## **Homekey Round 2**

# Notice of Funding Availability (NOFA) September 9, 2021 (As Amended January 14, 2022)

### **Application Workbook**

Rev. 2/1/22



## State of California Governor Gavin Newsom

Lourdes M. Castro Ramirez, Secretary
Business, Consumer Services and Housing Agency

Gustavo Velasquez, Director
Department of Housing and Community Development

2020 West El Camino Avenue Sacramento, CA 95833 Phone: (916) 263-2771

Email: Homekey@hcd.ca.gov Website: https://homekey.hcd.ca.gov/

					H		nekey Round		_											2	/1/22
							§401 Pre-Appl														
Has the lead a	applicant	(a public entity	or tri	ibal entity	y) underta	aken	a preapplication				D rega	arding	the pro	pose	l Home	key Proj	ect?				Yes
"Vellow" chade	d calls ar	e for Applicant in	nut Es	ailure to s	ubmit a co	mnle	ete application inc		ructions	-	ontati	on may	roculti	in the n	and for	vou to a	mond a	nd recul	hmit vou	r annli	nation
		ion's HCD review						Jiddii ig ti	ne require	eu uocum	iciliali	On may	163uit i	iii tiile i	eeu ioi	you to ai	nena a	iliu resui	orriit you	і арріі	Jalion
			has lil	kely failed	to meet a	Hor	mekey requireme	ent. 'Appl	licant Sco	oring Crite	eria' w	orkshe	et cells	shade	d in "red	" indicate	that th	ne Applic	ant has	failed t	to meet
the minimum per "Orange" shad			d attac	hments F	Electronica	ally a	attached files mus	st use the	e namino	conventi	ion in t	the Ann	lication	For F	vamnle:	"Housin	a Site N	/lan" for	the man	indica	ting the
		cation and all pro					illuoriou illoo iriuc	3t 400 till	o naming	, 001110111		шолфр	, ioution		varripio.	1100011	g Ollo II	nap ioi	шо тар	iiiaiaa	ung uno
		dicate HCD Use																			
		ate Application s			respondin	a NC	OFA section num	her													
			_			_	need assistance		pleting t	this appli	icatio	n.									
For general Ho	mekey N	OFA and prograi	m que	stions em	nail: <u>homek</u>	cey@	nhcd.ca.gov.														
For application	specific a	assistance compl	lete th	e 'App Su	pport' wor	kshe	eet & email your l	Excel ap	plication	to: appsu	pport(	@hcd.c	a.gov								
					ekey Sun	nma	ary (auto popul			-			enue w								
Capital Baselin		num Homekey	Awai		75 000 00	Car	Applica pital Baseline Awa		uested H	Homeke			000 00			of Max ne Award		and Re	equeste		ard 75,000.00
Additional Cont							ditional Contribution									tribution					00,000.00
Total Maxim		tal Award					otal Requested	Capital	Award							al Awar	d				75,000.00
Operating Subs 50% of Reloca		<u> </u>	-	\$2,4			erating Subsidy % of Relocation C	Costs			-	\$2,447			ting Sub	osidy ation Cos	sts			\$2,44	17,999.64 0.00\$
§207 Bonus Av					\$0.00	§20	07 Bonus Award	- app sul					\$0.00	§207	Bonus A	ward - a	pp sub				\$0.00
§207 Bonus Av Total Maxim					600,000.00 <b>22,999.64</b>	_	07 Bonus Award - otal Requested			rd	\$					ward-ful		ancy			00,000.00 <b>22,999.64</b>
Number of Doo				52			mber of Units Pro		_		51	. 0,022	,000.0.			, j			1	<del>• . •,•</del> .	_,000.0
		melessness Unit			)		Number of Ch				0			lumber 50	of Hom	eless Ur	nits	5			
		outh or Youth at Fible to persons w				its	0	5	IN	lumber of					e to pers	sons with	n hearir	ng or visi	ion disab	oilities	0
		•						Projec	t Overv						•			Ť.		•	
Project Name		sion Inn								a la	_				-	a la		ı			
Project Addres Project County		0-5638 Mission S	Street				Is the Proj	ect in a F		City San			99 212	(use th	e TCAC	State C			Zip <mark>941</mark>		No
Assessor Parc	cel	Block 7098 Lot					is all they			м ро. т.а		3001	00.21.	(doo t			101 00		, u. u. o		
Number (APN)		12																			
Assessor Pard Number (APN)																					
Geographic Se		Bay			•		l		1	Data Uni				_		:		ı			
Project Type (*Building Type	Transition	al Housing is Inte		ousing)				Int	terim Hou	using with	Plan t	to Conv	ert to F	Perman	ent						
	type not li	sted above (desc		pelow)																	
		,		•																	
Project Narrati	ve																				
							ion Inn, a 52-unit or Homekey throug														
Agreement with	the seller	. On or about May					motel property an														
experiencing ho	omelessne	SS.																			
,		under another na	me(s)	or was fo	ormerly kn	iown	under another	N/A													
name(s), provi		. ,	nr hae	the Projec	ct heen av	varde	ed other HCD pro	ogram fu	ınds?											1	No
riavo you appii		r HCD Program(s			ot boom av	rai a	Funding A		indo.	Fu	ınding	Status			NOFA	Date	Awar	d Date/E	Expected	l Awar	
							820	00 Fliail	ble App	licants											
Applicant #1							3-		7 .pp												
Entity name	_	County of San F	rancis	co										Org	anizatio	n type C					
Address 440 Auth Rep		et McSpadden			Titlo	Eve	ecutive Director				_	rancis		ddon@	sfgov.c	State C	A	_	Zip <mark>9420</mark> one <mark>415</mark> -		258
Contact	Dan Ada					_	nior Advisor, Hou	sing Initi	iatives				ams@s	_		ı y			one 415		
		B Goodlett Place	#200		1					City	San F	rancis	со			State C	Α		Zip <mark>9410</mark>		
File Name File Name	App1 Ce App1 Re	rt & Legal					ions & Legal worl uired; see Applica		umonto u	vorkshoot									aded to F aded to F		Yes Yes
File Name	App1 Re						t Documents wor		amento W	- JI KOI IEEL									aded to F		Yes
Co-Applicant														-							
Entity name Address										City				Org	anizatio	n type State			Zip		
Auth Rep					Title						Email					Jiaie		Pho			
Contact					Title					E	Email							Pho	_		
Address File Name	Co-App1	Cert & Legal			See Carti	ficati	ions & Legal wor	ksheet		City						State			Zip ded to F	ICD3	
File Name		Resolution					uired; see Applica		uments w	vorksheet									aded to F		
File Name		OrgDoc1, OrgD	ос2, є	etc			Documents wor												aded to F		
File Name File Name		OrgChart Signature Block					Documents wor Documents wor												aded to F aded to F		
	, who	J.g. atai o Diook			200 , thhi	Juil	JULINOINE WUI											Opioc		:	

		Homokov Bound 2 Brains	Overview		1 4	/1/22	
File Name	Ca Arad Davis Data Dasard	Homekey Round 2 Project	Overview			/1/22	
File Name File Name	Co-App1 Payee Data Record Co-App1 TIN Form	See Applicant Documents worksheet. See Applicant Documents worksheet.			Uploaded to HCD? Uploaded to HCD?		
File Name	Co-App1 Till Form Co-App1 Cert of Good Standing	Dated 30 days or less from the Application of	lue date		Uploaded to HCD?		
File Name	Co-App1 Tax-Exempt Status	Evidence of tax-exempt status from IRS and			Uploaded to HCD?		
	#2 (if applicable)	, , , , , , , , , , , , , , , , , , ,	т		- p		
Entity name				rganization type			
Address			City	State	Zip		
Auth Rep	_	Title	Email		Phone		
Contact		Title	Email	01.1	Phone		
Address File Name	Co-App2 Cert & Legal	See Certifications & Legal worksheet.	City	State	Zip Uploaded to HCD?		
File Name	Co-App2 Cert & Legal Co-App2 Resolution	Signature required; see Applicant Document	s worksheet		Uploaded to HCD?		
File Name	Co-App2 OrgDoc1, OrgDoc2, etc	See Applicant Documents worksheet.	o womened.		Uploaded to HCD?		
File Name	Co-App2 OrgChart	See Applicant Documents worksheet.			Uploaded to HCD?		
File Name	Co-App2 Signature Block	See Applicant Documents worksheet.			Uploaded to HCD?		
File Name	Co-App2 Payee Data Record	See Applicant Documents worksheet.			Uploaded to HCD?		
File Name	Co-App2 TIN Form	See Applicant Documents worksheet.			Uploaded to HCD?		
File Name	Co-App2 Cert of Good Standing	Dated 30 days or less from the Application of		C	Uploaded to HCD?		
File Name	Co-App2 Tax-Exempt Status	Evidence of tax-exempt status from IRS and velopment Team Contacts (provide inf			Uploaded to HCD?		
Property Man	agement Company	Tolophient Team Contacts (provide iiii	omination that is currently availa	ioio)			
	Dolores Street Community Services	Contact Name La	ura Valdez	Email laura	@dscs.ora		
	-282-6209 Address 938 Valer		City San Francisco	State			
Financial Con					, , ,		
- 0	N/A	Contact Name		Email			
Phone	Address		City	State	Zip		
Legal Counse							
Legal Name Phone N/A	City and County of San Francisco	Contact Name Vir	ginia Dario Elizondo		a.dario.elizondo@sfcityatty	.org	
General Cont		KEL OLI EEL, OLI I FIOOF	City San Francisco	State	CA Zip 94102		
Legal Name	TBD	Contact Name		Email			
Phone	Address	Someot Hamb	City	State	Zip		
Architect				<u> </u>	, ,		
Legal Name	TBD	Contact Name		Email			
Phone	Address		City	State	Zip		
	//Operating Funding Source	0		F 11	L'II O f		
	City and County of San Francisco -652-7739 Address 440 Turk	Contact Name Gi	gi Whitley City San Francisco	Email gigi.w	vhitley@sfgov.org CA Zip 94102		
	ddress 440 Turk Address 440 Turk	Ou cel	City   Sall Francisco	State	CA   ZIP   94 102		
Legal Name	- Specialing Funding Source	Contact Name		Email			
Phone	Address	3511461.14110	City	State	Zip		
Development	/Operating Funding Source						
Legal Name		Contact Name		Email			
Phone	Address		City	State	Zip		
	t/Operating Funding Source	O min at Nam		F			
Legal Name Phone	Address	Contact Name	City	Email State	Zip		
	/Operating Funding Source		City	State	Ζίρ		
Legal Name	Topolaring: analing coales	Contact Name		Email			
Phone	Address		City	State	Zip		
,		§201 Eligible					
Select below	the eligible uses you are applying for:						
		ation, of motels, hotels, hostels, or other sites nmercial properties, and other buildings with e				Yes	
File Name:	Rehab Description	Narrative description of current condition of	structure(s) and overall scope of wor	k.	Uploaded to HCD?	Yes	
File Name:	PNA	Physical Needs Assessment prepared by a			Uploaded to HCD?	Yes	
ii. Master leasi	ing of properties for non-congregant hous	ing. If Yes, provide a recent market study and	d/or rent roll, and/or other supporting	documentation.		No	
File Name:	Market Study	Provide a recent market study within the past (TCAC) guidelines, and/or a rent roll, and/or			Uploaded to HCD?	N/A	
iii. Conversion	n of units from nonresidential to residential					Yes	
	ruction of dwelling units.					No	
v. The purchas	se of affordability covenants and restriction	ns for units. If Yes, provide a recent market s				No	
File Name: Market Study Provide a recent market study within the past year which conforms to TCAC guidelines, and/or a rent roll, and/or other supporting documentation per §205 of the NOFA.  Vi. Relocation costs for individuals who are being displaced as a result of your Homekey Project.							
		ced as a result of your Homekey Project.  converted, constructed, or altered with funds	provided pursuant to HSC 850675 1	3		No Yes	
vii. Gapitalizeu	operating substates for units purchaseu,	\$202 Eligible I				163	
Select below	the eligible project types you are apply						
	of nonresidential structures to residential					Yes	
		as office or retail spaces, to residential dwelling	g units.			No	
		the elderly, manufactured housing, and other		es.		No	
	rental housing projects.					No	
	te-owned properties.	declare as the according to the Control of the Cont	a annual to the section of the secti		h have about the	No	
vi. Shared hou lease.	ising or scattered site housing is permitted	d as long as the resulting housing has commo	on ownership, financing, and property	management, and eac	n nousehold signs a	No	
.5400.							

		Homekey Round 2 Project Overview		2/1/22				
vii. Structure(s) lacking a permanent foundation such as manufactured home, recreational vehicle, and floating home, for temporary use only. HCD encourages Applicants to explore financing alternatives to Homekey for such structures. Must submit with application a detailed explanation of how the use will meet all Homekey requirements, including the requirements for use and affordability restrictions set forth at §208 of the NOFA. Applicants seeking HCD's approval of structures lacking a permanent foundation are encouraged to discuss their options at the required pre-application consultation.								
File Name:	Detailed parrative of how the use will meet all Homekey Program requirements, including the							
Other eligible	project not listed above (describe below)			No				
N/A								
viii. Applicant acknowledges Homekey Assisted Units previously awarded under the first round of Homekey funding are ineligible for Homekey Round 2 funding.								

					Threshold				2/1/22
				§	300 Threshold Requireme	nts			
					irements as they relate to the				
	knowledges that app by apply jointly with a				Eligible Applicant, as defined in	§200 and Article VI	I. Alternatively, each of the f	oregoing Eligible	Yes
					Target Population per Article VII	(xxxi)?			Yes
. Applicant h					e anticipated needs of the Targ		ny proposed sub-populations	to be served by the	Yes
roject?	acknowledges the rec	uirement to submit a	n overview hel	low of the nic	an and timeline for any required	entitlements nermit	ts and environmental cleara	nces? Annlicants mus	t
so complete	the 'Local & Env Ver	ification' worksheet.			to discuss their land use and				
	application consultation				ntal review and is allowed unde		0 " " 1 '	1.0	31
Permanent		with a use conversion	n under SB 35	and State D	Density Bonus, which is an adm				
ile Name	Env. Report 1		Dhana I /pro	norod or una	dated no earlier than 12 months	prior to the applicat	ion due date)	Uploaded to HC	D? Yes
			+		se II study, submit a Phase II (		·	·	
ile Name	Env. Report 2		prior to the a		,			Uploaded to HC	
ile Name	CEQA NEPA				Grant Funds (NHTE Verification	on from Poenoneible	Entity)	Uploaded to HC	_
le Name					Grant Funds (NHTF Verification worksheet(s) completed and s			Uploaded to HC	
le Name	Local Approvals		if different fro		n.			Uploaded to HC	
onstruction :			1/22 Racial Demogr	raphic Data	Construction completion date Worksheet (reports Continuum			ccupancy date	10/1/22 Yes
le Name	Racial Demographi		Racial Demo	graphic Data	a Worksheet, which reports Co			Uploaded to HC	
			worksheet or						
					control must not be contingent of Describe site control special cir		ny otner party. Does Applica	πι nave site control? I	Yes
,					2 22 3r opecial of			Execution	Expiration
	APN	5630-5638 Mission	Address	ranaisas	Type of Site C		Current owner	date	date
la ak 7000 :	-4.42	CA	Sireet, San Fr	ancisco,	<ul> <li>e. A sales contract, or other e agreement for the acquisition</li> </ul>		Jamna Investments LLC	0/00/04	N1/4
lock 7098 L	.OL 72					-		8/30/21	N/A
	cknowledges that if o as to not delay expe				ermanent housing, Applicant m	ust submit a commit	ment and plan to facilitate or	expedite those	Yes
le Name:	Use Change	a.karo ana occupat			nd plan to facilitate or expedite	the use change proc	esses	Uploaded to HC	D? Yes
	s below for unusual s	ite control special cir				<b>J</b>		,	,
le Name:	Site Control1, Site 0				f the type of site control for each			Uploaded to HC	
ile Name:	Prelim1, Prelim2, et	c			ary title report for each site about			Uploaded to HC	_
le Name: le Name:	Liability Insurance Automobile Insuran	ce			Insurance that meets the requility Insurance that meets the re		ii)	Uploaded to HC Uploaded to HC	
le Name:	Property-Hazard In				nce that meets the requirement		")	Uploaded to HC	
i. Applicant	acknowledges that th	e Eligible Applicant ap			inding is the entity that HCD rel		nce and capacity, and will co		
•	evelopment, and occu			"	01 10 1	C F '			168
	agrees to provide a				City and County of		nes and demonstrator oxida	ince of strong	
	agrees to provide a d and financial capacit			quisition of a	site and fund expenditure before	re all program deadli	nes and demonstrates evide	nce of strong	Yes

