## **Infill Infrastructure Grant Program**

Notice of Funding Availability (NOFA) May 12, 2021

# Qualifying Infill Area (QIA) and Qualifying Infill Project (QIP) Application

Rev. 6/21/21



State of California
Governor Gavin Newsom

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

Gustavo Velasquez, Director Department of Housing and Community Development

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QIP Name:								Cour	nty QIP is located:			G	eographic Reg	jion:
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File Name	Site Plan								ith certified by a C		te-	lι	Jploaded to H	CD?
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QIA - Provid	le the descript	ion of the	e Project Area	a including	ine designate	ea nousing	within	tne Qi	IA.					
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		I QIPS.			and tenant po	•	el the		ired QIP" docume	QIP City	QIP 2		ified for Requi	
	QIP Name		QIP (Descr	ibe unit mix a	and tenant po	bulation)		Q	IP Address	QIP City	QIP 2	Σiβ	Census Tract	APN
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Required QIP #1														
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QIP - Total La	and Area in Ac	res:												
QIP - Comme	ercial Square F	eet												
					Amenit	ies within	the re	quire						
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Overview

			Overview							6/21/21
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File Name	App1 Signature Block	See App	icant Documents worksheet.					Uploa	aded to H	CD?
File Name	App1 Payee Data Record	See App	icant Documents worksheet.	,				Uploa	aded to H	CD?
File Name	App1 FISCAL TIN Form	See App	icant Documents worksheet.					Uploa	aded to H	CD?
File Name	App1 Cert of Good Standing	Certificat	e of Good Standing certified	by Secretary	of State prior	to application	due date.	Uploa	aded to H	CD?
File Name	App1 Tax-Exempt Status	Evidence	of tax-exempt status from IF	RS and from F	Franchise Tax	Board for Cor	porations.	Uploa	aded to H	CD?
Applicant #2										
Entity Name										
Address				State		Zip				
Auth Rep		Title			Ph	none				
Contact		Title		E	mail			Phone		
Address				City			State		Zip	
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	App2 Cert & Legal		ification & Legal worksheet.						aded to H	
	App2 Resolution		e required; see Applicant Doo		sheet.				aded to H	
File Name	App2 OrgDoc1, OrgDoc2, etc		icant Documents worksheet.						aded to H	
File Name	App2 OrgChart	See App	icant Documents worksheet.					Uploa	aded to H	CD?
File Name	App2 Signature Block		icant Documents worksheet.						aded to H	
File Name	App2 Payee Data Record	See App	icant Documents worksheet.						aded to H	
File Name	App2 FISCAL TIN Form		icant Documents worksheet.						aded to H	
	App2 Cert of Good Standing		e of Good Standing certified	<u> </u>					aded to H	
File Name	App2 Tax-Exempt Status	Evidence	of tax-exempt status from II	RS and from F	Franchise Tax	Board for Cor	porations.	Uploa	aded to H	CD?

#### **Required Applicant Documentation**

6/21/21

#### Black, Indigenous, and Other People of Color - Nonprofit Developer of a QIP

A completed and signed letter of self-certification by authorized signatory is required for each Joint Applicant identifying as black, indigenous or other person of color. Each applicable Joint Applicant must sign an individual Certification.

#### **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 IIG website.

#### **Organizational Documents**

Organizational documents are required for all Applicants, except where a joint applicant is a governmental entity. Governmental entities are not required to submit organizational documents with the application.

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.

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

#### Limited Liability Company organizational documents

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.

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

#### Limited Partnership organizational documents

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. Forms available on IIG website.

Project Narrative	6/21/21
1. Summarize the scope of work for the CIP(s). Describe the distinct infrastructure improvements relating to utilities, surface improvements, landscape and amenities, environmental mitigation and remediation, replacement transit, residential parking and/or transit, etc. §304:	
Describe all on-site services that will be provided at the required QIP:	
3. Explain any specific development issues (relocation, environmental, historical, topography, etc.) at the required QIP and/or CIP(s):	
4. Explain any required demolition at the required QIP:	
5. Identify the Developer(s) for the required QIP. Describe Developer(s) experience with affordable housing:	

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	owing plans? If Yes, select plan.										-	,				
File Name	Relevant Development Plan			el and attach a cop	•		ū		•	ro dovol	onmont.	النبيا		d to HCD?		
. , . ,	e Applicant identify a mechanism, orth in §303(c)(4)? This mechanism			•					•	ire dever	opment	WIII O	ccur at an	overall ive	:L	
Donoity corre	1								or date stamped man	and let	ter					
File Name	Net Density Verification					rofessional s	uch as a	an eng	gineer, surveyor or la	ndscape			Uploade	d to HCD?		
(-)( <del>-)</del> ) ) (				nfirming the Net De		( OID) 11	- 1 1b - A			f th			ti Patria and			
	<ul> <li>Applicant designate the propose at amount pursuant to §305, and for</li> </ul>						at the P	Аррис	ant intends to utilize	for the p	urpose o	or esta	abiisning tr	ie max		
, ,	is application demonstrate that th						ther inc	ome l	limits and rents as de	signated	for the	purpo	se of dete	rmining th	е	
	grant amount shall be maintained															
	nt certifies construction shall not l													11 11000		
File Name	Construction exception	If appl	icable				Js be bu	ult as	a local approval con	dition.			Uploade	d to HCD?		
(a)(4)(Δ) Tota	I number of Structured Parking sp	naces - that are (	1) regu			Costs §304	na snac	es or	(2) public Structured	1	_	Δre c	nete lace	than or eq	ual to	
( /( /( /	red as a condition of approval for	,	, ,				0 1	00 01	(2) public ciruotures					parking sp		l
(a)(4)(B) Tota	I number of residential per unit pa	arking spaces in	Structu	ured Parking, as re	quired by	local land-us	e		Spaces exceed one			Δre c	nete lace	than or eq	ual to	
	oproval, not to exceed one parking	g space per resid	ential	unit, and not to exc	ceed \$50,	000 per			space per unit?	I NO				parking sp		l
permitted spa	t fees for the CIP are required by	local	If	Yes impact fees o	not to e	xceed 5% of	the tota	l Pro	gram grant amount?	Describe	helow t	he fe	e(s) Local	lity and ho	w the	
ordinance?	rices for the on- are required by	local	-   "	res, impact rees e	20 1101 10 0	ACCCU 3 70 OI	tile tota		gram gram amount:	Describe				sed for the		l
		-											•		'	
Mo cortify the	e CIP funded costs do not include	any of the follow	ing inc	oligible costs:												
	per Fees or profit.	any or the follow	ing ine	sligible costs.												
(b)(2) Costs o	of site acquisition for housing and	mixed use struct	ural im	nprovements.												
	of housing or mixed use structures	S.														
· / · /	sts related to ineligible costs. ees for local inclusionary program	ne														
(b)(3) 111 1100 11	ses for local inclusionary program	113.		Application 1	Threshol	d Requiren	nents -	8308	3							
(a)(2) We cer	tify that construction of the CIP ha	as not commence	d as c	• • • • • • • • • • • • • • • • • • • •		•		•								
	tify the CIP is infeasible without P								y Program funds?							
(a)(4) Does A	pplicant have Site Control §302(g		oject?	If Yes, enter form	of Site Co	ntrol and the	most re	ecent								
(a)(F) \Ma aari	Form of Site Control		iaibla	nurament to \$2042					Most r	ecent do	cument	execu	ution date:			
	tify all proposed uses of Program tion sufficiently complete to asses					Program regu	irement	s?								
	special circumstances:	o reacionity or ap	piioati	on and no compile		109.41040										
,	•															
File Name	CIP Site Control	Appro	orioto	documentation to	domonetra	to the form o	of Sito C	ontro	l indicated above			Ι	Unloade	d to HCD?		
	uired QIP trigger State Relocation						one o	Ontro	i indicated above.			l	Opioadci	101100:		
7277)?			(	3												
	e a narrative discussion on the					•										
	pacted households and provided	21/0														
	sistance including what actions ha on to comply with State Relocation															
Assistance La	aw? If No, provide documentation															
supporting re	elocation is not required.															
File Name	QIP Relocation Plan	Must r	rovide	e a Relocation Plar	n or docum	nentation sur	porting	no re	location.				Uploade	d to HCD?		
	we will comply with all state and									out the	program	inar				
	using and take no action that is n														-	

