

File No. 140104

Committee Item No. _____

Board Item No. 17

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee _____

Date _____

Board of Supervisors Meeting

Date February 11, 2014

Cmte Board

- | | | |
|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Motion |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Resolution |
| <input type="checkbox"/> | <input type="checkbox"/> | Ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Digest |
| <input type="checkbox"/> | <input type="checkbox"/> | Budget Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Introduction Form (for hearings) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/> | MOU |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Information Form |
| <input type="checkbox"/> | <input type="checkbox"/> | Budget and Budget Justification |
| <input type="checkbox"/> | <input type="checkbox"/> | Subcontract Budget |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Contract/Agreement |
| <input type="checkbox"/> | <input type="checkbox"/> | Agreement/Award Letter |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Application |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Correspondence |

OTHER

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Completed by: Joy Lamug

Date February 6, 2014

Completed by: _____

Date _____

An asterisked item represents the cover sheet to a document that exceeds 20 pages. The complete document is in the file.

1 [Apply For Grants - Housing Related Parks Program]

2
3 **Resolution authorizing the Recreation and Park Department to apply for grants from**
4 **the California Department of Housing and Community Development.**

5
6 WHEREAS, The State of California, Department of Housing and Community
7 Development (Department) has issued a Notice of Funding Availability (NOFA) dated October
8 2, 2013, under its Housing Related Parks (HRP) Program; and

9 WHEREAS, The City and County of San Francisco (Applicant) desires to apply for a
10 HRP Program grant and submit the 2013 Designated Program Year Application Package
11 released by the Department for the HRP Program; and

12 WHEREAS, The Department is authorized to approve funding allocations for the HRP
13 Program, subject to the terms and conditions of the NOFA, Program Guidelines, Application
14 Package, and Standard Agreement; now, therefore, be it

15 RESOLVED, Applicant is hereby authorized and directed to apply for and submit to the
16 Department the HRP Program Application Package released October 2013 for the 2013
17 Designated Program Year. If the application is approved, the Applicant is hereby authorized
18 and directed to enter into, execute, and deliver a State of California Standard Agreement
19 (Standard Agreement), and any and all other documents required or deemed necessary or
20 appropriate to secure the HRP Program Grant from the Department, and all amendments
21 thereto (collectively, the "HRP Grant Documents"); and, be it

22 FURTHER RESOLVED, Applicant shall be subject to the terms and conditions as
23 specified in the Standard Agreement. Funds are to be used for allowable capital asset project
24 expenditures to be identified in **Exhibit A** of the Standard Agreement. The application in full
25 is incorporated as part of the Standard Agreement. Any and all activities funded, information

1 provided, and timelines represented in the application are enforceable through the Standard
2 Agreement. Applicant hereby agrees to use the funds for eligible capital asset(s) in the
3 manner presented in the application as approved by the Department and in accordance with
4 the NOFA and Program Guidelines and Application Package; and, be it

5 FURTHER RESOLVED, That General Manager of the San Francisco Recreation and
6 Park Department and any designee(s) is/are authorized to execute in the name of Applicant
7 the HRP Program Application Package and the HRP Grant Documents as required by the
8 Department for participation in the HRP Program.

OFFICE OF THE MAYOR
SAN FRANCISCO



EDWIN M. LEE
MAYOR

TO: Angela Calvillo, Clerk of the Board of Supervisors
FROM: *EL* Mayor Edwin M. Lee *EL*
RE: Apply For Housing Related Parks Grants
DATE: February 4, 2014

Attached for introduction to the Board of Supervisors is the resolution authorizing the San Francisco Recreation and Park Department to apply for grants from the California Department of Housing and Community Development.

I request that this item be referred for adoption without committee reference.

Should you have any questions, please contact Jason Elliott (415) 554-5105.

RECEIVED
BOARD OF SUPERVISORS
SAN FRANCISCO

EL
FEB -4 PM 3:10



Department of Housing and Community Development
HOUSING-RELATED PARKS PROGRAM

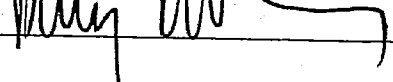
Grant Application
2013 Designated Program Year NOFA

Applicant Information

Applicant:	City and County of San Francisco, Recreation and Park Department		
Mailing Address:	30 Van Ness Avenue, Fifth Floor		
City:	San Francisco		
State:	California	Zip Code:	94102-6020
County:	San Francisco		
Website:	www.sfrecpark.org		
Authorized Representative Name:	Philip A. Ginsburg		
Authorized Representative Title:	General Manager, San Francisco Recreation and Park Department		
Phone:	415 831-2701	Fax:	415 831-2096
Email:	philip.ginsburg@sfgov.org		
Contact Person Name:	Toni Moran		
Contact Person Title:	Environmental Specialist - Grants		
Phone:	415 581-2555	Fax:	415 581-2540
Email:	toni.moran@sfgov.org		

Applicant Certification

As the official designated by the governing body, I hereby certify that if approved by HCD for funding through the HRP Program, the City and County of San Francisco, Recreation and Park Department assumes the responsibilities specified in the HRP Program Notice of Funding Availability and Program Guidelines and certifies that the information, statements, and attachments contained in this application are, to the best of my knowledge and belief, true and correct.

Signature:  Name: Philip A. Ginsburg
Date: January 21, 2014 Title: General Manager

Updated 12/10/2013

Legislative Information

Please list all representatives for the City/County. Attach additional sheets if necessary.
Legislative information is available at <http://www.leginfo.ca.gov>.

Applicant: City and County of San Francisco, Recreation and Park Department

	District	Legislator Name
Federal Congressional District:	8	Congresswoman Nancy Pelosi
		Senator Diane Feinstein
		Senator Barbara Boxer
State Assembly District:	17	Tom Ammiano
	19	Phil Ting
State Senate District:	11	Mark Leno
	8	Leland Yee

Eligibility Threshold Requirements

Applicant: City and County of San Francisco, Recreation and Park Department

1. HOUSING ELEMENT COMPLIANCE

Does the applicant have an adopted housing element which has been found to be in substantial compliance with Housing Element Law pursuant to Government Code Section 65585 which was submitted to the Department by the issuance date of the NOFA?

YES Date of HCD Review Letter: March 24, 2011 NO

2. ELIGIBLE UNITS

Did the applicant issue building permits or certificates of occupancy for Eligible Units during the Designated Program Year 2013 which meet the affordability requirements for extremely low-, very low- or low-income households?

2010 2011 2012 2013

3. ANNUAL PROGRESS REPORT SUBMITTAL

Has the applicant submitted to the Department the Annual Progress Report (APR) for the applicable calendar years, pursuant to Government Code Section 65400, on the jurisdiction's progress in implementing the housing element prior to January 22, 2014?

For example: applicants must submit the 2009 APR in order to be eligible to receive funding for Eligible Units from 2010. To receive funding for 2011 Eligible Units, the 2010 APR must be submitted to the Department. If applying for funds based on Eligible Units from both 2010 and 2011, both the CY 2009 and 2010 APRs must be submitted. Please refer to the chart below:

☒

4. MINIMUM GRANT AMOUNT

Does the applicant meet the minimum grant amount of \$75,000, including any bonus awards, based on Eligible Units from the 2013 Designated Program Year?

YES NO

Note: If the applicant has answered NO to any of the questions above, the application will not be reviewed further and the applicant is ineligible for funding.

Regional Blueprint Conformance

Applicant: City and County of San Francisco, Recreation and Park Department

The applicant must demonstrate that it has conformed applicable sections of its adopted General Plan, including the land use and open space elements, to the land use provisions of the applicable adopted Regional Blueprint Plan. The documentation must include ALL of the following, in a manner specific to the grant application for the proposed park improvements:

- ☐ Copies of relevant text, diagrams, or maps from both the General Plan and Regional Blueprint Plan;
- ☐ A resolution from the elected body of the applicant jurisdiction describing the basis of conformity between the two plans; and
- ☐ A letter or resolution from the Council of Governments (COG) having jurisdiction over the Regional Blueprint Plan attesting to the conformity of the general plan with the adopted Regional Blueprint Plan.

Park and Recreation Facility (Park Project) Description

Applicant:	City and County of San Francisco, Recreation and Park Department		
Park Project Name:	Kimbell Playground		
Park Project Location (include address, if known, or otherwise indicate nearest intersection): 1900 Geary Blvd., San Francisco, CA 94115			
Park Project Census Tract: <small>(please use 11-digit census tract number as detailed in instructions)</small>	06-075-0158-00. Borders eligible HUD census track		
Senate & Assembly District for Park Project Location:	Senate District:		11
	Assembly District:		17
Park Project Summary:			
Renovation of the existing playground and park site, and the existing clubhouse. The site work will consist of removal of existing play area, structures and sand, relocation of new play area adjacent to Geary and Steiner Streets, new pathways, planting, irrigation, new site lighting. The building work will consist of reconfiguring interior walls, adding new doors, modifying plumbing, upgrading interior electrical lighting, cutting back roof eaves, and re-			
Will the Park Project be in support of any Infill developments, as described in Section 106(F)? * If so, please name at least one development and indicate the development status (indicate N/A if not applicable) <u>OR</u> Does the jurisdiction's adopted General Plan conform to the region's adopted Regional Blueprint Plan? If so, please complete the Regional Blueprint Bonus Coversheet (next tab) and attach supporting documentation as required.			
<input type="checkbox"/> Infill-Supporting <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES		OR	<input type="checkbox"/> Regional Blueprint <input type="checkbox"/> NO <input type="checkbox"/> YES
			If claiming Infill-Supporting, provide name/address of at least one infill development and status: 1425 Fillmore, Complete.
Will the Park be located within a Disadvantaged Community, as described in Section 106(D)? * Please note: to receive bonus funds the application must include supporting documentation.			
<input type="checkbox"/> YES <input type="checkbox"/> NO		HUD UserGIS Map indicates that Kimbell Playground borders census block 8161.88 which is adjacent to Kimbell Playground is a qualified tract (see attached HUD report)	
Will the Park be located within a Park-Deficient Community, as described in Section 106(E)? * Please note: to receive bonus funds the application must include supporting documentation.			
<input type="checkbox"/> YES <input type="checkbox"/> NO		Community Factfinder Fnder Project ID #27932 indicates that there is only 1.08 acres of open space per 1,000 residents with 1/2 mile of park project site.	

Project Cost Breakdown and Other Funding Sources				
Project Cost				
Subproject	Estimated Cost		Subproject	Estimated Cost
DPW project mgmt. & support	\$1,060,093.00		Landscape Improvements	\$1,776,000.00
RPD project mgmt. & support	\$356,343.00		Building Reno. & Allowances	\$488,000.00
Play Area Construction	\$218,000.00		Design & project reserve	\$173,264.00
Total Project Cost:				\$4,071,700.00
Other Funding Sources				
Name of Source	Dollar Amount		Name of Source	Dollar Amount
2008 Bond Project	\$4,100,000.00			
Total Other Funds				\$4,100,000.00

* Applicable Bonus Funds as detailed in Section 106 of the Program Guidelines
2013 DPY Housing-Related Parks Program Application

Park and Recreation Facility (Park Project) Description

Applicant:	City and County of San Francisco, Recreation and Park Department		
Park Project Name:	Dr. George W. Davis Senior Center		
Park Project Location (include address, if known, or otherwise indicate nearest intersection):			
1751 Carroll Avenue, San Francisco, CA 94124			
Park Project Census Tract: <small>(please use 11-digit census tract number as detailed in instructions)</small>	06-075-0233-00		
Senate & Assembly District for Park Project Location:	Senate District:	3	
	Assembly District:	13	
Park Project Summary:			
Construction of a relocated community center on the ground floor of an affordable senior housing development.			
<p>Will the Park Project be in support of any Infill developments, as described in Section 106(F)? * If so, please name at least one development and indicate the development status (indicate N/A if not applicable) <u>OR</u> Does the jurisdiction's adopted General Plan conform to the region's adopted Regional Blueprint Plan? If so, please complete the Regional Blueprint Bonus Coversheet (next tab) and attach supporting documentation as required.</p>			
<input type="checkbox"/> Infill-Supporting <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES	OR	<input type="checkbox"/> Regional Blueprint <input type="checkbox"/> NO <input type="checkbox"/> YES	If claiming Infill-Supporting, provide name/address of at least one infill development and status: 5800 Third Street, San Francisco, CA - under construction.
Will the Park be located within a Disadvantaged Community, as described in Section 106(D)? * Please note: to receive bonus funds the application must include supporting documentation.			
YES	NO	HUD UserGIS Map indicates that park project census block 06-075-0233-00 is adjacent to an disadvantaged community in census block 06-075-0234-00.	
Will the Park be located within a Park-Deficient Community, as described in Section 106(E)? * Please note: to receive bonus funds the application must include supporting documentation.			
YES	NO	Community Factfinder Fnder Project ID #28537 indicates that there is only .37 acres of open space per 1,000 residents with 1/2 mile of park project site. Attached is the community factfinder report for Project #28537.	