						Thresh	old								2/	/1/22
File Name:	Development F	Dlan		Provide a developn	ont n		oiu						Union	ided to HC	_	Yes
							etate and	d local	requirements pertain	nina t	o rental hou	ieina man			_	res
									ect in a safe and sani			ising, man	diactured riodsiri	g, includin	9	Yes
									s and departments th			of example	and not limitation	n all	-	
									alifornia Secretary of							Yes
				ents of previous F						Olule	o di la tric Ot	amorria i i	anomice Tax Boa			100
			•	•					equired documents?	HCD	reserves t	he right to	request clarificat	ion of		
				and other supportir			iodilon wit	ar an i	equil cu documento.	1100	7100017001	ne rigini to	request old mode			Yes
	-				-		ion Assist	ance	Narrative? The Narra	ative	must show	the Annlic	ant's consideration	on of (I)		
									that may or will be di						d	
									tion Regarding Non-						_	Yes
			t as a condition of													
	Relocation Nar			Relocation Assistar	nce N	arrative for	relocation	or no	relocation				Unioa	ded to HC	:D2	Yes
i iic radiric.									ur Project Type is	Into	rim Housi	na: nlea			, U.	100
	3001101	manoner	Todoling recydli	cinonio (onip ti	io up	phounon	0001101110	10 <b>y</b> 0	ar i roject rype io	,	1111111100001	ing, picu	oc complete 3c	,,,		
i. Applicant has	s funding commi	itments or	other reasonable	assurance to cov	er ope	rations and	service o	costs	with specific funding	sour	ces (goverr	nment/phila	anthropic/private)	for the		
proposed Proje	ect for 5 years a	ind a budge	et which covers o	operations and ser	vices	costs throu	igh year 1	5 fron	n the recordation of t	the us	se restriction	n?				
		ehabilitating	g, and operating a	Permanent Housi	ng pro	oject? If Yes	s, the App	licant	or Co-Applicant mus	t dem	nonstrate th	e following	minimum experi	ence <b>and</b>		
	rements below:															
		_		or a2. must be Ye	_								Passes	threshol	ld?	No
a1. Has Applica	ant developed, o	owned, or o	operated a project	t similar in scope a	and siz	ze to the Pr	oject? If Y	es, pr	ovide details below:							
															Late	st date
															deve	eloped,
						Who pr	rovides th	he		H	ousing				owr	ned, or
	Pro	ject name	and address			exp	erience		Experience type		type	Po	pulation served		оре	erated
										ı	fordable					
											Rental					
									ten years, with at lea	st on	e of those p	rojects co	ntaining at least o	one unit		No
housing a tenai	nt who qualifies	as a mem	ber of the Target	Population (enter I	Projec	t informatio	n below)?	•								
	·					I					Ī				Late	st date
						Ī										eloped,
						Who pr	rovides th	he		н	ousing	Qualify	ing unit popula			ned, or
	Pro	ject name	and address				erience		Experience type		type		served			erated
											fordable					
										F	Rental					
										Aff	fordable					
										F	Rental					
h Experience l	helning nersons	address h	parriers to housing	a Pr	operty	/ manager		Su	pportive Service Pro	vider		Pass thr	eshold (three o	r more ve	ars	
	iding support se		3411010101010110			vice years	0.00	04	service y		0.00	. 400 1111		experience		No
				ı		,			,		If No. Applic	cant certifi	es that this requir	•	-	
Has a property				property manager									solicitation or me			
been selected?	?		and complete	experience chart b	elow:						TOHOULO	a iii iatai c		derstandir		
			If Voc. ontor our	portive service pro	widor						If No. Applie	ant cortifi	es that this requir		_	
Has a supportiv	ve service												es triat triis requir solicitation or me			
provider been s	selected?		name and cor	mplete experience	elow:						renected	ıııııulure		iderstandir		
					Delow.								un	idei Staridii	19:	
										1					_	
																# of
		_									Housing	g	B 1// 0			months
		Pro	ject name and a	ddress				E	Experience provide	r	type		Population Se	erved		
		Pro	ject name and a	ddress		1		ı	Experience provide Property Manager	r	type Affordab		Population Se	erved		months
		Pro	ject name and a	ddress				ı		r	type Affordab Rental	le	Population Se	erved		months
		Pro	ject name and a	ddress				E	Property Manager	r	Affordab Rental Affordab	le le	Population Se	erved		months
		Pro	ject name and a	ddress				ı		r	Affordab Rental Affordab Rental	le le	Population Se	erved		months
		Pro	ject name and a	ddress				E	Property Manager Property Manager	r	Affordab Rental Affordab Rental Affordab	le le	Population Se	erved		months
		Pro	ject name and a	ddress				E	Property Manager	r	Affordab Rental Affordab Rental Affordab Rental	le le le	Population Se	erved		months
		Pro	ject name and a	uddress				E	Property Manager Property Manager Property Manager	r	Affordab Rental Affordab Rental Affordab	le le le	Population So	erved		months
		Pro	ject name and a	ddress				E	Property Manager Property Manager	r	Affordab Rental Affordab Rental Affordab Rental	le le le le le le	Population Se	erved		months
		Pro	ject name and a	iddress					Property Manager Property Manager Property Manager Property Manager	r	Affordab Rental Affordab Rental Affordab Rental Affordab	le le le le le	Population Se	erved		months
		Pro	ject name and a	iddress				E	Property Manager Property Manager Property Manager	r	type Affordab Rental Affordab Rental Affordab Rental Affordab Rental Affordab	le l	Population Se	erved		months
Enter Supportiv	ve Service Prov			oddress	DW:			E	Property Manager Property Manager Property Manager Property Manager	r	type Affordab Rental Affordab Rental Affordab Rental Affordab Rental Affordab Rental Affordab	le l	Population Se	erved		months
Enter Supportiv	ve Service Prov				ow:				Property Manager Property Manager Property Manager Property Manager Property Manager		type Affordab Rental Affordab Rental Affordab Rental Affordab Rental Affordab Rental Affordab	le l	Population Se	erved		months
Enter Supportiv	ve Service Prov				ow:				Property Manager Property Manager Property Manager Property Manager		type Affordab Rental Affordab Rental Affordab Rental Affordab Rental Affordab Rental Affordab Rental	ele le	Population Sc	erved		months
Enter Supportiv	ve Service Prov				DW:			Sup	Property Manager	rider	type Affordab Rental Affordab Rental Affordab Rental Affordab Rental Affordab Rental Affordab Affordab	le l	Population Se	erved		months
Enter Supportiv	ve Service Prov				DW:			Sup	Property Manager Property Manager Property Manager Property Manager Property Manager	rider	Affordab Rental	le l	Population Se	erved		months
Enter Supportiv	ve Service Prov				DW:			Sup	Property Manager portive Service Prov	ider	type Affordab Rental Affordab Rental Affordab Rental Affordab Rental Affordab Rental Affordab Rental Affordab Affordab Affordab	le l	Population Sc	erved		months
Enter Supportiv	ve Service Prov				ow:			Sup	Property Manager	ider	type Affordab Rental	le l	Population So	erved		months
Enter Supportiv	ve Service Prov				ow:			Sup Sup Sup	Property Manager Propertive Service Prov portive Service Prov	ider ider	type Affordab Rental Affordab	le l	Population Se	erved		months
Enter Supportiv	ve Service Prov				ow:			Sup Sup Sup	Property Manager portive Service Prov	ider ider	type Affordab Rental	le l	Population Se	erved		months
Enter Supportiv	ve Service Prov				ow:			Sup Sup Sup	Property Manager Propertive Service Prov portive Service Prov portive Service Prov	ider ider ider	type Affordab Rental Affordab	le l	Population Sc	erved		months
Enter Supportiv	ve Service Prov				ow:			Sup Sup Sup	Property Manager Propertive Service Prov portive Service Prov	ider ider ider	type Affordab Rental Affordab	ile lie lie lie lie lie lie lie lie lie	Population Sc	erved		months
		ider name	and complete exp			rm reduction	n and low	Sup Sup Sup Sup	Property Manager Propertive Service Prov portive Service Prov portive Service Prov portive Service Prov portive Service Prov	ider ider ider	type Affordab Rental Affordab	ile lie lie lie lie lie lie lie lie lie	Population Se	erved		months
c. Experience a	administering a	ider name	and complete exp	perience chart bek	of ha			Sup Sup Sup Sup	Property Manager Propertive Service Prov portive Service Prov portive Service Prov portive Service Prov portive Service Prov	ider ider ider ider	type Affordab Rental Affordab	ile lie lie lie lie lie lie lie lie lie	otry.			months
		ider name	and complete exp	perience chart bek	of ha			Sup Sup Sup Sup	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider	type Affordab Rental Affordab	ile lie lie lie lie lie lie lie lie lie	otry.	erved		months
c. Experience a	administering a	ider name Housing Fi	and complete exp	perience chart bek	of ha			Sup Sup Sup Sup	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider	type Affordab Rental Affordab	ile lie lie lie lie lie lie lie lie lie	otry.			months
c. Experience a	administering a Housing First F it, ownership, or	ider name  Housing Fi	and complete exp	perience chart bele perience chart bele perience chart belee perience ch	of ha	nistering a l	Housing F	Sup Sup Sup Sup Sup	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider	type Affordab Rental Affordab	le l	ntry Uploa			months
c. Experience a File Name: d. Developmen d1. Does Appli	administering a Housing First F It, ownership, or cant have the c	Housing Fi	irst program that i	perience chart bele perience chart bele perience chart belee perience ch	of ha admi	nistering a l	Housing F	Sup Sup Sup Sup Sup	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider	type Affordab Rental Affordab	le l	ntry Uploa			months
c. Experience a File Name: d. Developmen d1. Does Appli d2. Applicant c	administering a Housing First F It, ownership, or cant have the c ertifles that it wi	Housing Fi	and complete exp  irst program that i  capacity. develop, own, and experienced staff v	perience chart belo includes principles Provide experience d operate a Perma without reliance up	of ha admi nent h	nistering a l Housing Pro other entity	Housing F  Dject? If Your or parent	Sup	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider	type Affordab Rental Affordab	le l	ntry Uploa			months
c. Experience a File Name: d. Dees Applii d2. Applicant c d3. Applicant c	administering a Housing First F It, ownership, or cant have the c retifies that it wi ertifies that it ha	Housing Fi Perm Operation apacity to a II employ e is sufficient	and complete exp	perience chart bele includes principles Provide experience d operate a Perma without reliance up ty to provide payro	of ha	Housing Proof	Housing F  Dject? If Ye  or parent  t benefits	Sup Sup Sup Sup Sup Sup Sup to started	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider ider roject	type Affordab Rental Affordab	le l	uploa t company?	ided to HC		months
c. Experience a File Name: d. Developmen d1. Does Applia d2. Applicant c d3. Applicant c d4. Applicant c	administering a Housing First F it, ownership, or cant have the c certifies that it ha certifies that it ha	Housing Fi Perm Operation apacity to ell employ e	and complete exp	perience chart bele includes principles Provide experience d operate a Perma without reliance up ty to provide payro	of ha	Housing Proof	Housing F  Dject? If Ye  or parent  t benefits	Sup Sup Sup Sup Sup Sup Sup to started	Property Manager Propertive Service Prov portive Service Prov port	ider ider ider ider ider roject	type Affordab Rental Affordab	le l	uploa t company?	ided to HC		months
c. Experience a File Name: d. Developmen d1. Does Applia d2. Applicant c d3. Applicant c d4. Applicant c	administering a Housing First F it, ownership, or cant have the c certifies that it ha certifies that it ha	Housing Fi Perm Operation apacity to ell employ e	irst program that i capacity. develop, own, and ixt financial capacit; t financial capacit;	perience chart bele includes principles Provide experience d operate a Perma without reliance up ty to provide payro	of ha	Housing Proof other entity employmer ons pursua	bject? If Ye or parent to Prog	Sup Sup Sup Sup Sup Sup Sup barrier irst pr comg	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider ider roject	type Affordab Rental Affordab	le l	uploa t company?	ided to HC		months
c. Experience a File Name: d. Developmen d1. Does Applic d2. Applicant c d3. Applicant c d4. Applicant c without reliance	administering a Housing First F it, ownership, or cant have the c certifies that it ha certifies that it ha	Housing Fi Perm operation apacity to u il employ e is sufficien entity or pa	and complete exp  irst program that i  capacity. develop, own, and experienced staff vi it financial capacit; trent company?	perience chart belo includes principles Provide experience d operate a Perma without reliance up by to provide payro by to carry out its c	of ha	Housing Proof other entity employmer ons pursua	pject? If Ye or parent to benefits and to Prog	Sup Sup Sup Sup Sup Sup Sup Charrier	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider ider ider action	type Affordab Rental	le l	Uploa t company? g financial guara	intees	CD?	months serving
c. Experience a File Name: d. Developmen d1. Does Applia d2. Applicant c d3. Applicant c d4. Applicant c	administering a Housing First F it, ownership, or cant have the c certifies that it ha certifies that it ha	Housing Fi Perm operation apacity to u il employ e is sufficien entity or pa	irst program that i capacity. develop, own, and ixt financial capacit; t financial capacit;	perience chart belo includes principles Provide experience d operate a Perma without reliance up by to provide payro by to carry out its c	of ha	Housing Proof other entity employmer ons pursua	pject? If Ye or parent to benefits and to Prog	Sup Sup Sup Sup Sup Sup Sup barrier irst pr comg	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider ider ider action	type Affordab Rental Affordab	le l	uploa t company?	intees	CD?	months serving
c. Experience a File Name: d. Developmen d1. Does Applic d2. Applicant c d3. Applicant c d4. Applicant c without reliance	administering a Housing First F it, ownership, or cant have the c certifies that it ha certifies that it ha	Housing Fi Perm operation apacity to u il employ e is sufficien entity or pa	and complete exp  irst program that i  capacity. develop, own, and experienced staff vi it financial capacit; trent company?	perience chart belo includes principles Provide experience d operate a Perma without reliance up by to provide payro by to carry out its c	of ha	Housing Proof other entity employmer ons pursua	pject? If Ye or parent to benefits and to Prog	Sup Sup Sup Sup Sup Sup Sup Charrier	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider ider ider action	type Affordab Rental	le l	Uploa t company? g financial guara	intees	CD?	months serving
c. Experience a File Name: d. Developmen d1. Does Applic d2. Applicant c d3. Applicant c d4. Applicant c without reliance	administering a Housing First F it, ownership, or cant have the c certifies that it ha certifies that it ha	Housing Fi Perm operation apacity to u il employ e is sufficien entity or pa	and complete exp  irst program that i  capacity. develop, own, and experienced staff vi it financial capacit; trent company?	perience chart belo includes principles Provide experience d operate a Perma without reliance up by to provide payro by to carry out its c	of ha	Housing Proof other entity employmer ons pursua	pject? If Ye or parent to benefits and to Prog	Sup Sup Sup Sup Sup Sup Sup Charrier	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider ider ider action	type Affordab Rental	le l	Uploa t company? g financial guara	intees	CD?	months serving
c. Experience a File Name: d. Developmen d1. Does Applic d2. Applicant c d3. Applicant c d4. Applicant c without reliance	administering a Housing First F it, ownership, or cant have the c certifies that it ha certifies that it ha	Housing Fi Perm operation apacity to u il employ e is sufficien entity or pa	and complete expands and complete expands and complete expands and capacity.  develop, own, and experienced staff virtual trinancial capacity arent company?	perience chart belo includes principles Provide experience d operate a Perma without reliance up by to provide payro by to carry out its c	of ha	Housing Proof other entity employmer ons pursua	pject? If Ye or parent to benefits and to Prog	Sup Sup Sup Sup Sup Sup Sup Charrier	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider ider ider action	type Affordab Rental	le l	Uploa t company? g financial guara	intees	CD?	months serving
c. Experience a File Name: d. Developmen d1. Does Applic d2. Applicant c d3. Applicant c d4. Applicant c without reliance	administering a Housing First F it, ownership, or cant have the c certifies that it ha certifies that it ha	Housing Fi Perm operation apacity to u il employ e is sufficien entity or pa	and complete expands and complete expands and complete expands and capacity.  develop, own, and experienced staff virtual trinancial capacity arent company?	perience chart belo includes principles Provide experience d operate a Perma without reliance up by to provide payro by to carry out its c	of ha	Housing Proof other entity employmer ons pursua	pject? If Ye or parent to benefits and to Prog	Sup Sup Sup Sup Sup Sup Sup Charrier	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider ider ider action	type Affordab Rental	le l	Uploa t company? g financial guara	intees	CD?	months serving
c. Experience a File Name: d. Developmen d1. Does Applic d2. Applicant c d3. Applicant c d4. Applicant c without reliance	administering a Housing First F it, ownership, or cant have the c certifies that it ha certifies that it ha	Housing Fi Perm operation apacity to u il employ e is sufficien entity or pa	and complete expands and complete expands and complete expands and capacity.  develop, own, and experienced staff virtual trinancial capacity arent company?	perience chart belo includes principles Provide experience d operate a Perma without reliance up by to provide payro by to carry out its c	of ha	Housing Proof other entity employmer ons pursua	pject? If Ye or parent to benefits and to Prog	Sup Sup Sup Sup Sup Sup Sup Charrier	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider iction	type Affordab Rental	le l	Uploa t company? g financial guara	intees	CD?	months serving
c. Experience a File Name: d. Developmen d1. Does Applic d2. Applicant c d3. Applicant c d4. Applicant c without reliance	administering a Housing First F it, ownership, or cant have the c certifies that it ha certifies that it ha	Housing Fi Perm operation apacity to u il employ e is sufficien entity or pa	and complete expands and complete expands and complete expands and capacity.  develop, own, and experienced staff virtual trinancial capacity arent company?	perience chart belo includes principles Provide experience d operate a Perma without reliance up by to provide payro by to carry out its c	of ha	Housing Proof other entity employmer ons pursua	pject? If Ye or parent to benefits and to Prog	Sup Sup Sup Sup Sup Sup Sup Charrier	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider iction	type Affordab Rental	le l	Uploa t company? g financial guara	intees	CD?	months serving
c. Experience a File Name: d. Developmen d1. Does Applic d2. Applicant c d3. Applicant c d4. Applicant c without reliance Staff type	administering a Housing First F It, ownership, or cant have the c ertifies that it wi ertifies that it ha e upon another of	Housing Fi Perm operation apacity to till employ e is sufficien entity or pa Emplo	irst program that if capacity. develop, own, and experienced staff vit financial capacit; tfinancial capacit; arent company? byee / Consultant	perience chart belo includes principles Provide experience d operate a Perma without reliance up by to provide payro by to carry out its c	of ha	Housing Proof other entity employmer ons pursua	pject? If Ye or parent benefits and to Prog	Sup Sup Sup Sup Sup Sup Sup Charrier	Property Manager Propertive Service Prov portive Service Prov	ider ider ider ider iction	type Affordab Rental	le l	Uploa t company? g financial guara	intees	CD?	months serving
c. Experience a File Name: d. Developmen d1. Does Applic d2. Applicant c d3. Applicant c d4. Applicant c without reliance Staff type	administering a Housing First F It, ownership, or cant have the c certifies that it wi certifies that it ha e upon another of	Housing Fi Perm operation apacity to of lemploy e ss sufficien entity or pa Emplo	and complete exp  irst program that i  P  capacity. develop, own, and experienced staff v  it financial capacit it financial capacit arent company?  oyee / Consultant	perience chart below includes principles Provide experience doperate a Perma without reliance up by to provide payro by to carry out its conful name	of ha	Housing Proother entity employmer ons pursua	Housing F  pject? If Yo or parent at benefits int to Prog	Sup Sup Sup Sup Sup Barrie Eirst product to sta	Property Manager Proper	rider rider rider rider rider rider rider	type Affordab Rental	le l	t company? ng financial guara	intees	CD?	months serving
c. Experience a File Name: d. Developmen d1. Does Applicant c d3. Applicant c d4. Applicant c without reliance Staff type  iii. One-for-one a. Will the acqu	administering a Housing First F It, ownership, or cant have the c certifies that it ha certif	Housing Fi Perm reperation apacity to a Il employ e is sufficien entity or pa Emplo f assisted site be red	and complete exp  irst program that i  P  capacity. develop, own, and experienced staff v  it financial capacity arent company? oyee / Consultant  housing developed/repositi	includes principles Provide experience d operate a Perma without reliance up by to provide payro by to carry out its o	of ha	Housing Project Projec	Housing F  oject? If Y/ or parent at benefits int to Prog  ct Staffing  I  I goal to a	Sup Sup Sup Sup Sup Sup Sup Sup Comprist to start of the	Property Manager Propertive Service Prov portive Service Prov	rider rider rider rider rider rider rider	type Affordab Rental	le l	t company? ng financial guara	intees	CD?	months serving
c. Experience a File Name: d. Developmen d1. Does Applicant c d3. Applicant c d4. Applicant c without reliance Staff type  iii. One-for-one a. Will the acqu	administering a Housing First F It, ownership, or cant have the c certifies that it ha certif	Housing Fi Perm reperation apacity to a Il employ e is sufficien entity or pa Emplo f assisted site be red	and complete exp  irst program that i  capacity. develop, own, and experienced staff v it financial capacit it financial capacit arent company?  oyee / Consultant  housing developed/repositi be demolished be	perience chart below includes principles Provide experience doperate a Perma without reliance up by to provide payrout its constitution of the following part of the efore any occupant	of ha a admi nent I on an II and bligati	Housing Proof other entity employmer ons pursua  Project  Ity's overall the Target	Diject? If You or parent in benefits int to Proget Staffing I goal to an Population	Sup Sup Sup Sup Sup Sup Sup Sup Sup Charrie Charrie Charrie Charrie Charrie	Property Manager Proper	ider ider ider ider ider ider ider ider	type Affordab Rental and low bai  t Staffing Ch mother entit t not limited	le l	t company? % of time dec	intees	CD?	months serving
c. Experience a File Name: d. Developmen d1. Does Applicant c d2. Applicant c d4. Applicant c without reliance Staff type  iii. One-for-one a. Will the acqu	administering a Housing First F It, ownership, or cant have the c certifies that it ha certif	Housing Fi Perm reperation apacity to a Il employ e is sufficien entity or pa Emplo f assisted site be red	and complete exp  irst program that it  capacity, develop, own, and experienced staff v it financial capacit it financial capacit arent company?  beyone / Consultant  housing developed/repositi be demolished be	includes principles Provide experience d operate a Perma without reliance up ty to provide payro ty to carry out its o full name ioned as part of the efore any occupan ((a) and (b): If the	of haa admi	Housing Proof other entity employmer ons pursua  Project  Project  It is a support of the Target and the Target ed housing	Housing F  oject? If Y/ or parent tt benefits int to Prog tt Staffing  I goal to as  Populatio or site wi	Sup Sup Sup Sup Sup Sup Sup Sup Sup Comp to sta gram r Charl	Property Manager Proper	ider ider ider ider ider ider ietion	type Affordab Rental	le l	t company?  g financial guara  % of time dec	intees	CD?	months serving
c. Experience a File Name: d. Developmen d1. Does Applicant c d2. Applicant c d4. Applicant c without reliance Staff type  iii. One-for-one a. Will the acqu	administering a Housing First F It, ownership, or cant have the c certifies that it ha certif	Housing Fi Perm operation apacity to o Il employ e is sufficien entity or pa Emplo f assisted site be red target site	irst program that i P capacity. develop, own, and txperienced staff v tt financial capacit tfinancial capacit trent company? byee / Consultant  housing developed/repositi be demolished be	perience chart below includes principles Provide experience doperate a Perma without reliance up to to provide payro by to carry out its control of the fore any occupant (a) and (b): If the poal to address	of ha e admi nent I on an Il and bligati	Housing Proother entity employmer ons pursua Project lity's overall the Target ed housing s of the Target so for the Target ed housing s of the Target ed ho	Housing F  oject? If Y/or parent at benefits int to Prog  ct Staffing  I goal to a  Populatio or site you get Popul	Sup	Property Manager Proper	rider rider rider rider roject pon a ag, bu	type Affordab Rental User to the content of the conte	le l	t company? ng financial guara % of time dec	intees	CD?	months serving