					Eligibilit	y and Thres	hold											6/21/21
File Name	Fair Housing	Self-Certifi				document that a manner that							ancy		Uplo	oaded	to HCD	?
						Market Stu	dy											
Does Market	study demonstra	te QIP is fir	nancially feasible? -	Must submit a	market stud	ly that meets the	e requirem	ents sp	ecified i	n TCA	C Regs	§1032	2(h)(10	))				
File Name	Market Study		Mus	t provide a com	npleted mark	cet study prepar	ed within o	ne yea	r of the	applic	ation due	e date.			Uplo	oaded	to HCD	?
						Tax Credits (	TC)											
Select appro	priate entry for ea	ch item:																
Project Tax C	Credit Type		Federal			equity investor					Antici	pated	tax cre	dit facto			App rate	<u> </u>
	State   Proposed equity investor contribution (\$)   Anticipated tax cred te for applying for 4%Tax Credits   Proposed month   Proposed year																App rate	4
	or applying for 4%Tax Credits Proposed month Proposed year																	
	or applying for 9%Tax Credits Proposed round Proposed year																	
	for applying for 9%Tax Credits																	
File Name	If already awarded, date of the Tax Credit Reservation															paded	to HCD	<u> </u>
						Milestone	S											
			s are already on title	?														
			s are anticipated?															
			nay have already be													s not	yet comp	oleted,
			te (MM/YY) for each											NA" belo	W.			
Provide the a	actual or anticipat	ed completi	on date for the follow	wing performan	ice mileston	es for the CIP.	f a milesto	ne is n	ot appli	cable,	please e	enter "N	√A".					
					1015.11										CI	P Dat	e (	QIP Date
			plicant and Develop					ons of	the dev	elopm	ent.							
			al clearances, includ		red under C	EQA and NEPA	•											
			public land use app		ala a auth a al ti	- th - C		alal:aa		- 41 - II	final and		/					
			Il construction/perma				na Uses Ir	ciuaing	substai	ntially	final con	struction	on/peri	nanent				
			on documents for re				nt or norn	ittina o	u thoritu									
	nent of construction	•	gs and Specifications	s to trie appropr	nate local bi	alluling departme	ent or pern	illing a	lutriority	•								
			e Notice of Completi	on														
Constituction	complete and the	ining or the	e Notice of Completi	UII.														

						QIP(s)	and all CIF	P(s) Source	es of Fund	S							6/21/21
See §310(a)(4) for ar	explanation	of funding com	imitments		QIP (Regu	ired by (	OIA) and a	I CIPs Con	struction Pe	eriod Sourc	es of Funds	3					
					Q.: (1.090		Local							1	*Det	ails of Deferred	Costs
Funding Committed by Application Due Date?	Unit Type	CIP or QIP #1	(listed	Source Name d in order of lien	priority)	Source Type	Support §310(a)(5)	Lien No.	Residential Amount	Commercial Amount	Total Amount	Interest Rate	Required Payment	Loan Term (months)	Amount	Desc	ription
1 Yes		CIP	(	IIG CIP Grant	<b></b> ,	State-HCD		1			\$0			(	Amount	Desc	iption
2											\$0						
3											\$0						
4											\$0						
5											\$0						
6											\$0						
7											\$0						
8											\$0						
9											\$0						
10											\$0						
11											\$0						
12											\$0 \$0						
13											\$0						
15											\$0						
16											\$0						
17											\$0						
18											\$0						
19											\$0						
20		QIP #1		Deferred	costs (detail at right)	)			\$0		\$0						
21		QIP #1	Equity Investor		, 3,	1	•				\$0			1			
	\$0	<total com<="" funds="" td=""><td></td><td>0.00%</td><td>&lt;% Funds commit</td><td>ted</td><td></td><td>TOTALS</td><td>\$0</td><td>\$0</td><td></td><td></td><td></td><td></td><td>\$0</td><td></td><td></td></total>		0.00%	<% Funds commit	ted		TOTALS	\$0	\$0					\$0		
0 <rental td="" units<=""><td>\$0</td><td><total funds<="" rental="" td=""><td></td><td>0.00%</td><td>&lt;% Rental funds of</td><td>committed</td><td></td><td></td><td></td><td></td><td></td><td>•</td><td>•</td><td></td><td></td><td></td><td></td></total></td></rental>	\$0	<total funds<="" rental="" td=""><td></td><td>0.00%</td><td>&lt;% Rental funds of</td><td>committed</td><td></td><td></td><td></td><td></td><td></td><td>•</td><td>•</td><td></td><td></td><td></td><td></td></total>		0.00%	<% Rental funds of	committed						•	•				
0 <ho td="" units<=""><td>\$0</td><td><total co<="" funds="" ho="" td=""><td>ommitted</td><td>0.00%</td><td>&lt;% HO funds com</td><td>mitted</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></total></td></ho>	\$0	<total co<="" funds="" ho="" td=""><td>ommitted</td><td>0.00%</td><td>&lt;% HO funds com</td><td>mitted</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></total>	ommitted	0.00%	<% HO funds com	mitted											
•	\$0	<total cip="" funds<="" td=""><td>committed</td><td>0.00%</td><td>&lt;% Funds commit</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></total>	committed	0.00%	<% Funds commit												
					QIP (	Required	d by QIA) a	ind all CIP I	Permanent	Sources of	Funds						
Funding Committed by	Rental vs			Source Name	,		Local	Lien	Residential	Commercial		Inter	est Rate	Repaymen	Terms	Required	Required
Application Due Date?	Homeowner (HO)	CIP or QIP #1	(listed			Туре	Support §310(a)(5)	No.	Amount	Amount	Total Amount	Туре	Rate	Туре	Due in (yrs)	Residential Debt Service	Commercia Debt Service
1 Yes	()	CIP		IIG CIP Grant Stat				1			\$0					2222 301 1100	
2											\$0						
3											\$0						
1											60						

Fundi	ng Committed by cation Due Date?	Rental vs Homeowner	CIP or QIP #1		Source Name		Source	Local Support	Lien	Residential	Commercial	Total Amount	Intere	est Rate	Repayment	Terms	Required Residential	Required Commercial
Appli	cation Due Date?	(HO)	On or an #1	(listed	in order of lien p	riority)	Type	§310(a)(5)	No.	Amount	Amount	Total Amount	Туре	Rate	Туре	Due in (yrs)	Debt Service	Debt Service
1	Yes		CIP		IIG CIP Grant		State-HCD	No	1			\$0						
2												\$0						
3												\$0						
4												\$0					l	
5												\$0					l	
6												\$0					i	
7												\$0						
8												\$0					l	
9												\$0					l	
10												\$0					l	
12												\$0					l	
12												\$0					l	
13												\$0					l	
14			QIP #1		Private	mortgage financing						\$0					l	
15			QIP #1			Deferred costs						\$0						
16	, and the second		QIP #1	Equity Investor	•	•	•					\$0						
								TOTALS		\$0	\$0	\$0				TOTALS	\$0	\$0
0	<rental td="" units<=""><td>\$0</td><td><total qip="" rental="" t<="" td=""><td>funds committed</td><td colspan="3">ds committed 0.00% &lt;% QIP Rental funds of</td><td>·</td><td></td><td></td><td></td><td><u> </u></td><td></td><td></td><td></td><td></td><td></td><td></td></total></td></rental>	\$0	<total qip="" rental="" t<="" td=""><td>funds committed</td><td colspan="3">ds committed 0.00% &lt;% QIP Rental funds of</td><td>·</td><td></td><td></td><td></td><td><u> </u></td><td></td><td></td><td></td><td></td><td></td><td></td></total>	funds committed	ds committed 0.00% <% QIP Rental funds of			·				<u> </u>						
0	<ho td="" units<=""><td>\$0</td><td><total fund<="" ho="" qip="" td=""><td>ds committed</td><td>0.00%</td><td>&lt;% QIP HO funds</td><td>committed</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></total></td></ho>	\$0	<total fund<="" ho="" qip="" td=""><td>ds committed</td><td>0.00%</td><td>&lt;% QIP HO funds</td><td>committed</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></total>	ds committed	0.00%	<% QIP HO funds	committed											