Project Cost Breakdown and Other Funding Sources				
Project Cost				
Subproject	Estimated Cost		Subproject	Estimated Cost
Construction	\$3,128,687.00		Other Soft Costs	\$807,665.00
Construction Contingency	\$205,309.00			
Architecture & Engineering	\$243,907.00			
			Total Project Cost:	\$4,385,568.00

Other Funding Sources				
Name of Source	Dollar Amount		Name of Source	Dollar Amount
Investor Equity	\$2,185,568.00			
Local Funding	\$2,000,000			
			Total Other Funds	\$4,185,568.00

* Applicable Bonus Funds as detailed in Section 106 of the Program Guidelines
 2013 DPY Housing-Related Parks Program Application

Park and Recreation Facility (Park Project) Description

Applicant:	City and County of San Francisco, Recreation and Park Department		
Park Project Name:	Donaldina Cameron House		
Park Project Location (include address, if known, or otherwise indicate nearest intersection): 920 Sacramento St, San Francisco, CA 94108			
Park Project Census Tract: <small>(please use 11-digit census tract number as detailed in instructions)</small>	06-075-0113-00		
Senate & Assembly District for Park Project Location:	Senate District:	3	
	Assembly District:	13	
Park Project Summary: Renovation of existing community center in a history landmark building.			
<p>Will the Park Project be in support of any Infill developments, as described in Section 106(F)? * If so, please name at least one development and indicate the development status (indicate N/A if not applicable) <u>OR</u> Does the jurisdiction's adopted General Plan conform to the region's adopted Regional Blueprint Plan? If so, please complete the Regional Blueprint Bonus Coversheet (next tab) and attach supporting documentation as required.</p>			
<input type="checkbox"/> Infill-Supporting <input type="checkbox"/> NO <input type="checkbox"/> YES		<input type="checkbox"/> Region <input type="checkbox"/> Blueprint <input type="checkbox"/> NO <input type="checkbox"/> YES	If claiming Infill-Supporting, provide name/address of at least one infill development and status: 940 Washington
<p>Will the Park be located within a Disadvantaged Community, as described in Section 106(D)? * Please note: to receive bonus funds the application must include supporting documentation.</p>			
<input type="checkbox"/> YES <input type="checkbox"/> NO		HUD UserGIS Map indicates that census block 06-075-0113-00 qualifies as a disadvantaged community.	
<p>Will the Park be located within a Park-Deficient Community, as described in Section 106(E)? * Please note: to receive bonus funds the application must include supporting documentation.</p>			
<input type="checkbox"/> YES <input type="checkbox"/> NO		Community Factfinder Fnder Project ID #28540 indicates that there is only .22 acres of open space per 1,000 residents with 1/2 mile of park project site.	

Project Cost Breakdown and Other Funding Sources				
Project Cost				
Subproject	Estimated Cost		Subproject	Estimated Cost
Construction	\$113,147.00			
Soft Costs	\$10,286.00			
Total Project Cost:				\$123,433.00

Other Funding Sources				
Name of Source	Dollar Amount		Name of Source	Dollar Amount
N/A				
Total Other Funds:				

* Applicable Bonus Funds as detailed in Section 106 of the Program Guidelines
2013 DPY Housing-Related Parks Program Application

Park and Recreation Facility (Park Project) Description

Applicant:	City and County of San Francisco, Recreation and Park Department		
Park Project Name:	Dagget Park		
Park Project Location (include address, if known, or otherwise indicate nearest intersection):			
Daggett Street right-of-way, an unimproved street near the intersection of 16th Street and 7th Street.			
Park Project Census Tract: <small>(please use 11-digit census tract number as detailed in instructions)</small>	06-075-0607-00		
Senate & Assembly District for Park Project Location:	Senate District:	11	
	Assembly District:	17	
Park Project Summary:			
The proposed Daggett Park would be 0.88 acres in size. The park would have a number of amenities and design features, including:			
<ul style="list-style-type: none"> Large, unprogrammed lawn areas for general recreation and gathering Ample seating opportunities dispersed throughout the park. 			
Will the Park Project be in support of any Infill developments, as described in Section 106(F)? * If so, please name at least one development and indicate the development status (indicate N/A if not applicable) <u>OR</u> Does the jurisdiction's adopted General Plan conform to the region's adopted Regional Blueprint Plan? If so, please complete the Regional Blueprint Bonus Coversheet (next tab) and attach supporting documentation as required.			
<input type="checkbox"/> Infill NO	<input checked="" type="checkbox"/> Supporting YES	OR	<input type="checkbox"/> Region NO
			<input type="checkbox"/> Blueprint YES
			If claiming Infill-Supporting, provide name/address of at least one infill development and status: 1000 16th Street. In Design. The park site was identified as part of the multi-year Eastern Neighborhoods Plan process, which changed the zoning in formerly industrial parts of San
Will the Park be located within a Disadvantaged Community, as described in Section 106(D)? * Please note: to receive bonus funds the application must include supporting documentation.			
YES	NO	Per HUD data, the park site is within a qualified census tract.	
Will the Park be located within a Park-Deficient Community, as described in Section 106(E)? * Please note: to receive bonus funds the application must include supporting documentation.			
YES	NO	Community Factfinder Finder Project ID #28444 indicates that there is only .77 acres of open space per 1,000 residents with 1/2 mile of park project site.	

Project Cost Breakdown and Other Funding Sources

Project Cost			
Subproject	Estimated Cost		Subproject
Site Acquisition	\$1,600,000.00		
Park construction	\$3,720,000.00		
			Total Project Cost: \$5,320,000.00

Other Funding Sources

Name of Source	Dollar Amount		Name of Source	Dollar Amount
Infrastructure Fund	\$1,880,000.00			
developer	\$800,000			
Developer gift	\$1,040,000			
			Total Other Funds:	\$3,720,000.00

* Applicable Bonus Funds as detailed in Section 106 of the Program Guidelines
2013 DPY Housing-Related Parks Program Application

Park and Recreation Facility (Park Project) Description

Applicant:	City and County of San Francisco, Recreation and Park Department		
Park Project Name:	Central Market Living Innovation Zone Mini-Plaza		
Park Project Location (include address, if known, or otherwise indicate nearest intersection): Market Street between 6th and 7th streets			
Park Project Census Tract: <small>(please use 11-digit census tract number as detailed in instructions)</small>	06-075-012500		
Senate & Assembly District for Park Project Location:	Senate District:	11	
	Assembly District:	17	

Park Project Summary:

The San Francisco Planning Department and the Mayor's Office of Civic Innovation will partner with The Exploratorium to work with community residents and key stakeholders to design and build a mini-plaza on Market Street as part of the City's Living Innovation Zone (LIZ) Program. The mini-plaza will work with private-sector partners to identify new design and programming solutions to a long-standing social and public space challenges

Will the Park Project be in support of any Infill developments, as described in Section 106(F)? * If so, please name at least one development and indicate the development status (indicate N/A if not applicable) **OR** Does the jurisdiction's adopted General Plan conform to the region's adopted Regional Blueprint Plan? If so, please complete the Regional Blueprint Bonus Coversheet (next tab) and attach supporting documentation as required.

<input type="checkbox"/> Infill-Supporting		<input type="checkbox"/> Regional Blueprint		If claiming Infill-Supporting, provide name/address of at least one infill development and status: 1078 Market Street is in the early design phase; we anticipate completing the entitlement process in 2015.
NO	YES	OR		

Will the Park be located within a Disadvantaged Community, as described in Section 106(D)? * Please note: to receive bonus funds the application must include supporting documentation.

YES	NO	Per HUD data, the location is within qualified census tract 0125.00. It is also across the street from qualified census tract 0176.01.

Will the Park be located within a Park-Deficient Community, as described in Section 106(E)? * Please note: to receive bonus funds the application must include supporting documentation.

YES	NO	Community Factfinder Fnder Project ID #28443 indicates that there is only .27 acres of open space per 1,000 residents with 1/2 mile of park project site.

Project Cost Breakdown and Other Funding Sources

Project Cost

Subproject	Estimated Cost	Subproject	Estimated Cost
Materials and construction	\$80,000.00		
Design, labor	\$65,000.00		
Community engagement	\$25,000.00		
Total Project Cost:			\$170,000.00

Other Funding Sources

Name of Source	Dollar Amount	Name of Source	Dollar Amount
SF General Fund	\$20,000.00		
Total Other Funds:			\$20,000.00

* Applicable Bonus Funds as detailed in Section 106 of the Program Guidelines
2013 DPY Housing-Related Parks Program Application

Comprehensive Unit Listing

Applicant: City and County of San Francisco, Recreation and Park Department

Please provide a listing, by unique project identifier used in the Housing Project Cover Sheet, of all units contained in this application. The Department will use this listing in both reviewing the application to determine eligibility of each project and calculating the final grant award amount. There should be a separate line entry for each of the Housing Project Cover Sheets included in the application. Please list the projects in the same order as they appear in the application to facilitate the application review process.

***If necessary, please add additional rows to accommodate all eligible projects but be sure to copy formatting to carry forward associated formulas**

Project Cover Sheet #		Unit Count							Base Award Amount	Bonus Awards						TOTAL
		A	B	C	D	E	F	G		New Construction Units?	Infill Units?	Infill-Supporting/Regional Blueprint?	Park-Deficient Community?	Disadvantaged Community?	Total Bonus Funds	
#	Project Name/Identifier from Housing Project Cover Sheet	# of ELI units	# VL units	# of L units	# of ELI bedrooms	# of VL bedrooms	# of L bedrooms	Total # of bedrooms								
	SAMPLE PROJECT	1	24	30	13	50	31	84	\$56,000	No	No	Yes	No	No	\$8,400	\$64,400
	blank							0	\$0	Yes	Yes		Yes	Yes	\$0	\$0
	2 25 Essex Street	76	44		76	44		120	\$109,000	Yes	Yes		Yes	Yes	\$186,000	\$295,000
	3 121 Golden Gate Avenue		89			89		89	\$66,750	Yes	Yes		Yes	Yes	\$137,950	\$204,700
	4 1180 4th Street	25	124		52	257		309	\$244,750	Yes	Yes		Yes	Yes	\$478,950	\$723,700
	5 61 & 63 West Point Road	7	21		19	58		77	\$62,500	Yes	Yes		Yes	Yes	\$119,350	\$181,850
	1 1251 Turk Street		98			184		184	\$138,000	Yes	Yes		Yes	Yes	\$285,200	\$423,200
	7 1000 16th Street			91			128	128	\$64,000	Yes	Yes		Yes	Yes	\$198,400	\$262,400
	8 2235 3rd Street		39			55		55	\$41,250	Yes	Yes		Yes	Yes	\$85,250	\$126,500
	9 blank							#REF!	#REF!						\$0	#REF!
	10 178 Townsend		19			27		27	\$20,250	Yes	Yes		Yes	Yes	\$41,850	\$62,100
	11 1075 Le Conte Avenue	9	63		14	99		113	\$88,250	Yes	Yes		Yes	Yes	\$175,150	\$263,400
	12 333 Harrison			49			51	51	\$25,500	Yes	Yes		Yes	Yes	\$79,050	\$104,550
	13 1345 Turk Street (Pending)							0	\$0						\$0	\$0
	14 Jamestown		43	151		139	299	438	\$253,750	Yes	Yes		Yes	Yes	\$678,900	\$932,650
	15 1880 Mission St.			40			54	54	\$27,000	Yes	Yes		Yes	Yes	\$83,700	\$110,700
	1.1 260 Fifth Street			27			38	38	\$19,000	Yes	Yes		Yes	Yes	\$58,900	\$77,900
	2.1 blank							0	\$0						\$0	\$0
	3.1 474 Natoma		35	24		51	38	89	\$57,250	Yes	Yes		Yes	Yes	\$137,950	\$195,200
	4.1 Pheliah Loop	6	6	48	6	6	114	126	\$67,500	Yes	Yes		Yes	Yes	\$195,300	\$262,800
	5.1 255 Broadway	39	34		50	59		109	\$94,250	Yes	Yes		Yes	Yes	\$168,950	\$263,200
	6.1 2175 Market (permit ?)		18			25		25	\$18,750	Yes	Yes		Yes	Yes	\$38,750	\$57,500
	7.1 940 Washington			22			22	22	\$11,000	No					\$0	\$11,000
	8.1 44 McAllister		211			211		211	\$158,250	No					\$0	\$158,250
	9.1 472 Ellis		153			153		153	\$114,750	No					\$0	\$114,750
	10.1 35 Woodward	52			52			52	\$52,000	No					\$0	\$52,000
	11.1 391 Leavenworth	40			40			40	\$40,000	No					\$0	\$40,000
	12.1 350 Golden Gate	7	62		7	62		69	\$53,500	No					\$0	\$53,500
	TOTAL	261	1059	452	316	1519	744	#REF!	\$1,827,250						\$3,149,600	\$4,976,850

Comprehensive Unit Listing

Applicant:	City and County of San Francisco, Recreation and Park Department
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Please provide a listing, by unique project identifier used in the Housing Project Cover Sheet, of all units contained in this application. The Department will use this listing in both reviewing the application to determine eligibility of each project and calculating the final grant award amount. There should be a separate line entry for each of the Housing Project Cover Sheets included in the application. Please list the projects in the same order as they appear in the application to facilitate the application review process.