File Name: Discuss the Page   Upspeed of the CPT	c. Will all of the	e proposed housing be located within th	e original target housing	Threshold location neighborhood?					1	2/1/22
why the necessary increase the expressment to eating ordinate the larger regressment of the collection					ion and all proposed	housing location(s).		Uploaded to	HCD?	
Applicat factorelegate the listenin bloscope Proposet of the requisition of the properties and activated and private proposed for researched assessment to econes operations and services control of the registry of the registry of the properties and activate activate and a	File Name:	Outside Neighborhood	why it is necessary	to locate this replacement	housing outside the t	arget neighborhood (i.e		Uploaded to	HCD?	
and southern controlled and the property of th				§302 Interim Housing	Requirements			ı		
Successful diversignment, comments, or operation of an internal housing process. Each of an an emergency sheller or Translocal Housing for all values from of the late time, yet in the late time, and an an emergency sheller or Translocal Housing for all values from of the late time, yet in the late time, yet	unding source ise restriction	es (government/philanthropic/private) fo	or the Project for five year	ars and submit a budget to	cover operations an	d services costs throu	gh year 15 fr	om the recordation		Yes
Project Name and Address  Who provided  By Sperimen Eye  Project Name and Address  Who provided  Project Name and Address  Who provided  Sperimen Eye  Project Name and Address  Who provided  Sperimen Eye  Project Name and Address  Project Name Agent Name Name Agent Name Name Agent Name		1 0 0 1		0 1 7 11					Pass	Yes
Project Name and Address  Biographics (Project Name and Address (Proje							Years	20.00 Thr	eshold	Yes
Project Bane and Address  Who provided experiences type (Population Reverd (Instantion Rousing project type)  Francisco Transcriptor Store (Population Rousing of Store (Population Rousing Population Rousing Population Rousing (Population Rousing Population Rousing Population Rousing (Population Rousing Rousing Population Rousing (Population Rousing Rousing Population Rousing Rous									# 0	f month
City and Courty of Sam   Operated   Transitional Housing Program Plus, 134 Getden Gate Ave, Sam Francisco. City and Courty of Sam   Operated   Transitional Housing Program Plus, 134 Getden Gate Ave, Sam Francisco. City and Courty of Sam   Operated   Transitional Housing Program Plus, 134 Getden Gate Ave, Sam Francisco. City and Courty of Sam   Operated   Transitional Housing Program Plus, 134 Getden Gate Ave, Sam Francisco. City and Courty of Sam   Operated   Transitional Housing Program Plus, 134 Getden Gate Ave, 2011 April 137 City and Courty of Sam   Operated   Transitional Housing   Court of of Sam   Operated   Cour	ith Street Ana		CA 94107		Experience type		Pop	ulation Served	serv	ing in t
As 4102  Transitional Housing and Florance, 5234 Genery Boulevard, Sen Francisco, Co. Cyr and County of Sen County	л., од ост, <b>р</b> а		, 6, 10, 10,		Operated	Transitional Housing			t	72
Francisco (20) Haight Street, San Francisco, CA 94:17  CON Haight Street, San Francisco, CA 94:17  CON Haight Street, San Francisco, CA 94:17  CON Haight Street, San Francisco, CA 94:17  Control of San Cartery of San		ousing Program Plus, 134 Golden Gate	Ave, San Francisco,		Operated	Transitional Housing			t	36
20 February of San   Operated   Transitional Housing Intellect water a vision is better to the Production of San   Operated   Transitional Housing Intellect water a vision is beating intellect water and intellect water wat		ousing at G House, 6324 Geary Boulev	ard, San Francisco,		0	TWIII	Homeles		t	20
Sealor Voulth Housing Inflative, various locations in San Farancisco, CA  Olivier of County of San  Francisco					Operated	I ransitional Housing	RISK			36
Transitional Housing and HIV Services, 129 Hyde Street, San Francisco, CA  Life yand County of San  Operated  Francisco  Operated  Fran	020 Haight S	treet, San Francisco, CA 94117		, ,	Operated	Transitional Housing			t	12
Francisco   Principles   Prin	Castro Youth I	Housing Initiative, various locations in S	San Francisco, CA	City and County of San	Operated	Transitional Housing	Homeles	ss Youth or Youth a	i	12
And the properties of the prop	ransitional H	ousing and HIV Services, 129 Hvde Str	eet, San Francisco, CA				Homeles		1	
Some Applicant have experience shring inferim. Housing program participants is Permanent Housing to ensure long-term housing stability?  Include experience in liking linker in Housing to ensure long-term housing stability?  Include experience and stating linker in Housing to ensure long-term housing stability.  Doe Applicant have experience serious program participants to Permanent Housing to ensure long-term housing stability.  Doe Applicant have experience animalism program that includes principles of harm reduction and low barriers to entry?  Flow Some Some Principants and the series of the ser	94102			Francisco	Operated	I ransitional Housing	Risk	of Homelessness		36
Does Applicant have experience linking Interim Housing program participants to Permanent Housing to ensure long-term housing stability?  Provide experience in Riving Interim Housing program profit coarts to Permanent Housing to ensure long-term from the provided of the CP7  Does Applicant makes preprince and provided of the CP7  Does Applicant makes preprince and provided of the CP7  Provide experience administering a Housing First program and trades principles of human flexibility and the CP7  Provide experience administering a Housing First program that includes principles of human flexibility and the CP7  Provide experience administering a Housing First program that includes principles of human flexibility and the CP7  Provide experience administering a Housing First program that includes principles and the CP7  Provide experience administering a Housing First program that includes principles and the CP7  Provide experience administering a Housing First program that includes principle Staffing Chart below.  Provided the provided details in the Project Staffing Chart below.  Provided the Provided Provided Staffing Chart below.  Provided the Provided Provided Staffing Chart below.  Provided the Provided Staffing Chart below.  Provided Staffing Provided Staffing Chart below to provided Staffing Chart below.  Provided Staffing Provided Staffing Chart below.  Provid		h Emergency Shelter, 536 Central Ave.	, San Francisco, CA		Operated	Emergency Shelter			t	36
Provide experience in linking litterim Housing programs participants to Permanent Housing to ensure logical part housing stability.  Does Applicant have experience administering a Housing First program that includes principles of harm reduction and tow barriers to entry?    Housing First Interim   Provide experience administering a Housing First program that includes principles of harm reduction and tow barriers to entry?										
Inter Mane. Interim Hag Exp Provide experience in larking Interim Housing program participants to Permanent Housing to ensure Incorporative In										
to search trage styp  Dose-Applicant house appretione administering a Housing First program that includes principles of harm reduction and low barriers to entry?  Provide experience administering a Housing First program that includes principles of harm reduction and tow barriers to entry?  Provide experience administering a Housing First program that includes principles of harm reduction and tow barriers to entry  Provide experience administering a Housing First program that includes principles of harm reduction and tow barriers to entry  Provide experience administering a Housing First program that includes principles of harm reduction and tow barriers to entry  I house Applicant horifes that it was used to develop, own, and operate a Permanent Housing Project? If Yes, provide details in the Project Staffing Chart below:  2. Applicant certifies that it has sufficient financial capacity to carry out its obligations pursuant to Program requirements including, but not limited to providing financial guarantees inflored that it has sufficient financial capacity to carry out its obligations pursuant to Program requirements including, but not limited to providing financial guarantees inflored that it has sufficient financial capacity to carry out its obligations pursuant to Program requirements including, but not limited to providing financial guarantees inflored that it is a sufficient financial capacity to carry out its obligations pursuant to Program requirements including, but not limited to providing financial guarantees inflored that it is a sufficient financial capacity.  Staff type  Employee Consultant full name  Project Staffing Chart  Project Staffing Ch	. Does Applic	ant have experience linking Interim Ho								Yes
Does Applicant have experience administering a Housing First program that includes principles of harm reduction and low barriers to entry?    Housing First Interim	ile Name:	Interim Hsg Exp			program participants	to Permanent Housing	to ensure	Uploaded to	HCD?	Yes
and two barriers to entry  Development, convership, or operation capacity,  1. Does Applicant have the capacity to develop, own, and operate a Permanent Housing Project? If Yes, provide details in the Project Staffing Chart below:  2. Applicant certifies that it was sufficient financial capacity to provide payrol and employment benefits to staff without reliance upon another entity or parent company?  3. Applicant certifies that it has sufficient financial capacity to provide payrol and employment benefits to staff without reliance upon another entity or parent company?  3. Applicant certifies that it has sufficient financial capacity to carry out its obligations pursuant to Program requirements including, but not limited to providing financial guarantees without reliance upon another entity or parent company?  Staff type  Employee / Consultant full name  Poston title  Project Staffing Chart  Bendown Staffing Chart  Project Staffing Chart Staffing Chart  Project Staffing Char	. Does Applic	ant have experience administering a H			rm reduction and low	barriers to entry?		I.		Yes
Development, ownership, or operation capacity.  1. Does Applicant New the capacity to develop, own, and operate a Permanent Housing Project? If Yes, provide details in the Project Staffing Chart below:  2. Applicant certifies that has sufficient financial capacity to provide payroll and employment benefits to staff without relance upon another entity or parent company?  3. Applicant certifies that has sufficient financial capacity to provide payroll and employment benefits to staff without relance upon another entity or parent company?  4. Applicant certifies that has sufficient financial capacity to carry out its obligations pursuant to Program requirements including, but not limited to providing financial guarantees without relance upon another entity or parent company?  5. Applicant certifies that has sufficient financial capacity to carry out its obligations pursuant to Program requirements including, but not limited to providing financial guarantees without relance upon another entity or parent company?  6. Applicant certifies that has sufficient financial capacity to carry out its obligations pursuant to Program requirements including, but not limited to providing financial guarantees without relance upon another entity or parent company?  6. Applicant certifies that the sufficient financial guarantees without the providing financial guarantees without the program of the parent sufficient financial guarantees without the program of the providing financial guarantees without the providing financial guarantees without the program of the providing financial guarantees without the program of the p	ile Name:	Housing First Interim			irst program that incl	udes principles of harm	reduction	Uploaded to	HCD?	Yes
1. Does Applicant have the capacity to develop, own, and operate a Permanent Housing Project? If Yes, provide details in the Project Staffing Chart below:  2. Applicant certifies that the assumption system of the Window reliance upon another entity or parent company?  3. Applicant certifies that the assumption first first disciplination of the provided payrol and employment benefits to staff without reliance upon another entity or parent company?  4. Applicant certifies that the assumption first first disciplination of the providing first disciplination of the providination of the providinati			and low barriers to e	entry				.,		
22. Applicant certifies that it will employ experienced staff without reliance upon another entity or parent company?  34. Applicant certifies that it has sufficient financial capacity to corrovia perign and employment benefits to staff without reliance upon another entity or parent company?  44. Applicant certifies that it has sufficient financial capacity to carry out its obligations pursuant to Program requirements including, but not limited to providing financial guarantees reliable to the providing financial guarantees and the providing financial guarantees. Program requirements including, but not limited to providing financial guarantees. Part of the part of the providing financial guarantees. Part of the part of t			n. and operate a Perman	nent Housing Project? If Ye	es, provide details in t	he Proiect Staffing Cha	rt below:			Yes
M. Applicant certifies that it has sufficient financial capacity to carry out its obligations pursuant to Program requirements including, but not limited to providing financial guarantees without relance upon another entity or parent company?    Staff type										Yes
Alson type   Employee   Consultant full name   Position title   Full time   Part time   % of time dedicated to this p   Consultant   Co	<ol> <li>Applicant of</li> </ol>	certifies that it has sufficient financial ca	pacity to provide payrol	l and employment benefits	to staff without relian	ce upon another entity	or parent co	mpany?		Yes
Staff type				bligations pursuant to Prog	ram requirements inc	luding, but not limited to	providing fi	nancial guarantees		Yes
Staff type   Employee (Consultant full name   Position title   Full time   Full time   25%   25%   Consultant   Dan Adams   Senior Advisor, Housing Initiatives, Full Time   25%   25%   Consultant   Rathbeen Mertz   President, REANA Consulting Inc   Part Time   10%   Employee   Salvador Meniyar   Director of Housing, IRSH   Full Time   5%   5%   Employee   Elizabeth Hewson   Manager of Supportive Housing   Full Time   10%   Employee   Rathbeen Meniyar   Director of Housing, IRSH   Full Time   10%   Employee   Rathbeen Meniyar   Supportive Housing   Full Time   10%   Employee   Alson Schlageter   Supportive Housing Program   Full Time   10%   Employee   Norar Amajol   Youth Housing Program Manager, HSH   Full Time   20%   Employee   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Employee   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH   Full Time   20%   Sharon Christen   Real Estate Principal Analyst, HSH	vitnout relianc	e upon another entity or parent compar	ny?	Project Staffing	Chart					
Consultant   Kathleen Mertz   President, REANA Consulting inc   Part Time   10%	Staff type	Employee / Consu	ıltant full name				time	% of time dedicated	to this	project
Employee Salvador Menjivar Director of Housing, HSH Full Time 55% Employee Elizabeth Herson Manager of Supportive Housing Full Time 10% Employee Alison Schlageter Supportive Housing Program Full Time 10% Employee Noora Amajd Youth Housing Program Full Time 20% Supportive Housing Program Full Time 20% Supportive Housing Program Handward Full Time 20% Supportive Housing Full Time 20% Support										
Employee Elizabeth Hewson Manager of Supportive Housing Fogram Full Time 10% Employee Alison Schlageter Supportive Housing Program Full Time 10% Employee Noora Amajid Youth Housing Program Manager, HSH Full Time 20% Employee Sharon Christen Read Estate Principal Analyst, HSH Full Time 20% Employee Sharon Christen Read Estate Principal Analyst, HSH Full Time 25% S500 Article XXXIV  splicant acknowledges per HSC \$37001, subdivision (h)(2), article XXXIV §1 of the California Constitution is not applicable to a development that consists of the acquisition, enhabilitation, reconstruction, alterations work, new construction, or any combination thereof, of lodging facilities or dwelling units using moneys received from the CSFRF established by the federal American Rescue Plan Act of 2021 (ARPA) (Public Law 117-2)? As such, Article XXXIV is not applicable to a development that consists of the acquisition, reconstruction, alterations work, new construction, or any combination thereof, of lodging facilities or dwelling units using moneys received from the CSFRF established by the federal American Rescue Plan Act of 2021 (ARPA) (Public Law 117-2)? As such, Article XXXIV is not applicable to a development that consists of the acquisition, reconstruction, alterations with the CSFRF established by the federal American Rescue Plan Act of 2021 (ARPA) (Public Law 117-2)? As such, Article XXXIV is not applicable to a development.  \$501 Housing First  splicant acknowledges that the Eligible Applicant shall certify to employ the core components of Housing First, as set forth at Welfare and Institutions Code §8255, in its property analysement and tenants selections protectes? Projects shall accept treats and severation, credit history, or history of eviction in accordance with practices permitted pursuant to Housing First practices, including local Coordinated Entry System (CES) far-persone-who are experiencing Housings and Entry System (CES) far-persone-who are experiencing Housings and Entry System (CES) far-persone-who are exper										
Employee Sharon Christen Read Estate Principal Analyst, HSH Full Time 20%  Employee Sharon Christen Read Estate Principal Analyst, HSH Full Time 25%  \$500 Article XXXIV  Applicant acknowledges per HSC \$37001, subdivision (h)(2), article XXXIV, \$1 of the California Constitution is not applicable to a development that consists of the acquisition, ehabilitation, reconstruction, alterations work, new construction, or any combination thereof, of lodging facilities or dwelling units using moneys received from the CSFRF established by the federal American Rescue Plan Act of 2021 (ARPA) (Public Law 117-2)? As such, Article XXXIV is not applicable to a development that consists of the acquisition, ehabilitation, reconstruction, alterations work, new construction, or any combination thereof, of lodging facilities or dwelling units using moneys received from the CSFRF established by the federal American Rescue Plan Act of 2021 (ARPA) (Public Law 117-2)? As such, Article XXXIV is not applicable to indiversely funded development.  \$501 Housing First  **Spoil Housing First**  **Spoil Housing F			•	Manager o	of Supportive Housing	Full Time		10%		
Employee Sharon Christen Real Estate Principal Analyst, HSH Full Time 25% \$500 Article XXXIV   \$500 Article XXIV   \$500 Article XXXIV										
\$500 Article XXXIV  poplicant acknowledges per HSC §37001, subdivision (h)(2), article XXXIV, §1 of the California Constitution is not applicable to a development that consists of the acquisition, reconstruction, alterations work, new construction, or any combination thereof, of lodging facilities or dwelling units using moneys received from the CSFRF established by the federal American Rescue Plan Act of 2021 (ARPA) (Public Law 117-2)? As such, Article XXXIV is not applicable to Homekey funded development.  \$501 Housing First  poplicant acknowledges that the Eligible Applicant shall certify to employ the core components of Housing First, as set forth at Welfare and institutions Code §8255, in its property management and tenant selection practices? Projects shall accept tenants regardless of sobriety, participation in services or treatment, history of incarceration, credit history, or history of eviction in accordance with practices permitted pursuant to Housing First practices, including local Coordinated Entry System prioritization protocols, or other federal or state Project unding sources.  \$502 Tenant Selection  \$502 Tenant Selection  \$502 Tenant Selection  \$503 Tenant Selection  poplicant acknowledges that referrals to Homekey Assisted Units shall be made through the local Coordinated Entry System (CES) for persons who are experiencing Homelessness care developed in collaboration with the local Coard implemented consistent with the requirements set forth in the NOFA CoC collaboration in the blocal Coard implemented consistent with the requirements set forth in the NOFA CoC collaboration in the house and supportive service design is los strongly encouraged to help target and serve greatest need populations. If referrals will be made using a prioritization system other than CES, the Applicant must describe help alm for tenant selection, and it shall be reasonably detailed and comprehensive, as determined by the Department in its sole and absolute discretion.  \$503 Participation in Statewide HDIS/HMIS  popli										
ehabilitation, reconstruction, alterations work, new construction, or any combination thereof, of lodging facilities or dwelling units using moneys received from the CSFRF established by the federal American Rescue Plan Act of 2021 (ARPA) (Public Law 117-2)? As such, Article XXXIV is not applicable to Homekey funded development.    Sol1 Housing First	Litiployee	Giaron	illotori			T dii Time		2070		
So Tenant Selection practices? Projects shall accept tenants regardless of sobriety, participation in services or treatment, history of incarceration, credit history, or history of eviction in accordance with practices permitted pursuant to Housing First practices, including local Coordinated Entry System prioritization protocols, or other federal or state Project unding sources.    \$502 Tenant Selection	ehabilitation, r	econstruction, alterations work, new co	onstruction, or any com	bination thereof, of lodging As such, Article XXXIV is n	facilities or dwelling u ot applicable to Home	nits using moneys rece	eived from th		ed by	Yes
So 2 Tenant Selection  Applicant acknowledges that referrals to Homekey Assisted Units shall be made through the local Coordinated Entry System prioritization protocols, or other federal or state Project unding sources.  Spo2 Tenant Selection  Applicant acknowledges that referrals to Homekey Assisted Units shall be made through the local Coordinated Entry System (CES) for persons who are experiencing Homekesenses? For persons, At Risk of Homekesenses, CES or another comparable prioritization system based on greatest need shall be used. All referral protocols for Homekey Assisted Units must be developed in collaboration with the local CoC and implemented consistent with the requirements set forth in the NOFA. CoC collaboration in Project and supportive service design is late of the plan for tenant selection, and it shall be reasonably detailed and comprehensive, as determined by the Department in its sole and absolute discretion.  Sola Participation in Statewide HDIS/HMIS  Applicant acknowledges Homekey Grantees must support CoC participation in the statewide Homeless Data Integration System (HDIS), and, in accordance with state and federal law including all applicable privacy law), disclose relevant data to the local Homeless Management Information System (HMIS)?  Notice: Another comparable data collection system may be appropriate for specific projects or sub-populations including, but not limited to, domestic violence victims, reterans, and youth.  Sola Relocation  Applicant acknowledges Homekey Grantees must comply with all applicable federal, state, and local relocation law. Grantees must have a relocation plan prior to proceeding with any hase of a project or other activity that will result in the displacement of persons, businesses, or farm operations?  Relocation Plan Relocation Assistance Narrative for relocation or no relocation  Applicants acknowledges all developments shall adhere to the accessibility requirements set forth in California Building Code Chapter 11A and 11B and the Americans with Disabi									-4.	
poplicant acknowledges that referrals to Homekey Assisted Units shall be made through the local Coordinated Entry System (CES) for persons who are experiencing Homelessness?  For persons At Rick of Homelessness, CES or another comparable prioritization system based on greatest need shall be used. All referral protocols for Homekey Assisted Units must be developed in collaboration with the local CoC and implemented consistent with the requirements set forth in the NOFA. CoC collaboration in Project and supportive service design is loss strongly encouraged to help target and serve greatest need populations. If referrals will be made using a prioritization system other than CES, the Applicant must describe he plan for tenant selection, and it shall be reasonably detailed and comprehensive, as determined by the Department in its sole and absolute discretion.    \$503 Participation in Statewide HDIS/HMIS	f eviction in a	ccordance with practices permitted pur								Yes
er persons At Risk of Homelessness, CES or another comparable prioritization system based on greatest need shall be used. All referral protocols for Homekey Assisted Units must be developed in collaboration with the local CoC and implemented consistent with the requirements set forth in the NOFA. CoC collaboration in Project and supportive service design is loss strongly encouraged to help target and serve greatest need populations. If referrals will be made using a prioritization system other than CES, the Applicant must describe he plan for tenant selection, and it shall be reasonably detailed and comprehensive, as determined by the Department in its sole and absolute discretion.  \$503 Participation in Statewide HDIS/HMIS  **pplicant acknowledges Homekey Grantees must support CoC participation in the statewide Homeless Data Integration System (HDIS), and, in accordance with state and federal law neluding all applicable privacy law), disclose relevant data to the local Homeless Management Information System (HMIS)?  **lote: Another comparable data collection system may be appropriate for specific projects or sub-populations including, but not limited to, domestic violence victims, eterans, and youth.   \$504 Relocation  **spoilcant acknowledges Homekey Grantees must comply with all applicable federal, state, and local relocation law. Grantees must have a relocation plan prior to proceeding with any hase of a project or other activity that will result in the displacement of persons, businesses, or farm operations?  **Spoilcants acknowledges all developments shall adhere to the accessibility requirements set forth in California Building Code Chapter 11A and 11B and the Americans with Disabilities ct. Title II?  **lie Name:**  **Relocation Provide a non-discrimination policy**  **Uploaded to HCD?**  **Spoilcant acknowledges use of Homekey funds is subject to California's prevailing Wage  **upplicant acknowledges use of Homekey funds is subject to California's prevailing wage law (Lab. Code, § 1720 et seq.). Applic				§502 Tenant Se	lection					
represens At Risk of Hemelessnese, CES or another comparable prioritization system based on greatest need shall be used. All referral protocols for Homekey Assisted Units must be developed in collaboration with the local CoC and implemented consistent with the requirements set forth in the NOFA. CoC collaboration in Project and supportive service design is loss strongly encouraged to help target and serve greatest need populations. If referrals will be made using a prioritization system other than CES, the Applicant must describe he plan for tenant selection, and it shall be reasonably detailed and comprehensive, as determined by the Department in its sole and absolute discretion.  \$503 Participation in Statewide HDIS/HMIS  **splicant acknowledges Homekey Grantees must support CoC participation in the statewide Homeless Data Integration System (HDIS), and, in accordance with state and federal law including all applicable privacy law), disclose relevant data to the local Homeless Management Information System (HMIS)?  **Idote: Another comparable data collection system may be appropriate for specific projects or sub-populations including, but not limited to, domestic violence victims, eterans, and youth.   \$504 Relocation  **Splicant acknowledges Homekey Grantees must comply with all applicable federal, state, and local relocation law. Grantees must have a relocation plan prior to proceeding with any hase of a project or other activity that will result in the displacement of persons, businesses, or farm operations?  **Relocation Plan**  Relocation Assistance Narrative for relocation or no relocation  **poplicants acknowledges all developments shall adhere to the accessibility requirements set forth in California Building Code Chapter 11A and 11B and the Americans with Disabilities etc., Title II?  **Relocation**  Relocation Plan**  Relocation Pl	oplicant ackr	nowledges that referrals to Homekey As	ssisted Units shall be ma	ade through the local Coor	dinated Entry System	(CES) for persons wh	o are experi	encina Homelessne	ee2	
Iso strongly encouraged to help target and serve greatest need populations. If referrals will be made using a prioritization system other than CES, the Applicant must describe he plan for tenant selection, and it shall be reasonably detailed and comprehensive, as determined by the Department in its sole and absolute discretion.  \$503 Participation in Statewide HDIS/HMIS  **spilicant acknowledges Homekey Grantees must support CoC participation in the statewide Homeless Data Integration System (HDIS), and, in accordance with state and federal law including all applicable privacy law), disclose relevant data to the local Homeless Management Information System (HMIS)?  **lote: Another comparable data collection system may be appropriate for specific projects or sub-populations including, but not limited to, domestic violence victims, reterans, and youth.  **S504 Relocation**  **spoicant acknowledges Homekey Grantees must comply with all applicable federal, state, and local relocation law. Grantees must have a relocation plan prior to proceeding with any hase of a project or other activity that will result in the displacement of persons, businesses, or farm operations?  **lile Name:** Relocation Plan Relocation Assistance Narrative for relocation or no relocation upplicants acknowledges all developments shall adhere to the accessibility requirements set forth in California Building Code Chapter 11A and 11B and the Americans with Disabilities ct., Title II?  **lile Name:** Access & Non-Discrimination**  **Provide a non-discrimination policy**  **Uploaded to HCD?**  **S506 Prevailing Wage**  **upplicant acknowledges use of Homekey funds is subject to California's prevailing wage law (Lab. Code, § 1720 et seq.). Applicant is urged to seek professional legal advice about the	or persons A	t Risk of Homelessness, CES or anoth	er comparable prioritiza	ition system based on grea	atest need shall be us	ed. All referral protocol	s for Homek	ey Assisted Units m	nust	
Applicant acknowledges Homekey Grantees must support CoC participation in the statewide Homeless Data Integration System (HDIS), and, in accordance with state and federal law including all applicable privacy law), disclose relevant data to the local Homeless Management Information System (HMIS)?  Idote: Another comparable data collection system may be appropriate for specific projects or sub-populations including, but not limited to, domestic violence victims, eterans, and youth.  \$504 Relocation  Spota Relocation  Spota Relocation law. Grantees must have a relocation plan prior to proceeding with any hase of a project or other activity that will result in the displacement of persons, businesses, or farm operations?  Relocation Plan  Relocation Plan  Relocation Assistance Narrative for relocation or no relocation  Spota Relocation Plan  Relocation Plan  Relocation Assistance Narrative for relocation or no relocation  Uploaded to HCD?  \$505 Accessibility and Non-Discrimination  Spota Relocation Plan  Relocation	lso strongly e	encouraged to help target and serve gre	eatest need populations	. If referrals will be made	using a prioritization	on system other than	CES, the A	pplicant must des		Yes
Including all applicable privacy law), disclose relevant data to the local Homeless Management Information System (HMIS)?  Alote: Another comparable data collection system may be appropriate for specific projects or sub-populations including, but not limited to, domestic violence victims, reterans, and youth.  \$504 Relocation  Applicant acknowledges Homekey Grantees must comply with all applicable federal, state, and local relocation law. Grantees must have a relocation plan prior to proceeding with any phase of a project or other activity that will result in the displacement of persons, businesses, or farm operations?  File Name: Relocation Plan Relocation Assistance Narrative for relocation or no relocation Uploaded to HCD?  \$505 Accessibility and Non-Discrimination  Applicants acknowledges all developments shall adhere to the accessibility requirements set forth in California Building Code Chapter 11A and 11B and the Americans with Disabilities act, Title II?  File Name: Access & Non-Discrimination Provide a non-discrimination policy Uploaded to HCD?  \$506 Prevailing Wage  Applicant acknowledges use of Homekey funds is subject to California's prevailing wage law (Lab. Code, § 1720 et seq.). Applicant is urged to seek professional legal advice about the			§50	03 Participation in Stat	ewide HDIS/HMIS					
lote: Another comparable data collection system may be appropriate for specific projects or sub-populations including, but not limited to, domestic violence victims, eterans, and youth.  \$504 Relocation  splicant acknowledges Homekey Grantees must comply with all applicable federal, state, and local relocation law. Grantees must have a relocation plan prior to proceeding with any hase of a project or other activity that will result in the displacement of persons, businesses, or farm operations?  ile Name: Relocation Plan Relocation Assistance Narrative for relocation or no relocation Uploaded to HCD?  \$505 Accessibility and Non-Discrimination  spplicants acknowledges all developments shall adhere to the accessibility requirements set forth in California Building Code Chapter 11A and 11B and the Americans with Disabilities ct., Title II?  ile Name: Access & Non-Discrimination Provide a non-discrimination policy Uploaded to HCD?  \$506 Prevailing Wage  spplicant acknowledges use of Homekey funds is subject to California's prevailing wage law (Lab. Code, § 1720 et seq.). Applicant is urged to seek professional legal advice about the							cordance wi	th state and federal	law	
pplicant acknowledges Homekey Grantees must comply with all applicable federal, state, and local relocation law. Grantees must have a relocation plan prior to proceeding with any hase of a project or other activity that will result in the displacement of persons, businesses, or farm operations?    Relocation Plan   Relocation Assistance Narrative for relocation or no relocation   Uploaded to HCD?	lote: Anothe	er comparable data collection system					d to, domes	stic violence victin	ns,	Yes
hase of a project or other activity that will result in the displacement of persons, businesses, or farm operations?    Relocation Plan   Relocation Assistance Narrative for relocation or no relocation   Uploaded to HCD?										
ile Name: Relocation Plan Relocation Assistance Narrative for relocation or no relocation Uploaded to HCD?  §505 Accessibility and Non-Discrimination  pplicants acknowledges all developments shall adhere to the accessibility requirements set forth in California Building Code Chapter 11A and 11B and the Americans with Disabilities ct., Title II?  ile Name: Access & Non-Discrimination Provide a non-discrimination policy Uploaded to HCD?  §506 Prevailing Wage  pplicant acknowledges use of Homekey funds is subject to California's prevailing wage law (Lab. Code, § 1720 et seq.). Applicant is urged to seek professional legal advice about the						s must have a relocation	n plan prior t	to proceeding with a	ny	Yes
\$505 Accessibility and Non-Discrimination  pplicants acknowledges all developments shall adhere to the accessibility requirements set forth in California Building Code Chapter 11A and 11B and the Americans with Disabilities ct, Title II?  lie Name:   Access & Non-Discrimination   Provide a non-discrimination policy   Uploaded to HCD?    \$506 Prevailing Wage    pplicant acknowledges use of Homekey funds is subject to California's prevailing wage law (Lab. Code, § 1720 et seq.). Applicant is urged to seek professional legal advice about the		<u> </u>						Uploaded to HCD	?	Yes
ct, Title II?  ile Name: Access & Non-Discrimination Provide a non-discrimination policy  Uploaded to HCD?  \$506 Prevailing Wage  pplicant acknowledges use of Homekey funds is subject to California's prevailing wage law (Lab. Code, § 1720 et seq.). Applicant is urged to seek professional legal advice about the			§50	05 Accessibility and No	on-Discrimination					
ile Name: Access & Non-Discrimination Provide a non-discrimination policy Uploaded to HCD?  \$506 Prevailing Wage  pplicant acknowledges use of Homekey funds is subject to California's prevailing wage law (Lab. Code, § 1720 et seq.). Applicant is urged to seek professional legal advice about the		nowledges all developments shall adhe	ere to the accessibility re	equirements set forth in Ca	alifornia Building Code	Chapter 11A and 11B	and the Ame	ricans with Disabiliti	ies	Yes
\$506 Prevailing Wage  pplicant acknowledges use of Homekey funds is subject to California's prevailing wage law (Lab. Code, § 1720 et seq.). Applicant is urged to seek professional legal advice about the		Access & Non-Discrimination	Provide a non-discr	imination policy				Uploaded to	HCD?	Yes
pplicant acknowledges use of Homekey funds is subject to California's prevailing wage law (Lab. Code, § 1720 et seq.). Applicant is urged to seek professional legal advice about the	,				y Wage			Spicadou to		100
rage law. The certification must verify that prevailing wages have been or will be paid, and that labor records will be maintained and made available to any enforcement agency upon	w's requirem	ents. Prior to disbursing the Homekey	funds, HCD will require	vailing wage law (Lab. Code a certification of compliance	e, § 1720 et seq.). Ap	evailing wage law, as w	ell as all appl	licable federal preva	iling	Yes