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

				QIP (Regu	uired by QIA	A) Reside	ntial and a	II CIP Per	manent So	ources of F	unds						6/21/21	Co	mmercial Sou	ırces
USES OF FUNDS	IIG CIP Grant	0	0	0	0	0	0	0	0	0	0	0	0	Private mortgage financing	Deferred costs	Equity Investor	Total Residential Sources/Costs	Total Commercial Sources/Costs	Source Name:	Source Name:
Qualifying Infill Project (QIP)	•	•		•				•	•				•	•			•		•	
LAND COST/ACQUISITION																				
Land Cost or Value																	\$0			
Demolition																	\$0			
Legal												-					\$0 \$0			
Land Lease Rent Prepayment  Total Land Cost or Value		\$0	Sc	so so	\$0	\$0	\$0	\$0	\$0	\$0	SC	D \$(	\$0	\$0	\$0	\$0				\$0
Existing Improvements Cost or Value		Ų.		•	,	<del>-</del>	<del>+</del>	Ų	Ţ,	Ų.	•		, ,,	Ţ.	Į.	Ţ.	\$0			
Off-Site Improvements																	\$0	\$0		
Total Acquisition Cost		\$0					•													
Total Land Cost / Acquisition Cost  Predevelopment Interest/Holding Cost		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$(	\$0	\$0	\$0	\$0	\$0 \$0			\$0
Assumed, Accrued Interest on Existing Debt																				
(Rehab/Acq)																	\$0	\$0		
Excess Purchase Price Over Appraisal																	\$0			
Total Relocation Costs																	\$0	\$0		
NEW CONSTRUCTION Site Work	1																\$0	\$0		
Structures																	\$0			
General Requirements	<u> </u>																\$0	\$0		
Contractor Overhead																	\$0			
Contractor Profit	1																\$0			
Prevailing Wages General Liability Insurance	1																\$0 \$0			
Urban Greening																	\$0			
Other New Construction: (Specify)																	\$0			
Other New Construction: (Specify)																	\$0			
Other New Construction: (Specify)																	\$0			
Total New Construction		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	D \$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
ARCHITECTURAL FEES Design																	\$0	\$0		
Supervision																	\$0			
Total Architectural		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	D \$0	\$0	\$0	\$0	\$0				\$0
Total Survey & Engineering																	\$0	\$0		
CONSTRUCTION INTEREST & FEES																				
Construction Loan Interest Origination Fee																	\$0 \$0			
Credit Enhancement/Application Fee																	\$0			
Bond Premium																	\$0			
Cost of Issuance																	\$0			
Title & Recording																	\$0			
Taxes Insurance																	\$0 \$0			
Employment Reporting	1																\$0			
Other Construction Int. & Fees: (Specify)	<u> </u>																\$0			
Other Construction Int. & Fees: (Specify)																	\$0	\$0		
Other Construction Int. & Fees: (Specify)																	\$0			
Other Construction Int. & Fees: (Specify)  Total Construction Interest & Fees		\$0	\$(	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$(	D \$0	\$0	\$0	\$0	\$0	\$0 \$0			ęn.
PERMANENT FINANCING		\$0	\$(	, şt	\$0	\$0	\$0	\$0	\$0	\$0	\$(	\$1	\$0	\$0	, \$0	. \$0	\$0	\$0	\$0	\$0
Loan Origination Fee	<u> </u>																\$0	\$0		
Credit Enhancement/Application Fee																	\$0	\$0		
Title & Recording	1																\$0			
Taxes	1																\$0 \$0	\$0 \$0		
Other Perm. Financing Costs: (Specify)																	\$0 \$0	\$0		
Other Perm. Financing Costs: (Specify)																	\$0			
Other Perm. Financing Costs: (Specify)																	\$0	\$0		
Other Perm. Financing Costs: (Specify)																	\$0			
Total Permanent Financing		\$0								\$0	\$( \$(									
Subtotals Forward LEGAL FEES	1	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Legal Paid by Applicant																	\$0	\$0		
Other Attorney Costs: (Specify)	<u> </u>																\$0			
Other Attorney Costs: (Specify)																	\$0			
Other Attorney Costs: (Specify)																	\$0			
Total Legal Fees RESERVES		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$(	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
RESERVES	1	1	l	1	1			l		ı		1	1	l	1	I .		l	l	

				QIP (Requ	ired by O	A) Posido	atial and a	II CID Dor	manant Sa	uroos of	Funde						0/04/04	Cor
USES OF FUNDS	IIG CIP Grant	0	0	o O	o o	o O	0	o o	o o	o	o o	0	0	Private mortgage financing	Deferred costs	Equity Investor	6/21/21  Total Residentia Sources/Costs	Total
Operating Reserve																	\$0	\$0
Replacement Reserve																	\$0	
Transition Reserve																	\$0	
Rent Reserve																	\$0	
Other Reserve Costs: (Specify)																1	\$0	
Other Reserve Costs: (Specify)  Other Reserve Costs: (Specify)																1	\$0	
																	\$0	
Other Reserve Costs: (Specify)  Total Reserves		-	\$(		\$0	***	***	\$0	to.	\$0	\$0	\$0	60	***	SC	\$0		
		\$0	\$(	0 \$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	) \$0	\$0	\$0	0 \$0
CONTINGENCY COSTS																		200
Construction Hard Cost Contingency																	\$0	
Soft Cost Contingency											_				_		\$0	
Total Contingency		\$0	\$(	0 \$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0 \$0
OTHER PROJECT COSTS																		
TCAC App/Allocation/Monitoring Fees																	\$0	
Environmental Audit																	\$0	
Local Development Impact Fees																	\$0	
Permit Processing Fees																	\$0	
Capital Fees																	\$0	
Marketing																	\$0	
Furnishings																	\$0	
Market Study																	\$0	
Accounting/Reimbursable																	\$0	
Appraisal Costs																	\$0	\$0
Other Costs: (Specify)																	\$0	\$0
Other Costs: (Specify)																	\$0	\$0
Other Costs: (Specify)																	\$0	
Other Costs: (Specify)																	\$0	
Other Costs: (Specify)																	\$0	
Other Costs: (Specify)																	\$0	
Total Other		\$0	\$(	0 \$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Subtotal Project Costs		\$0																
DEVELOPER COSTS		φυ	90	90	φυ	<b>40</b>	φυ	φ0	φυ	φυ	7 90	φι	40	φυ	, şt	φυ	- P	, 40
Developer Overhead/Profit																	\$0	\$0
																	\$0	
Consultant/Processing Agent				+													\$0	
Project Administration																		
Broker Fees Paid to a Related Party																	\$0	
Construction Oversight by Developer																	\$0	
Other Developer Costs: (Specify)											_				_		\$0	
Total Developer Costs	\$0						\$0											
TOTAL PROJECT COST	\$0	\$0	\$(	0 \$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0 \$0
Capital Improvement Project(s) (CIP																		_
Site acquisition of CIP including easements and																	\$0	آر
right of ways																	\$0	
Other:					40		40	40				•	40	40				
Total Site Acquisition (not parking)	\$0	\$0	\$0	0 \$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Clearing and Grubbing																	\$0	
Demolition																	\$0	
Excavation																	\$0	
Grading																	\$0	
Soil Stabilization (Lime, etc.)																	\$0	
Erosion/Weed Control																	\$0	
Dewatering																	\$0	
Other:																	\$0	)
Other:																	\$0	)
Total Site Preparation	\$0	\$0	\$0	0 \$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Sanitary Sewer																	\$0	)
Potable Water																	\$0	וֿכ
Non-Potable Water																	\$0	<u>י</u>
Storm Drain																	\$0	
Detention Basin/Culverts																	\$0	
Joint Trench																	\$0	
Other:																	\$0	
Total Site Utilities	\$0	\$0	\$0	0 \$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
	\$0	\$0	\$1	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	, \$0		
Aggregate Base											-						\$0	
Asphalt Pavement																	\$0	
Curb, Gutter, Sidewalk																	\$0	
Street Lights																	\$0	
Striping/Signage/Barricades																	\$0	
Traffic Mitigation																	\$0	<u> 1</u>

