applicant been convicted of any misdemeanor related to the conduct of the applicant’s business?	
12. Within the past ten years, has the applicant been convicted of any misdemeanor for any financial or fraud related crime?	

Printed Name	Title of Signatory	Signature	Date

Local Approvals and Environmental Review Verification

To the Applicant: Submit this form to the agency or department of local government responsible for administration of the items listed. This form may be submitted to more than one agency or department if necessary. If an item is not required, include the reason why in box provided.

Project Applicant/Co-Applicant:	
Applicant/Co-Applicant Address:	
Applicant/Co-Applicant City:	
Project Name:	
Project Address/site:	
Project City:	
Project County:	
Assessor Parcel Numbers (APNs):	FALSE

To the local jurisdiction: The Applicant named above has submitted an application to the State Dept. of Housing and Community Development (HCD) requesting funding for the Project named above, under the Homekey+ Program. Projects submitted for program funding are subject continuous, over the Counter basis, with exceptions noted in Section 400. Project readiness is a component of that process. Verification of items listed below will be used in evaluating Homekey+ applications.

Is this Project approved "by right"?

		Applicable for this Project	% Complete	Approved Date
CEQA Environmental Clearance is in progress, approved, or determined to be unnecessary	**CEQA**			
NEPA Environmental Clearance is in progress, approved, or determined to be unnecessary	**NEPA**			

Specify in the box below, items not required and explain why (include documentation, if applicable):

	Required for this Project?	Under Review?	Verified as Completed and date completed
All necessary, discretionary, and non-discretionary public land use approvals except building permits and other ministerial approvals are:			

Specify in the box below, items not required and explain why (include documentation, if applicable):

Dated:

Statement Completed by (please print):	
Signature:	
Title:	
Agency or Department:	
Agency or Department Address:	
Agency or Department Phone:	

Full list of Uploads

Green checkmark =

X mark, means not a
responsibility of the

FILE NAME		FILE DESCRIPTION		
HCD Excel Application				
File Name	01. HK Application Workbook	HK Application Excel Workbook.		✓
"Project Overview" Sheet/Tab				
File Name	02a. App1 Cert & Legal Disclosure	Reference: Applicant Certification Worksheet.		✗
File Name	02b. App1 Authorizing Resolution	Authorizing Resolution		✗
File Name	02c. App1 Signature Block	Signature Block - upload in Microsoft Word Document.		✗
File Name	02d. App1 TIN Form	Completed Government TIN form.		✗
File Name	03a. Co-App1 Cert & Legal Disclosure	Reference: Applicant Certification Worksheet.		✗
File Name	03b. Co-App1 OrgDoc1, Co-App1 OrgDoc2, etc.	Reference: Entity Org Docs Worksheet.		✗
File Name	03c. Co-App1 Authorizing Resolution	Authorizing Resolution		✗
File Name	03e. Co-App1 Signature Block	Signature Block - upload in Microsoft Word Document.		✗
File Name	03f. Co-App1 Cert of Good Standing	Dated 30 days or less from the application due date.		✗
File Name	03g. Co-App1 EIN Verification	EIN Verification (IRS form SS-4) (except jurisdictions)		✗
File Name	03h. Co-App1 Tax-Exempt Status	Evidence of tax-exempt status from IRS and FTB for Corporations (Non-Profits Only).		✗
File Name	03i. Co-App1 Payee Data Record	Completed Payee Data Record.		✗
File Name	03j. Co-App1 TIN Form	Completed Government TIN form (jurisdictions only).		✗
File Name	04a. Co-App2 Cert & Legal Disclosure	Reference: Applicant Certification Worksheet.		✗
File Name	04b. Co-App2 OrgDoc1, Co-App2 OrgDoc2, etc.	Reference: Entity Org Docs Worksheet.		✗
File Name	04c. Co-App2 Authorizing Resolution	Authorizing Resolution		✗
File Name	04e. Co-App2 Signature Block	Signature Block - upload in Microsoft Word Document.		✗
File Name	04f. Co-App2 Cert of Good Standing	Dated 30 days or less from the application due date.		✗
File Name	04g. Co-App2 EIN Verification	EIN Verification (IRS form SS-4) (except jurisdictions)		✗
File Name	04h. Co-App2 Tax-Exempt Status	Evidence of tax-exempt status from IRS and FTB for Corporations (Non-Profits Only).		✗
File Name	04i. Co-App2 Payee Data Record	Completed Payee Data Record.		✗
File Name	04j. Co-App2 TIN Form	Completed Government TIN form (jurisdictions only).		✗