Threshold									
File Name:	Prevailing Wage	Provide a prevailing wage certification	Uploaded to H	CD?	Yes				
§507 Environmental Clearances									
Applicant acknowledges HCD encourages Eligible Applicants to fully engage with HCD's technical assistance and to consider the CEQA exemption set forth at HSC §50675.1.4 and the provision for land use consistency and conformity set forth at HSC §50675.1.3, subdivision (i)? Applicants should consult with their counsel for legal advice in construing application of the foregoing exemptions to their Project. It is entirely within an Applicant's discretion to determine whether to use the statutory CEQA exemption, whether the exemption applies to the Applicant's proposed activity, or whether some other mechanism applies and could be used to satisfy obligations under CEQA.									
	§508 Land Use								
§508 Land Use Applicant acknowledges Pursuant to HSC section 50675.1.3, subdivision (i), Homekey Projects are deemed consistent and in conformity with any applicable local plan, standard, or requirement, and any applicable coastal plan (local or otherwise). Such Projects shall not be subject to any discretionary local permit review or approval process (e.g., a discretionary use permit process) before being able to proceed as a permitted use.									

	Certification & Legal	Disclosure	2/1/22
	cluded in this application are, to the best of my kno cation on behalf of the entity identified in the signatu tities of interest - of all persons or entities, including		
N/A			
l. As of the date of application, the Project, or the r	eal property on which the Project is proposed (Pro	operty) is not party to or the subject of any claim or action at the State or Federal a	ppellate level.
5. I have disclosed and described below any claim n addition, I acknowledge that all information in this	application and attachments is public, and may be		
Shireen McSpadden	Executive Director, Department of Homelessness and Supportive Housing		
Printed Name	Title of Signatory	Signature	Date
	Legal Disc		
f the subsidiary is involved in (for example, as a gun n addition to each of these entities themselves, the	uarantor) or will be benefited by the application or to be term "applicant" shall also include the direct and it	indirect holders of more than ten percent (10%) of the ownership interests in the er	ntity, as well
· · · · · · · · · · · · · · · · · · ·	y company. For projects using tax-exempt bonds,	ne general and limited partners of the entity if the entity is a partnership, and the me , it shall also include the individual who will be executing the bond purchase agreen " or "joint applicant" as defined above.	
Explain all positive responses on a separate sheet	and include with this questionnaire in the application	on.	
Exceptions: Public entity applicants without an ownership nembers, are not required to respond to this q		at not limited to cities, counties, and joint powers authorities with 100 or mo	re
		so not required to respond. However, chief executive officers (Executive Directors easurers, Chief Financial Officers, or their equivalent).	, Chief
Civil Matters  I. Has the applicant filed a bankruptcy or receivers  /ears?	ship case or had a bankruptcy or receivership acti	ion commenced against it, defaulted on a loan or been foreclosed against in past te	en No
2. Is the applicant currently a party to, or been notif business, or (b) the project that is the subject of the		on that may materially and adversely affect (a) the financial condition of the applicar	nt's No
B. Have there been any administrative or civil settle condition of the applicant's business, or (b) the project		cant within the past ten years that materially and adversely affected (a) the financia	l No
<ol> <li>Is the applicant currently subject to, or been notificensing or accreditation agency, a local, state or f</li> </ol>		ninistrative proceeding, examination, or investigation by a local, state or federal regulatory or enforcement agency?	Yes
		mination, or investigation by a local, state or federal licensing or accreditation agen that resulted in a settlement, decision, or judgment?	cy, Yes
Criminal Matters			
<ol> <li>Is the applicant currently a party to, or the subjection investigation, of any kind, involving, or that could</li> </ol>		o or the subject of, any criminal litigation, proceeding, charge, complaint, examination	on No
		o or the subject of, any criminal litigation, proceeding, charge, complaint, examinate cant for matters relating to the conduct of the applicant's business?	on No
or investigation, of any kind, involving, or that could	d result in, criminal charges (whether felony or mis-	o or the subject of, any criminal litigation, proceeding, charge, complaint, examinated demeanor) against the applicant for any financial or fraud related crime?	No
or investigation, of any kind, that could materially at	ffect the financial condition of the applicant's busine	o or the subject of, any criminal litigation, proceeding, charge, complaint, examinations?	NO
10. Within the past ten years, has the applicant bee	·		No
1. Within the past ten years, has the applicant bee	•	1.1	No
<ol> <li>Within the past ten years, has the applicant bee</li> <li>Provide a letter of explanation if you responder</li> </ol>	<u> </u>	or iraud related crime?	No
File Name: Cert & Legal Explanation	Letter of explanation for any "Yes" answers	or red shaded items above.  Uploaded to HC	:D? Yes
Shireen McSpadden	Executive Director		
Printed Name	Title of Signatory	Signature	Date

#### **Applicant Documents**

2/1/22

#### Certifications & Legal Disclosure

A completed and signed Certification is required for each Joint Applicant. Each Joint Applicant must sign an individual Certification form. A completed and signed Legal Disclosure is also required for each Joint Applicant. The hard copy Certifications & Legal Disclosure should be submitted with the application as detailed in the NOFA.

#### Resolutions

Applicant may use their own Resolution format as long as it contains ALL of the authorizations as in the sample.

The person attesting to the resolution signing cannot be the same person authorized to execute the documents in the name of the applicant.

If more than one authorized signatory is identified, state whether both signatories are required or only one signatory is required to submit and execute Program docs.

If the application is being signed by a designee of the authorized signatory, the applicant must also submit a designee letter or other proof of signing authority.

A resolution is required of each Joint Applicant - both private and public entities. A sample resolution template is available on the Homekey website.

#### **Organizational Documents**

Organizational documents are required for all Applicants except Governmental entities are not required.

Submit organizational documents supporting the Resolution submitted with the application.

#### Corporation organizational documents

Articles of Incorporation (Corp. Code §154, 200 and 202) as certified by the CA Secretary of State.

Bylaws and any amendments thereto (Corp. Code §207(b), 211 and 212)

Certificate of Amendment of Articles of Incorporation (Corp. Code §900-910 (general stock), §5810-5820 (public benefit and religious corporations), §7810-7820 (mutual benefit corporations), or §12500-12510 (general cooperative corporations)) as applicable.

Restated Articles of Incorporation (Corp. Code §901, 906, 910 (general stock), §5811, 5815, 5819 (public benefit and religious corporations), §7811, 7815 and 7819 (mutual benefit corporations) and §12501, 12506 and 12510 (general cooperative corporations)) as applicable.

Statement of Information (CA Secretary of State form SI-100 or SI-200)

Shareholder Agreements (Corp. Code §186) if applicable.

Certificate of Good Standing certified by Secretary of State.

#### Limited Liability Company

Articles of Organization (CA Secretary of State form LLC-1)

Certificate of Amendment (CA Secretary of State form LLC-2) if applicable

Restated Articles of Organization (CA Secretary of State form LLC-10) if applicable

Certificate of Correction (CA Secretary of State form LLC-11) if applicable

Statement of Information (CA Secretary of State form LLC-12 or LLC-12NC)

Operating Agreement (Corp. Code §17707.02(s) and 17701.10)

Certificate of Good Standing certified by Secretary of State

#### Limited Partnership

Certificate of Limited Partnership (CA Secretary of State form LP-1)

Amendment to Certificate of Limited Partnership (CA Secretary of State form LP-2) if applicable.

Certificate of Correction (CA Secretary of State form LP-2) if applicable.

Limited Partnership Agreement (CA Corp. Code §15901.02(x) and 15901.10)

Certificate of Good Standing certified by Secretary of State.

Any other CA Secretary of State filings applicable to revivals, conversions or mergers.

#### **Organizational Chart**

The Organizational chart must depict the organizational structure of the entities in relation to the applicant.

#### Signature Block

All Applicants must submit a Signature Block in a Microsoft Word Document that will be used in the HCD legal documents such as the Standard Agreement.

#### Payee Data Record STD-204 or Taxpayer Identification Number (TIN)

The TIN must be submitted by all governmental entity Applicants. All other Applicants must submit the STD-204 Payee Data Record. Available on the Homekey website.

Homekey Round 2 Page 10 of 29 Applicant Documents

	§300(iii) Supportive Services Plan (SSP) 2/1/22
Homekey applic	ations must include an initial plan for providing supportive services based on the anticipated needs of the Target Population and any proposed sub-populations to be served by the
Project. The che	cklist below shall serve as a guide to ensure your SSP is complete.
Part I.	Tenant Selection
Yes	Section 1: Tenant Selection Criteria
Yes	Section 2: Referrals
Yes	Section 3: Housing First Certification §501
Part II.	Supportive Services Detail
Yes	Section 1: Supportive Services Provider Information
Yes	Section 2: Supportive Services Chart
Yes	Section 3: Supportive Services Coordination
Part III.	Staffing
Yes	Section 1a: Staffing Description
Yes	Section 1b: Staffing Chart
Yes	Section 2: Staffing Ratios
Part IV.	Supportive Services Budget
Part V.	Property Management Plans and Tenant Selection
Yes	Section 1: Property Management Plans and Tenant Selection
Part VI.	Measurable Outcomes and Plan for Evaluation
Yes	Section 1: Measurable Outcomes
Yes	Section 2: Plan for Evaluation

#### Part I. Tenant Selection

§502 asks for a detailed description of the Tenant Selection process. Using the titled sections below, the narrative should be as specific as possible, delineating the roles of property management and the support service provider and how these functions will be coordinated. Your description should clearly and conclusively document processes to ensure compliance with the Homekey Round 2 NOFA for Tenant Selection and Housing First Practices.

#### Section 1: Tenant Selection Criteria

Target Population and Eligibility Criteria

a. Do you use Housing First Practices?

Yes

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

The available units are part of the SF Coordinated Entry (CE) process, designated to serve homeless households referred through HSH's Online Navigation and Entry (ONE) system which serves as San Francisco's federally compliant HMIS system. Youth are referred to vacancies for Interim Housing and Permanent Supportive Housing units via CE and prioritized via an assessment. Factors that affect prioritization for housing are vulnerability, chronicity of homelessness, and barriers to housing. Applicants must meet the definition of homelessness as defined by Part 578.3 of Title 42 of the United States Code, and must meet occupancy limits for the units.

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

45 of the 52 units will serve homeless Transition Age Youth (TAY) and adults as defined by Part 578.3 of Title 42 of the United States Code (90%) 5 units, will target young adults aged 25-29 who are currently experiencing homelessness and were part of the Homeless Response System as TAY (10%). San Francisco's Proposition C, passed by voters in 2018, speaks specifically to housing for the TAY population and allows for young adults aged 25-29 to be placed in TAY designated Permanent Supportive Housing. Additionally, according to current data, 10% of the persons served by the Youth Access Points and prioritized for housing through Coordinated Entry are young adults aged 25-29 who were homeless as TAY. Therefore, under Homekey definitions there are two target populations.

d. Describe any additional eligibility criteria other than those indicated above, i.e., information needed to determine if the tenant can comply with lease terms. **NOTE:** Selection criteria designed to assess anything other than the ability to comply with lease terms generally run afoul of fair housing laws designed to protect equal access to housing for people with disabilities. See Between the Lines, A Question and Answer Guide on Legal Issues in Supportive Housing Chapter 4.

All placements will be made using the core components of Housing First, as set forth in the Welfare and Institutions Code Section 8255. Placements will be referred based on eligibility and occupancy standards and Homekey target population definitions. There are no minimum income requirements. No distinction will be drawn between a person who keeps his/her own unit and one who does so with the assistance of an attendant. Homeless status will be verified in writing. All placements may request a reasonable accommodation as part of the referral and application process.

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

The occupancy package includes a full set of disclosures as required by law. This includes, but is not limited to, disclosures and policies such as bed bug disclosures, grievance policy, reaonable accommodation policy, smoke detector notice, quest policy, community rules, and Covid-19 addendum.