****If necessary, please add additional rows to accommodate all eligible projects but be sure to copy formatting to carry forward associated formulas***

[illegible]

Housing Project Cover Sheet - 1

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant: City and County of San Francisco, Recreation and Park Department	
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation) <input checked="" type="checkbox"/>	1251 (1239) Turk Street - Rosa Parks II
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment
Building Permit(s) Issuance Date(s): (for new construction units)	12/2/2011 (housing start)
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved) <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes Please include supporting documentation
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
Deed-Restricted	
Method of Restriction/ Type of Subsidy Used:	Declaration of Restrictions / HOME Program
Length of Deed Restriction:	55 years *Rental units must be restricted for a minimum of 55 years
Ownership Units	
Deed-Restricted	
Method of Restriction/ Type of Subsidy Used:	
Length of Deed Restriction:	*Ownership units must be restricted for a minimum of 20 years
Non-Restricted Units	
Sales Price & Initial Occupant's Income	
<small>* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.</small>	

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units				Very Low-Income Units		Low-Income Units	
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms
0	0	Studio	32	32	Studio	0	0
0	0	1-Bed	65	65	1-Bed	0	0
0	0	2-Bed	1	2	2-Bed	0	0
0	0	3-Bed		0	3-Bed	0	0
0	0	4-Bed		0	4-Bed	0	0
0	0	5-Bed		0	5-Bed	0	0
0	0	Totals	98	99	Totals	0	0

Project Description:

Rosa Parks II, Sponsored by the Tenderlion Neighborhood Development Corporation to provide housing for homeless or at-risk and very low income senior residents. The new building will include on-site common areas, 2nd floor roof deck, courtyards, and access to nearby senior center.

Housing Project Cover Sheet - 2

*** Please complete and submit a separate Project Cover Sheet for each Residential Project ***

Applicant: City and County of San Francisco, Recreation and Park Department	
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation) <input checked="" type="checkbox"/>	25 Essex - Rene Cazenave Apts
Type of Project: <input type="checkbox"/>	<input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Rehabilitation, Conversion, or Preservation* <small>*Note: Applicant must also fill out Housing Project Attachment</small>
Building Permit(s) Issuance Date(s): (for new construction units)	8-Jun-11
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved) <input checked="" type="checkbox"/>	
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)? <input checked="" type="checkbox"/>	
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	Declaration of Restrictions / Tax Increment, HOPWA, Transbay Jobs Housing Linkage Fee
Length of Deed Restriction: <input type="text" value="55 Years"/>	<small>*Rental units must be restricted for a minimum of 55 years</small>
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	
Length of Deed Restriction: <input type="text"/>	<small>*Ownership units must be restricted for a minimum of 20 years</small>
<input type="checkbox"/> Non-Restricted Units Sales Price & Initial Occupant's Income	

* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units		Unit Type	Very Low-Income Units		Unit Type	Low-Income Units	
Number of Units	Total Bdrms		Number of Units	Total Bdrms		Number of Units	Total Bdrms
	0	Studio	108	108	Studio		0
	0	1-Bed	11	11	1-Bed		0
	0	2-Bed		0	2-Bed		0
	0	3-Bed		0	3-Bed		0
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
0	0	Totals	119	119	Totals	0	0

Project Description:

Sponsored by Bridge Housing/CHP to provide housing for homeless and at-risk residents. NEW CONSTRUCTION - 8 stories of 120 DU's and future supportive office(s), retail(s), restaurant(s) at first floor.

Housing Project Cover Sheet - 3

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	<input checked="" type="checkbox"/>	121 Golden Gate Avenue - Vera Haile Senior Housing	
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment		
Building Permit(s) Issuance Date(s): (for new construction units)			
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input checked="" type="checkbox"/>		
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?		Yes Please include supporting documentation	
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.		site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses	

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input checked="" type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; padding: 5px; min-height: 20px;">Declaration of Restrictions / HOME, Hotel Tax, Affordable Housing Fund</div>
<input type="checkbox"/> Length of Deed Restriction:	<div style="border: 1px solid black; padding: 2px 10px;">55 years</div> <small>*Rental units must be restricted for a minimum of 55 years</small>
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 30px;"></div>
Length of Deed Restriction:	<div style="border: 1px solid black; width: 100px; height: 20px;"></div> <small>*Ownership units must be restricted for a minimum of 20 years</small>
Non-Restricted Units	
Sales Price & Initial Occupant's Income	<div style="border: 1px solid black; height: 30px;"></div>
<small>* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.</small>	

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units				Very Low-Income Units		Low-Income Units	
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms
	0	Studio	43	43	Studio		0
	0	1-Bed	46	46	1-Bed		0
	0	2-Bed		0	2-Bed		0
	0	3-Bed		0	3-Bed		0
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
0	0	Totals	89	89	Totals	0	0

Project Description:

ST Anthony Foundation Senior Project, sponsored by Mercy Housing California to provide housing for homeless or at-risk, and very low income senior residents; ERECT 10 STORIES, 90 DWELLING UNITS, 1 BASEMENT, DINING SOCIAL SERVICES, AFFORDABLE APARTMETN BUILDING.

Housing Project Cover Sheet - 4

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant: City and County of San Francisco, Recreation and Park Department	
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	1180 4th Street
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment
Building Permit(s) Issuance Date(s): (for new construction units)	1/26/2011
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input type="checkbox"/> <input checked="" type="checkbox"/>
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes Please include supporting documentation
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	Declaration of Restrictions / Tax Increment
Length of Deed Restriction:	55 years *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	
Length of Deed Restriction:	 *Ownership units must be restricted for a minimum of 20 years
<input type="checkbox"/> Non-Restricted Units Sales Price & Initial Occupant's Income	
* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.	

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

Extremely Low Income Units		Unit Type	*Very Low Income Units*		Unit Type	*Low Income Units*	
Number of Units	Total Bdrms		Number of Units	Total Bdrms		Number of Units	Total Bdrms
	0	Studio		0	Studio		0
7	7	1-Bed	35	35	1-Bed		0
9	18	2-Bed	45	90	2-Bed		0
9	27	3-Bed	44	132	3-Bed		0
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
25	52	Totals	124	257	Totals	0	0

Project Description:

Sponsored by Mercy Housing, Erect 6 stories of 150 Dwelling Units for Very Low Income Families and homeless or at-risk residents.

Housing Project Cover Sheet - 5

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation) <input checked="" type="checkbox"/>	61 West Point Road " Planning Block 5 - Building B"		
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment		
Building Permit(s) Issuance Date(s): (for new construction units)	9/9/2010		
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved) <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes		Please include supporting documentation
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses		

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
Deed-Restricted	
Method of Restriction/ Type of Subsidy Used:	Declaration of Restrictions / Tax Increment, HOPE SF
Length of Deed Restriction:	55 years *Rental units must be restricted for a minimum of 55 years
Ownership Units	
Deed-Restricted	
Method of Restriction/ Type of Subsidy Used:	
Length of Deed Restriction:	*Ownership units must be restricted for a minimum of 20 years
Non-Restricted Units	
Sales Price & Initial Occupant's Income	

* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units			Very Low-Income Units			Low-Income Units	
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms
	0	Studio		0	Studio		0
	0	1-Bed		0	1-Bed		0
2	4	2-Bed	4	8	2-Bed		0
1	3	3-Bed	3	9	3-Bed		0
	0	4-Bed	2	8	4-Bed		0
	0	5-Bed	1	5	5-Bed		0
3	7	Totals	10	30	Totals	0	0

Project Description:

To Erect 4 Stories, 13 Units Residential Building

Housing Project Cover Sheet - 6

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	63 West Point Road " Planning Block 5 - Buidling A"		
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment		
Building Permit(s) Issuance Date(s): (for new construction units)	9/9/2010		
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)			
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes	Please include supporting documentation	
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses		

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	Declaration of Restrictions / Tax Increment, HOPE SF
Length of Deed Restriction:	55 Years *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	
Length of Deed Restriction:	*Ownership units must be restricted for a minimum of 20 years
<input type="checkbox"/> Non-Restricted Units Sales Price & Initial Occupant's Income	
<small>* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.</small>	

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units		Unit Type	*Very Low-Income Units		Unit Type	*Low-Income Units	
Number of Units	Total Bdrms		Number of Units	Total Bdrms		Number of Units	Total Bdrms
	0	Studio		0	Studio		0
	0	1-Bed		0	1-Bed		0
2	14	2-Bed	7	14	2-Bed		0
	0	3-Bed	2	6	3-Bed		0
2	8	4-Bed	2	8	4-Bed		0
	0	5-Bed		0	5-Bed		0
4	12	Totals	11	28	Totals	0	0

Project Description:

To Erect 4 Stories, 15 Units Residential Building.

Housing Project Cover Sheet - 7

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant: City and County of San Francisco, Recreation and Park Department	
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation) <input checked="" type="checkbox"/>	1000 16th Street (1400 7th St.)
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment
Building Permit(s) Issuance Date(s): (for new construction units)	7-Sep-12
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved) <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes Please include supporting documentation
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> Notice of Special Restrictions
<input type="checkbox"/> Length of Deed Restriction:	<div style="border: 1px solid black; padding: 2px;">Life of Project</div> *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<input type="checkbox"/> Length of Deed Restriction:	<div style="border: 1px solid black; padding: 2px;"></div> *Ownership units must be restricted for a minimum of 20 years
Non-Restricted Units Sales Price & Initial Occupant's Income	
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
<small>* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.</small>	

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units				Very Low-Income Units		Low-Income Units	
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms
	0	Studio		0	Studio	22	22
	0	1-Bed		0	1-Bed	32	32
	0	2-Bed		0	2-Bed	37	74
	0	3-Bed		0	3-Bed		0
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
0	0	Totals	0	0	Totals	91	128

Project Description:

Project will construct 453 dwelling units, which include 91 below market rate dwelling units.