Commercial Sources

Source Name:

Source Name:

				QIP (Regu	ired by QI	A) Resider	ntial and a	II CIP Per	manent So	urces of I	unds						6/21/21	T
USES OF FUNDS	IIG CIP Grant	0	0	0	0	0	0	0	0	0	0	0	0	Private mortgage financing	Deferred costs	Equity Investor	Total Residentia Sources/Costs	
Other:																	\$0	)
Total Surface Improvements	\$0	\$0	\$(	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Irrigation																	\$0	j
Concrete Work																	\$0	
Landscaping																	\$0	
Urban Greening																	\$0	
Playground Facilities and Tot Lots																	\$0	
Walking/Bike Path																	\$0	
Drinking Fountains																	\$0	
Structures																	\$0	
Lighting																	\$(	
Open Space																	\$0	
Other:																	\$(	
Total Parks-Landscape and Amenities	\$0	\$0	\$(	0 \$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Wetland Mitigation																	\$(	
Endangered Species																	\$(	
Tree Mitigation																	\$(	
Environmental Remediation																	\$0	
Other:															-		\$(	
Total Env. Mitigation/Remediation	\$0	\$0	\$(	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Replacement Parking																	\$(	
Grading																	\$(	
Foundation Work																	\$(	
Site Work																	\$(	
Other:																	\$(	
Other:															-		\$(	
Total Structured Parking §304(a)(4)(A)	\$0	\$0	\$(	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Residential Parking Structures				-													\$(	
Grading				-													\$0	
Foundation Work Site Work																	\$(	
Other:																	\$(	
Other:																	\$(	
Total Residential Parking §304(a)(4)(B)	\$0	\$0	\$(	0 \$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Access Plazas	ŞU	\$0	30	\$0	ψU	ψU	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	Ş(	\$0	\$(	
Pathways																	\$(	
Bus Shelters																	\$(	
Transit Shelters																	\$(	
Pedestrian Facilities																1	\$(	
Bicycle Facilities																1	\$(	
Other:																	\$(	
Total Transit	\$0	\$0	\$(	0 \$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Drainage	40	90		90	\$0	\$0	φ0	40	\$0	40	\$0	φ0		40	ąt.	, 40	\$(	
Parks & Recreation																	\$(	
Streets/Signals																	\$(	
Traffic Fees																	\$(	
Waste Water																	\$(	
Water Facility																	\$(	
Other:																	\$(	
Other:																	\$(	
Total Impact Fees	\$0	\$0	\$(	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Engineering	**	Į.	T T	***	***	ţ	40	Ţ,	30	***	Ţ.	40	***	***		1	\$(	
Design			Ì														\$(	
Other:																	\$(	
Other:				1													\$(	
Total Soft Costs	\$0	\$0	\$(	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Other:	,,,			1	,,,	, ,	**	**	, ,	**	4.	4.	**	4.	,		\$0	
Other:																	\$(	
Total Other Asset Costs	\$0	\$0	\$(	50 \$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
CIP TOTAL PROJECT COSTS	\$0																	
QIP TOTAL PROJECT COSTS	\$0																	
TOTAL QIP & CIP PROJECT COSTS	\$0				\$0	\$0		\$0		\$0								4

Commercial Sources

		Required QIP	Annual Income	and Expenses	6/21/21
		Employee Information		and Expenses	Comments
No.	FTE	Employee Job Title	Salary/Wages	Value of Free Rent	Comments
		On-Site Manager(s)	\$0	\$0	
		On-Site Assistant Manager(s)	\$0	\$0	
		Supportive Services Staff Supervisor(s)	\$0		
		Supportive Services Coordinator, On-Site	\$0		
		Other Supportive Services Staff (inc. Case Manager)	\$0		
		On-Site Maintenance Employee(s)	\$0	\$0	
		On-Site Leasing Agent/Administrative Employee(s)	\$0	\$0	
		On-Site Security Employee(s)	\$0	\$0	
			\$0	\$0	
		T. (10.1.)	\$0	\$0	
1	0744	Total Salaries and Value of Free Rent Units	\$0	Show from road on an	
		Payroll Taxes	\$0	Show free rent as an	
		Workers Compensation	* -	expense?	
		Employee Benefits  mployee(s) Payroll Taxes, Workers Comp. & Benefits	\$0 \$0	Yes	
		Total Employee(s) Expenses	\$0		
		. , , , .	<b>\$</b> 0		
		Employee Units			
Inco Lin		Job Title(s) of Employee(s) Living On-Site	Unit Type (No. of bdrms.)	Square Footage	
			0	0	
			0	0	
			0	0	
		To	otal Square Footage	0	
		Annu	al Operating B	udget	
Acct	. No.	Revenue - Income	Residential	Commercial	Comments
5120/	/5140	Rent Revenue - Gross Potential		\$0	
		Restricted Unit Rents	\$0		
		Unrestricted Unit Rents	\$0		
512	21	Tenant Assistance Payments			
		Subsidy Program Name	\$0		
		Subsidy Program Name	\$0		
		Operating Subsidies	\$0		
		Other: (specify)	\$0	\$0	
59		Laundry and Vending Revenue	\$0		
51		Garage and Parking Spaces	\$0	\$0	
599	90	Miscellaneous Rent Revenue	\$0	\$0	
		Gross Potential Income (GPI)	\$0	\$0	
		Vacancy Rate: Restricted Units	5.0%		
		Vacancy Rate: Unrestricted Units	5.0%		
		Vacancy Rate: Tenant Assistance Payments	5.0%		
		Vacancy Rate: Other: (specify)	5.0%		
		Vacancy Rate: Laundry & Vending & Other Income	5.0%		
		Vacancy Rate: Commercial Income		50.0%	
5220/	5240	Vacancy Loss(es)	\$0	\$0	
		Effective Gross Income (EGI)	\$0	\$0	
Acct	. No.	Expenses	Residential	Commercial	Comments
00	00	Administrative Expenses: 6200/6300			
620		Conventions and Meetings	\$0	\$0	
62		Advertising and Marketing	\$0	\$0	
62		Other Renting Expenses	\$0	\$0	
63		Office/Administrative Salaries from above	\$0	\$0	
63		Office Expenses	\$0	\$0	
63		Office or Model Apartment Rent	\$0	\$0	
63:		Management Fee Site/Resident Manager(s) Salaries from above	\$0 \$0	\$0 \$0	
63		Administrative Free Rent Unit from above	\$0	\$0 \$0	
634		Legal Expense Project	\$0	\$0 \$0	
63		Audit Expense	\$0	\$0	
63		Bookkeeping Fees/Accounting Services	\$0	\$0	
639		Miscellaneous Administrative Expenses	\$0	\$0	
626		Total Administrative Expenses	\$0	\$0	
	. No.	Expenses	Residential	Commercial	Comments
501		Utilities Expenses: 6400		- Janinoi Viai	Johnnents
64	50	Electricity	\$0	\$0	
64		Water	\$0	\$0	
		21 NOEA	Page 14 of 26	, ,	Operating