#### Section 2: Referrals

The following addresses the required use of the Coordinated Entry System (CES) for all referrals into Homekey Assisted Units or an alternate comparable prioritization system for those At Risk of Homelessness based on greatest need. Note that use of standard waiting lists is prohibited, in that both of these systems must prioritize referrals based on highest acuity needs, rather than first-come first served.

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

The City of San Francisco's Coordinated Entry is the foundation of the Homelessness Response System (HRS) and is designed to assess, prioritize and match people experiencing homelessness to housing opportunities. Coordinated Entry organizes the Homelessness Response System with a common population-specific assessment, a centralized data system, a "by name" database of clients and a prioritization method. Coordinated Entry Access Points are the community gateways into San Francisco's Homelessness Response System and serve: Adults, Families and Transitional Age Youth. CE Access Points are located throughout the City and are operated by local non-profit service providers. At these community Access Points, eligible adults, youth and families experiencing homelessness are provided with Problem Solving opportunities, shelter, housing opportunities, and other services in San Francisco. The city operates separate Access Points for adults, families, and youth, which are designed to facilitate access to the HRS for each population. All Access Points provide the same assessment approach, including standardized decision-making based on the unique needs of the individuals and families they are designed to serve. The Department of Homelessness and Supportive Housing adopted CES Standards on February 1, 2021 and this, along with contact information, are attached to this application for reference.

b. If using a separate comparable prioritization system than CES to refer persons At Risk of Homelessness describe that system. All referral protocols for Homekey Assisted Units must be developed in collaboration with the local CoC and implemented consistent with the requirements set forth in the Homekey NOFA.

N/A

Section 3: Housing First Certification §501

		§300(iii) Suppor					2/1/22	
	all certify to employ the core of below to certify compliance with		s set forth at Welfare a	and Institutions	Code §8255, in its prope	rty management and tenant selection pra-	ctices.	
Tenant Screening	elow to certify compliance wi	in Housing First.						
1. If the project cannot so	erve someone, it works throu	igh the coordinated entry proces	ss to ensure that thos	e individuals or	families have access to	housing and services elsewhere.	Yes	
' '	rything possible not to reject a dicating a lack of "housing re	,	oor credit or financial	history, poor o	or lack of rental history, m	ninor criminal convictions, or behaviors	Yes	
	is not contingent on sobriety, the terms of the funding itse	•	lack of a criminal rec	ord, completior	n of treatment, participation	on in services, or any other unnecessary	Yes	
<ol> <li>People with disabilities physical features that ac</li> </ol>		s to request reasonable accom	modations within appl	ications and so	creening processes and o	during tenancy. Building and units include	Yes	
Housing-Based Volunt	•	and up a positive veuth develor	amont model and sult	ırallı oomnataı	nt convices to engage with	h tananta	Vac	
2. Services are informed	by a harm-reduction philoso	ces use a positive youth develop phy that recognizes that substar ared education regarding safer pr	nce use/ addiction are	a part of som	e tenants' lives. Tenants		Yes Yes	
	service coordinators who are					t not limited to, motivational interviewing	Yes	
	es or compliance with service	or compliance with service plans are not conditions of tenancy but are reviewed with tenants and regularly offered as a resource to tenants. Housing and			resource to tenants. Housing and	Yes		
		roblem-solving over therapeutic	goals.				Yes	
Housing Permanency	- 6 11 - 16 - 20 4 - 11 1	delettere de met energiament energia						
1. Substance use in and of itself, without other lease violations, is not considered a reason for eviction.  2. Tenants in supportive housing are given reasonable flexibility in paying their share of rent on time and offered special payment arrangements for rent arrears and/or assistance with							Yes	
financial management, including representative payee arrangements.  3. Every effort is made to provide a tenant the opportunity to transfer from one housing situation, program, or project to another if tenancy is in jeopardy. Whenever possible, eviction back							Yes Yes	
into homelessness is avoided.  4. Program Requires Housing Providers to Provide Tenants with Leases and Reflects Tenants' Rights & Responsibilities Of Tenancy Under CA Law (in						aw (including eviction protections).	Yes	
			I. Supportive Servi	•		(		
Section 1: Supportive	Services Provider Informati		i. oupportive oct vi	ocs Detail				
If already identified, list the			nd any proposed sub	-populations to	be served by the Project	t. If more than one Provider will be offering	)	
Provid	der Name	Populations the	he Provider will serv	/e		Services Provider will offer		
Larkin Street Youth Serv	rices	Homeless Youth, Transition Age	Outreach, Intake and Assessment, Case M. Stability Support, Coordination with Property and Safety Checks, Socialization, Exit Plann					
Describe any known cor	oflicts and/or the mitigation str	rategy for when Homekey funding	g or other program re	equirements co	inflict with Housing First p	practices, as applicable.		
None	<u> </u>	y,						
If your tenants include m Assisted Units.	ninor children and/or adult dep	endents of Homekey Tenants, c	describe any additiona	al criteria that v	vill be used to ensure app	licants are eligible to occupy the Homeke	у	
N/A								
Section 2: Supportive	Services Chart							
		required in §300 to be offered to	tenants of the Homek	ey Assisted U	nits.			
Resident Service	Service I	Description	Frequency	Hours	Service Provider	Off-site Service Location		
List each service separately		the degree to which services provided.	Frequency of services provided	Provide the hours of availability	Provider's Name	If service is on-site, leave blank. Enter di miles, to off-site service and list res commuting options. Reasonable access that does not require walking more that mile.	ident is access	
	One-site Case management	ratio of 20:1.	Depends on needs of clients	8 hours a day; 5 days	Larkin Street Youth Services	Timo.		
One Case Manager and one supervisory Program Mana		supervisory Program Manager		a week				
The on-site Behavioral Health Clinician will provide behavioral health screening, clinical assessments, crisis intervention and support services for clients with greates acuity of behavioral health needs. They will also facilitate and coordinate Collaborative Case Conferences to assis determining treatment plans for clients with behavioral he concerns.			Depends on needs of clients	8 hours a day; 5 days a week	Larkin Street Youth Services			

	§300(iii) Suppor	tive Services P	lan (SSP)		2/1/22
Physical health services	The on-site Support Services provider will provide referral services and coordination with clinics and hospitals. The Support Service provider uses a holistic and trauma informed approach to ensure client's physical health needs are met. HSH is also continuing to partner with DPH and the National Harm Reduction Coalition's Drug Overdose Prevention and Education program to create and tailor education services and resources to the community working with people experiencing homelessness. HSH will work with this program to adopt the uniform overdose prevention policy created for PSH programs.	Depends on needs of clients	8 hours a day; 5 days a week	Larkin Street Youth Services	
Assistance obtaining benefits and essential documentation	On-site Support Services will assist clients with obtaining and maintaining public benefits and other types of income. HSH facilitates identity and income documentation for all clients at the point of housing referral/ move-in. Once housed, Support Services will continue to identify needs of residents to obtain documents such as identification, birth certificates, social security cards, and other essential documents in order to progress on goals related to housing stability. Support Services will identify fee waivers and other resources to help reduce the cost of obtaining essential documentation.	Depends on needs of clients	8 hours a day; 5 days a week	Larkin Street Youth Services	
Education and employment services	On-site Support Services will assess clients' skills and goals at intake and encourage all cliens to participate in educational and employment services. The goals of these services are to increase education levels, skill levels, and find employment all geared towards increasing the client's income. Support Services will provide referral services and coordination of workshops and trainings as needed by clients.	Depends on needs of clients	8 hours a day; 5 days a week	Larkin Street Youth Services	
Other services, such as housing retention skills, legal assistance, family connection services, etc.	On-site Support Services will provide referral services to legal assistance in the community, as needed by the clients. Support Services staff will also connect each client with resources needed to be food secure as they live independently, and referrals to skill building classes and groups in the community.	Depends on needs of clients	8 hours a day; 5 days a week	Larkin Street Youth Services	
Other Residential Services (specify)- Community Building	On-site Support Services will provide community building opportunites like weekly coffee and pastries, holiday events, and other programs to provide socialization and stability.	Monthly	1-2 hours	Larkin Street Youth Services	
Other Residential Services (specify)- Housing Stability Support	On-site Support Services will outreach to and offer services and/or referrals to all clients who display indications of housing instability. Housing instability indicators include but are not limited to, discontinuance from benefits, rules violations or warnings from Property Management, and conflicts with staff or other residents. Clients will be assisted with communicating, responding to, and meeting with				

Section 3: Supportive Services Coordination

In order to provide wrap around services, the onsite supportive services team partners with many community providers including In-Home Supportive Services (IHSS), San Francisco Department of Public Health (DPH), intensive case management programs, medical and psychiatric providers, police, paramedics, EMS6, crisis response, hospital and jails, money management providers, San Francisco Human Services Agency public benefits division, Social Security Administration, Meals on Wheels, and the Conservators Office. Whenever possible, these services are delivered on site at no cost to the tenants. Additionally, the building is located within walking distance to major public transit options (BART Train and MUNI bus lines). The operating or services budgets can be revised to include funding for transportation needed to access services, depending on needs presented.

2. Describe how the supportive services will be provided in a manner that is culturally and linguistically competent for persons of different races, ethnicities, sexual orientations, gender identities, and gender expressions. This includes explaining how services will be provided to Homekey tenants who do not speak English, or have other communication barriers, including sensory disabilities, and how communication among the services providers, the property manager and these tenants will be facilitated. Additionally, describe how services will accommodate trauma-based, barriers to services. If available, provide documentation, in the form of Memorandum of Understanding, Memorandum of Agreement, letters of support or contracts demonstrating who will be responsible for ensuring access to services and how accessibility will be accomplished.

<sup>1.</sup> Describe the accessibility of community services to which you propose linkages, whether they are on-site or in close proximity to the Project, and the frequency, travel time and cost to the tenant for transportation required to access the services to include both public transportation and private transportation services (e.g. van owned by the provider). If available, provide documentation, in the form of Memorandum of Understanding, Memorandum of Agreement, letters of support or contracts demonstrating who will be responsible for ensuring access to services and how accessibility will be accomplished.

#### §300(iii) Supportive Services Plan (SSP)

2/1/22

HSH recognizes that the life-threatening challenges facing youth experiencing homelessness in San Francisco are largely the byproducts of systemic inequality rooted in white supremacy, homophobia, capitalism, and anti-trans bias. Therefore, any solution—whether with an individual or system wide—must be rooted in equity. The Service Provider's approach to equity will be based on radical acceptance and a nonjudgmental approach to the provision of services. Service staff will actively reach out to those who may feel excluded or overlooked, or who may be reluctant to seek help on their own, and will make essential services and supplies more equally accessible to all. The Service Provider will strive to meet young people experiencing homelessness where they are at, and will take into account the cultural sensitivities, intersectional identities, and different lived experiences of each individual. The Service Provider will facilitate ongoing Property Management training focusing on equity, trauma, anti-bias, and harm reduction specifically for TAY experiencing homelessness. Reasonable steps will be taken to ensure that persons with Limited English Proficiency (LEP) have meaningful access and an equal opportunity to participate in services, activities, programs and other benefits. Property Management will ensure meaningful communication with LEP applicants and residents and their authorized representatives. Interpreters, translators and other aids needed to comply with this shall be provided free of charge to the person being served, and residents and their families will be informed of the availability of such assistance. Language assistance will be provided through use of a contracted telephonic interpretation service, competent bilingual staff, staff interpreters, or formal arrangements with local organizations providing interpretation or translation services or technology. For persons with disabilities, the Services provider will work to provide necessary accommodations while connecting the individual with appropri

#### Part III. Staffing

#### Section 1a: Staffing Description

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

The Supportive Services staffing plan consists of case managers, a supervisory Program Manager, senior management oversight from the Program Director, part time Peer Advocate, and part time Behavioral Health Clinician. The Case Manager responsibilities include: completing a comprehensive intake and assessment of clients at the time of move-in; providing referrals as needed; conducting outreach to clients, coordinating with external resources and providers to support clients; coordinating with Property Management to ensure housing stability of all clients using housing first, harm reduction, and trauma informed approaches; and organizing groups and commununity events for the clients. The supervisory Program Manager supervises the Case Managers to provide high level of service to clients and provides guidance, training and oversight. The Supervisor also submits required reports, provides coverage, as needed, and responds to requests from HSH and stakeholders. The Peer Advocate organizes living skills groups, client activities, accompanies clients to appointments, and services as ongoing peer support for community building programs. Two days a week, a Behavioral Health Clinician will be available on site for services as needed. The Clinician will provide on-site behavioral health screening, clinical assessments, crisis intervention and support services for clients with greatest acuity of behavioral health needs.

#### Section 1b: Staffing Chart

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

IL. mulcate Wi	ich staff position will be responsible for Homeless Management Information System data entry and C	Total	auon.		1
Title	Minimum requirements	FTE:	3.4	Employing Organization	Location
List each staff position	List min. required staff preparation include (education & experience).	Indicate F position Homeke (half-time	ns for y units	List which organization will employ each staff position	Select "On- Site" or "Off- Site"
	Bachelor's degree in psychology, counseling, social work or related field, and minimum 2 years relevant experience; or 5 years relevant experience in place of degree; some positions may be bilingual	2		Lead Service Provider	On-Site
Program Manager	Master's degree in psychology, counseling, social work or related field, and minimum 3 years relevant experience and 3 years supervisory experience; bilingual if possible. This position will be responsible for Homeless Management Information System data entry and CoC coordination.	0.5	5	Lead Service Provider	On-Site
	Bachelor's degree in social work, psychology or a related field preferred but not required, and at least 5 years of management and supervisory experience; bilingual if possible	0.2	2	Lead Service Provider	Off-Site
	Bachelor's degree in social work, psychology or a related field preferred but not required, and 2 to 3 years' experience working with youth and young adults; preferably at-risk, homeless, or runaway youth	0.5	5	Lead Service Provider	On-Site
BH Clinician	Master's degree in psychology, counseling, social work or related field, and current license or registered with the BBS as an Associate Clinical Social Worker, Associate Marriage and Family Therapist, or Associate Licensed Clinical Counselor; blinigual if possible	0.2	2	Lead Service Provider	On-Site
Section 2: Staffing					
	all services staffing level for the Project by completing the calculation below.				
a. Total Homekey A					50
	ce Staff from the Staffing Chart for the Homekey Assisted Units - Provide only the number of ongoing direct ser- omekey Assisted Units, (for example, case manager, psychiatric nurse, services coordinator, etc). Do not inclu ositions.			•	2.7
	nekey units per FTE Staff Person (a÷b)				18.51851852
	anager staffing ratio chart to show how many staff are assigned per client (for example 2:1, 3:1, etc.). Include a	all case man	nagement		
Population Type:	Chronically Homeless Homeless	Ī	<u> </u>	At-Risk of Homelessnes	ss
Case Manager Rati	·			20:1	
	Part IV. Supportive Services Budget				

#### §300(iii) Supportive Services Plan (SSP)

2/1/22

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

Income Source/Program Name		Amount	Туре	Funding Status	% of Total Budget
Homekey			Cash	Intend to Fund or Provide	0.00%
HSH Subsidy			Cash	Committed	0.00%
					0.00%
					0.00%
	Total Revenue	\$0			0.00%
Expense Item		Amount	Туре	Funding Status	% of Total Budget
Staff Salaries: List by title of position	n. (This list must	i	1		_
match the Staffing Chart above.)	`	Í			
Case Manager	FTE: 2.00	\$104,410	Cash	Committed	30.42%
Program Manager	FTE: 0.50	\$37,960	Cash	Committed	11.06%
Program Director	FTE: 0.03	\$2,800	Cash	Committed	0.82%
Peer Advocate	FTE: 0.50	\$24,430	Cash	Committed	7.12%
BH Clinician	FTE: 0.36	\$29,170	Cash	Committed	8.50%
	FTE:				0.00%
	FTE:				0.00%
	FTE:				0.00%
	FTE:				0.00%
	FTE:				0.00%
	FTE:				0.00%
	FTE:				0.00%
Fringe Benefits	1	\$48,900	Cash	Committed	14.25%
	Total Staff Expenses	\$247,670			72.15%
Tenant Transportation (per SSP)		\$12,980	Cash	Committed	3.78%
Staff training (per SSP)		\$2,860	Cash	Committed	0.83%
Equipment					0.00%
Supplies		\$11,410	Cash	Committed	3.32%
Travel		\$1,400	Cash	Committed	0.41%
Office Rent/Occupancy Costs (don	n't include rent/leasing		ouc		
costs for SH units)	-				0.00%
Training					0.00%
Consultants: List by Function					0.00%
Subcontractors/Partners-list by Ent	titv/Service type				0.00%
Other Expenses: Client Food and L		\$19,060	Cash	Committed	5.55%
Other Expenses: Program Activities		\$3,120	Cash	Committed	0.91%
Other Expenses: Indirect Staff Cost		\$44,765	Cash	Committed	13.04%
Other Expenses: (type in expense					0.00%
Other Expenses: (type in expense					0.00%
Other Expenses: (type in expense					0.00%
7	Total Expenses	\$343,265			100.00%

#### Part V. Property Management Plans and Tenant Selection

#### Section 1: Property Management Plans and Tenant Selection

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

- Applicant eligibility and screening standards
- 2. Confidentiality
- Substance abuse policy
- 4. Communication between property manager and supportive services staff
- 5. Eviction policies and eviction prevention procedures
- 6. Process for assisting tenants to apply for different forms of cash and non-cash benefits to aid the household in retaining their housing, if needed
- 7. How applicants and residents will be assisted in making reasonable accommodation requests, in coordination with the services provider and persuasive to outside entities, such as Housing Authorities, to ensure that persons with disabilities have access to and can maintain housing
- 8. Policies and practices to facilitate Voluntary Moving On strategies
- 9. Appeal and Grievance Procedures

File Name	Property Management Plan	Submit Property Management Plan and Tenant Selection Policies	Uploaded to HCD?	Yes							
		Part VI. Measurable Outcomes and Plan for Evaluation									
Specific targe	Specific target populations will likely have varying outcomes and evaluation strategies. List outcomes and evaluations plans specific to each target population.										
Section 1: N	Section 1: Measurable Outcomes										
Outcomes a	re what you expect to happen for the peo	ple served by your Project. Outcomes are sometimes called results. Outcome objectives are time-spec	cific measurable goals that id	entify how							

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

Category	Outcomes	Outcome Objectives
Residential Stability: Tenants maintain permanent housing	At least 70% of the participants exiting the interim program will exit	Services will coordinate with Property Management on a weekly
(see examples in cell comments to the right)	to stable housing	basis, and external community providers as needed to assist
		participants in maintaining housing. Services will engage in weekly
		wellness checks and tracks interactions with participants through
		the individual assessments and ongoing referrals Services shall
		also provide housing related support that assists participants in
		achieving goals that move them towards more independent
		housing.

	§300(iii) Supportive Services Plan (SSP)		2/1/22
Increased Skills and/or Income: Tenants gain job-related skills, participate in job-related training and/or education, gain stipend part-time or full-time supported employment, gain access to mainstream service/income support Programs for which they are eligible (see examples in cell comments to the right)	At least 80% of interim housing participants will be connected to employment or enrolled in post-secondary education	Services shall assess participant skills and goals at encourage clients to engage in educational and empservices to increase education levels, skill levels, a employment to increase income.	oloyment
Greater Self- Determination: Tenants gain daily living skills and ability to plan and advocate for themselves to maximize independence and self-sufficiency (see examples in cell comments to the right)	At lease 80% of interim housing participants will be connected to income/public benefit sources	Services shall create Individualized Service Plans to and support achievement of goals.Interactions, eng weekly status will be documented to ensure particip receiving the support they need.	agement, and
Client Satisfaction	At least 75% of interim housing participants completing an annual survey will be satisfied or very satisfied with supportive services	A written annual survey shall be offered to participa feedback, satisfaction, and assess the effectivenes and systems within the program. Services shall offe to participants regarding completion of the survey if format presents any problem.	s of services r assistance

#### Section 2: Plan for Evaluation

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

Data is reported by Support Service Providers on a monthly, quarterly and annual basis. Information is input into shared databases, CARBON and ONE (Online Navigation and Entry), managed by the City and County of San Francisco. There is least one dedicated HSH staff managing the contract with the Support Services Provider and who reviews the reports on the respective due dates, and provides feedback and follow-up as necessary. Monitoring of the program occurs on an annual basis on-site at the building, at which time the program outcome objectives will be reviewed alongside program documents and client files. A comprehensive report, including findings and feedback, is then issued to the agency providing Support Services. Additionally, HSH will require programs to report how they will address issues of racial equity in services provided, the demographics of their staff at all levels, and internal mechanisms for advancement of staff of color. HSH will monitor and evaluate programs on their responsiveness to racial disparities.