Housing Project Cover Sheet - 8

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation) <input checked="" type="checkbox"/>	2235 Third Street		
Type of Project: <input type="checkbox"/>	<input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment		
Building Permit(s) Issuance Date(s): (for new construction units)	10/14/2011		
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved) <input checked="" type="checkbox"/>	N/A		
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)? <input checked="" type="checkbox"/>			
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.		site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses	

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 30px; width: 100%;"></div> Notice of Special Restrictions
Length of Deed Restriction:	<div style="border: 1px solid black; padding: 2px;">Life of Project</div> *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 30px; width: 100%;"></div>
Length of Deed Restriction:	<div style="border: 1px solid black; width: 100px; height: 20px;"></div> *Ownership units must be restricted for a minimum of 20 years
Non-Restricted Units Sales Price & Initial Occupant's Income	
<div style="border: 1px solid black; height: 30px; width: 100%;"></div>	

* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units		Unit Type	Very Low-Income Units		Unit Type	Low-Income Units	
Number of Units	Total Bdrms		Number of Units	Total Bdrms		Number of Units	Total Bdrms
	0	Studio	7	7	Studio		0
	0	1-Bed	16	16	1-Bed		0
	0	2-Bed	16	32	2-Bed		0
	0	3-Bed		0	3-Bed		0
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
0	0	Totals	39	55	Totals	0	0

Project Description:

Residential, parking, retail, daycare

Housing Project Cover Sheet - 10

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation) <input checked="" type="checkbox"/>	178 Townsend		
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment		
Building Permit(s) Issuance Date(s): (for new construction units)	9/8/2011		
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved) <input checked="" type="checkbox"/>			
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?			
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.		site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses	

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> Notice of Special Restrictions
Length of Deed Restriction:	<input type="text" value="Life of Project"/> *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Length of Deed Restriction:	<input type="text"/> *Ownership units must be restricted for a minimum of 20 years
Non-Restricted Units Sales Price & Initial Occupant's Income	
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
<small>* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.</small>	

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units		Very Low-Income Units			Low-Income Units	
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Total Bdrms
	0	Studio	3	3	Studio	0
	0	1-Bed	8	8	1-Bed	0
	0	2-Bed	8	16	2-Bed	0
	0	3-Bed		0	3-Bed	0
	0	4-Bed		0	4-Bed	0
	0	5-Bed		0	5-Bed	0
0	0	Totals	19	27	0	0

Project Description:

Residential, Retail and Parking

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	1075 Le Conte (6600 3rd Street)		
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment		
Building Permit(s) Issuance Date(s): (for new construction units)	2/22/2011		
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input checked="" type="checkbox"/>		
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?		Yes Please include supporting documentation	
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.		site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses	

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
Deed-Restricted	
Method of Restriction/ Type of Subsidy Used:	Declaration of Restrictions / Tax Increment
Length of Deed Restriction:	55 Years *Rental units must be restricted for a minimum of 55 years
Ownership Units	
Deed-Restricted	
Method of Restriction/ Type of Subsidy Used:	
Length of Deed Restriction:	 *Ownership units must be restricted for a minimum of 20 years
Non-Restricted Units	
Sales Price & Initial Occupant's Income	

* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units		Unit Type	Very Low-Income Units		Unit Type	Low-Income Units	
Number of Units	Total Bdrms		Number of Units	Total Bdrms		Number of Units	Total Bdrms
0	0	Studio	15	15	Studio	0	0
0	0	1-Bed	24	24	1-Bed	0	0
0	0	2-Bed	25	50	2-Bed	0	0
0	0	3-Bed	8	24	3-Bed	0	0
0	0	4-Bed		0	4-Bed	0	0
0	0	5-Bed		0	5-Bed	0	0
0	0	Totals	72	113	Totals	0	0

Project Description:

Sponsored by Porvidence, a project to provide housing to Homeless/At-Risk and Homeless Transition Age Youth residents. Erect 73 Dwelling Units, Five Stories Residential/Parking Building. AKA 6600 03rd Street.

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	<input checked="" type="checkbox"/>	333 Harrison Street - Rincon Green	
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment		
Building Permit(s) Issuance Date(s): (for new construction units)	12/1/2010		
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input checked="" type="checkbox"/>	02/27/2013 Certificate of Final Completion and Occupancy Issued	
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	<input checked="" type="checkbox"/>	Yes	Please include supporting documentation
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses		

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> Notice of Special Restrictions
<input type="checkbox"/> Length of Deed Restriction:	<div style="border: 1px solid black; padding: 2px;">Life of the Project</div> *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<input type="checkbox"/> Length of Deed Restriction:	<div style="border: 1px solid black; width: 100px; height: 15px;"></div> *Ownership units must be restricted for a minimum of 20 years
<input type="checkbox"/> Non-Restricted Units Sales Price & Initial Occupant's Income	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units		Very Low-Income Units		Low-Income Units	
Number of Units	Total Bdrms	Number of Units	Total Bdrms	Number of Units	Total Bdrms
	0		0	29	29
	0		0	18	18
	0		0	2	4
	0		0		0
	0		0		0
	0		0		0
0	0	0	0	49	51

Project Description:

Erect Typet Retail, Parking and Residential Building

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant: City and County of San Francisco, Recreation and Park Department	
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation) <input checked="" type="checkbox"/>	1345 Turk Street - Fillmore Park
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment
Building Permit(s) Issuance Date(s): (for new construction units)	4/16/2010
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved) <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes Please include supporting documentation
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input checked="" type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	
Length of Deed Restriction:	<input type="text"/> *Rental units must be restricted for a minimum of 55 years
<input type="checkbox"/> Ownership Units	
Deed-Restricted Method of Restriction/ Type of Subsidy Used:	Notice of Special Restrictions
Length of Deed Restriction:	Life of project *Ownership units must be restricted for a minimum of 20 years
Non-Restricted Units Sales Price & Initial Occupant's Income	

* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

Extremely Low-Income Units		Unit Type	*Very Low-Income Units*		Unit Type	*Low-Income Units*	
Number of Units	Total Bdrms		Number of Units	Total Bdrms		Number of Units	Total Bdrms
	0	Studio		0	Studio		0
	0	1-Bed		0	1-Bed	6	6
	0	2-Bed		0	2-Bed	14	28
	0	3-Bed		0	3-Bed	6	18
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
0	0	Totals	0	0	Totals	26	52

Project Description:

32 Affordable homeownership units within Three, Two and Three Story Buildings., and 24 below grade parking. 26 units restricted to 80% AMI and below, 6 units at 90% AMI.

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant: City and County of San Francisco, Recreation and Park Department	
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation) <input checked="" type="checkbox"/>	855-867 Jamestown (AKA 833-861 Jamestown)
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment
Building Permit(s) Issuance Date(s): (for new construction units)	9/22/2010
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved) <input checked="" type="checkbox"/>	
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes Please include supporting documentation
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation. <input checked="" type="checkbox"/>	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	Notice of Special Restrictions Length of Deed Restriction: Life of the Project *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	
Length of Deed Restriction: 	*Ownership units must be restricted for a minimum of 20 years
Non-Restricted Units Sales Price & Initial Occupant's Income: 	
<small>* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.</small>	

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units		Very Low-Income Units		Low-Income Units	
Number of Units	Total Bdrms	Number of Units	Total Bdrms	Number of Units	Total Bdrms
	0		0		0
	0	2	2	18	18
	0	12	24	118	236
	0	3	9	15	45
	0	26	104		0
	0		0		0
0	0	43	139	151	299
		Totals		Totals	

Project Description:

Residential, 36 Dus

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	<input checked="" type="checkbox"/>	1880 Mission	
Type of Project:	<input type="checkbox"/>	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment	
Building Permit(s) Issuance Date(s): (for new construction units)		10/17/2011	
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input checked="" type="checkbox"/>		
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	<input checked="" type="checkbox"/>	Yes Please include supporting documentation	
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.		site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses	

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> Notice of Special Restrictions
Length of Deed Restriction:	<div style="border: 1px solid black; padding: 2px;">Life of the Project</div> *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Length of Deed Restriction:	<div style="border: 1px solid black; width: 100px; height: 20px;"></div> *Ownership units must be restricted for a minimum of 20 years
Non-Restricted Units Sales Price & Initial Occupant's Income	
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	

* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units		Unit Type	*Very Low-Income Units		Unit Type	Low-Income Units	
Number of Units	Total Bdrms		Number of Units	Total Bdrms		Number of Units	Total Bdrms
	0	Studio		0	Studio	6	6
	0	1-Bed		0	1-Bed	23	23
	0	2-Bed		0	2-Bed	8	16
	0	3-Bed		0	3-Bed	3	9
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
0	0	Totals	0	0	Totals	40	54

Project Description:

Rental, Retail, Parking

Housing Project Cover Sheet 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	<input checked="" type="checkbox"/>	260 5th Street	
Type of Project:	<input type="checkbox"/>	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment	
Building Permit(s) Issuance Date(s): (for new construction units)	7/6/2012 (Confirm)		
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input checked="" type="checkbox"/>		
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?		Yes	Please include supporting documentation
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses		

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> Notice of Special Restrictions
Length of Deed Restriction:	<div style="border: 1px solid black; padding: 2px;">Life of the Project</div> *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Length of Deed Restriction:	<div style="border: 1px solid black; width: 100px; height: 20px;"></div> *Ownership units must be restricted for a minimum of 20 years
<input type="checkbox"/> Non-Restricted Units Sales Price & Initial Occupant's Income	
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	

* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units			Very Low-Income Units			Low-Income Units	
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms
	0	Studio		0	Studio	4	4
	0	1-Bed		0	1-Bed	12	12
	0	2-Bed		0	2-Bed	11	22
	0	3-Bed		0	3-Bed		0
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
0	0	Totals	0	0	Totals	27	38

Project Description:

Erect nine story, 85 feet, mixed use building including up to 170 Dwelling Units and up to 102 parking spaces.

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant: City and County of San Francisco, Recreation and Park Department	
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	1167 Market Street - Trinity Plaza
Type of Project:	<input checked="" type="checkbox"/> New Construction <input type="checkbox"/> Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment
Building Permit(s) Issuance Date(s): (for new construction units)	8/25/2011
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input checked="" type="checkbox"/>
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes Please include supporting documentation.
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	Notice of Special Restrictions
Length of Deed Restriction:	Life of the project *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	
Length of Deed Restriction:	 *Ownership units must be restricted for a minimum of 20 years
Non-Restricted Units Sales Price & Initial Occupant's Income	
* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.	

Project Summary Table
Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units			Very Low-Income Units			Low-Income Units		
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	
	0	Studio		0	Studio		0	
	0	1-Bed		0	1-Bed		0	
	0	2-Bed		0	2-Bed		0	
	0	3-Bed		0	3-Bed		0	
	0	4-Bed		0	4-Bed		0	
	0	5-Bed		0	5-Bed		0	
0	0	Totals	0	0	Totals	0	0	

Project Description:

Apartment, Restaurant

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	<input checked="" type="checkbox"/>	474 Natoma St	
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment		
Building Permit(s) Issuance Date(s): (for new construction units)	12/5/2011		
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input checked="" type="checkbox"/>		
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?		Yes Please include supporting documentation	
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.		site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses	

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> Declaration of Restriction / Tax Increment
<input type="checkbox"/> Length of Deed Restriction:	<div style="border: 1px solid black; padding: 2px;">55 Years</div> *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<input type="checkbox"/> Length of Deed Restriction:	<div style="border: 1px solid black; padding: 2px;"></div> *Ownership units must be restricted for a minimum of 20 years
<input type="checkbox"/> Non-Restricted Units Sales Price & Initial Occupant's Income	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<small>* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.</small>	

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units		Unit Type	Very Low-Income Units		Unit Type	Low-Income Units	
Number of Units	Total Bdrms		Number of Units	Total Bdrms		Number of Units	Total Bdrms
	0	Studio	4	4	Studio	3	3
	0	1-Bed	18	18	1-Bed	10	10
	0	2-Bed	10	20	2-Bed	8	16
	0	3-Bed	3	9	3-Bed	3	9
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
0	0	Totals	35	51	Totals	24	38

Project Description:

60 units of 100% affordable housing.