File Name	05a. Co-App3 Cert & Legal Disclosure	Reference: Applicant Certification Worksheet.		✗
File Name	05b. Co-App3 OrgDoc1, Co-App3 OrgDoc2, etc.	Reference: Entity Org Docs Worksheet.		✗
File Name	05c. Co-App3 Authorizing Resolution	Authorizing Resolution		✗
File Name	05e. Co-App3 Signature Block	Signature Block - upload in Microsoft Word Document.		✗
File Name	05f. Co-App3 Cert of Good Standing	Dated 30 days or less from the application due date.		✗
File Name	05g. Co-App3 EIN Verification	EIN Verification (IRS form SS-4) (except jurisdictions)		✗
File Name	05h. Co-App3 Tax-Exempt Status	Evidence of tax-exempt status from IRS and FTB for Corporations (Non-Profits Only).		✗
File Name	05i. Co-App3 Payee Data Record	Completed Payee Data Record.		✗
File Name	05j. Co-App3 TIN Form	Completed Government TIN form (jurisdictions only).		✗

File Name	06a. Co-App4 Cert & Legal Disclosure	Reference: Applicant Certification Worksheet.		✗
File Name	06b. Co-App4 OrgDoc1, Co-App4 OrgDoc2, etc.	Reference: Entity Org Docs Worksheet.		✗
File Name	06c. Co-App4 Authorizing Resolution	Authorizing Resolution		✗
File Name	06e. Co-App4 Signature Block	Signature Block - upload in Microsoft Word Document.		✗
File Name	06f. Co-App4 Cert of Good Standing	Dated 30 days or less from the application due date.		✗
File Name	06g. Co-App4 EIN Verification	EIN Verification (IRS form SS-4) (except jurisdictions)		✗
File Name	06h. Co-App4 Tax-Exempt Status	Evidence of tax-exempt status from IRS and FTB for Corporations (Non-Profits Only).		✗
File Name	06i. Co-App4 Payee Data Record	Completed Payee Data Record.		✗
File Name	06j. Co-App4 TIN Form	Completed Government TIN form (jurisdictions only).		✗

File Name	07a. MGP Cert & Legal Disclosure	Reference: Applicant Certification Worksheet.		✗
File Name	07b. MGP OrgDoc1, MGP OrgDoc2, etc.	Reference: Entity Org Docs Worksheet.		✗
File Name	07c. MGP Resolution	Authorizing Resolution.		✗
File Name	07e. MGP Signature Block	Signature Block - upload in Microsoft Word Document.		✗
File Name	07f. MGP Cert of Good Standing	Dated 30 days or less from the application due date.		✗
File Name	07g. MGP Tax-Exempt Status	Evidence of tax-exempt status from IRS and FTB for Corporations (Non-Profits Only).		✗
File Name	07h. MGP Payee Data Record	Completed Payee Data Record.		✗

File Name	08a. AGP1 Cert & Legal Disclosure	Reference: Applicant Certification Worksheet.		✗
File Name	08b. AGP1 OrgDoc1, AGP1 OrgDoc2, etc.	Reference: Entity Org Docs Worksheet.		✗
File Name	08c. AGP1 Resolution	Authorizing Resolution.		✗
File Name	08e. AGP1 Signature Block	Signature Block - upload in Microsoft Word Document.		✗

File Name	08f. AGP1 Cert of Good Standing	Dated 30 days or less from the application due date.		✗
File Name	08g. AGP1 Tax-Exempt Status	Evidence of tax-exempt status from IRS and FTB for Corporations (Non-Profits Only).		✗
File Name	08h. AGP1 Payee Data Record	Completed Payee Data Record.		✗

File Name	09a. AGP2 Cert & Legal Disclosure	Reference: Applicant Certification Worksheet.		✗
File Name	09b. AGP2 OrgDoc1, AGP2 OrgDoc2, etc.	Reference: Entity Org Docs Worksheet.		✗
File Name	09c. AGP2 Resolution	Authorizing Resolution.		✗
File Name	09e. AGP2 Signature Block	Signature Block - upload in Microsoft Word Document.		✗
File Name	09f. AGP2 Cert of Good Standing	Dated 30 days or less from the application due date.		✗
File Name	09g. AGP2 Tax-Exempt Status	Evidence of tax-exempt status from IRS and FTB for Corporations (Non-Profits Only).		✗
File Name	09h. AGP2 Payee Data Record	Completed Payee Data Record.		✗