Local Jurisdictio	n and NEPA Responsible Ent	ity Verificat	ion (if applicable)		2/1/22
Applicant: Submit this form to the agency or department of lo	ocal government responsible for administr	ration of the item	is listed. This form may be	submitted to more than or	ne agency or department
if necessary. If the NEPA Responsible Entity is not a local gov	vernment (e.g. State of Calif. HOME Prog	ram, USDA RD)	, also submit a copy of this	s form to the appropriate N	EPA Responsible Entity
If an item is not required, indicate the reason in the box below	. Complete both Sections 1 & 2.				
Project Applicant:	City and County of San Francisco				
Applicant Address:	440 Turk Street				
Applicant City:	San Francisco				
Project Name:	Mission Inn				
Project Address/site:	5630 Mission Street				
Project City:	San Francisco				
Project County:	San Francisco				
Assessor Parcel Numbers (APNs):	Block 7098 Lot 12				
· ,	Section	1			
Local jurisdiction or NEPA Responsible Entity: The Applic requesting funding for the project named above, under the Ho of that process. Verification of items listed below will be used it	omekey program. Projects submitted for p				
			Not Required for this Project	Final date of Public Comment Period	Approved Date
All Environmental Clearances (CEQA and NEPA) necessary	to begin construction are either final	CEQA	Х		
approved or unnecessary:		NEPA	X		
Specify in the box below, items not required and explain why					
	Section:	2			
Note: Any project using Homekey funds for any of the purpos or otherwise," and "allowed as a permitted use, within the zon	•				• •
reviews or approvals." (Health and Safety Code 50675.1.3 (i)				, , , , , , .	, ,
				Not Required for this Project	Verified as Complete and date completed
All necessary land use approvals or entitlements necessary papprovals, such as site plan or design review.	prior to issuance of a building permit, inclu	uding any require	ed discretionary	X	·
Specify in the box below, items not required and explain why	(include documentation, if applicable):				
Property can be used as interim housing under the current entitle					
Project Applicant has submitted a complete application where the application has been neither approved or disa official and is limited to ensuring that the proposed developme submitted to the local government. A "nondiscretionary local a 35), By-Right Processing for Permanent Supportive Housing local process that meets the definition of non-discretionary approximately."	approved. A nondiscretionary local apprount meets a set of objective zoning, design approval process" includes Streamlined Nunder Chapter 753, Statutes of 2018 (AB	oval process is on review and/or s Ministerial Approv	ne that includes little or no subdivision standards in ef val Processing under to Ch	subjective judgement by the fect at the time the application apter 366, Statutes of 201	he public tion is 7 (SB N/A
Projects located within the boundaries of an incorporate the county shall make the necessary determinations. Th		ary determinati	ons, and for Projects loc	cated in the unincorpora	ted areas of a county,
Dated:					
Statement completed by:					
Signature:					
Title:					
Agency or Department Name:					
Agency or Department Address:					
Agency or Department Phone:					

			§205 Maximum Program Award, Capital Funding Match, and Rent/Subsidy Revenue									_																							
	Doors at Acc	uisition								Proposed U	nits for Inter	m Housing witl	h Plan to Conv	ert to Perman	ent Project						2/1/22														
				,	San Francisco	0		N.	Monthly Unit	Rent		Subsidy Prog	ram #1 Name	Subsidy Proj	gram #2 Name	Target I	Population - Ho	mekey Assist	ed Units (Article	VII)			Maximum C	pital Awar	rd (Baseline	e and Additional	Contribution) Bas	sed on Propose	d Units for Interin	n Housing with	Plan to Conve	rt to Permane	nt Project		
		Baseline																													Per Unit Local Match		Maximum	Maximum	
		Award																	Homeless		Baseline Award		Maximum					Adjusted Award			(Lesser of	Additional	Match	Additional	/
		based on							Proposed		Monthly								Youth or Youth			Baseline Award	Baseline Award			Unit's Pro-Rated		lesser of			Per Unit	Per Unit	(Proposed	Award	/
D.d.	Number of Doors at	Units and	at Bdrm	Number of Units	Unit Size (Square	Income	Mnor		Rent for Restricted		Utility		Monthly Rent Subsidy		Monthly Rent Subsidy	At-Risk of Homelessness	Chronically Homeless	Homeless	at Risk of Homelessness	Total Assisted	and Proposed	based on Units	based on Proposed	Total Unit Square		Share of Project Cost Based on	Project Cost	Assisted Unit	Funding Gap on	Day Hait Francisco	Funding Gap	Award (Equal	Assisted Units	(Equal to	Maximum
size	Acquisition	Acquisition	n size		Feet			Restricted		Unrestricted	Allowance <sup>1</sup>	Subsidy Units		Subsidy Units	Amount	Units	Units	Units	Units	Units	Served	Bdrm Size	Project	Feet	Feet	Square Feet	Manager Units	Raseline	Assisted Units	Gan	\$100,000)	Match)	Amount)	Local Match)	Capital Award
0	52	\$7,800,00	0 0	45	270	30%		\$0	\$0	1	\$0						-		45	45	\$7,875,000.00	\$0.00	\$7,875,000.00	12,150	88.24%	\$23,751,617.65	\$23,751,617.65	\$7,875,000.00	\$15,876,617.65	\$352,813.73	\$100,000.00	\$100,000.00	\$4,500,000.00	\$4,500,000.00	\$12,375,000.00
		\$	0 0	5	270	30%		\$0	\$0	1	\$0							5		- 5	\$0.00		\$750,000.00		9.80%		\$2,639,068.63	\$750,000.00	\$1,889,068.63	\$377,813.73	\$100,000.00		\$500,000.00		\$1,250,000.00
		\$	0 0	1	270	None	1	\$0	\$0	1	\$0									0	\$0.00		\$150,000.00		1.96%	\$527,813.73	\$527,813.73	\$150,000.00	\$377,813.73	\$377,813.73			\$100,000.00	\$100,000.00	\$250,000.00
		\$	0					\$0	\$0	1										0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00
		\$	0					\$0	)											0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 \$0.00
		\$	50					\$0		_	1									0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00 \$0.00
		3	0.0				1	\$0			-									0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		Š	0.0					\$0		_	1									0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		\$	0					\$0	)											0	\$0.00	\$0.00	\$0.00	0	0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		\$	0					\$0	)											0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		\$	0					\$0	)											0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		\$	0					\$0	)											0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		\$	00				1	\$0			-									0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00
Tota	52	\$7.800.00	10	51				\$0											46		\$7.875.000.00	\$900,000.00				\$26,918,500.00	\$0.00	\$0.00	\$18,143,500.00	\$0.00	\$0.00		\$5,100,000.00		
100	1 52	\$7,000,00	,0	31		Annual N	ot Ponte	90		nl sı	Annual S	ubsidy Revenue	so.		sn.	0.00%	0.00%	10.00%	90.00%	100.00%	Total Budgete		sts from 'Dev Budo			\$26,918,500.00	\$20,510,500.00	\$6,775,000.00	\$10,143,500.00				\$5,100,000.00	\$5,100,000.00	\$13,875,000.00
_						Allituat IV	et Rents	30	÷	U SI	Allitual 3	absidy Revenue	ψU		ψU	0.00%	0.0076	10.00%	50.00%	100.00%	rotal Budgete	d Development co	sts iloili Dev Buus	et worksnee	et ceil L 120	\$20,515,000.00									

		Homek	ey Award including Ca	pital (Baseline an	d Match), Ope	rating Subsid	dy, Relocati	on, and Bonus	es		
File Name:	Appraisal		If land costs will be include			h an appraisal	Ho	baded to HCD?	Yes		
r ic rumc.	гфргизи		dated within 60 days of the	ne application submitt	al date.		Op	budge to Hob.	105		
§205 Capital Awar	d Calculation								HCD Amount	Requested Amount	Actual Amount
1. Maximum Homel	ev Canital Aw	ard based on:		\$8,775,000	\$8,775,000	\$8,775.00					
			Assisted units share of P from above cell AJ25						\$5,100,000	\$5,100,000	\$5,100,00
A. Total Maximum	Homekey Ca	pital Award (1 + 2)							\$13,875,000	\$13,875,000	\$13,875,00
Capital Award base	d on how many	Assisted Units from	above cell U25	50	Tot	al proposed Pro	ject units fron	above cell E25	51		
§206 Homekey Op	erating Subsi	dy Calculation		•					Monthly Amount		
		ose experiencing Chr	onic Homelessness, for F	lomeless Youth, or	45	Monthly an	nount per unit	\$1,400	\$63,000		
		bove cells Q25 + S25			5	Monthly on	nount per unit	\$1.000	\$5.000		
Total qualifying mor						molitily at	nount per unit	ψ1,000	\$68,000		
Operating Subsid									Annual Amount		
<ul> <li>i. Operating Subside worksheet cell C38</li> </ul>	y Source: 'Ope	erating* Operating Su	bsidy: HSH Subsidy	Subsidy term (in years)	15		ing Homekey ubsidy years	3	\$2,448,000		
<ul> <li>i. Operating Subsid worksheet cell C39</li> </ul>	y Source: 'Ope	erating* Operating Su	bsidy: (specify)	Subsidy term (in years)			ing Homekey ubsidy years	0	\$0		
ii. Operating Subsit worksheet rows 37			Net Operating Income fro	m 'Cash Flow' worksl	heet row 43 an	Reserve Depo	osits from 'Car	sh Flow			
Operating Subsid Analysis	y: Need	Year 1	Year 2	Year 3	Ye	ar 4	Y	ear 5	Five Year Total		
'Cash Flow' worksh	eet	\$895.800	\$923,225	\$628.975	5	0		\$0	\$2,448,000		
			support from the local Co sidies, were sought for the				ning the need	or an operating	subsidy and		
File Name:	Op Subsi		A letter template and a lis be found on the Homeke		y complements	ary funding can	Up	baded to HCD?	Yes		
B. Homekey Oper	ating Subsidy	if requested in 'Over	view' worksheet cell AK12	9 (lesser of Need A	nalysis and M	ax Homekey A	mount)		\$2,448,000	\$2,448,000	\$2,448,00
			rksheet cell AK128 ('Dev						\$0 \$0	\$0	S
\$207 Bonus Award: will Tribal Entity be submitted before May 02, 2022? If Yes, \$10,000 bonus award per Assisted unit. No \$207 Bonus Award: will Project's Assisted units achieve full occupancy within eight months of award date? If Yes, \$10,000 bonus award per										\$0	S
§207 Bonus Award Assisted unit	will Project's A	Assisted units achieve	e full occupancy within eig	ht months of award d	late? If Yes, \$1	0,000 bonus aw	ard per	Yes	\$500,000	\$500,000	\$500,00
C. Total Other Ho	mekey Award								\$500,000	\$500,000	\$500,00
Maximum Homek	V Program A		\$16.823.000	\$16,823,000	\$16.823.00						

Proposed Project Unit	s by Bedroom	Size
Total 0 bedroom units	51	100.00%
Total 1 bedroom units	0	0.00%
Total 2 bedroom units	0	0.00%
Total 3 bedroom units	0	0.00%
Total 4 bedroom units	0	0.00%
Total 5 Bedroom units	0	0.00%
Total proposed units	51	100.00%
Assisted Units by	Bedroom Size	
Total 0 bedroom units	50	100.00%
Total 1 bedroom units	0	0.00%
Total 2 bedroom units	0	0.00%
Total 3 bedroom units	0	0.00%
Total 4 bedroom units	0	0.00%
Total 5 Bedroom units	0	0.00%
Total Assisted units	50	98.04%

Sources of Funds												
Funding	Committed by			Lien	Funding	Intere	st Rate	Repayme	nt Terms	Required Debt		
	tion Due Date?	Source Name	Source Type	No.	Amount	Туре	Rate	Туре	Due in (yrs)	Service Amount		
1	Yes	Homekey Capital Award from \$13,875,000	State-HCD	1	\$13,875,000							
2	Yes	City and County of San Francisco - Interim	Local		\$4,985,000							
3	Yes	City and County of San Francisco - Perm	Local		\$8,058,500							
4												
5												
6												
7												
8												
9												
10												
		•	•		\$26,918,500					\$0		
File Na	me:	EFC1, EFC2, EFCI3, etc. Documentation	for the executed fu	unding commitme	nts (see below	<u>'</u> )		Upl	paded to HCD?	Yes		

"Article VII((xii) "Enforceable Funding Commitment" means a letter or other document, in form and substance satisfactory to the Department, which evidences an enforceable commitment of funds or a reservation of funds by a Project funding source, and which contains the following: a. The name of the Applicant or Grantee; b. The Project name; c. The Project site address, assessor's parcel number, or legal description; and d. The amount, interest rate (if any), and terms of the funding source. The Enforceable Funding Commitment may be conditioned on certain standard underwriting criteria, such as appraisals, but may not be generally conditional. Examples of unacceptable general conditions include phrases such as "subject to senior management approval," or a statement that omits the word "commitment," but instead indicates the lender's "willingness to process an application" or indicates that financing is subject to loan committee approval of the Project. Contingencies in commitment documents based upon the receipt of tax-exempt bonds or low-income housing tax credits will not disqualify a source from being counted as committed.

Applicant comments: Include a description of balloon payments and unusual or extraordinary circumstances.

N/A

2/1/22					Source	es/Uses of	Funds				
2/1/22					Ocurc	03/0303 01	Tunus				
USES OF FUNDS		City and County	City and County								
	Homekey Award		of San Francisco - Perm	0	0	0	0	0	0	0	Total Sources/Costs
Project Development Costs	Homekey Award	interim	Perm	U	U	U		U	U	U	Sources/Costs
LAND COST/ACQUISITION											
Land Cost or Value  Demolition											\$0 \$0
Legal											\$0
Land Lease Rent Prepayment											\$0
Total Land Cost or Value  Existing Improvements Cost or Value	\$0 \$13,875,000	\$0 \$3,125,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0 \$17,000,000
Off-Site Improvements	\$13,673,000	\$3,123,000									\$17,000,000
Total Acquisition Cost	\$13,875,000	\$3,125,000		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$17,000,000
Total Land Cost / Acquisition Cost	\$13,875,000	\$3,125,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$17,000,000
Predevelopment Interest/Holding Cost Assumed, Accrued Interest on Existing Debt											\$0
(Rehab/Acq)											\$0
Excess Purchase Price Over Appraisal  REHABILITATION											\$0
Site Work											\$0
Structures		\$1,190,000	\$6,164,000								\$7,354,000
General Requirements											\$0
Contractor Overhead Contractor Profit											\$0 \$0
Prevailing Wages											\$0
General Liability Insurance											\$0
Urban Greening											\$0
Other Rehabilitation: (Specify) Other Rehabilitation: (Specify)											\$0 \$0
Other Rehabilitation: (Specify)											\$0
Total Rehabilitation Costs	\$0	\$1,190,000		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$7,354,000
Total Relocation Expenses			\$150,000								\$150,000
NEW CONSTRUCTION Site Work											\$0
Structures											\$0
General Requirements											\$0
Contractor Overhead											\$0 \$0
Contractor Profit Prevailing Wages											\$0
General Liability Insurance											\$0
Urban Greening											\$0
Other New Construction: (Specify) Other New Construction: (Specify)											\$0 \$0
Other New Construction: (Specify)  Other New Construction: (Specify)											\$0
Other New Construction: (Specify)											\$0
Other New Construction: (Specify)											\$0
Other New Construction: (Specify)  Total New Construction Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0 <b>\$0</b>
ARCHITECTURAL FEES											
Design		\$40,000	\$200,000								\$240,000
Supervision Total Architectural Costs	\$0	\$40,000	\$60,000 \$260,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$60,000 \$300,000
Total Survey & Engineering	40	\$40,000	\$50,000	\$0	<del>***</del>	40	40	<b>\$</b> 0	\$0	40	\$50,000
CONSTRUCTION INTEREST & FEES											
Construction Loan Interest Origination Fee											\$0 \$0
Credit Enhancement/Application Fee											\$0
Bond Premium											\$0
Cost of Issuance											\$0
Title & Recording Taxes		\$40,000									\$40,000 \$0
Insurance			\$250,000								\$250,000
Employment Reporting											\$0
Other Construction Int. & Fees: (Specify) Other Construction Int. & Fees: (Specify)											\$0 \$0
Other Construction Int. & Fees: (Specify)  Other Construction Int. & Fees: (Specify)											\$0
Other Construction Int. & Fees: (Specify)											\$0
Total Construction Interest & Fees	\$0	\$40,000	\$250,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$290,000
PERMANENT FINANCING  Loan Origination Fee											\$0
Credit Enhancement/Application Fee											\$0
Title & Recording											\$0
Taxes											\$0 \$0
Insurance Other Perm. Financing Costs: (Specify)											\$0
Other Perm. Financing Costs: (Specify)											\$0
Other Perm. Financing Costs: (Specify)											\$0
Other Perm. Financing Costs: (Specify)  Total Permanent Financing Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0 <b>\$0</b>
Subtotals Forward	\$13,875,000			\$0	\$0			\$0	\$0	\$0	\$25,144,000
LEGAL FEES											
Legal Paid by Applicant											\$0
Other Attorney Costs: (Specify) Other Attorney Costs: (Specify)											\$0 \$0
Other Attorney Costs: (Specify)											\$0
Total Attorney Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
RESERVES Operating Reserve											\$0
Replacement Reserve			\$52,000								\$52,000
Transition Reserve											\$0
Rent Reserve											\$0

2/1/22					Sourc	es/Uses of	Funds				
USES OF FUNDS	Homekey Award	City and County of San Francisco - Interim	City and County of San Francisco - Perm	0	0	0	0	0	0	0	Total Sources/Costs
Project Development Costs	•	•			•	-		•	•		
Other Reserve Costs: (Specify)											\$0
Other Reserve Costs: (Specify)											\$0
Other Reserve Costs: (Specify)											\$0
Total Reserve Costs	\$0	\$0	\$52,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$52,000
CONTINGENCY COSTS											
Construction Hard Cost Contingency		\$119,000	\$616,400								\$735,400
Soft Cost Contingency											\$0
Total Contingency Costs	\$0	\$119,000	\$616,400	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$735,400
OTHER PROJECT COSTS											
TCAC App/Allocation/Monitoring Fees											\$0
Environmental Audit		\$26,000									\$26,000
Local Development Impact Fees											\$0
Permit Processing Fees		\$25,000	\$154,100								\$179,100
Capital Fees											\$0
Marketing											\$0
Furnishings		\$106,000	\$20,000								\$126,000
Market Study											\$0
Accounting/Reimbursable											\$0
Appraisal Costs											\$0
Other Costs: Start Up Costs		\$214,000									\$214,000
Other Costs: Construction Management		\$50,000	\$100,000								\$150,000
Other Costs: Materials Testing			\$42,000								\$42,000
Other Costs: (Specify)											\$0
Other Costs: (Specify)											\$0
Other Costs: (Specify)											\$0
Total Other Costs	\$0	\$421,000	\$316,100	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$737,100
SUBTOTAL PROJECT COST	\$13,875,000	\$4,935,000	\$7,858,500	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$26,668,500
DEVELOPER COSTS											
Developer Overhead/Profit											\$0
Consultant/Processing Agent											\$0
Project Administration		\$50,000	\$200,000								\$250,000
Broker Fees Paid to a Related Party											\$0
Construction Oversight by Developer											\$0
Other Developer Costs: (Specify)											\$0
Total Developer Costs	\$0			\$0			\$0			\$0	\$250,000
Total Project Costs	\$13,875,000	\$4,985,000	\$8,058,500	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$26,918,500

					Mission Inn
2/1/22	?	Year	1 Annual Incom	e and Expenses	
		Employee Information			Comments
		Employee Job Title	Salary/Wages	Value of Free Rent	
1	1.00	On-Site Manager(s)	\$75,000	\$0	
		On-Site Assistant Manager(s)	\$41,600	\$0	
		Supportive Services Staff Supervisor(s)	\$37,960		
		Supportive Services Coordinator, On-Site	\$104,410		
		Other Supportive Services Staff (inc. Case Manager)	\$56,400		
2		On-Site Maintenance Employee(s)	\$82,400	\$0	
		On-Site Leasing Agent/Administrative Employee(s)		\$0	
_		On-Site Security Employee(s)		\$0	
		Desk Clerks	\$160,020	\$0	
0	0.20	Central office staff	\$12,600	\$0	
107	744	Total Salaries and Value of Free Rent Units	\$570,390	\$0 Show free rent as an	
		Payroll Taxes Workers Compensation	\$0 \$0	expense?	
		Employee Benefits	\$77,040	Yes	
07	123	Employee Benefits Employee(s) Payroll Taxes, Workers Comp. & Benefits	\$77,040	res	
		Total Employee(s) Expenses	\$647,430		
			<b>Ψ041,430</b>	l	
		Employee Units		T	
Income Li	imit	Job Title(s) of Employee(s) Living On-Site	Unit Type (No. of bdrms.)	Square Footage	
None		On-Site Manager(s)	0	270	
			0	0	
			0	0	
			Total Square Footage		
		Year 1 A	nnual Operating	g Budget	
Acct. N		Revenue - Income	Residential	Commercial	Comments
5120/514	40	Rent Revenue - Gross Potential		\$0	
		Restricted Unit Rents	\$0		
5404		Unrestricted Unit Rents	\$0		
5121		Tenant Assistance Payments	•	**********	
		Subsidy Program #1 Name	\$0		
		Subsidy Program #2 Name	\$0		
		Operating Subsidy: HSH Subsidy Operating Subsidy: (specify)	\$200,000 \$0	¢0	
5910		Laundry and Vending Revenue	\$1,200	<b>\$0</b>	
5170		Garage and Parking Spaces	\$1,200	\$0	
5990		Interim Housing Revenue	\$0	\$0	
		Gross Potential Income (GPI)	\$201,200	\$0	
	1	, ,	,		
		Vacancy Rate: Restricted Units	5.0%	<del>,</del>	
		Vacancy Rate: Unrestricted Units	5.0% 5.0%	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	
		Vacancy Rate: Tenant Assistance Payments Vacancy Rate: Operating Subsidy: (specify)	5.0%		
		Vacancy Rate: Operating Subsidy: (specify)  Vacancy Rate: Laundry & Vending & Other Income	5.0%		
		Vacancy Rate: Laundry & Vending & Other Income  Vacancy Rate: Commercial Income	5.0%	50.0%	
5220/524		Vacancy Loss(es)	\$60	\$0.0%	
		Effective Gross Income (EGI)		\$0	
Acct. N	lo.	Expenses	Residential	Commercial	Comments
		Administrative Expenses: 6200/6300			
6203		Conventions and Meetings	\$1,000	\$0	
6210		Advertising and Marketing	\$1,220	\$0	
6250		Other Renting Expenses	\$0	\$0	
6310		Office/Administrative Salaries from above	\$0	\$0	
6311		Office Expenses	\$2,455	\$0	
6312		Office or Model Apartment Rent	\$0	\$0	
6320		Management Fee	\$2,750	\$0	455/unit
6330		Site/Resident Manager(s) Salaries – from above	\$116,600	\$0	
6331		Administrative Free Rent Unit - from above	\$0	\$0	
6340		Legal Expense Project	\$3,050	\$0	
6350		Audit Expense	\$15,000	\$0	
6351		Bookkeeping Fees/Accounting Services	\$0	\$0	
6390		Miscellaneous Administrative Expenses	\$0	\$0	
6263T		Total Administrative Expenses	\$142,075	\$0	