				6/21/2
0.450			and Expenses	
6452	Gas	\$0	\$0	
6453	Sewer	\$0	\$0	
6400T	Other Utilities: (specify)	\$0 \$0	\$0	
64001	Total Utilities Expenses Operating and Maintenane Expenses: 6500	\$0	\$0	Comments
6510	Payroll from above	\$0	\$0	Comments
6515	Supplies	\$0	\$0 \$0	
6520	Contracts	\$0	\$0	
6521	Operating & Maintenance Free Rent Unit from above	\$0	\$0 \$0	
6525	Garbage and Trash Removal	\$0	\$0	
6530	Security Contract	\$0	\$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	\$0	\$0	
	Taxes and Insurance: 6700	ΨΟ	ΨΟ	Comments
6710	Real Estate Taxes	\$0	\$0	Commence
6711	Payroll Taxes (Project's Share) from above	\$0	\$0	
6720	Property and Liability Insurance (Hazard)	\$0	\$0	
6729	Other Insurance (e.g. Earthquake)	\$0	\$0	
6721	Fidelity Bond Insurance	\$0	\$0	
6722	Worker's Compensation from above	\$0	\$0	
6723	Health Insurance/Other Employee Benefitsfrom above	\$0	\$0	
6790	Miscellaneous Taxes, Licenses, Permits & Insurance	\$0	\$0	
6700T	Total Taxes and Insurance	\$0	\$0	
	Supportive Services Costs: 6900	40	Ψ0	Comments
6990	Staff Supervisor(s) Salaries - from above	\$0	\$0	
6990	Services Coordinator Salaries, On-Site - from above	\$0	\$0	
6990	Other Supportive Services Staff Salaries - from above	\$0	\$0	
6990	Supportive Services Admin Overhead	\$0	\$0	
6990	Other Supportive Services Costs: (specify)	\$0	\$0	
6990	Other Supportive Services Costs: (specify)	\$0	\$0	
6900T	Total Supportive Services Costs	\$0	\$0	
		,	·	
	Total Operating Expenses Funded Reserves: 7200	\$0	\$0	Comments
7210		Residential	Commercial	
7210	Required Replacement Reserve Deposits  Other Reserves: (specify)	\$0 \$0	\$0 \$0	
7230		\$0	-	
7240	Other Reserves: (specify)	\$0	\$0 \$0	
7240	Other Reserves: (specify)  Total Reserves	\$0	\$0	
	Ground Lease	Residential	Commercial	
	Ground Lease Ground Lease	\$0	\$0	
	Total Ground Lease	\$0	\$0	
	Net Operating Income	\$0	\$0	
		ΨΟ	ΨΟ	
	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	Miscellaneous Financial Expenses: (specify)	\$0	\$0	
6890	Miscellaneous Financial Expenses: (specify)	\$0	\$0	
6890	Miscellaneous Financial Expenses: (specify)	\$0	\$0	
6890 6890T	Miscellaneous Financial Expenses: (specify)	\$0	\$0	
6800T	Total Financial Expenses	\$0 <b>*</b> 0	\$0	
	Cash Flow	\$0	\$0	
7190	Asset Management/Similar Fees	\$0	\$0	
		Per Year	Per Month	
	ating Expenses Per Unit	Φ.ς.	Φ.ς.	
vvitnout any	Adjustments	\$0 \$0	\$0 \$0	
			טת	
With the Val	ue of Rent-Free Units Included Taxes, Social Services Coordinator or Social	ΨΟ	Ψ.	
With the Val Without RE	Taxes, Social Services Coordinator or Social Social Programs and With the Value of Rent Fee Units	\$0 \$0	\$0	

### **Required QIP Cash Flow Analysis**

Is Income from Restricted	d Units ba	ased on Restr	icted or Pro	oposed Rer	nts?		Restricted	Rents	_							
Income From Housing Units	Inflation	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
Restricted Unit Rents	2.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Unrestricted Units	2.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tenant Assistance Payments																
Subsidy Program Name		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Subsidy Program Name	2.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operating Subsidies	2.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other: (specify)	2.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gross Potential Income - Housi	ing	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other Income																
Laundry & Vending	2.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other Income	2.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Commercial Income	2.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gross Potential Income - Other		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gross Potential Income - Total</b>		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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
Other: (specify)	5.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laundry/Vending/Other Income	5.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Commercial Income	50.0%	0	0	Ô	0	Õ	0	Ô	Ů.	0	0	0	0	0	0	0
Total Vacancy Loss	00.070	ŏ	ŏ	ŏ	ŏ	ŏ	ŏ	ŏ	ŏ	ŏ	ŏ	ŏ	ŏ	ŏ	ŏ	ŏ
Effective Gross Income		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		U	U	U	U	U	U	•	U	•	· ·	•	•	U	U	U
Operating Expenses & Reserve																
Residential Exp. (w/o Real Estate																
Taxes & Sup. Services)	3.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Real Estate Taxes	2.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Supportive Services Costs	2.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Replacement Reserve	0.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Expenses & Reserves		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Net Operating Income		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Debt Service	ſ															
1st Mortgage		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Bridge Loan (repaid from Investor	r equity)	0	0	0	0	0	U	U	U	U	U	U	U	U	U	U
2nd Mortgage	oquity)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3rd Mortgage Debt Service		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Misc. Financial Expenses: (specif	fv)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Required Debt Service	31	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
																<u> </u>
Cash Flow after all debt service	•	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Debt Service Coverage Ratio (D	OSCR)	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
(2	,															

				Verification (	of Environment	al Review & L	and Use	Entitleme	nts				6/21/21
File N	lama	Auth to Use Gra	nt Eundo	For NEP	A only, provide a co	opy of the HUD 7	015.16 "A	uthority To Us	se Grant Fu	ınds" o	r	Uploaded to	НСВЗ
		Autil to Use Gra	iii Fuiius		e current status of t								
File N		Environmental			a copy of all enviror							Uploaded to	
					artment of local go								
					s need only submit tity. If an item is not						Entity is no	ot a local go	vernment, submit
Applie		Tomi to the approp	JIIALE INLI	A Nesponsible Lin	ity. If all item is not	required, include	ine reas	on wily in the	oox provide	ou.			
	Name							Applicant Type	Э				
Addre		- I					City	71		Stat	te	Zip	
	Pr	roject Name		Brief Descrip	ntion	Addres	s	City	Zip		County	Census	APNs
		ojout ruino		2.10. 2000.1	7.1.0.11	7144100		Oity	_,,,		County	Tracts	74110
Required QIP													
and C	commun		equesting	funding for the pro	<b>E ENTITY:</b> The Apject named above to								
		tal Review	9 40										
		proved "by right"?											
				y regardless of the	answer to the prec								
		nmental Clearanc	- N	ot Required for	Has a Negative		of Public	Date(s) EIR		Date A	Appeal Per	riod Hav	e any appeals
(CEQ		A) necessary to b	egin	this Project	Declaration bed issued?	Commen	Period	/ Notic			Ends		been filed?
	con	struction are: CEQA			issued?			Determina	ion mea				
		NEPA*											
n the	box bel		ny items a	re not required and	include documenta	ation, if applicable	):	1					
		ock for Environm			<del></del>								
Date:	ty that	the information o	n this for	m is true and cor	rect to the best of	my knowledge.							
	d name	of party completin	a form:	Sig	nature of party con	npleting form:							
		completing	g ioiii.			P	gency an	d/or Dept.					
form:	1 - 3	1 1 3					J = 1, =	name:					
Agenc	cy/Dept.	Address					City			Stat	te	Zip	
					llowing local approv	rals)			1				•
appro		y and discretiona cept building per e:			Not Required for Project			local planning g ordinances	11 .	ted and		submitted, omplete for	Date Approved
		Amendment:											
	lan Rev												
	g Appro	lse Permits:											
	ty Bonu												
	Variand												
	Variano												
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	Variand												
	Variand		av itoma a	ro not required and	inglude decuments	ation if applicable							
n the	box bei	low, explain why ar	iy items a	re not required and	include documenta	ation, ii applicable	· .						
0.	de Bl		Facility and										
		ock for Land Use			rect to the best of	my knowledge							
Date:	•	of party completin			nature of party con								
Title o	of party	completing				P	gency an	d/or Dept.					
form:	/D	A data					la: '	name:				1	
Agenc	cy/Dept.	Address					City			Stat	te	Zip	
				HCD	requires an origin	al, fully complet	ed form	with signatur	es.				