File Name	10a. MLLC Cert & Legal Disclosure	Reference: Applicant Certification Worksheet.		✗
File Name	10b. MLLC OrgDoc1, MLLC OrgDoc2, etc.	Reference: Entity Org Docs Worksheet.		✗
File Name	10c. MLLC Resolution	Authorizing Resolution.		✗
File Name	10e. MLLC Signature Block	Signature Block - upload in Microsoft Word Document.		✗
File Name	10f. MLLC Cert of Good Standing	Dated 30 days or less from the application due date.		✗
File Name	10g. MLLC Tax-Exempt Status	Evidence of tax-exempt status from IRS and FTB for Corporations (Non-Profits Only).		✗
File Name	10h. MLLC Payee Data Record	Completed Payee Data Record.		✗

File Name	11. LLC OA	Operating Agreement		✗
File Name	11. LP-1	Certificate of Limited Partnership (LP-1)		✗
File Name	11. LP-2	Amendment to Certificate of Limited Partnership (LP-2)		✗
File Name	11. LPA	Limited Partnership Agreement		✗

File Name	12. Letter local county BHD	Provide the Department with letter from the local county behavioral health department describing the support for the Project (capital, operating or service commitments, referrals, stakeholder collaboration, etc.)		✗
File Name	13. Unsuccessful tax credit-bonds	Provide evidence if your unsuccessful application for tax credit/bonds.		✗
File Name	14. Existing HCD Award	Provide a copy of your existing HCD award letter - Upload as Capital EFCs		✗
File Name	15. Tax Credit Reservation	If the Project has already received a tax credit reservation, upload documentation - Upload as Capital EFCs		✗
File Name	16. Utility allowance	Schedule of utility allowances.		✗
File Name	17. CES Participation, CoC and Subsidy Form	Provide a plan for tenant selection, and it shall be reasonably detailed and comprehensive.		✗
File Name	18. Relocation Plan	Relocation Plan.		✗
File Name	19. CEQA	Copy of CEQA Determination Documents (if applicable).		✗

File Name	20. NEPA	NEPA Authority to Use Grant Funds issued by the Responsible Entity if the project is proposing use of federal funds. Note: Not required at time of application, but required prior to disbursements.		✗

"Max Funds & Unit Mix" Sheet/Tab				
File Name	21. Funding Limit Exemption Form	Provide justification for the need in excess funding above the funding limits. Applicants asserting the Project is in a high-cost area shall provide data from HUD, the United States Census Bureau, or another authoritative source to validate the assertion.		✗

"Supportive Services Plan" Sheet/Tab				
File Name:	22. LSP Contract	Lead Service Provider Contract, Agreement or Letter of Intent.		✗
File Name:	22. LSP NonApplicant Contract	Lead Service Provider Contract, Agreement or Letter of Intent (non-Applicant provider).		✗
File Name:	23. LSP resumes	Provide resumes of Supportive Services staff who will be overseeing Case Managers on the Project. Not required for Assisted Units with Veterans Affairs Supportive Housing (HUD-VASH) vouchers		✗
File Name	24. Property Management Plan	Submit Property Management Plan and Tenant Selection Policies		✗

"Threshold Requirements" Sheet/Tab				
File Name	25. Tribal Entity Waiver	Modifications or waivers as provided for in HSC §50406, subdivision (p) (Assembly Bill 1010 (Chapter 660, Statutes of 2019).		✗
File Name	26. Project Ownership Structure	Provide a "Project Ownership Structure" chart.		✗
File Name	27. Non-Discrimination Policy	Provide a non-discrimination policy.		✗
File Name	28. Equity Statement	Provide Racial & Gender Equity statement by answering the above question.		✗
File Name	29. Engaging the Target Population Statement	Provide a response to the question above.		✗
File Name	30. Site Control	Documentation of site control in accordance with UMR §8303, including a summary explanation of site control and values for applications with multiple or non-contiguous parcels, scattered sites, lot line adjustments, phased projects, or other complex land and acquisition transactions, see Article III, §300(x)(a-h).		✗
File Name	31. Indian Country Verification	Documentation verifying land is located in Indian Country as defined by 18 USC 1151.		✗
File Name	32. Fee or Trust Land Verification	Documentation verifying land is located on Fee or Trust Land.		✗
File Name	33. Project Use Change - Lot Split	For Projects that require a use change, lot split or other local approvals for permanent housing, include a commitment and plan to facilitate or expedite those processes, to not delay expenditure and occupancy requirements.		✗
File Name	34. Preliminary Title Report	Provide a preliminary report dated within 90 days of application due date. For projects developed in Indian country, an attorney's opinion regarding chain of title and current title status is acceptable in lieu of a title report.		✗