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant: City and County of San Francisco, Recreation and Park Department	
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	1100 Ocean Avenue (Phelan Loop)
Type of Project:	<input checked="" type="checkbox"/> New Construction <input type="checkbox"/> Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment
Building Permit(s) Issuance Date(s): (for new construction units)	
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes Please include supporting documentation
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	Declaration of Restrictions / Affordable Housing Bond Program
Length of Deed Restriction:	55 years *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	
Length of Deed Restriction:	 *Ownership units must be restricted for a minimum of 20 years
<input type="checkbox"/> Non-Restricted Units Sales Price & Initial Occupant's Income	
	
<small>*Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.</small>	

Project Summary Table
Number of Bedrooms By Unit Type and Affordability

Extremely Low-Income Units		Unit Type	Very Low-Income Units		Unit Type	Low-Income Units	
Number of Units	Total Bdrms		Number of Units	Total Bdrms		Number of Units	Total Bdrms
	0	Studio	18	18	Studio	0	0
	0	1-Bed	18	18	1-Bed	0	0
	0	2-Bed	21	21	2-Bed	0	0
	0	3-Bed	13	13	3-Bed	0	0
	0	4-Bed		0	4-Bed	0	0
	0	5-Bed		0	5-Bed	0	0
0	0	Totals	70	70	Totals	0	0

Project Description:

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant: City and County of San Francisco, Recreation and Park Department	
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation) <input checked="" type="checkbox"/>	255 Broadway
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment
Building Permit(s) Issuance Date(s): (for new construction units)	5/16/2011
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved) <input checked="" type="checkbox"/>	
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes Please include supporting documentation
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted	
Method of Restriction/ Type of Subsidy Used:	Declaration of Restrictions / San Francisco Municipal Transportation Agency
Length of Deed Restriction:	55 -Year Use *Rental units must be restricted for a minimum of 55 years
<input type="checkbox"/> Ownership Units	
Deed-Restricted	
Method of Restriction/ Type of Subsidy Used:	
Length of Deed Restriction:	*Ownership units must be restricted for a minimum of 20 years
Non-Restricted Units	
Sales Price & Initial Occupant's Income	

* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units				Very Low-Income Units		Low-Income Units	
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms
10	10	Studio		0	Studio		0
20	20	1-Bed	15	15	1-Bed		0
7	14	2-Bed	17	34	2-Bed		0
2	6	3-Bed	2	6	3-Bed		0
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
39	50	Totals	34	55	Totals	0	0

Project Description:

Broadway/Sansome Family Housing: 75-unit, 100% affordable housing development w/ ground-floor retail use

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant: City and County of San Francisco, Recreation and Park Department	
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	2175 Market Street
Type of Project:	<input checked="" type="checkbox"/> New Construction <input type="checkbox"/> Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment
Building Permit(s) Issuance Date(s): (for new construction units)	4/17/2013 (12/07/2012)
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input checked="" type="checkbox"/>
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes Please include supporting documentation
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses

Affordability Documentation (Mark appropriate box and provide supporting documentation)

<input checked="" type="checkbox"/> Rental Units <input type="checkbox"/> Deed-Restricted <input type="checkbox"/> Method of Restriction/ Type of Subsidy Used: Tax Exempt Bond Regulatory Agreement Length of Deed Restriction: 55 Years *Rental units must be restricted for a minimum of 55 years	
Ownership Units <input type="checkbox"/> Deed-Restricted <input type="checkbox"/> Method of Restriction/ Type of Subsidy Used: Length of Deed Restriction: *Ownership units must be restricted for a minimum of 20 years <input type="checkbox"/> Non-Restricted Units <input type="checkbox"/> Sales Price & Initial Occupant's Income	

* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.

Project Summary Table
Number of Bedrooms By Unit Type and Affordability

Extremely Low-Income Units		Very Low-Income Units		Low-Income Units	
Number of Units	Total Bdrms	Number of Units	Total Bdrms	Number of Units	Total Bdrms
	0		0		0
	0	11	11		0
	0	7	7		0
	0		0		0
	0		0		0
	0		0		0
0	0	18	18	0	0
		Totals		Totals	

Project Description:

ERECT 6 STORIES , 88 DWELLING UNIT.TYPE 5 OVER 1.

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	Project 7.1 - 940 Washington - Gum Moon		
Type of Project:	<input type="checkbox"/> New Construction <input checked="" type="checkbox"/> Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment		
Building Permit(s) Issuance Date(s): (for new construction units)			
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input checked="" type="checkbox"/> 6/5/2012 <input type="checkbox"/> Please include supporting documentation		
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes		
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses		

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
Deed-Restricted <input checked="" type="checkbox"/> Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; padding: 5px;">Declaration of Restrictions / Seismic Safety Loan Program funds</div>
Length of Deed Restriction:	55 years *Rental units must be restricted for a minimum of 55 years
Ownership Units	
Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 30px;"></div>
Length of Deed Restriction:	<div style="border: 1px solid black; width: 100px; height: 20px;"></div> *Ownership units must be restricted for a minimum of 20 years
Non-Restricted Units Sales Price & Initial Occupant's Income	
<div style="border: 1px solid black; height: 30px;"></div>	

* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units		Unit Type	Very Low-Income Units		Unit Type	Low-Income Units	
Number of Units	Total Bdrms.		Number of Units	Total Bdrms.		Number of Units	Total Bdrms.
	0	Studio		0	Studio	22	22
	0	1-Bed		0	1-Bed		0
	0	2-Bed		0	2-Bed		0
	0	3-Bed		0	3-Bed		0
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
0	0	Totals	0	0	Totals	22	22

Project Description:

ADAPTIVE RE-USE OF (E) 4 STORY CONCRETE FRAMED BUILDING. CHANGE OF USE FROM STORAGE TO MIXED USE (PRIMARY RESIDENTIAL-R2)

Housing Project Attachment 9 Units Rehabilitated, Converted or Preserved

*** This form is NOT required for new construction projects ***

Applicant:	City and County of San Francisco, Recreation and Park Department
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	940 Washington

General Requirements

- Is the local government providing, or did it provide "committed assistance" for this project?

YES ☒
NO ☐
- Identify the specific type and date of "committed assistance."
 Type: _____
 Date: _____

NOTE: The applicant must meet these general requirements in addition to the requirements detailed below to be eligible to receive funding for units substantially rehabilitated, converted, or preserved.

Project type

☒ Mark appropriate box and provide supporting documentation for each of the bullets listed under the heading:

☒ Substantial Rehabilitation

- The rehabilitation resulted in a net increase in the number of housing units available and affordable to very low- and low-income households.
- Units were at imminent risk of loss to the housing stock or determined to be unfit for human habitation. For example, units were at-risk of being demolished or removed from the housing stock without the necessary rehabilitation.
- If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975 and tenants were given the right to reoccupy the units.

☐ Conversion of Units or Foreclosed Properties from Non-Affordable to Affordable

- Type of Units Converted:
 - ☐ Multifamily rental units (must be 3 or more units)
 - ☐ Multifamily ownership units
 - ☐ Foreclosed properties acquired
- If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975.

☐ Preservation of Affordable Units

- Units were located within an "assisted housing development" as defined in Government Code Section 65863.10(a)(3) and/or restricted to income-qualified households at the time the units were identified for preservation.
- Units were at imminent risk of loss to the affordable housing stock.

Housing Project Cover Sheet 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant: City and County of San Francisco, Recreation and Park Department	
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	44 McAllister - Civic Center Residence
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment
Building Permit(s) Issuance Date(s): (for new construction units)	
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	11/8/2010
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes Please include supporting documentation
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	Declaration of Restrictions / CDBG, Affordable Housing Fund
Length of Deed Restriction: 55 years	*Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	
Length of Deed Restriction:	*Ownership units must be restricted for a minimum of 20 years
<input type="checkbox"/> Non-Restricted Units Sales Price & Initial Occupant's Income	
* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.	

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units			Very Low-Income Units			Low-Income Units	
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms
0	0	Studio	211	211	Studio	0	0
0	0	1-Bed		0	1-Bed		0
0	0	2-Bed		0	2-Bed		0
0	0	3-Bed		0	3-Bed		0
0	0	4-Bed		0	4-Bed		0
0	0	5-Bed		0	5-Bed		0
0	0	Totals	211	211	Totals	0	0

Project Description:

211 SRO/studio units for very low income households.

Housing Project Attachment 9 Units Rehabilitated, Converted or Preserved

*** This form is NOT required for new construction projects ***

Applicant:	City and County of San Francisco, Recreation and Park Department
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	44 McAllister

General Requirements

- Is the local government providing, or did it provide "committed assistance" for this project?

YES ☒
NO ☐

- Identify the specific type and date of "committed assistance."

Type: San Francisco Mayor's Office of Housing, SF RDA

Date: _____

NOTE: The applicant must meet these general requirements in addition to the requirements detailed below to be eligible to receive funding for units substantially rehabilitated, converted, or preserved.

Project Type



Mark appropriate box and provide supporting documentation for each of the bullets listed under the heading.

Substantial Rehabilitation

- The rehabilitation resulted in a net increase in the number of housing units available and affordable to very low- and low-income households.
- Units were at imminent risk of loss to the housing stock or determined to be unfit for human habitation. For example, units were at-risk of being demolished or removed from the housing stock without the necessary rehabilitation.
- If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975 and tenants were given the right to reoccupy the units.

Conversion of Units or Foreclosed Properties from Non-Affordable to Affordable

- Type of Units Converted:

Multifamily rental units (must be 3 or more units)

Multifamily ownership units

Foreclosed properties acquired

- If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975.

Preservation of Affordable Units

- Units were located within an "assisted housing development" as defined in Government Code Section 65863.10(a)(3) and/or restricted to income-qualified households at the time the units were identified for preservation.
- Units were at imminent risk of loss to the affordable housing stock.

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	<input type="checkbox"/>	472 Ellis - Arlington Residence (468 - 480 Ellis)	
Type of Project:	<input checked="" type="checkbox"/>	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment	
Building Permit(s) Issuance Date(s): (for new construction units)	12/28/2011		
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input checked="" type="checkbox"/>	6/15/2013	
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	<input checked="" type="checkbox"/>	Yes Please include supporting documentation	
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	<input checked="" type="checkbox"/>	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses	

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; padding: 5px; min-height: 20px;">Declaration of Restrictions / Hotel Tax, Affordable Housing Fund</div>
<input type="checkbox"/> Length of Deed Restriction:	<div style="border: 1px solid black; padding: 2px 10px;">55 years</div> *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 30px;"></div>
<input type="checkbox"/> Length of Deed Restriction:	<div style="border: 1px solid black; padding: 2px 10px;"></div> *Ownership units must be restricted for a minimum of 20 years
<input type="checkbox"/> Non-Restricted Units Sales Price & Initial Occupant's Income:	<div style="border: 1px solid black; height: 30px;"></div>
<small>* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.</small>	

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units				Very Low-Income Units		Low-Income Units	
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms
	0	Studio	153	153	Studio		0
	0	1-Bed		0	1-Bed		0
	0	2-Bed		0	2-Bed		0
	0	3-Bed		0	3-Bed		0
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
0	0	Totals	153	153	Totals	0	0

Project Description:

153-unit 100% affordable development serving formerly homeless individuals.

Housing Project Attachment-9 Units Rehabilitated, Converted or Preserved

*** This form is NOT required for new construction projects ***

Applicant:	City and County of San Francisco, Recreation and Park Department
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	472 Ellis - Arlington Residence (468 - 488 Ellis Street)

General Requirements

• Is the local government ☒ providing, or did it provide "committed assistance" for this project?
YES
NO

• Identify the specific type and date of "committed assistance."

Type: Community Development Block Grant, Hotel Tax Loan and Grant

Date: 11-8-2010

NOTE: The applicant must meet these general requirements in addition to the requirements detailed below to be eligible to receive funding for units substantially rehabilitated, converted, or preserved.

Project Type



Mark appropriate box and provide supporting documentation for each of the bullets listed under the heading.

Substantial Rehabilitation

• The rehabilitation resulted in a net increase in the number of housing units available and affordable to very low- and low-income households.

• Units were at imminent risk of loss to the housing stock or determined to be unfit for human habitation. For example, units were at-risk of being demolished or removed from the housing stock without the necessary rehabilitation.

• If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975 and tenants were given the right to reoccupy the units.



Conversion of Units or Foreclosed Properties from Non-Affordable to Affordable

• Type of Units Converted:

☐ Multifamily rental units (must be 3 or more units)

☐ Multifamily ownership units



Foreclosed properties acquired

• If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975.

Preservation of Affordable Units

• Units were located within an "assisted housing development" as defined in Government Code Section 65863.10(a)(3) and/or restricted to income-qualified households at the time the units were identified for preservation.

• Units were at imminent risk of loss to the affordable housing stock.

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	<input type="checkbox"/>	35 Woodward - Dolores Hotel	
Type of Project:	<input checked="" type="checkbox"/>	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment	
Building Permit(s) Issuance Date(s): (for new construction units)	2/23/2011		
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input checked="" type="checkbox"/>		
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	<input checked="" type="checkbox"/>	Yes Please include supporting documentation.	
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	<input checked="" type="checkbox"/>	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses	

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> Declaration of Restrictions / CDBG Program
Length of Deed Restriction:	55 years *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Length of Deed Restriction:	<div style="border: 1px solid black; width: 100px; height: 20px;"></div> *Ownership units must be restricted for a minimum of 20 years
Non-Restricted Units Sales Price & Initial Occupant's Income	
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
<small>* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.</small>	

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units			Very Low-Income Units			Low-Income Units	
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms
	0	Studio	52	52	Studio	60	60
	0	1-Bed		0	1-Bed		0
	0	2-Bed		0	2-Bed		0
	0	3-Bed		0	3-Bed		0
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
0	0	Totals	52	52	Totals	60	60

Project Description:

The project is targeted toward special needs residents.