						oring							6/21/21
							(points in		aded cell	s) T	otal QIP S	elf Score	0.00
			Iner	Project Read		- ,			lala atifu aa a		1		ı
File	Name	E&L Use		ide signed copies of landing of document.	⊏IIV & L	Land Use	vernication w	orksneet.	identily har	ne or Locality at	Uploade	ed to HCD?	
٠,		ental Review Status - 30 po	oints max (if er	vironmental reviews	and ned	cessary e	ntitlements ha	ve been o	completed f	or the QIP and	submitted to H	CD by the	
		e date, select "Yes"). P, we have completion and a	approval or ado	otion of all necessary	enviror	nmental c	learances incl	uding thos	se required	under the CEQ	A and if		
app	icable, Ni	EPA, and all applicable time	periods for filin	g appeals or lawsuits	have la	apsed. If r	no, answer (B)	30 poir	nts				0
٠,		P, we have issued a public n	notice of the ava	ilability of a draft env	rironmer	ntal impac	ct report, nega	tive decla	ration, or e	nvironmental as	sessment? - 1	5	Ů
poin NEP		deral funding proposed that	will trigger NEP	A2 Describe circums	tances	helow		If Yes	s enter dat	e of "Authority to	Lise Grant F	unds":	
	74.  10 T O	dorar randing proposed that	Will digger 1421	71. Boothbo dhouine	nanooo	bolow.			o, ornor dar	o or ridinomy is	o o o o o o o o o o o o o o o o o o o	ariao .	
CEC	A: Proje	ect approved "by-right"?	Is Pro	oject Categorically Exempt?	Neg	ative Dec	laration Date:		Final E Da		scribe specia	circumstar	nces
(2) 1		Entitlement Status - 30 poi			tom the	Jacol iuria	disting on ho		and outposition	tool to UCD but	an disation	duo doto o	vologi
"Yes		Entitlement Status - 30 por	ints max (ii nece	essary enuliements ir	om me	local juris	sulction can be	secured	and Submit	ted to HCD by ti	ie application	due date, s	select
		P, have all necessary local la	and use approve	als have been grante	d for the	e QIP, as	determined by	y a local la	and use aut	thority (e.g., plar	nning or		
		elopment director or zoning											
٠, ,		consistent with all relevant I be been submitted and deeme			_					retionary local la	nd use		0
		eligible to receive all necess					•			dentify in table h	elow - 10		
poin		ongiono to rocorro un mococo	outy rood, raile	арр. ота раточа	10 a	. 10.10.00.0	, , , , , , , , , , , , , , , , , , ,	, .pp. 0 . u.					
the a	ppropriate	g and status of all discretion e local agencies, or consister Entitlements form.	•	• • •	•	•		•		•			
ana	_and 030	Agency / Issuer		Land Use Approva	I Date	Appr	oval Type			Type and C	omments		
								Site Plan					
									nal Use Per	mits			
								Zoning A Other (sp	• •				
								Other (sp					
								Other (sp	• • • • • • • • • • • • • • • • • • • •				
` '		Funding Commitments - 2	•										
		rces on the Dev Sources wo							'QIP #1".	Danie de la constanta de la co	000/   Daire	- 1 0	1
		g commitments as a % of total deminstrates as		·					+		.00% Point	_	0.00
		Perm EFC #1, #2, etc		f(s) of permanent fina						T OTTIGHORE.		ed to HCD?	
		port - 12 points max											
٠,	•	a funding commitment or cor					the QIP or CI	P - 12 poi	nts (All fund	ding sources on	Dev Sources	worksheet	0
		nd 59 to 74 must include "Ye lic agencies funding commit		rding whether it is Lo	ocai Sup		Grant amount	\$0		Commitm	nents as % of	Grant:	0.00%
	Name	Local EFC #1, #2, etc		f(s) of local support,	see §30			ΨΟ		COMMINIC		ed to HCD?	
(5)(	) Prohou	sing Policies - 8 points ma	ax										0
/ix	accompar Maps) or	ocated in jurisdictions that ha nying increased housing cap disadvantaged community p a local housing trust fund or	pacity in areas of oursuant to Sena	f high segregation an ate Bill 535 and Asser	d pover	rty or low	resource oppo	ortunity are	ea (see TC	AC/HCD Opport	unity Area		0
	permitting	ocated in jurisdictions that ha multifamily housing, establis Gov. Code §66200 4 poir	shed a Workfor	•						•			0
(iii)	-	ocated in jurisdictions that zo				_	-				nodate 150		0
	Projects in	n jurisdictions that have adop	pted accessory	dwelling unit ordinan	ces or c	other mec	hanisms that i			•	create		
, ,	1. Parking 2. Process 3. Ministe 4. Reduct 5. Reduct 6. Reduct 7. No min	with dwelling units beyond the representations to 0.75 or fewer sing or impact fee waivers or rial approval in fewer than 45 ion or modifications of develon or modifications of develon or modifications of develon or size requirement; ons for affordability; or	r spaces per acc or reductions of 9 5 days; lopment standar lopment standar	cessory dwelling unit 50% or more; rds for side yard setbords to two story heigh	in areas acks of nts;	s not alrea	ady exempt fro	om parkinç	g per Gov.	Code §65852.2;			0
	9. Offering	g support programs such as											
(v)	•	ocated in jurisdictions that or vailable fee calculators 4 p		e design standards fo	or multifa	amily resi	dential develo	pment or	adopt fee ti	ransparency me	asures, inc.		0
Stra	Select egy Type	Strategy Desc	cription	Enter name of s	nk to wł	here the	of units), tim	ing (reduc	ced number eamlining (r	numerically in ter r of days), devel educed number	opment costs of approvals)	(reduced c	osts per