0/4/00	Voca	4. A	and Emerce	Mission Inn
2/1/22			e and Expenses	
Acct. No.	Expenses	Residential	Commercial	Comments
0.450	Utilities Expenses: 6400	000,000	00	
6450	Electricity	\$60,000	\$0	
6451	Water	\$7,200	\$0	
6452	Gas	\$0	\$0	
6453	Sewer	\$9,000	\$0	
	Other Utilities: Internet/Phone	\$1,200	\$0	
6400T	Total Utilities Expenses	\$77,400	\$0	
	Operating and Maintenance Expenses: 6500			Comments
6510	Payroll from above	\$255,020	\$0	
6515	Supplies	\$9,000	\$0	
6520	Contracts	\$32,000	\$0	
6521	Operating & Maintenance Free Rent Unit from above	\$0	\$0	
6525	Garbage and Trash Removal	\$144,000	\$0	
6530	Security Contract	\$2,400	\$0	
6531	Security Free Rent Unit from above	\$0	\$0	
6546	Heating/Cooling Repairs and Maintenance	\$0	\$0	
6548	Snow Removal	\$0	\$0	
6570	Vehicle & Maintenance Equipment Operation/Reports	\$0	\$0	
6590	Miscellaneous Operating and Maintenance Expenses	\$0	\$0	
6500T	Total Operating & Maintenance Expenses	\$442,420	\$0	
	Taxes and Insurance: 6700	ţ <u>2,.2</u> 0	Ψ0	Comments
6710	Real Estate Taxes	\$0	\$0	
6711	Payroll Taxes (Project's Share) from above	\$0	\$0	
6720	Property and Liability Insurance (Hazard)	\$14,300	\$0	
6729	Other Insurance (e.g. Earthquake)	\$0	\$0	
6721	Fidelity Bond Insurance	\$0	\$0	
6722		\$0	\$0	
6723	Worker's Compensation from above			
6790	Health Insurance/Other Employee Benefitsfrom above	\$77,040	\$0	
	Miscellaneous Taxes, Licenses, Permits & Insurance	\$500	\$0	
6700T	Total Taxes and Insurance	\$91,840	\$0	
	Supportive Services Costs: 6900			Comments
6990	Staff Supervisor(s) Salaries - from above	\$37,960	\$0	
6990	Services Coordinator Salaries, On-Site - from above	\$104,410	\$0	
6990	Other Supportive Services Staff Salaries - from above	\$56,400	\$0	
6990	Supportive Services Admin Overhead	\$44,765	\$0	
6990	Other Supportive Services Costs: Admin, Training, Travel	\$10,404	\$0	
6990	Other Supportive Services Costs: Insurance, Supplies	\$3,406	\$0	
6990	Other Supportive Services Costs: Client Food, Transport, Laundry	\$33,900	\$0	
6990	Other Supportive Services Costs: Program Activities	\$3,120	\$0	
6990	Other Supportive Services Costs: Employee Benefits	\$48,900	\$0	
6900T	Total Supportive Services Costs	\$343,265	\$0	
	Total Operating Expenses	\$1,097,000	\$0	Comments
				Comments
7210	Funded Reserves: 7200	Residential	Commercial	
7210 7220	Required Replacement Reserve Deposits	\$0	\$0	
	Other Reserves: (specify)	\$0	\$0	
7230	Other Reserves: (specify)	\$0	\$0	
7240	Other Reserves: (specify)	\$0	\$0	
	Total Reserves	\$0	\$0	
	Ground Lease	Residential	Commercial	
	Ground Lease	\$0	\$0	
	Total Ground Lease	\$0	\$0	
	Net Operating Income	(\$895,860)	\$0	
	Financial Expenses: 6800			Comments
6820	1st Mortgage Debt Service	\$0	\$0	
6830	2nd Mortgage Debt Service	\$0	\$0	
6840	3rd Mortgage Debt Service	\$0	\$0	
6890	Misc. Financial Expenses: (specify)	\$0		
			\$0	
6890	Misc. Financial Expenses: (specify)	\$0	\$0	
6890	Misc. Financial Expenses: (specify)	\$0	\$0	
6890	Misc. Financial Expenses: (specify)	\$0	\$0	
6800T	Total Financial Expenses		\$0	
	Cash Flow	(\$895,860)	\$0	
7190	Asset Management/Similar Fees	\$0	\$0	

						Cash	Flow Anal	_								2/1/22
Income from Restricted Unit							Proposed									
Income From Housing Units	Inflation	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 1
Restricted Unit Rents	2.5% 2.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	(
Unrestricted Unit Rents Tenant Assistance Payments	2.5%	U	U	U	U	U	U	U	U	U	U	U	U	U	U	
Subsidy Program #1 Name	2.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	Ö	0
Subsidy Program #2 Name	2.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operating Subsidy: HSH Subsidy		200,000	200,000	522,361	1,180,149	1,209,683	1,239,955	1,270,984	1,302,788	1,335,388	1,368,803	1,403,053	1,438,159	1,474,143	1,511,027	1,548,832
Operating Subsidy: (specify)	Ļ	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gross Potential Income - Housing		200,000	200,000	522,361	1,180,149	1,209,683	1,239,955	1,270,984	1,302,788	1,335,388	1,368,803	1,403,053	1,438,159	1,474,143	1,511,027	1,548,832
Other Income																
Laundry & Vending	0.0%	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200
Other Income	0.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Commercial Income	0.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gross Potential Income - Other		1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200	1,200
Gross Potential Income - Total		201,200	201,200	523,561	1,181,349	1,210,883	1,241,155	1,272,184	1,303,988	1,336,588	1,370,003	1,404,253	1,439,359	1,475,343	1,512,227	1,550,032
Vacancy Assumptions Restricted Units	5.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Unrestricted Units	5.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tenant Assistance Payments	5.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operating Subsidy: (specify)	5.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laundry/Vending/Other Income	0.0%	0	ő	0	0	ő	0	Ö	Ö	Ö	Ö	Ö	Ö	0	Ö	ő
Commercial Income	50.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Vacancy Loss		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Effective Gross Income		201,200	201,200	523,561	1,181,349	1,210,883	1,241,155	1,272,184	1,303,988	1,336,588	1,370,003	1,404,253	1,439,359	1,475,343	1,512,227	1,550,032
Operating Expenses & Reserve De	posits															
Residential Exp. (w/o Real Estate																
Taxes & Sup. Services)	2.5%	661,895	678,442	695,403	712,789	730,608	748,873	767,595	786,785	806,455	826,616	847,282	868,464	890,175	912,430	935,240
Real Estate Taxes	2.5%	91,840	94,136	96,489	98,902	101,374	103,909	106,506	109,169	111,898	114,696	117,563	120,502	123,515	126,602	129,768
Supportive Services Costs	2.5%	343,265	351,847	360,643	369,659	378,900	388,373	398,082	408,034	418,235	428,691	439,408	450,393	461,653	473,195	485,024
Replacement Reserve	0.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other Reserves	0.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Ground Lease	2.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Commercial Expenses	3.5%	1,097,000	1,124,425	1,152,536	1,181,349	1,210,883	1,241,155	1,272,184	1,303,988	1,336,588	1,370,003	1,404,253	1,439,359	1,475,343	1,512,227	1,550,032
Total Expenses & Reserves	-	(895,800)	(923,225)	(628 975)	(0)	0	0	0	(0)	1,330,300	0	1,404,233	(0)	(0)	0	(0)
Net Operating Income	-	(095,000)	(923,225)	(626,975)	(0)	U	U	U	(0)	U	U	U	(0)	(0)	U	(0)
Debt Service 1st Mortgage		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Bridge Loan (repaid from Investor ed	w. iita e\	0	0	0	0	0	U	U	U	U	U	U	U	U	U	U
2nd Mortgage	quity)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3rd Mortgage Debt Service		0	0	0	0	0	0	0	Ö	Ö	0	Ö	0	0	Ö	Ö
Misc. Financial Expenses: (specify)	3.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Misc. Financial Expenses: (specify)		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Misc. Financial Expenses: (specify)		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Misc. Financial Expenses: (specify)		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Required Debt Service	L	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cash Flow after all debt service		(895,800)	(923,225)	(628,975)	(0)	0	0	0	(0)	0	0	0	(0)	(0)	0	(0)
Debt Service Coverage Ratio (DSC	R)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Use of Cash Flow After Debt Service																
Asset Mgmt./ Similar Fees		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Max Asset Mgmt/Similar Fees	3.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Target NOI to get to 1.1 DSCR		0														
Subsidy needed to get to 1.1 DS																
	SCR	(895,800)														
Reserves & Debt (not payable by H																
			0	0	0	0	0	0	0	0	0	0	0	0	0	0
Reserves & Debt (not payable by H Reserve Expenses Required Debt Service		dy)	0	0	0 0	0	0	0	0	0	0	0 0	0	0	0	0
Reserve Expenses Required Debt Service	K Op Subsi	<b>dy)</b>	-			-	-	-	-	-				-		
Reserve Expenses Required Debt Service Total Reserve Expenses and De	<mark>K Op Subsi</mark> ebt	dy) 0 0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by	<mark>K Op Subsi</mark> ebt	dy) 0 0	0	0	0	0	0	0	0	0	0 0	0	0	0	0	0
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid	K <b>Op Subsi</b> bt Bonus	dy) 0 0 0 0 0	0 0 0	0 0	0 0 0	0 0 0	0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0	0 0 0	0 0 0	0 0
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid Homekey App Submittal Bonus awa	K <b>Op Subsi</b> bt Bonus	dy) 0 0 0 0	0 0 0	0 0	0 0 0	0 0 0	0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0 0	0 0 0	0 0 0	0 0
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid  Homekey App Submittal Bonus awa Cash Flow after all debt service	K Op Subsi bt Bonus	dy) 0 0 0 0 0 0	0 0 0	0 0 0 0 0	0 0 0	0 0 0	0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0	0 0 0	0 0 0	0 0 0 0
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid  Homekey App Submittal Bonus awa Cash Flow after all debt service HK Bonus Draw* for Reserves & Dr	K Op Subsi bt Bonus	0 0 0 0 0 0 0 0	0 0 0 0 0 0 (923,225)	0 0 0 0 0 (628,975)	0 0 0 0	0 0 0 0	0 0	0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0	0 0 0 0	0 0 0 0	0 0 0	0 0 0 0
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid  Homekey App Submittal Bonus awd Cash Flow after all debt service Hit Bonus Draw* for Reserves & Di Cash Flow after HK Bonus draws	K Op Subsi bt Bonus	0 0 0 0 0 0	0 0 0 0 0 0	0 0 0 0 0	0 0 0 0	0 0 0	0 0 0 0	0 0 0 0	0 0 0	0 0 0	0 0 0	0 0 0 0	0 0 0 0	0 0 0	0 0 0 0	0 0 0 0
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid Homekey App Submittal Bonus aw Cash Flow after all debt service HK Bonus Draw* for Reserves & Dr Cash Flow after HK Bonus draws **HK Bonus balance after draws	K Op Subsi bt Bonus ard	dy) 0 0 0 0 0 0 0 (895,800) 0 (895,800) 0	0 0 0 0 0 0 (923,225)	0 0 0 0 0 (628,975)	0 0 0 0	0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid  Homekey App Submittal Bonus awd Cash Flow after all debt service HIK Bonus Draw* for Reserves & Dd Cash Flow after HK Bonus draws  "HK Bonus balance after draws  Homekey Operating Subsidy amount	K Op Subsi	0 0 0 0 0 0 0 (895,800) 0 (895,800) 0	0 0 0 0 0 (923,225) 0 (923,225)	0 0 0 0 (628,975) 0 (628,975)	(0) (0) (0)	0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0	(0)	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0 (0)	0 0 0 0 0	0 0 0 0	(O)
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid Homekey App Submittal Bonus awa Cash Flow after all debt service HK Bonus Draw* for Reserves & De Cash Flow after HK Bonus draws **HK Bonus balance after draws Homekey Operating Subsidy amou Cash Flow after HK above Bonus draws	K Op Subsi	dy) 0 0 0 0 0 0 0 0 0 (895,800) 0 (895,800) 0 (895,800) 0 (895,800)	(923,225) (923,225)	0 0 0 0 (628,975) 0 (628,975)	(0) (0) (0)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	(O
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid Homekey App Submittal Bonus aw Cash Flow after all debt service HK Bonus Draw* for Reserves & Dr Cash Flow after HK Bonus draws **HK Bonus balance after draws HOmekey Operating Subsidy amou Cash Flow after HK sbove Bonus dr HOmekey Bonus Draw*	K Op Subsi	0 0 0 0 0 0 0 (895,800) 0 (895,800) 0	(923,225) (923,225) (923,225)	0 0 0 0 (628,975) (628,975)	(O) (O) (O) (O)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0	(0)	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0 (0)	0 0 0 0 0	0 0 0 0	(O
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid Homekey App Submittal Bonus awa Cash Flow after all debt service Ith Bonus Draw* for Reserves & Dt Cash Flow after HK Bonus draws "HK Bonus balance after draws Homekey Operating Subsidy amou Cash Flow after HK above Bonus dra Homekey Bonus Draw* "HK Bonus balance after draws	k Op Subsi	dy) 0 0 0 0 0 0 (895,800) 0 (895,800) 0 2,448,000 (895,800) 0 0	(923,225) (923,225) (923,225)	(628,975) (628,975) 0 (628,975)	(0) (0) (0) (0)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0	0 0 0 0 0	(0)	0 0 0 0 0	0 0 0 0 0 0	0 0 0 0 0 0	(0) (0) (0)	(o) (o) (o)	0 0 0 0 0	(O
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid  Homekey App Submittal Bonus awa Cash Flow after all debt service HIK Bonus Draw* for Reserves & Da Cash Flow after HIK Bonus draws  "HK Bonus balance after draws  Homekey Operating Subsidy amou Cash Flow after HK above Bonus dra Homekey Bonus Draw*  "HK Bonus balance after draws Cash Flow after HC above Bonus dra Homekey Bonus Draw*  "HK Bonus balance after draws Cash Flow after Operating Subsidy Cash Flow after Operating Subsidy	K Op Subsi	dy) 0 0 0 0 0 0 0 (895,800) 0 (895,800) 0 2,448,000 (895,800) 0 (895,800)	(923,225) (923,225) 0 (923,225)	(628,975) (628,975) 0 (628,975) 0 (628,975)	(O)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0	(0)	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0 (0)	0 0 0 0 0	0 0 0 0	(O
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid Homekey App Submittal Bonus aw Cash Flow after all debt service HK Bonus Draw* for Reserves & Dr Cash Flow after HK Bonus draws **HK Bonus balance after draws Homekey Operating Subsidy amou Cash Flow after HK above Bonus dr Homekey Bonus Draw* **HK Bonus balance after draws Cash Flow after PK above Bonus dr Homekey Bonus Draw* **HK Bonus balance after draws Cash Flow after Departing Subsidy or Momekey Bonus Draw* **HK Bonus balance after draws Cash Flow after Operating Subsidy or Momekey Operating Subsidy Draw* Homekey Operating Subsidy Draw*	K Op Subsi	dy)  0 0 0 0 0 0 (895,800) 0 (895,800) 0 (895,800) 0 (895,800) 895,800	(923,225) (923,225) (923,225) (923,225) (923,225)	0 0 0 0 (628,975) 0 (628,975) (628,975) 0 0 (628,975)	(O) (O) (O) (O) (O) (O)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0	(O) (O) (O) (O)	0 0 0 0	0 0 0 0 0	0 0 0 0 0	(O) (O) (O) (O)	(0) (0) (0) (0)	0 0 0 0 0	(O)
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid  Homekey App Submittal Bonus awa Cash Flow after all debt service HK Bonus Draw* for Reserves & Dt Cash Flow after HK Bonus draws  *HK Bonus balance after draws  Homekey Operating Subsidy amout Cash Flow after HK above Bonus dra Homekey Bonus Draw*  *HK Bonus balance after draws  Cash Flow after Operating Subsidy of Cash Flow after Operating Subsidy Homekey Operating Subsidy Subsidy Draw* Cash Flow after Operating Subsidy Draw* Cash Flow after Operating Subsidy Draw* Cash Flow after HK Op Subsidy draw	K Op Subsi	dy) 0 0 0 0 0 0 (895,800) 0 (895,800) 0 2,448,000 (895,800) 0 (895,800) 0 0 (895,800) 0 0	(923,225) (923,225) (923,225) 0 (923,225) 923,225)	0 0 0 0 (628,975) (628,975) (628,975) 628,975	(0) (0) (0) (0) (0) (0)	0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0	(O) (O) (O) (O) (O)	0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0	(0) (0) (0) (0) (0)	(O) (O) (O) (O) (O)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(O) (O) (O) (O) (O)
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid  Homekey App Submittal Bonus aw Cash Flow after all debt service HK Bonus Draw* for Reserves & Di Cash Flow after HK Bonus draws  *HK Bonus balance after draws  Homekey Operating Subsidy amou Cash Flow after HK above Bonus dr Homekey Bonus Draw*  *HK Bonus balance after draws Cash Flow after HG Operating Subsidy of Homekey Operating Subsidy Draw* Cash Flow after HG Op Subsidy draw NOI after HK Op Subsidy draw NOI after HK Op Subsidy draw NOI after all draws	K Op Subsi	dy) 0 0 0 0 0 0 (895,800) 0 (895,800) 0 2,448,000 (895,800) 0 (895,800) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(923,225) (923,225) (923,225) (923,225) 0 (923,225) 0 (923,225) 0 0	(628,975) (628,975) (628,975) 0 (628,975) 0 (628,975) 0 0	(0) (0) (0) (0) (0) (0) (0) (0) 0	0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(O)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(0) (0) (0) (0) (0) (0)	(O) (O) (O) (O) (O) (O)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(O) (O) (O) (O) (O) (O)
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid Homekey App Submittal Bonus aw Cash Flow after all debt service HK Bonus Draw* for Reserves & Dr Cash Flow after HK Bonus draws **HK Bonus balance after draws HOmekey Operating Subsidy amou Cash Flow after HK above Bonus dr Homekey Bonus Draw* **HK Bonus balance after draws Cash Flow after Operating Subsidy of Homekey Operating Subsidy Draw* Cash Flow after Operating Subsidy draw Nol after HK Op Subsidy draw Nol after all draws DSCR with Homekey draws	K Op Subsi	dy)  0 0 0 0 0 0 (895,800) 0 (895,800) 0 (895,800) 0 (895,800) 0 (895,800)	(923,225) (923,225) (923,225) (923,225) (923,225) 923,225 923,225 0 0.00	(628,975) 0 (628,975) 0 (628,975) 0 (628,975) 0 (628,975) 628,975	(O) (O) (O) (O) (O) (O) (O) (O) (O) (O)	0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0	(O) (O) (O) (O) (O)	0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0	(0) (0) (0) (0) (0)	(O) (O) (O) (O) (O)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(O) (O) (O) (O) (O)
Reserve Expenses Required Debt Service Total Reserve Expenses and De Reserve Exp. and Debt paid by Reserve Exp. and Debt unpaid Reserves Exp. Reserve	K Op Subsi	dy) 0 0 0 0 0 0 (895,800) 0 (895,800) 0 2,448,000 (895,800) 0 (895,800) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(923,225) (923,225) (923,225) (923,225) 0 (923,225) 0 (923,225) 0 0	(628,975) (628,975) (628,975) 0 (628,975) 0 (628,975) 0 0	(0) (0) (0) (0) (0) (0) (0) (0) 0	0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(O)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(0) (0) (0) (0) (0) (0)	(O) (O) (O) (O) (O) (O)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	