Housing Project Attachment - 9 Units Rehabilitated, Converted or Preserved

*** This form is NOT required for new construction projects ***

Applicant:	City and County of San Francisco, Recreation and Park Department
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	35 Woodward - Dolores Hotel

General Requirements

- Is the local government ☒ providing, or did it provide "committed assistance" for this project?

YES

NO

- Identify the specific type and date of "committed assistance."

Type: Home Loan, Community Development Block Grant Loan

Date: 9/23/2010

NOTE: The applicant must meet these general requirements in addition to the requirements detailed below to be eligible to receive funding for units substantially rehabilitated, converted, or preserved.

Project Type

☐ Mark appropriate box and provide supporting documentation for each of the bullets listed under the heading.

Substantial Rehabilitation

- The rehabilitation resulted in a net increase in the number of housing units available and affordable to very low- and low-income households.

Units were at imminent risk of loss to the housing stock or determined to be unfit for human habitation. For example, units were at-risk of being demolished or removed from the housing stock without the necessary rehabilitation.

- If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975 and tenants were given the right to reoccupy the units.

☐ Conversion of Units or Foreclosed Properties from Non-Affordable to Affordable

- Type of Units Converted:

☐ Multifamily rental units (must be 3 or more units)

☐ Multifamily ownership units

☐ Foreclosed properties acquired

- If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975.

Preservation of Affordable Units

- Units were located within an "assisted housing development" as defined in Government Code Section 65863.10(a)(3) and/or restricted to income-qualified households at the time the units were identified for preservation.

- Units were at imminent risk of loss to the affordable housing stock.

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	391 Leavenworth - Aarti Hotel		
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment		
Building Permit(s) Issuance Date(s): (for new construction units)	9/23/2011		
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)			
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes	Please include supporting documentation	
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses		

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input checked="" type="checkbox"/> Deed-Restricted <input type="checkbox"/> Method of Restriction/ Type of Subsidy Used:	Declaration of Restrictions / CDBG Program
Length of Deed Restriction:	55 years *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted <input type="checkbox"/> Method of Restriction/ Type of Subsidy Used:	
Length of Deed Restriction:	*Ownership units must be restricted for a minimum of 20 years
<input type="checkbox"/> Non-Restricted Units Sales Price & Initial Occupant's Income	

* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units		Very Low-Income Units				Low-Income Units	
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms
	0	Studio	40	40	Studio		0
	0	1-Bed		0	1-Bed		0
	0	2-Bed		0	2-Bed		0
	0	3-Bed		0	3-Bed		0
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
0	0	Totals	40	40	Totals	0	0

Project Description:

Rehabilitation of 40-year SRO.

**Housing Project Attachment 9
Units Rehabilitated, Converted or Preserved**

*** This form is NOT required for new construction projects ***

Applicant:	City and County of San Francisco, Recreation and Park Department
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	391 Leavenworth

General Requirements

<ul style="list-style-type: none"> Is the local government providing, or did it provide "committed assistance" for this project? <div style="display: flex; justify-content: space-around;"> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> </div> Identify the specific type and date of "committed assistance." Type: <u>Community Development Block Grant Loan</u> Date: <u>4-13-2011</u>
<p>NOTE: The applicant must meet these general requirements in addition to the requirements detailed below to be eligible to receive funding for units substantially rehabilitated, converted, or preserved.</p>

Project Type

☒ Mark appropriate box and provide supporting documentation for each of the bullets listed under the heading:

Substantial Rehabilitation

- The rehabilitation resulted in a net increase in the number of housing units available and affordable to very low- and low-income households.
Units were at imminent risk of loss to the housing stock or determined to be unfit for human habitation. For example, units were at-risk of being demolished or removed from the housing stock without the necessary rehabilitation.
- If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975 and tenants were given the right to reoccupy the units.

Conversion of Units or Foreclosed Properties from Non-Affordable to Affordable

- Type of Units Converted:
 - ☐ Multifamily rental units (must be 3 or more units)
 - ☐ Multifamily ownership units
 - ☐ Foreclosed properties acquired
- If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975.

Preservation of Affordable Units

- Units were located within an "assisted housing development" as defined in Government Code Section 65863.10(a)(3) and/or restricted to income-qualified households at the time the units were identified for preservation.
- Units were at imminent risk of loss to the affordable housing stock.

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant: City and County of San Francisco, Recreation and Park Department	
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation) <input checked="" type="checkbox"/>	350 Golden Gate - Madonna Residence
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment
Building Permit(s) Issuance Date(s): (for new construction units)	9/23/2011
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved) <input checked="" type="checkbox"/>	
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)? <input checked="" type="checkbox"/> Yes Please include supporting documentation	
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation. <input checked="" type="checkbox"/>	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units <input checked="" type="checkbox"/>	
Deed-Restricted <input checked="" type="checkbox"/> Method of Restriction/ Type of Subsidy Used: Declaration of Restrictions / HOME Program	
Length of Deed Restriction: 55 years	*Rental units must be restricted for a minimum of 55 years
Ownership Units	
Deed-Restricted Method of Restriction/ Type of Subsidy Used: HOME, CDBG	
Length of Deed Restriction:	*Ownership units must be restricted for a minimum of 20 years
Non-Restricted Units Sales Price & Initial Occupant's Income	
* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.	

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units		Unit Type	Very Low-Income Units		Unit Type	Low-Income Units	
Number of Units	Total Bdrms		Number of Units	Total Bdrms		Number of Units	Total Bdrms
0	0	Studio	69	69	Studio	0	0
0	0	1-Bed		0	1-Bed		0
0	0	2-Bed		0	2-Bed		0
0	0	3-Bed		0	3-Bed		0
0	0	4-Bed		0	4-Bed		0
0	0	5-Bed		0	5-Bed		0
0	0	Totals	69	69	Totals	0	0

Project Description:

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Housing Project Attachment - 9 Units Rehabilitated, Converted or Preserved

*** This form is NOT required for new construction projects ***

Applicant:	City and County of San Francisco, Recreation and Park Department
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	350 Golden Gate

General Requirements

• Is the local government providing, or did it provide "committed assistance" for this project? <div style="display: flex; justify-content: space-around;"> YES NO </div>	
• Identify the specific type and date of "committed assistance." Type: rent subsidys for 12 units and capitalized operating subsidy from San Francisco Date: 6-22- 2011	
<p>NOTE: The applicant must meet these general requirements in addition to the requirements detailed below to be eligible to receive funding for units substantially rehabilitated, converted, or preserved.</p>	

Project Type



Mark appropriate box and provide supporting documentation for each of the bullets listed under the heading.

Substantial Rehabilitation

- The rehabilitation resulted in a net increase in the number of housing units available and affordable to very low- and low-income households.
 Units were at imminent risk of loss to the housing stock or determined to be unfit for human habitation. For example, units were at-risk of being demolished or removed from the housing stock without the necessary rehabilitation.
- If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975 and tenants were given the right to reoccupy the units.

Conversion of Units or Foreclosed Properties from Non-Affordable to Affordable

- Type of Units Converted:
 - Multifamily rental units (must be 3 or more units)
 - Multifamily ownership units
 - Foreclosed properties acquired
- If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975.

Preservation of Affordable Units

- Units were located within an "assisted housing development" as defined in Government Code Section 65863.10(a)(3) and/or restricted to income-qualified households at the time the units were identified for preservation.
- Units were at imminent risk of loss to the affordable housing stock.

Housing Project Cover Sheet - 6

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	365 Fulton - Richardson Apts		
Type of Project:	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment		
Building Permit(s) Issuance Date(s): (for new construction units)	6/20/2011		
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input checked="" type="checkbox"/> <input type="checkbox"/>		
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	Yes		Please include supporting documentation
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses		

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input checked="" type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	Declaration of Restrictions / Tax Increment
Length of Deed Restriction:	<input type="text" value="55 years"/> *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	
Length of Deed Restriction:	<input type="text"/> *Ownership units must be restricted for a minimum of 20 years
<input type="checkbox"/> Non-Restricted Units Sales Price & Initial Occupant's Income	
* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.	

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

*Extremely Low-Income Units			Very Low-Income Units			Low-Income Units	
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms
	0	Studio		0	Studio		0
	0	1-Bed		0	1-Bed		0
2	4	2-Bed	7	14	2-Bed		10
	0	3-Bed	2	6	3-Bed		0
2	8	4-Bed	2	8	4-Bed		0
	0	5-Bed		0	5-Bed		0
4	12	Totals	11	28	Totals	0	0

Project Description:

To Erect 4 Stories, 15 Units Residential Building.

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	<input type="checkbox"/>	249 Eddy, 161 - 165 Turk	
Type of Project:	<input checked="" type="checkbox"/>	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment	
Building Permit(s) Issuance Date(s): (for new construction units)	1/13/2010		
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input checked="" type="checkbox"/>		
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?		Yes Please include supporting documentation	
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.		site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses	

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> Declaration of Restrictions
<input type="checkbox"/> Length of Deed Restriction:	<div style="border: 1px solid black; padding: 2px;">55-Year</div> *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<input type="checkbox"/> Length of Deed Restriction:	<div style="border: 1px solid black; padding: 2px;"></div> *Ownership units must be restricted for a minimum of 20 years
<input type="checkbox"/> Non-Restricted Units Sales Price & Initial Occupant's Income	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

Extremely Low-Income Units		Very Low-Income Units		Low-Income Units	
Number of Units	Total Bdrms	Number of Units	Total Bdrms	Number of Units	Total Bdrms
		77	77		0
		5	5		0
			0		0
			0		0
			0		0
			0		0
0	0	82	82	0	0
		Totals		Totals	

Project Description:

249 Turk Street, 55 units, 165 Turk, 27 units (Need to verify housing mix)

Housing Project Attachment- 9
Units Rehabilitated, Converted or Preserved

*** This form is NOT required for new construction projects ***

Applicant:	City and County of San Francisco, Recreation and Park Department	
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	249 Eddy, 161 - 165 Turk	

General Requirements

- Is the local government providing, or did it provide "committed assistance" for this project?
- YES NO

- Identify the specific type and date of "committed assistance."

Type: _____

Date: _____

NOTE: The applicant must meet these general requirements in addition to the requirements detailed below to be eligible to receive funding for units substantially rehabilitated, converted, or preserved.

☒ Project Type

Mark appropriate box and provide supporting documentation for each of the bullets listed under the heading:

Substantial Rehabilitation

- The rehabilitation resulted in a net increase in the number of housing units available and affordable to very low- and low-income households.
- Units were at imminent risk of loss to the housing stock or determined to be unfit for human habitation. For example, units were at-risk of being demolished or removed from the housing stock without the necessary rehabilitation.
- If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975 and tenants were given the right to reoccupy the units.

<input type="checkbox"/>	Conversion of Units or Foreclosed Properties from Non-Affordable to Affordable
--------------------------	--

- Type of Units Converted:
- ☐ Multifamily rental units (must be 3 or more units)
- ☐ Multifamily ownership units
- ☐ Foreclosed properties acquired
- If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975.

Preservation of Affordable Units

- Units were located within an "assisted housing development" as defined in Government Code Section 65863.10(a)(3) and/or restricted to income-qualified households at the time the units were identified for preservation.
- Units were at imminent risk of loss to the affordable housing stock.