					QIP Scorir	ng								6/21/21
					A((   -   -	. \ 01	0 D - ' ( - M							
Daint		- 0/ -f OID	ita nastriata d ta a sacra		Affordability §309(k				\$200(F)(4)	<u> </u>		2000/F)/(0)		I
	s based o sheet)	n % of QIP un	nits restricted to occupa	incy by var	ious income groups. (see Ma	ıx run	nas ana Unit IVIIX		§309(b)(1) points=	0.00	5	309(b)(2) points=	0.00	0.00
WOIK	SHEEL)				Density §309(c) -	- 40 P	Points Max		points=			points=		
Point	s based o	n extent to wh	nich the average Net De	ensity of Q	IP, adjusted by unit size, exce			Net		% QIP r	neets o	r exceeds		_
			(see Eligibility and Thre	•			Dens		0			et Density:	0.00%	0
					Access to Transit §30	9(d) -	- 20 Points Max							
Point	s for prox	imity of QIP to	a Transit Station or Ma	ajor Transi	t Stop. Distance must be evid	denced	d by a scaled map	. Walka	able Route i	s defined ir				
Туре			Transit		Contact				Phone		P	lanned Sta		
• •		n ana suarta	Name Name	ion or Moio	yr Transit Ctan massured by	. Mall	kabla Dauta fram	naaraat	houndon	f OID to th		Service I	Date	
			ion or Major Transit Stat		or Transit Stop measured by a sints	a vvair	kable Roule Irom	nearest	boundary (	DI QIP IO III	e outer	boundary		
					ansit Station or a Major Trans	sit Sto	op, measured by a	Walka	ble Route f	rom the nea	rest bo	oundary of		
					the Transit Station or Major T									0
		pportunity are	a (see TCAC/HCD Opp	portunity Ar	rea Maps) or disadvantaged o	commi	unity pursuant to S	Senate	Bill 535 and	l Assembly	Bill 155	50? - 15		
point		b-lf:	In of a Transit Chatian	M-: T-		الماميال	- Davida forms than		la a consideration of	4 OID 4= 4h		h		
			ie of a Transit Station of the or Major Transit Station of the or Major Transit Station of the or a statio	-	ansit Stop measured by a Wa	aikabi	e Route from the i	nearest	boundary o	of QIP to the	e outer	boundary		
	Name	Transit Acce			scaled map showing Transit S	Station	ns or Major Transi	t Stops	and Walka	ole Routes.		Uploaded	to HCD?	
File	Name	TCAC Oppor	tunity Man		TCAC/HCD Opportunity Area		•	cated in	n an area o	f high		Uploaded	to HCD?	
					ion and poverty or low resour			20 1	1					
File	Name	Transit Sche			ervice schedule publicly poste							Uploaded	to HCD?	
Doint	e basad a	n the provimit			portunity and Proximity to owing amenities that exist or							Rural Area		0
					specified on a TCAC/HCD Or					su.		Kulai Alea		0
					ncluding school grounds unles		•			eement be	ween			
				al facilities a	and the school district providing	ng ava	ailability to the ger	neral pu	blic of the s	school grou	nds			0
	or facilities / Name	s)? - 3 or 5 po	ints				Posponsible iu	riadiatio	n					
	Address						Responsible ju	risuictio	WI	State		Zip		
Cont				Title			Phone			Date In	Service			
File l	Name	Park Access		Provide s	scaled map showing distance	to Pa	ırk.					Uploaded	to HCD?	
` '		within what dis	stance from a locally re	cognized E	mployment Center §302(I) w	ith at I				points.				0
	/ Name Address						Responsible ju	risdictio	n	State		7in		
Cont				Title			City Phone			Date In	Service	Zip		
		Employment	Access		scaled map showing distance	to Em						Uploaded	to HCD?	
Entity	/ Name			•			Responsible ju	risdictio	n		•			•
	Address						City			State		Zip		
Cont		within what die	otopoo from a locally ro	Title	Retail Center §302(dd) with at	loost	Phone Phone	21/000	2 or E point	Date In	Service	9		0
` '		Retail Acces			scaled map certified showing				3 OF 3 POILI	.5.		Uploaded	to HCD?	U
					mmunity college that residents				5 points.			- Picaaca		0
	y name						Responsible ju	risdictio	n					
	address						City			State	00	Zip		
Cont	Name	Education A	ccess	Provide s	scaled map showing distance	s to n	Phone	16		Date in	_	Uploaded	to HCD2	
					y that operates to serve resid				3			Piodued	.5 11001	0
` '	y name						Responsible ju	•						
	address						City			State		Zip		
Cont		Casial Camaia	A	Title	pooled man observing a distance	0 to -	Phone Phone			Date in	service		to LICDO	1
riie	Name	Social Service	LE ACCESS		scaled map showing distance sistency with Regional P				Y			Uploaded	IO HCD?	
Point	s awarde	d for each of the	ne followina	Juli	ololonoy with Regional Fi	3	3303(1) - 10 1 011	1410						0
			•	ainable co	mmunities strategy or alterna	tive pl	lanning strategy th	nat has	been deteri	mined by th	e Califo	ornia Air		
<b>(A)</b>	Resources	s Board to ach	ieve the region's green	house gas	emissions target. Consistend	cy with	h such plans must	be den	nonstrated	by a letter o	r resolu	ution		0
'		•		entative fro	om the metropolitan planning	organ	ization, regional tr	ansport	tation agen	cy, planning	, or loc	al		
	uanspulla	tion commissi	οιι - ο μοιιπο											

				QIP Scoring					6/21/21		
(B	reduce gr equivalen points	eenhouse t represent	gas emissions. Evidence of tative from the metropolitan	uired for a region by law, and if the QIP sup f consistency with such plans must be demo planning organization or regional transport	onstrated by a letter or re ation planning agency or	esolution executed by an off local transportation commi	icer of, or an ssion - 5		0		
Not less than 50% of the land area is within a Transit Priority Area evidenced by a letter or resolution executed by an officer of, or an equivalent representative from the metropolitan planning organization, regional transportation planning agency, or local transportation commission - 5 points											
File Name  QIP Consistency  Submit letters or resolutions from the local council of government, metropolitan planning organization or regional transportation planning agency confirming points above.  Uploaded to HCD?											
				Tie Breaker §307(b	)(3); NOFA						
In t	he event tw	o or more	applications have the same	e rating and ranking scores, HCD will apply	tie breaking criteria outlir	ned in the NOFA.	Application	n due date	7/12/21		
(1)	10 bonus p	oints to the	e QIP having the lowest rat	io between the requested grant amount to t	he total allowable maxim	um grant amount per §305.		Ratio=	0.00%		
(2)	If tie still ex	ists, 3 poir	nts to the QIP for each prior	awarded QIP developed by the Applicant t	hat has received a Certif	icate of Occupancy by the	application de	adline .			
De	velopment r	name:			IIG prior NOFA date	Cert. of Occup	date:	0			
De	velopment r	name:			IIG prior NOFA date	Cert. of Occup	date:	0			
Development name: IIG prior NOFA date Cert. of Occup date: 0											
Development name: IIG prior NOFA date Cert. of Occup date: 0											
Development name: IIG prior NOFA date Cert. of Occup date: 0											
De	velopment r	name:			IIG prior NOFA date	Cert. of Occup	date:	0			

