



Department of Housing and Community Development
HOUSING-RELATED PARKS PROGRAM

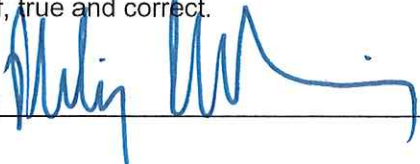
Grant Application
2013 Designated Program Year NOFA

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

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) **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	OR	<input type="checkbox"/> Regional Blueprint	If claiming Infill-Supporting, provide name/address of at least one infill development and status: 1425 Fillmore, Complete.
NO		YES	

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 checked="" 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)
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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 checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Community Factfinder Finder 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.
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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.

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 checked="" type="checkbox"/> Supporting	OR	<input type="checkbox"/> Regional Blueprint	<input type="checkbox"/> Blueprint	If claiming Infill-Supporting, provide name/address of at least one infill development and status: 5800 Third Street, San Francisco, CA - under construction.
NO	YES		NO	YES	

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 adisadvanaged community in census block 06-075-0234-00 .
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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.
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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: 06-075-0113-00
(please use 11-digit census tract number as detailed in instructions)

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.

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		OR	<input type="checkbox"/> Region	<input type="checkbox"/> Blueprint	If claiming Infill-Supporting, provide name/address of at least one infill development and status: 940 Washington
NO	YES		NO	YES	

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 census block 06-075-0113-00 qualifies as a disadvantaged community.

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 #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:

- 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) **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	<input checked="" type="checkbox"/> Supporting	OR	<input type="checkbox"/> Region	<input type="checkbox"/> Blueprint	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
NO	YES		NO	YES	

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 checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Per HUD data, the park site is within a qualified census tract.
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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 checked="" type="checkbox"/> YES	<input type="checkbox"/> 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.
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Project Cost Breakdown and Other Funding Sources				
Project Cost				
Subproject	Estimated Cost		Subproject	Estimated Cost
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	OR	<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	

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 checked="" type="checkbox"/> YES	<input type="checkbox"/> 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.
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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 checked="" type="checkbox"/> YES	<input type="checkbox"/> 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.
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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 #	Project Name/Identifier from Housing Project Cover Sheet	Unit Count							Base Award Amount	Bonus Awards						TOTAL Total Award Amount
		A	B	C	D	E	F	G		New Construction Units?	Infill Units?	Infill-Supporting/Regional Blueprint?	Park-Deficient Community?	Disadvantaged Community?	Total Bonus Funds	
		# 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	3	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) 033-001 (033-001)							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	Phelah 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

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"/>			
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	
* 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						Low-Income Units	
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms
	0	Studio	32	32	Studio		0
	0	1-Bed	65	65	1-Bed		0
	0	2-Bed	1	2	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	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:	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)	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:	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="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	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)?	<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 checked="" type="checkbox"/> Deed-Restricted Method of Restriction/ Type of Subsidy Used:	Declaration of Restrictions / HOME, Hotel Tax, Affordable Housing Fund
<input type="checkbox"/> 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	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) <input checked="" type="checkbox"/>	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
<input type="checkbox"/> 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:	
<input type="checkbox"/> 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	0	Studio	0	0	Studio	0	0
7	7	1-Bed	35	35	1-Bed	0	0
9	18	2-Bed	45	90	2-Bed	0	0
9	27	3-Bed	44	132	3-Bed	0	0
0	0	4-Bed	0	0	4-Bed	0	0
0	0	5-Bed	0	0	5-Bed	0	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"/>			
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		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	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) <input checked="" type="checkbox"/>	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) <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, 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	
* 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		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:	<input type="text" value="Notice of Special Restrictions"/>
<input type="checkbox"/> 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:	<input type="text"/>
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	<input type="text"/>
* 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	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"/>	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)	10/14/2011		
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: Notice of Special Restrictions
Length of Deed Restriction: <input type="checkbox"/>	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:
Length of Deed Restriction: <input type="checkbox"/>	 *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	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: Notice of Special Restrictions
<input type="checkbox"/>	Length of Deed Restriction: 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:
<input type="checkbox"/>	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	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	Totals	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						Low-Income Units	
Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms	Unit Type	Number of Units	Total Bdrms
	0	Studio	15	15	Studio		0
	0	1-Bed	24	24	1-Bed		0
	0	2-Bed	25	50	2-Bed		0
	0	3-Bed	8	24	3-Bed		0
	0	4-Bed		0	4-Bed		0
	0	5-Bed		0	5-Bed		0
0	0	Totals	72	113	Totals	0	0

Project Description:

Sponsored by Providence, 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)?	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
<input type="checkbox"/> 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:	
<input type="checkbox"/> 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	0	0	Studio	29	29
0	0	1-Bed	0	0	1-Bed	18	18
0	0	2-Bed	0	0	2-Bed	2	4
0	0	3-Bed	0	0	3-Bed	0	0
0	0	4-Bed	0	0	4-Bed	0	0
0	0	5-Bed	0	0	5-Bed	0	0
0	0	Totals	0	0	Totals	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"/>			
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 checked="" type="checkbox"/>	Deed-Restricted Method of Restriction/ Type of Subsidy Used:
Length of Deed Restriction: 	*Rental units must be restricted for a minimum of 55 years
<input type="checkbox"/>	
Ownership Units	
<input type="checkbox"/>	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
<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	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
<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
	0	Studio		0	Studio		0
	0	1-Bed	2	2	1-Bed	18	18
	0	2-Bed	12	24	2-Bed	118	236
	0	3-Bed	3	9	3-Bed	15	45
	0	4-Bed	26	104	4-Bed		0
	0	5-Bed		0	5-Bed		0
0	0	Totals	43	139	Totals	151	299

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:	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)?	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
<input type="checkbox"/> 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	0	Studio	0	0	Studio	6	6
0	0	1-Bed	0	0	1-Bed	23	23
0	0	2-Bed	0	0	2-Bed	8	16
0	0	3-Bed	0	0	3-Bed	3	9
0	0	4-Bed	0	0	4-Bed		0
0	0	5-Bed	0	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)?	<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:	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
<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	0	0	Studio	4	4
0	0	1-Bed	0	0	1-Bed	12	12
0	0	2-Bed	0	0	2-Bed	11	22
0	0	3-Bed	0	0	3-Bed	0	0
0	0	4-Bed	0	0	4-Bed	0	0
0	0	5-Bed	0	0	5-Bed	0	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) <input checked="" type="checkbox"/>	1167 Market Street - Trinity Plaza		
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)	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. <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
<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		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
	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:

Apartments, 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. <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:	Declaration of Restriction / Tax Increment
<input type="checkbox"/> 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:	
<input type="checkbox"/> Length of Deed Restriction:	
<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	4	4	Studio	3	3
0	0	1-Bed	18	18	1-Bed	10	10
0	0	2-Bed	10	20	2-Bed	8	16
0	0	3-Bed	3	9	3-Bed	3	9
0	0	4-Bed		0	4-Bed		0
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) <input checked="" type="checkbox"/>	1100 Ocean Avenue (Phelan Loop)		
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. <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:	Declaration of Restrictions / Affordable Housing Bond Program
Length of Deed Restriction:	55 years *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
0	0	Studio	18	18	Studio	0	0
0	0	1-Bed	18	18	1-Bed	0	0
0	0	2-Bed	21	42	2-Bed	0	0
0	0	3-Bed	13	39	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	70	117	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 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:	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		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
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)	<input checked="" type="checkbox"/>	2175 Market 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)	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)?	<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)

<input checked="" type="checkbox"/> Rental Units	
<input type="checkbox"/> Deed-Restricted 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 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	0	0	Studio	0	0
0	0	1-Bed	11	11	1-Bed	0	0
0	0	2-Bed	7	14	2-Bed	0	0
0	0	3-Bed	0	0	3-Bed	0	0
0	0	4-Bed	0	0	4-Bed	0	0
0	0	5-Bed	0	0	5-Bed	0	0
0	0	Totals	18	25	Totals	0	0

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) <input type="checkbox"/>	Project 7.1 - 940 Washington - Gum Moon		
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)			
Date(s) of Certificate(s) of Occupancy: (units rehabilitated, converted, or preserved) <input checked="" type="checkbox"/>	6/5/2012		
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	
Deed-Restricted Method of Restriction/ Type of Subsidy Used:	Declaration of Restrictions / Seismic Safety Loan Program funds
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						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		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)	<input checked="" type="checkbox"/>	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)	<input checked="" type="checkbox"/>	11/8/2010	
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: Declaration of Restrictions / CDBG, Affordable Housing Fund
<input type="checkbox"/>	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:
<input type="checkbox"/>	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	211	211	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	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:	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)?	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 / Hotel Tax, Affordable Housing Fund
<input type="checkbox"/> 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
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	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:	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)?	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 / CDBG 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

* 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	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 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 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

• 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 Loan

Date: 4-13-2011

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"/>	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)?	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)

<input checked="" type="checkbox"/> Rental Units	
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		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	69	69	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	69	69	Totals	0	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)	350 Golden Gate

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: rent subsidys for 12 units and capitalized operating subsidy from San Francisco
 Date: 6-22- 2011

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 - 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) <input checked="" type="checkbox"/>	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: <input checked="" type="checkbox"/> (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 / Tax Increment
Length of Deed Restriction: <input style="width: 100px;" 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 style="width: 100px;" 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		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	4	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 - 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:	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)? <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:	Declaration of Restrictions
<input type="checkbox"/> Length of Deed Restriction:	55-Year *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	77	77	Studio		0
	0	1-Bed	5	5	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	82	82	Totals	0	0

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.

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:	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)	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)?	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 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:
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
35	35	Studio	25	25	Studio	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
35	35	Totals	25	25	Totals	0	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?

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.