Housing Project Cover Sheet - 9

***** Please complete and submit a separate Project Cover Sheet for each Residential Project *****

Applicant:	City and County of San Francisco, Recreation and Park Department		
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	<input type="checkbox"/>	473 Ellis - Cambridge Hotel	
Type of Project:	<input checked="" type="checkbox"/>	New Construction Substantial Rehabilitation, Conversion, or Preservation* *Note: Applicant must also fill out Housing Project Attachment	
Building Permit(s) Issuance Date(s): (for new construction units)	<input type="checkbox"/>	8/26/2010	
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved)	<input checked="" type="checkbox"/>	TBD	
Are Eligible Units considered Infill, pursuant to Section 106(C)(1)-(3)?	<input checked="" type="checkbox"/>	Yes	Please include supporting documentation
If yes, please identify how units determined to be infill (refer to Section 106(C) of Program Guidelines) and include supporting documentation.	<input checked="" type="checkbox"/>	site previously developed 75 percent of perimeter adjoins parcels currently developed with urban uses	

Affordability Documentation (Mark appropriate box and provide supporting documentation)

Rental Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 30px; width: 100%;"></div> Declaration of Restrictions / CDBG Program
Length of Deed Restriction:	57 years *Rental units must be restricted for a minimum of 55 years
Ownership Units	
<input type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	<div style="border: 1px solid black; height: 30px; width: 100%;"></div>
Length of Deed Restriction:	<div style="border: 1px solid black; width: 100px; height: 20px;"></div> *Ownership units must be restricted for a minimum of 20 years
<input type="checkbox"/> Non-Restricted Units Sales Price & Initial Occupant's Income	<div style="border: 1px solid black; height: 30px; width: 100%;"></div>

* Please note if counting non-restricted ownership units, supporting documentation must include both the initial sales price and household income of initial occupant considering household size.

Project Summary Table

Number of Bedrooms By Unit Type and Affordability

Extremely Low-Income Units		Unit Type	*Very Low-Income Units*		Unit Type	*Low-Income Units*	
Number of Units	Total Bdrms		Number of Units	Total Bdrms		Number of Units	Total Bdrms
35	35	Studio	25	25	Studio		
	0	1-Bed		0	1-Bed		
	0	2-Bed		0	2-Bed		
	0	3-Bed		0	3-Bed		
	0	4-Bed		0	4-Bed		
	0	5-Bed		0	5-Bed		
35	35	Totals	25	25	Totals	0	

Project Description:

Housing Project Attachment- 9 Units Rehabilitated, Converted or Preserved

*** This form is NOT required for new construction projects ***

Applicant:	City and County of San Francisco, Recreation and Park Department
Project Name, Address and/or other Identifier: (please note, it is critical that project identifier is consistent or readily identifiable across all required documentation)	473 Ellis, Cambridge Hotel

General Requirements

• Is the local government providing, or did it provide "committed assistance" for this project? <div style="display: flex; justify-content: space-around;"> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO </div>	
• Identify the specific type and date of "committed assistance." Type: _____ Date: _____	
NOTE: The applicant must meet these general requirements in addition to the requirements detailed below to be eligible to receive funding for units substantially rehabilitated, converted, or preserved.	

Project Type

Mark appropriate box and provide supporting documentation for each of the bullets listed under the heading.

<input checked="" type="checkbox"/> Substantial Rehabilitation
• The rehabilitation resulted in a net increase in the number of housing units available and affordable to very low- and low-income households. • Units were at imminent risk of loss to the housing stock or determined to be unfit for human habitation. For example, units were at-risk of being demolished or removed from the housing stock without the necessary rehabilitation. • If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975 and tenants were given the right to reoccupy the units.
<input type="checkbox"/> Conversion of Units or Foreclosed Properties from Non-Affordable to Affordable
• Type of Units Converted: <div style="margin-left: 20px;"> <input type="checkbox"/> Multifamily rental units (must be 3 or more units) <input type="checkbox"/> Multifamily ownership units <input type="checkbox"/> Foreclosed properties acquired </div> • If the units were previously occupied, the local government provided relocation assistance consistent with Government Code 7260 or Health and Safety Code Section 17975.
<input type="checkbox"/> Preservation of Affordable Units
• Units were located within an "assisted housing development" as defined in Government Code Section 65863.10(a)(3) and/or restricted to income-qualified households at the time the units were identified for preservation. • Units were at imminent risk of loss to the affordable housing stock.

STATE OF CALIFORNIA
STANDARD AGREEMENT
STD 213 (Rev 06/03)

AGREEMENT NUMBER

13-HRPP-XXX

REGISTRATION NUMBER

N/A

1. This Agreement is entered into between the State Agency and the Contractor named below:

STATE AGENCY'S NAME

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

CONTRACTOR'S NAME

City/County/Town of _____

2. The term of this Agreement is: **Upon HCD Approval** through **06/30/2016**

3. The maximum amount of this Agreement is: **\$ x,xxx,xxx.00**

4. The parties agree to comply with the terms and conditions of the following exhibits which are by this reference made a part of the Agreement.

Exhibit A - Authority, Purpose and Scope of Work	2	page(s)
Exhibit B - Budget Detail and Payment Provisions	2	page(s)
Exhibit C - State of California General Terms and Conditions		GTC 610*
Exhibit D - HRP Program General Terms and Conditions	2	page(s)

TOTAL NUMBER OF PAGES ATTACHED: **6** pages.

Items shown with an asterisk (*) are hereby incorporated by reference and made part of this agreement as if attached hereto.
These documents can be viewed at <http://www.documents.dgs.ca.gov/olsGTC-610.doc>

IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto:

CONTRACTOR

CONTRACTOR'S NAME (if other than an individual, state whether a corporation, partnership, etc.)

City/County/Town of _____

BY (Authorized Signature)



DATE SIGNED (Do not type)

PRINTED NAME AND TITLE OF PERSON SIGNING

ADDRESS

STATE OF CALIFORNIA

AGENCY NAME

Department of Housing and Community Development

BY (Authorized Signature)



DATE SIGNED (Do not type)

PRINTED NAME AND TITLE OF PERSON SIGNING

*California Department of General
Services Use Only*

Stacy Q. Hernandez, Contracts Manager, Business & Contract Services Branch

☒ Exempt from: SCM 4.04.3 (DGS
Memo dated 6/12/81)

1800 Third Street, Room 350, Sacramento, CA 95811

EXHIBIT A

AUTHORITY, PURPOSE AND SCOPE OF WORK

1. Authority

Pursuant to Chapter 8 of Part 2 of Division 31 of the California Health and Safety Code, commencing with Section 50700, as added by Section 1 of Chapter 641 of the Statutes of 2008, the State of California Department of Housing and Community Development (herein referred to as the "State" or the "Department") has established the Housing-Related Parks (HRP) Program (the "Program"). This Standard Agreement (the "Agreement") is entered into under the authority of, and in furtherance of the purposes of, the Program as set forth in Health and Safety Code Section 50701. Pursuant to Health and Safety Code Sections 50702 and 50704.5, the State has issued a Notice of Funding Availability, dated June 15, 2011 (NOFA) and Program guidelines, dated January 13, 2011 (the "Guidelines") governing the Program.

2. Purpose

In accordance with the authority cited above, the Contractor has applied to the State for financial assistance (the "Application") in the form of a grant from the Program (the "Grant"). The State has agreed to make the Grant, as a financial incentive based on the issuance of housing starts, for housing units affordable to very low- and low-income households by the Contractor pursuant to the terms of the NOFA, the Guidelines and this Agreement. Based on the representations made by the Contractor in its Application, which is hereby incorporated as if set forth in full, the State shall provide a Grant in the amount shown below for the purpose of paying for capital improvement(s) related to the acquisition, rehabilitation, or construction of a Park and Recreation Facility.

The State and the Contractor have agreed to enter into this Agreement in accordance with the terms and conditions herein, subject to all the provisions of the applicable statutes, the NOFA, the Guidelines and further subject to the State laws and requirements governing State contracts. Capitalized terms herein shall have the meaning of the definitions set forth in the Guidelines.

3. Scope of Work

-
-
-
-
-
-

EXHIBIT A

4. Grant Timelines

No work performed prior to the effective date of this Agreement or after June 30, 2016, shall be funded. The effective date of this Agreement is the date it is executed by the State, after execution by the Contractor. All funds must be requested from the Department no later than April 30, 2016. For the purpose of this Agreement, no funds may be expended after June 30, 2016. It is the responsibility of the Contractor to monitor the project and timeliness of draws within the specified dates.

5. Grant Amount

The total amount of this Grant is \$ _____ .00 .

EXHIBIT B

BUDGET DETAIL AND PAYMENT PROVISIONS

1. Allowable Uses of Grant Funds

- A. Grant funds shall only be used for projects approved by the State that involve the construction, rehabilitation, and/or acquisition of capital assets as defined by the California Government Code, Section 16727(a) that benefit the community within the Contractor's jurisdiction and as further set out in Section 108 of the Guidelines. Capital assets include tangible physical property with an expected useful life of fifteen (15) years or more, equipment with an expected useful life of two (2) years or more, or major maintenance, reconstruction, or demolition for purposes of reconstruction and/or retrofitting work.
- B. Incidental expenses shall not be paid by Grant funds unless they are directly related to the construction or acquisition of an eligible capital asset. Such expenses include costs associated with planning, engineering, construction management, environmental impact reports, appraisals, site acquisitions, or necessary easements.
- C. Grant funds shall not be expended for the administrative costs of persons directly employed by the Contractor or for other "soft" costs that are not directly related to the construction, rehabilitation or acquisition of capital assets.

2. Performance

Contractor shall take such actions, pay such expenses and do all things necessary to complete the Work specified in Exhibit A in accordance with the schedule for completion set forth therein and within the terms and conditions of this Agreement.

3. Fiscal Administration

- A. Term: The effective date of this Agreement is the date upon which it is executed by the State (the date stamped in the lower right portion of the Standard Agreement (Std. 213) through September 30, 2016. All funds must be requested by the Contractor by April 30, 2016 and expended by June 30, 2016. This Agreement shall terminate September 30, 2016.
- B. The Contractor shall make any and all request(s) for disbursement no earlier than ninety (90) days from the anticipated need for the funds, using the forms provided by the State. The forms will be made available at <http://www.hcd.ca.gov/hpd/hrpp> . The Contractor shall expend the funds within 90 days from the date of receipt from the State, or by June 30, 2016, whichever occurs earlier and subsequent supporting documentation shall be submitted to the Department.
- C. Failure to expend contract funds in a timely manner may affect future funding.

EXHIBIT B

- D. A separate checking account for the Grant funds is not required. However, the Contractor shall deposit Grant funds in an interest bearing checking or savings account, or the State may require the Contractor to deposit all Grant funds into a segregated account in an institution whose deposits are insured by the federal or state government. All interest earned from the deposit of Grant funds shall be used for allowable, Program purposes and accounted for to the State. All funds not expended within 90 days of receipt, or by June 30, 2016, as applicable, shall be returned to the State with accrued interest.
- E. The Contractor shall make a good faith effort to minimize the number of disbursement requests to the State by anticipating and requesting in advance the maximum amount of funds that can be expended within the (ninety) 90 day time frame.
- F. The Contractor shall inform the State within a reasonable amount of time in the event that expenditures related to an authorized project(s) are less than the total Grant award. The Contractor may expend the balance of Grant funds on additional capital assets projects, upon written State approval. Contractor shall provide the State with a letter of request that describes the additional project(s) to be funded.
- G. The Contractor shall immediately inform the State, no later than December 31, 2015, if the Contractor anticipates it will not be able to expend all Grant funds by June 30, 2016.
- H. The Contractor is responsible for maintaining records which fully disclose the activities funded by the Grant. Adequate documentation of each transaction shall be maintained to permit the determination, through an audit if requested by the State, of the accuracy of the records and the allowability of expenditures charged to Grant funds. If the allowability of expenditure cannot be determined because records or documentation are inadequate, the expenditure may be disallowed, and the State shall determine the reimbursement method for the amount disallowed. The State's determination of the allowability of any expense shall be final, absent fraud, mistake or arbitrariness.
- I. Funds will be disbursed upon receipt by the Department of documentation of a certificate of occupancy, final inspection, or other comparable local approval evidencing completion of the Eligible Units by which the applicant qualified for Program funding. All such documentation shall be subject to the approval of the Department. If the Department determines that any of the Eligible Units, which qualified the applicant for Program funding, were not completed, then the Grant will be reduced to an amount corresponding to the actual number of completed Eligible Units.
- J. Any Grant funds remaining unexpended as of June 30, 2016, must be returned to the State with accrued interest. Checks shall be made payable to the Department of Housing and Community Development (HCD) and shall be mailed to the Department at the address indicated in Exhibit D, no later than July 31, 2016.