		§3	304 Application	Sco	oring Criteria (2	207	Points Ma	x)							2/1/22
		inimum program requirements		rill requ	uire a minimum scor	e of	<b>120</b> points to b	ре	T	otal Self Sc					
		will be based on the following c			40						Commi	unity Er	<mark>ngagemen</mark>	§304	(3)
		s timely and demonstration uitable for development and ev				ohtai	ining eite contr	ol along	with	other suppo	rting evide	nco - 20	) may noint	e hace	40.00
on average sco			idence of site control	, or a p	pian and unleune for	Oblai	ining site contin	oi aloriy	WILII	otrier suppo	iting evide	1106 - 20	max point	s Dase	20.00
Type of Site Co															
e. A sales contra	act, or othe	r enforceable agreement for the	e acquisition of the pr	operty	/										20
b. Commitment	of non-Hon	nekey rental or operating subsid	dies used to maintain	the	Assisted Units					0/ inoro	mont of				
		Project - max 20 points, 1 point			with	5	Tota	50	)	% incre Assisted Ur		00.0%	Increment		20.00
Assisted Units v operating assist		ted funding. Project or Grantee	based commitments	tor	committed	Ĭ	Units	s		committed		00.070		5%	20.00
Rental Subsidy:			Program #1 Name		funding	Fu	nds Committee	d N/A	Δ	Δ	seistad I In	its recei	iving Renta	I Subs	idy
Rental Subsidy '			Program #2 Name				inds Committee						iving Renta		
Operating Subsi			Subsidy: HSH Subsid	у			nds Committee						g Operating		
Operating Subsi	idy	Operating	g Subsidy: (specify)				nds Committee					receivino	g Operating	Subsi	idy
File Name	Subsidy F	Program #1 Name	Provide committmen affordability of the Pr	oject.									Uploaded	to HC	D? N/A
File Name	Subsidy F	Program #2 Name	Provide committmen affordability of the Pr	oject.			<u> </u>						Uploaded	to HC	D? N/A
File Name	Operating	Subsidy: HSH Subsidy	Provide committment affordability of the Pr		is non-Homekey op	eratin	ng subsidy that	will be	used	to maintain t	the ongoing	g	Uploaded	to HC	D? Yes
File Name	Operating	Subsidy: (specify)	Provide committmen affordability of the Pr		is non-Homekey op	eratin	ng subsidy that	will be	used	to maintain t	the ongoing	g	Uploaded	to HC	D? N/A
2. Experience -															50.00
		o, or operation experience - ma	•		F	7						9	\		20.00
10 points	ant nave tn	e following experience: Develo	oment, ownersnip, or	opera	ition of one project s	ımııar	r in scope and	size to	tne pi	roposea proj	ject (descr	IDE DEIO	w) -	Yes	10.00
															Latest date
					Who provides th				Н۵	ousing					developed, owned, or
		Project name and address			experience		Experience	type		type	Pop	ulation	served		operated
Granada Hotel,	1000 Sutte	r Street, San Francisco (Home	key Round 1)		City and County of	San	Develope	ed.	Affo	ordable	•	Homeles	ss		11/13/20
					Francisco		·			Rental					11/10/20
housing or interi	m projects	points already earned. Does in the last ten years, with at lea												No	0.00
i opulation (prov	iue details	below)? - 10 points		T				T		1			I	$\neg \vdash$	1 -41 -1 -1
															Latest date developed,
					Who provides th	1e			Но	using	Qualifyir	ng unit	population	1	owned, or
		Project name and address			experience		Experience	type	t	type		serve	d		operated
		ded for each additional project ulation) - max 15 points	(development, owner	ship, o	or operation of affor	dable	rental housing	or inter	rim pı	rojects in the	last ten ye	ears ser	ving at leas	t one	10.00
		et, San Francisco (Homekey F	Round 1)		City and County of Francsico	San	Develope	ed		ordable Rental		Homele	ss		12/2/20
Abigail Hotel (SII	P #1) 246 N	AcAllister Street, San Francisco	)		City and County of Francisco	San	Develope	ed	Ir			outh or	Youth at R	isk	4/29/20
					Trancisco				П	odonig	UI F	ionicies:	011033		
b. Experience he	elping pers	ons address barriers to housing	g stability and providi	ng oth	er support services	; 1 pc	oint awarded fo	or each	year	of service ex	xperience ·	- Y	ears	33.0	15.00
max 10 points															# of
	p.	oject Name and address		Wh	no provides the experience	١.	Experience Pr	rovider		Housing type		Popula	tion Serve	d	months serving
City and County		ncisco, HSH and DPH, variety	projects across the	City	and County of San					Affordable					
City of San Fran				,	Francsico		Applican	ι		Rental		Но	meless		396

		§3	04 Appli	cation	Scoring	g Crit	teria (2	207 Poi	nts I	Max)					2/1/22
Explanation:															
Explanation.															
		ocumenting how the			and man	nageme	ent team	(which ma	ay incl	ude Applicant, D	Developer, Prop	erty Manag	ger, and Le	ad Service	15.00
Provider) are co	nnected and will work	k together on the Proj	Provide con		etter(s) o	r MOLI	(s) docu	mentation					Linio	aded to HCD?	
		ngagement - max 20				. IVIOU	(3) uocul	montation					υμιο	aaca to HOD!	0.00
		ints (HCD will score				ased o	n the su	bmitted	Conti	inuum of Care	Outcomes)				
File Name:	Racial Disparities A		Provide the										Uplo	aded to HCD?	Yes
b. Community E	ngagement - 10 point I	s (HCD will score C	-							•	*** ** * *				
										or will engage v		erience of			
File Name:	Community Engage									cumentation of t			Uplo	aded to HCD?	Yes
					s, comm	unity pl	lanning d	ocuments	s, MOI	U of partnership	with communit	у			
			organization	s, etc.											
		ection - max 92 poin			Chronic					1	Homolo	ss Youth or	r Vouth at		68.00
	26, S36, T26 - 20 po	itions from Award, Ma ints	aton, and		essness	0.0	00%	Hom	elessr	ness 10.00%	'n	ss foulifor sk of Home		90.00%	20.00
	s include units for	Percentage of Assis	ted units tha	t are <b>thre</b>	e bedroo	oms	l		Perce	entage of Assist	ed units that are	e two bedr	rooms or		
large family hou	sing types - 10	or larger from 'Awar			e' worksl	heet	0.00%	1	arger	from 'Award, Ma				0.00%	0.00
points	- FF daadt	cells iction to serve Target	s U43 + U44	+ U45	T.11	1.4		A I'				2 + U43 + U			
		HCD to increase inco		Yes						s to waive		age of Assisto to waive in		100.00%	20.00
	3(ii) - max 20 points									o §303(ii).			ome limits		
d. Extent Projec	t commits to being ac	cessible to persons v	with disabilitie	es - max 1	0 points			Total un	its fror	m 'Award, Match	n, and Revenue	' workshee	et cell E25	50	0.00
		I accessibility require nobility disabilities - 5		rth in §505	o, specific	cally un	its with	0		% of units exce	eding state and requirements			0.00%	0.00
		persons with hearing	•	abilities as	defined	in 24 C	FR		% c	of units accessit				0.000/	0.00
		10 and CBC Ch. 11B						0				-	disabilities	0.00%	0.00
e. The Project re	equires no rehabilitati	on/construction, or th	e rehabilitatio	on/constru	ction and	full occ	cupancy	can be c	omple	ted within eight i	months of awar	d - max 10	points	Yes	10.00
	·	equired per Assisted													10.00
f1. Capital match		Maximum matc			/linimum r			o. minimu	vas	omio pei dooi			I		10.00
minimum match		Assisted units	from		for Assis					Excess match		Incre	ements of		
	pt for every \$10,000			2,000			tch, and	\$102,0	00	(per unit)	\$158,870		,000 over	10	10.00
over the require points	d match - max 10	Revenue' workshee Al25		F	Revenue'	worksh	neet cell Al25			., ,		baselin	e amount		
·	ge total cost per	Average baseline		+	Δν	erane o	cost per			Requested			+		+
	below the minimum	Assisted Unit				-	init from			below		Incre	ements of		
	or, 1 pt for every	'Award, Match,	and \$175	5,500	'Awa	ırd, Mat	tch, and	\$175,5	00	minimum	\$0		000 under	0	0.00
	aseline amount -	Revenue' works					rksheet			baseline (per unit)		baselin	e amount		
max 10 pts g. Site Selection	- max 12 nointe	cells X25 /	U20		С	iens U3	32 / U25			(per unit)		<u> </u>			8.00
File Name:	Amenities Site Map		Map indicati	ng the pro	posed ho	ousing lo	ocation(s	s) and sco	oring r	elated amenities	below.		Uplo	aded to HCD?	Yes
Project site is lo	cated within 1/2 mile	of a bus rapid transit s	station, light i	ail station	, commut	er rail s	station, fe	erry termi	nal, bu	ıs station, or pul	olic bus stop OI		ct includes	an	
	•	residents (e.g., van o					ing and n	naintainin	g the v	an and its serv	ice are included	in the bud	get and the	Yes	4.00
		nd by tenants or a re	_				rook :	+ a=== f :	ah - :	duga 1114	mile f ·	to in	*************		<del>                                     </del>
i. Project site is points	ocated within 1/2 mile	e of a full-scale groce	y store/sup	ermarket v	wnere sta	apies, fr	esn mea	ıı, and tre	sn pro	ouce are sold 1	mile for projec	is in rural a	neas ? - 2	Yes	2.00
<u> </u>	located within 1/2 mile	e (1 mile for projects i	in rural areas	s) of a qua	lifying me	edical c	linic with	a physici	an, ph	ysician's assist	ant, or nurse pr	ractitioner o	on-site for a	1	<u> </u>
minimum of 40 h	ours each week, or I	nospital (not a private	doctor's offi	ce)? A qua	alifying me	edical c	clinic mus							No	0.00
		ehensive subsidy pro													
		le of a book-lending p							2051 - 1	toro or ho-lib f	oilitu 2 2 i- t			No	0.00
		ile of a pharmacy (1 n meless Youth: Project				_			_				prenticesh	No ip	0.00
	•	ildcare centers for pa						-					•	Yes	2.00
1 - /		F-	3,			-	,	, - 3-		,		, .		. 55	

§304 Application Scoring Criteria (207 Points Max)								
5. Negative Points - max minus 20	points							
a. For any Project resulting in the per	manent displacement of re	sidents (r	not businesses or farm operations), a	s outlined	below:			
The Project permanently displaces existing residents:	Total existing units	52	Total household units that will be displaced	0	Percentage of household units that will be displaced 0.1	00%	0.00	
					mp, HCD may consider additional criteria as a tiebreaker, ir t stability and proximity to transit, services and amenities.	cluding	but not	

			Application Developmer	nt Team (ADT) Support Form		2/1/22
Name:		Complete the	"yellow" cells in the form below for ap	oplication related issues and email a copy to: appsuppo	rt@hcd.ca.gov Contact Phone:	
Issue #	Program Name &	Tab	Cell#	Update/Comment	Urgency	Status Date
1	Homekey					
2	Homekey					
3	Homekey					
4	Homekey					
5	Homekey					
6	Homekey					
7	Homekey					
8	Homekey					
9	Homekey					
10	Homekey					
11	Homekey					
12	Homekey					
13	Homekey					
14	Homekey					
15	Homekey					
16	Homekey					
17	Homekey					
18	Homekey					
19	Homekey					
20	Homekey					
21	Homekey					
22	Homekey					
23	Homekey					
24	Homekey					
25	Homekey					
26	Homekey					
27	Homekey					
28	Homekey					
29	Homekey					
30	Homekey					

		Homekey Application Upload Document Checklist  Iformation in column AK is auto-populated from document submittal replies in the worksheets in	
Complete ap		mentation may result in the need for you to amend and resubmit your application resulting in your application do to the date of resubmittal.	our application's HCD review
		One Continue all and materials	Halandada HODO Va
File Name	App1 Cert & Legal	See Certifications & Legal worksheet.	Uploaded to HCD? Yes
File Name File Name	App1 Resolution App1 TIN Form	Signature required; see Applicant Documents worksheet.  See Applicant Documents worksheet.	Uploaded to HCD? Yes Uploaded to HCD? Yes
			Uploaded to HCD?
File Name File Name	Co-App1 Cert & Legal Co-App1 Resolution	See Certifications & Legal worksheet.	Uploaded to HCD?
File Name	Co-App1 Resolution Co-App1 OrgDoc1, OrgDoc1, etc	Signature required; see Applicant Documents worksheet.  See Applicant Documents worksheet.	Uploaded to HCD?
File Name	Co-App1 OrgChart	See Applicant Documents worksheet. See Applicant Documents worksheet.	Uploaded to HCD?
File Name	Co-App1 OrgChart Co-App1 Signature Block	See Applicant Documents worksneet. See Applicant Documents worksheet.	Uploaded to HCD?
File Name	Co-App1 Signature Block Co-App1 Payee Data Record	See Applicant Documents worksheet. See Applicant Documents worksheet.	Uploaded to HCD?
File Name	Co-App1 Fayee Data Record Co-App1 TIN Form	See Applicant Documents worksheet.	Uploaded to HCD?
File Name	Co-App1 Til 1 Offi Co-App1 Cert of Good Standing	Dated 30 days or less from the Application due date.	Uploaded to HCD?
File Name	Co-App1 Cert of Good Standing  Co-App1 Tax-Exempt Status	Evidence of tax-exempt status from IRS and Franchise Tax Board, if applicable	Uploaded to HCD?
File Name	Co-App2 Cert & Legal	See Certifications & Legal worksheet.	Uploaded to HCD?
			Uploaded to HCD?
File Name	Co-App2 Resolution	Signature required; see Applicant Documents worksheet.	
File Name	Co-App2 OrgDoc2, OrgDoc2, etc	See Applicant Documents worksheet.	Uploaded to HCD?
File Name	Co-App2 OrgChart	See Applicant Documents worksheet.	Uploaded to HCD?
File Name	Co-App2 Signature Block	See Applicant Documents worksheet.	Uploaded to HCD?
File Name	Co-App2 Payee Data Record	See Applicant Documents worksheet.	Uploaded to HCD?
File Name	Co-App2 TIN Form	See Applicant Documents worksheet.	Uploaded to HCD?
File Name	Co-App2 Cert of Good Standing	Dated 30 days or less from the Application due date.	Uploaded to HCD?
File Name	Co-App2 Tax-Exempt Status	Evidence of tax-exempt status from IRS and Franchise Tax Board for Non-profit Corp.	Uploaded to HCD?
File Name:	Rehab Description	Narrative description of current condition of structure(s) and overall scope of work.	Uploaded to HCD? Yes
File Name:	PNA	Physical Needs Assessment prepared by a qualified independent third party contractor.	Uploaded to HCD? Yes
File Name:	Market Study	Provide a recent market study within the past year which conforms to Tax Credit Allocation Committee (TCAC) guidelines, and/or a rent roll, and/or other supporting documentation per §205 of the NOFA.	Uploaded to HCD? N/A
File Name:	Market Study	Provide a recent market study within the past year which conforms to TCAC guidelines, and/or a rent roll, and/or other supporting documentation per §205 of the NOFA.	Uploaded to HCD? N/A
		Detailed narrative of how the use will meet all Homekey Program requirements, including the	
File Name:	Non-Perm Structure	requirements for use and affordability restrictions set forth at §208 of the NOFA	Uploaded to HCD? N/A
Threshold wo	orksheet	The second section of the section of	
		Phono I (proposed or undeted no corlice they 40 months arise to the corline than 10 months	Unloaded to LIODOL 11
File Name	Env. Report 1	Phase I (prepared or updated no earlier than 12 months prior to the application due date).	Uploaded to HCD? Yes
File Name	Env. Report 2	Phase II (prepared or updated no earlier than 12 months prior to the application due date).	Uploaded to HCD? N/A
File Name	CEQA	Copy of CEQA Determination Documents	Uploaded to HCD? Yes
File Name	NEPA	Copy of Authority of Use Grant Funds (NHTF Verification from Responsible Entity)	Uploaded to HCD? N/A
File Name	Local Approvals	"Local & Env Verification' worksheet(s) completed and signed by local authority or Responsible Entity, if different from jurisdiction.	Uploaded to HCD? Yes
File Name	Racial Demographics	Racial Demographic Data Worksheet, which reports CoC outcomes by race and ethnicity. The worksheet on the Homekey webpage	Uploaded to HCD? Yes
File Name:	Use Change	Provide a commitment and plan to facilitate or expedite the use change processes	Uploaded to HCD? Yes
File Name:	Site Control1, Site Control2, etc	Provide documentation of the type of site control for each site above	Uploaded to HCD? Yes
File Name:	Prelim1, Prelim2, etc	Provide current preliminary title report for each site above	Uploaded to HCD? Yes
File Name:	Liability Insurance	Proof of General Liability Insurance that meets the requirements in §800(i)	Uploaded to HCD? Yes
File Name:	Automobile Insurance	Proof of Automobile Liability Insurance that meets the requirements in §800(ii)	Uploaded to HCD? Yes
File Name:	Property-Hazard Insurance	Proof of Property Insurance that meets the requirements in §800(v)	Uploaded to HCD? Yes
File Name:	Development Plan	Provide a development plan	Uploaded to HCD? Yes
File Name:	Relocation Narrative	Relocation Assistance Narrative for relocation or no relocation	Uploaded to HCD? Yes
File Name:	Housing First Perm	Provide experience administering a Housing First program of harm reduction and low barriers to entry	Uploaded to HCD?
File Name:	One-for-one Replacement	iii(a) and (b) If the acquired housing or site will be redeveloped/repositioned per the locality's overall goal to address the needs of the Target Population and the community (unless the target site is going to be demolished before any occupancy by the Target Population), provide a letter of commitment to ensure one-for-one replacement of units.	Uploaded to HCD?
File Name:	Housing Site Map	Map indicating the original target housing location and all proposed housing location(s).	Uploaded to HCD?
File Name:	Outside Neighborhood	If replacement housing is proposed outside the target neighborhood, include a justification explaining why it is necessary to locate this replacement housing outside the target neighborhood (i.e., offsite) and how doing so supports and enables the Target Population to maintain housing.	Uploaded to HCD?
File Name:	Interim Hsg Exp	Provide experience in linking Interim Housing program participants to Permanent Housing to ensure long-term housing stability	Uploaded to HCD? Yes
File Name:	Housing First Interim	Provide experience administering a Housing First program that includes principles of harm reduction and low barriers to entry	Uploaded to HCD? Yes
File Name:	Relocation Plan	Relocation Assistance Narrative for relocation or no relocation	Uploaded to HCD? Yes
File Name:	Access & Non-Discrimination	Provide a non-discrimination policy	Uploaded to HCD? Yes
File Name:	Prevailing Wage	Provide a prevailing wage certification	Uploaded to HCD? Yes
	& Legal worksheet		
File Name:	Cert & Legal Explanation	Letter of explanation for any "Yes" answers or red shaded items above.	Uploaded to HCD? Yes
	Services Plan worksheet	, , , , , , , , , , , , , , , , , , , ,	.,
File Name:	Property Management Plan	Submit Droperty Management Plan and Topant Salestian Policies	Uploaded to HCD? Yes
		Submit Property Management Plan and Tenant Selection Policies	Opioaded to FICD? Yes
Award, Matc File Name:	h, and Revenue worksheet Utility Allowance	1Local housing authority document showing current utility allowance chart, with relevant components	Uploaded to HCD? Yes
File Name:	Appraisal	circled.  If land costs will be included in the Development Budget, attach an appraisal dated within 60 days of	Uploaded to HCD? Yes
File Name:	Op Subsidy Confirmation	the application submittal date.  A letter template and a list of potential Homekey complementary funding can be found on the Homekey	Uploaded to HCD? Yes
Dev Sources	s worksheet	webpage.	
File Name:	EFC1, EFC2, EFCI3, etc.	Documentation for the executed funding commitments (see below)	Uploaded to HCD? Yes
Application S	Scoring Criteria worksheet		
File Name	Subsidy Program #1 Name	Provide commitment of this non-Homekey rental subsidy that will be used to maintain the ongoing affordability of the Project.	Uploaded to HCD? N/A
File Name	Subsidy Program #2 Name	Provide committment of this non-Homekey rental subsidy that will be used to maintain the ongoing affordability of the Project.	Uploaded to HCD? N/
		Provide committment of this non-Homekey operating subsidy that will be used to maintain the ongoing	Uploaded to HCD? Yes
File Name	Operating Subsidy: HSH Subsidy	affordability of the Project.	
File Name	Operating Subsidy: HSH Subsidy  Operating Subsidy: (specify)	affordability of the Project.  Provide committment of this non-Homekey operating subsidy that will be used to maintain the ongoing affordability of the Project.	Uploaded to HCD? N/A
File Name	Operating Subsidy: (specify)	Provide committment of this non-Homekey operating subsidy that will be used to maintain the ongoing affordability of the Project.	·
File Name	Operating Subsidy: (specify)  Commitment letter(s) or MOU(s)	Provide committment of this non-Homekey operating subsidy that will be used to maintain the ongoing affordability of the Project.  Provide commitment letter(s) or MOU(s) documentation	Uploaded to HCD? Yes
File Name	Operating Subsidy: (specify)	Provide committment of this non-Homekey operating subsidy that will be used to maintain the ongoing affordability of the Project.	·
File Name File Name:	Operating Subsidy: (specify) Commitment letter(s) or MOU(s) Racial Disparities Analysis	Provide committment of this non-Homekey operating subsidy that will be used to maintain the ongoing affordability of the Project.  Provide commitment letter(s) or MOU(s) documentation  Provide the Continuum of Care Outcomes by Race and Ethnicity  Provide a detailed narrative of how the Applicant has engaged or will engage with the target community, including people currently experiencing homelessness and people with lived experience of homelessness, to inform the design of the project. Provide documentation of this engagement,	Uploaded to HCD? Yes