File Name	35. Development Plan	Provide a detailed development plan that supports acquisition of a site, completion of rehabilitation or construction, occupancy, and fund expenditure before all program deadlines, factoring in entitlements, permits, procurement, potential construction delays and supply chain issues, and demonstrates evidence of strong organizational and financial capacity to develop the Project.		✗
File Name	36. Appraisal	Applicants shall provide an appraisal prepared no earlier than 12 months prior to application submission date for all Projects seeking acquisition funds from Homekey+ or if property value will be used as local match. The appraisal must comply with the Homekey+ requirements outlined in the Homekey+ Appraisal Guidance document, which will be available on the Homekey+ website.		✗
File Name	37. Rehab Description	Narrative description of current condition of structure(s) and overall scope of work.		✗
File Name	38. PNA or CAN	PNA or CNA prepared by a qualified independent third-party contractor.		✗
File Name	39. Market Study	Provide a Market Study dated within the 12 months from Application submission.		✗
File Name	40. Env. Report 1	Environmental Site Assessment Phase I (prepared or updated no earlier than 12 months prior to the application due date).		✗
File Name	41. Env. Report 2	If Environmental Site Assessment Phase I requires a Phase II study, submit a Phase II (prepared or updated no earlier than 12 months prior to the application due date).		✗
File Name	42. Relocation narrative	Applicant's Relocation Assistance Narrative shall include or identify the following: §300(xvii)(a-i)		✗
File Name	43. EFC #1, EFC #2, etc.	Provide a letter or other document for all funding commitments for developement and operating sources.		✗
File Name	44. Housing First Statement	Provide relevant experience administering a Project in accordance with the core components of Housing First (Welfare & Institutions Code § 8255).		✗
File Name	45. One-for-one Replacement	Provide a letter of commitment to ensure one-for-one replacement of units.		✗
File Name	46. Existing Unit Mix	Provide an existing unit mix of the current site including residential/commercial shared space. (Units, kitchens, rooms, bathrooms, Unit Amenities/Features, parking spaces, etc.		✗
File Name	47. Aerial Site Map	Provide an arerial map indicating the original target housing location and all proposed housing location(s).		✗
File Name	48. Justification outside the neighborhood	Provide justification explaining why it is necessary to locate this replacement housing outside the target neighborhood (i.e., offsite) and how doing so supports and enables the Target Population to maintain housing.		✗

"Scoring" Sheet/Tab				
File Name:	49. Excess state-owned property	Provide documentation/agreement for ground lease with the state to create affordable housing on Excess state-owned property.		✗
File Name:	50. Local Surplus Land	Provide documentation that the proposed Project is located on a site designated as surplus land by a local government. For written compliance with the Surplus Land Act – either an exempt surplus findings letter or standard surplus disposition findings letter from HCD.		✗
File Name:	51. MHSA/BHSA letter	Provide a letter from the local county behavioral health department meeting the EFC requirements in Article VII of this NOFA.		✗

File Name:	52. Commitment Letters, MOU(s) or other formal agreement	Provide documentation as stated above, be sure to include all as described therein this section.		✗
File Name:	53. Amenities Map	If applicable, provide a radius map with the amenities identified by markers		✗
File Name:	54. High Speed Internet	Provide documentation of high speed internet availability.		✗

"Certification & Legal" Sheet/Tab				
File Name	55. Cert-Legal Explanation	Letter of explanation for any "Yes" answers or red shaded items above. Copy this sheet and upload separate from the application.		✗

OTHER				
File Name	56. Other 1, Other 2, Other 3, etc.	Any other documentation that would assist HCD to understand and/or assist with Threshold, Scoring, or Program Requirements.		✓ Only if ap

Application Development Team (ADT) Support Form

V2 3/10/25

Please complete the "yellow" cells in the form below and email a copy to: **AppSupport@hcd.ca.gov** **and** **Homekey.Help@hcd.ca.gov**. A member of the Application Development Team will respond to your request.

Full Name:		Date Requested:		Application Version Date:	3/10/25

Organization:		Email:		Contact Phone:	

Issue #	Sheet/Tab name	Section	Cell#	Describe the issue/error or suggestion	Urgency	ADT Status	Status Date
1							
2							
3							
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