EXHIBIT C

GENERAL TERMS AND CONDITIONS

1. APPROVAL: This Agreement is of no force or effect until signed by both parties and approved by the Department of General Services, if required. Contractor may not commence performance until such approval has been obtained.
2. AMENDMENT: No amendment or variation of the terms of this Agreement shall be valid unless made in writing, signed by the parties and approved as required. No oral understanding or Agreement not incorporated in the Agreement is binding on any of the parties.
3. ASSIGNMENT: This Agreement is not assignable by the Contractor, either in whole or in part, without the consent of the State in the form of a formal written amendment.
4. AUDIT: Contractor agrees that the awarding department, the Department of General Services, the Bureau of State Audits, or their designated representative shall have the right to review and to copy any records and supporting documentation pertaining to the performance of this Agreement. Contractor agrees to maintain such records for possible audit for a minimum of three (3) years after final payment, unless a longer period of records retention is stipulated. Contractor agrees to allow the auditor(s) access to such records during normal business hours and to allow interviews of any employees who might reasonably have information related to such records. Further, Contractor agrees to include a similar right of the State to audit records and interview staff in any subcontract related to performance of this Agreement. (Gov. Code §8546.7, Pub. Contract Code §10115 et seq., CCR Title 2, Section 1896).
5. INDEMNIFICATION: Contractor agrees to indemnify, defend and save harmless the State, its officers, agents and employees from any and all claims and losses accruing or resulting to any and all contractors, subcontractors, suppliers, laborers, and any other person, firm or corporation furnishing or supplying work services, materials, or supplies in connection with the performance of this Agreement, and from any and all claims and losses accruing or resulting to any person, firm or corporation who may be injured or damaged by Contractor in the performance of this Agreement.
6. DISPUTES: Contractor shall continue with the responsibilities under this Agreement during any dispute.
7. TERMINATION FOR CAUSE: The State may terminate this Agreement and be relieved of any payments should the Contractor fail to perform the requirements of this Agreement at the time and in the manner herein provided. In the event of such termination the State may proceed with the work in any manner deemed proper by the State. All costs to the State shall be deducted from any sum due the Contractor under this Agreement and the balance, if any, shall be paid to the Contractor upon demand.

8. INDEPENDENT CONTRACTOR: Contractor, and the agents and employees of Contractor, in the performance of this Agreement, shall act in an independent capacity and not as officers or employees or agents of the State.

9. RECYCLING CERTIFICATION: The Contractor shall certify in writing under penalty of perjury, the minimum, if not exact, percentage of post consumer material as defined in the Public Contract Code Section 12200, in products, materials, goods, or supplies offered or sold to the State regardless of whether the product meets the requirements of Public Contract Code Section 12209. With respect to printer or duplication cartridges that comply with the requirements of Section 12156(e), the certification required by this subdivision shall specify that the cartridges so comply (Pub. Contract Code §12205).

10. NON-DISCRIMINATION CLAUSE: During the performance of this Agreement, Contractor and its subcontractors shall not unlawfully discriminate, harass, or allow harassment against any employee or applicant for employment because of sex, race, color, ancestry, religious creed, national origin, physical disability (including HIV and AIDS), mental disability, medical condition (e.g., cancer), age (over 40), marital status, and denial of family care leave. Contractor and subcontractors shall insure that the evaluation and treatment of their employees and applicants for employment are free from such discrimination and harassment. Contractor and subcontractors shall comply with the provisions of the Fair Employment and Housing Act (Gov. Code §12990 (a-f) et seq.) and the applicable regulations promulgated thereunder (California Code of Regulations, Title 2, Section 7285 et seq.). The applicable regulations of the Fair Employment and Housing Commission implementing Government Code Section 12990 (a-f), set forth in Chapter 5 of Division 4 of Title 2 of the California Code of Regulations, are incorporated into this Agreement by reference and made a part hereof as if set forth in full. Contractor and its subcontractors shall give written notice of their obligations under this clause to labor organizations with which they have a collective bargaining or other Agreement.

Contractor shall include the nondiscrimination and compliance provisions of this clause in all subcontracts to perform work under the Agreement.

11. CERTIFICATION CLAUSES: The CONTRACTOR CERTIFICATION CLAUSES contained in the document CCC 307 are hereby incorporated by reference and made a part of this Agreement by this reference as if attached hereto.

12. TIMELINESS: Time is of the essence in this Agreement.

13. COMPENSATION: The consideration to be paid Contractor, as provided herein, shall be in compensation for all of Contractor's expenses incurred in the performance hereof, including travel, per diem, and taxes, unless otherwise expressly so provided.

14. GOVERNING LAW: This contract is governed by and shall be interpreted in accordance with the laws of the State of California.

15. ANTITRUST CLAIMS: The Contractor by signing this agreement hereby certifies that if these services or goods are obtained by means of a competitive bid, the Contractor shall comply with the requirements of the Government Codes Sections set out below.

a. The Government Code Chapter on Antitrust claims contains the following definitions:

1) "Public purchase" means a purchase by means of competitive bids of goods, services, or materials by the State or any of its political subdivisions or public agencies on whose behalf the Attorney General may bring an action pursuant to subdivision (c) of Section 16750 of the Business and Professions Code.

2) "Public purchasing body" means the State or the subdivision or agency making a public purchase. Government Code Section 4550.

b. In submitting a bid to a public purchasing body, the bidder offers and agrees that if the bid is accepted, it will assign to the purchasing body all rights, title, and interest in and to all causes of action it may have under Section 4 of the Clayton Act (15 U.S.C. Sec. 15) or under the Cartwright Act (Chapter 2 (commencing with Section 16700) of Part 2 of Division 7 of the Business and Professions Code), arising from purchases of goods, materials, or services by the bidder for sale to the purchasing body pursuant to the bid. Such assignment shall be made and become effective at the time the purchasing body tenders final payment to the bidder. Government Code Section 4552.

c. If an awarding body or public purchasing body receives, either through judgment or settlement, a monetary recovery for a cause of action assigned under this chapter, the assignor shall be entitled to receive reimbursement for actual legal costs incurred and may, upon demand, recover from the public body any portion of the recovery, including treble damages, attributable to overcharges that were paid by the assignor but were not paid by the public body as part of the bid price, less the expenses incurred in obtaining that portion of the recovery. Government Code Section 4553.

d. Upon demand in writing by the assignor, the assignee shall, within one year from such demand, reassign the cause of action assigned under this part if the assignor has been or may have been injured by the violation of law for which the cause of action arose and (a) the assignee has not been injured thereby, or (b) the assignee declines to file a court action for the cause of action. See Government Code Section 4554.

16. CHILD SUPPORT COMPLIANCE ACT: For any Agreement in excess of \$100,000, the contractor acknowledges in accordance with Public Contract Code 7110, that:

a. The contractor recognizes the importance of child and family support obligations and shall fully comply with all applicable state and federal laws relating to child and family support enforcement, including, but not limited to, disclosure of information and compliance with earnings assignment orders, as provided in Chapter 8 (commencing with section 5200) of Part 5 of Division 9 of the Family Code; and

b. The contractor, to the best of its knowledge is fully complying with the earnings assignment orders of all employees and is providing the names of all new employees to the New Hire Registry maintained by the California Employment Development Department.

17. UNENFORCEABLE PROVISION: In the event that any provision of this Agreement is unenforceable or held to be unenforceable, then the parties agree that all other provisions of this Agreement have force and effect and shall not be affected thereby.

18. PRIORITY HIRING CONSIDERATIONS: If this Contract includes services in excess of \$200,000, the Contractor shall give priority consideration in filling vacancies in positions funded by the Contract to qualified recipients of aid under Welfare and Institutions Code Section 11200 in accordance with Pub. Contract Code §10353.

19. SMALL BUSINESS PARTICIPATION AND DVBE PARTICIPATION REPORTING REQUIREMENTS:

a. If for this Contract Contractor made a commitment to achieve small business participation, then Contractor must within 60 days of receiving final payment under this Contract (or within such other time period as may be specified elsewhere in this Contract) report to the awarding department the actual percentage of small business participation that was achieved. (Govt. Code § 14841.)

b. If for this Contract Contractor made a commitment to achieve disabled veteran business enterprise (DVBE) participation, then Contractor must within 60 days of receiving final payment under this Contract (or within such other time period as may be specified elsewhere in this Contract) certify in a report to the awarding department: (1) the total amount the prime Contractor received under the Contract; (2) the name and address of the DVBE(s) that participated in the performance of the Contract; (3) the amount each DVBE received from the prime Contractor; (4) that all payments under the Contract have been made to the DVBE; and (5) the actual percentage of DVBE participation that was achieved. A person or entity that knowingly provides false information shall be subject to a civil penalty for each violation. (Mil. & Vets. Code § 999.5(d); Govt. Code § 14841.)

20. LOSS LEADER:

If this contract involves the furnishing of equipment, materials, or supplies then the following statement is incorporated: It is unlawful for any person engaged in business within this state to sell or use any article or product as a "loss leader" as defined in Section 17030 of the Business and Professions Code. (PCC 10344(e).)

EXHIBIT D

HRP PROGRAM GENERAL TERMS AND CONDITIONS

1. Report Requirements

During the term of this Agreement, the Contractor shall submit the following reports by the deadlines specified, or as otherwise required at the discretion of the State:

- A. The Contractor shall submit annual reports to the State thirty (30) days after December 31st of each year ("Annual Report"), during the term of this Agreement for as long as the Contractor has not expended all Grant funds. The Annual Report shall contain (1) the progress the Contractor has made in completing the approved projects partially or wholly funded by the Grant, including a description of the community benefit; (2) the amount of Grant funds drawn down and expended to date by the Contractor; and (3) a description of projects completed. The Contractor shall use the forms provided by the State made available at <http://www.hcd.ca.gov/hpd/hrpp>; and,
- B. Upon complete expenditure of the Grant funds, the Contractor shall submit a final report in a manner satisfactory to the State ("Final Report"). The Final Report shall be submitted to the State within 60 days of June 30, 2016, the date all funds must be expended. The Final Report shall contain (1) a description of the final capital assets constructed or purchased with the Grant funds; and, (2) the number of certificates of occupancy issued in relation to the number of building permits issued in the program year. The Contractor shall use the forms provided by the State made available at <http://www.hcd.ca.gov/hpd/hrpp>.

2. State Contract Coordinator

The state contract coordinator of this Agreement for the Department is the HRP Program Manager, Division of Housing Policy Development, or the Manager's designee ("State Contract Coordinator"). Unless otherwise informed, any notice, report, or other communication required by this Agreement shall be mailed first class to the State Contract Coordinator at the following address:

Department of Housing and Community Development
Division of Housing Policy Development
1800 3rd Street, Room 430
P.O. Box 952053
Sacramento, California 94252-2053
Attention: HRP Program Manager

3. Audit/Retention and Inspection of Records

Contractor agrees that the Department or its delegatee will have the right to review, obtain, and copy all records pertaining to performance of this Agreement. Contractor agrees to provide the Department or its delegatee with any relevant information requested and shall permit the Department or its delegatee access to its premises, upon reasonable notice, during normal business hours for the purpose of interviewing employees and inspecting and copying such

EXHIBIT D

books, records, accounts, and other material that may be relevant to a matter under investigation for the purpose of determining compliance with the California Public Contract Code Section 10115 et seq., the California Government Code Section 8546.7 and Title 2, California Code of Regulations, Section 1896.60 et seq. Contractor further agrees to maintain such records for a period of three (3) years after final payment under this Agreement. Contractor shall comply with the caveats and be aware of the penalties for violations of fraud and for obstruction of investigation as set forth in the California Public Contract Code Section 10115.10.

4. Special Conditions

The State reserves the right to add any special conditions to this Agreement it deems necessary to assure that the policy and goals of the Program are achieved.

5. Prevailing Wages

- A. Where funds provided through this Agreement are used for construction work, or in support of construction work, Contractor shall ensure that the requirements of Chapter I (commencing with Section 1720) of Part 7 of the California Labor Code (pertaining to the payment of prevailing wages and administered by the California Department of Industrial Relations) are met.
- B. For the purpose of this requirement "construction work" includes, but is not limited to rehabilitation, alternation, demolition, installation or repair done under contract and paid for, in whole or in part, through this Agreement. All construction work shall be done through the use of a written contract, with the properly licensed building contractor incorporating these requirements (the "construction contractor"). Where the construction contract will be between the Contractor and a licensed building contractor the Contractor shall serve as the "awarding body" as that term is defined in the California Labor Code. Where the Contractor will provide funds to a third party that will enter into the construction contract with a licensed building contractor, the third party shall serve as the "awarding body". Prior to any disbursement of funds, including but not limited to release of any final retention payment, the State may require a certification from the awarding body that prevailing wages have been or will be paid.