				Scoring							6/21/21
				Points Max (po			aded cells)	To	otal QIA Sel	Score	0.00
			Provide signed copies of En	• ( )			Identify name of I	ocality at	l		
File Nam			beginning of document.				•	•	Uploaded	to HCD?	
			QIPs within the QIA is more ication due date, select "Yes		use entitle	ements re	quired for constru		umber of QIPs vithin the QIA?		
(A) The C	IA will have three or more	e QIPs that provide	le a minimum of 250 new or r	ehabilitated housir	ng units an	nd can sec	cure all land use e				
constructi	on within a reasonable pe	eriod of time follow	ving the submittal of the Prog								
	under a Nondiscretionary				1	11.1	J				0
			um of 150 new or rehabilitate ving the submittal of the Prog								
submitted	under a Nondiscretionary	/ Local Approval I	Process 5 points								
			and use approvals, excluding								
	priate local agencies, or c nd Land Use Entitlements		al planning documents. This	information must n	natch the i	informatio	n provided on the	Verificatio	n of the Status	of Enviro	nmental
ixeview a	Required QIP #1 - Ager		Land Use Approval D	ate Approval	Туре		Ty	pe and Co	mments		
					71	Site Plan					-
							nal Use Permits				
						Zoning A Other (sp					
						Other (sp					
						Other (sp	ecify)				
						Other (sp	• • • • • • • • • • • • • • • • • • • •				
						Other (sp					
	QIP #2 - Agency /	Issuer	Land Use Approval D	ate Approval		Other (St	• •	pe and Co	mments		
			pp			Site Plan	Review				
							nal Use Permits				
						Zoning A Other (sp					
						Other (sp	• ,				
						Other (sp	ecify)				
						Other (sp					
						Other (sp					
	QIP #3 - Agency /	Issuer	Land Use Approval D	ate Approval		Other (Sp		pe and Co	mments		
			• •		J.,	Site Plan	Review	•			
							nal Use Permits				
						Zoning A Other (sp					
						Other (sp					
						Other (sp	• • • • • • • • • • • • • • • • • • • •				
						Other (sp					
						Other (sp					
(2) Envir	onmental review status	- 25 points max	(if environmental reviews and	necessary entitle	ments hav			ted to HCI	D by the application	ation due	date,
select "Ye											
` '			r adoption of all necessary er appeals or lawsuits have laps			0	se required under	the CEQA	and NEPA, if		
	·		er or tiered environmental imp				he appropriate age	ency and tl	he		
			ite subsequent projects subje								
	CCR, commencing with §1										0
` '			er or tiered environmental imp ite subsequent projects subje	•	•		• • • •		•		
	CCR, commencing with §1			ot to orivinorimoriti	ai 1011011 c	io odon po		o didoiii ioo,	, Chapter o,		
		of the land area i	s on sites that have been sul	ject to a Phase 1	Site Asses	ssment wi	thin one year prior	r to the app	olication due		
date 5 p		that will trigger N	IFDA2 Describe circumstance	a halawi		If Vo	a antar data of "A	uthoritu to	Llos Cront Fur	do".	
MEFA:	r ederal runding proposed	mac will trigger N	IEPA? Describe circumstance	SO DEIUW.		ii Yes	s, enter date of "A	unonly to	USE GIANT FUR	iu5 .	
050:	Project approved "by-	Is P	roject Categorically	Manage 27 1			Final EIR	Des	cribe special c	rcumstan	ices
CEQA:	right"?		Exempt?	Negative Declara	tion Date:		Date:	belo	-		
		25 points max (	if necessary entitlements from	n the local jurisdict	ion have b	een secu	red and submitted	to HCD b	y the application	on due da	te, select
"Yes" belo		provals for develo	pments within the QIA, have	been granted as	determine	d by a loc	al land use author	ity (e.a. nl	lanning or		
			ator)? identify in table below		40.011111110	a by a loc	ai iaila ase autil0i	, (c.g., pi	anning of		
(B) The d	evelopments within the Q	IA are consistent	with all relevant local plannin	g documents and							0
discretion	ary local land use approve	als have been sul	omitted and deemed complet	e by the appropriat	e local ag	encies? ic	dentify in table bel	ow - 15 po	ints.		

QIA Scoring  (C) The OIP within the OIA is eligible to receive all necessary local land use approvals per a Nondiscretionary Local Approval Process? identify in table below.												
(C) The QIP within the QIA is eligible to receive all necessary local land use approvals per a Nondiscretionary Local Approval Process? identify in table below - 10 points  Provide a listing and status of all discretionary local land use approvals, excluding design review, required to complete QIP that have been granted, submitted or to be applied the appropriate local agencies, or consistent with local planning documents. This information must match the information provided on the Verification of the Status of Environment.												
the	appropriate											
IXCV	icw and Lo	Agency / Issuer	Land Use Approval Date	Appro	val Type		Type and Com	ments				
						Site Plan Review						
						Conditional Use F	Permits					
						Zoning Approval						
						Other (specify) Other (specify)						
						Other (specify)						
						Other (specify)						
						Other (specify)						
						Other (specify)						
` '		funding commitments - 20 points max										
		rces on the Dev Sources worksheet rows 5										
		commitments as a % of total development					Permanent: 0.009		0	0.00		
	Name	mmitments as a % of total development cos	of(s) of permanent financing,				Permanent: 0.00%	6 Points: Uploaded				
		port - 12 points max	n(s) or permanent infancing,	366 3302(	.111)			Opioaueu	to ricu:			
(A) Obtaining a funding commitment(s) from a local public agency(ies) for the QIP or CIP - 12 points (All funding sources on Dev Sources worksheet rows 6 to 24 miles).												
(A) Obtaining a funding commitment(s) from a local public agency(les) for the QIP of CIP - 12 points (All funding sources on Dev Sources worksheet rows 6 to 24 m include "Yes" or "No" regarding whether it is Local Support)												
Total Local Public Agencies Funding Commitment Amount: \$0 CIP Grant Amount \$0 Commitments as % of Grant Amount												
File Name Local EFC #1, #2, etc Proof(s) of local support, see §309(a)(4)(B) Uploaded to												
(6)(A) Prohousing Policies - 8 points max												
Projects located in jurisdictions that have implemented programs over the last five years, which are currently in effect, that finance infrastructure with accompanying increased housing capacity in areas of high segregation and poverty or low resource opportunity area (see TCAC/HCD Opportunity Area Maps) or disadvantaged community pursuant to Senate Bill 535 and Assembly Bill 1550 or provide local financial incentives for housing, including, but not limited to, a local housing trust fund or fee waivers 4 points  Projects located in jurisdictions that have adopted a Nondiscretionary Local Approval Process for residential & mixed-use development in all zones.												
Projects located in jurisdictions that have adopted a Nondiscretionary Local Approval Process for residential & mixed-use development in all zones permitting multifamily housing, established a Workforce Housing Opportunity Zone, as defined in Gov. Code §65620, or a housing sustainability district as defined in Gov. Code §66200 4 points												
(iii) Projects located in jurisdictions that zone more sites for residential development or zoning sites at higher densities than is required to accommodate 150 percent of the minimum regional housing need allocation for the Lower Income allocation in the current housing element cycle 4 points												
(iv)	1. Parking 2. Process 3. Minister 4. Reducti 5. Reducti 6. Reducti 7. No mini 8. Provision	reductions to 0.75 or fewer spaces per acting or impact fee waivers or reductions of rial approval in fewer than 45 days; ion or modifications of development standation or modifications of development standations of affordability; or grapport programs such as a user-friendly	cessory dwelling unit in areas 50% or more; rds for side yard setbacks of rds to two story heights; rds to allow 60% or more lot	s not alrea	dy exempt fro	m parking pursua	nt to Gov. Code §658	52.2;		0		
(v)	Projects lo	ocated in jurisdictions that only use objective vailable fee calculators 4 points	e design standards for multif	amily resid	dential develo	pment or adopt fee	e transparency measu	res, inc.		0		
	Select	aliable lee calculators 4 points	Enter name of source d	II.	of units), tim	ing (reduced numl	e numerically in terms ber of days), developn	nent costs (r	educed c	osts per		
	itegy Type m above)	Strategy Description	and the hyperlink to wl		uriit), erititle	_	g (reduced number of a value of incentives).	appiovais), c	n runuing	(uoliai		
<b>\</b>		Challegy & Societies.	30040 00 30 00.0									
			Affordability §3									
	nts based o	n % of QIA units restricted to occupancy by					(b)(1) pints= 0.00	§310(b)(2) points=	0.00	0.00		
Density §310(c) - 40 Points Max  Points based on extent to which the Net Density of QIA, adjusted by unit size, exceeds the required Net Density §303(c)(4). see Eligibility and Threshold worksheet AJ114 & U15  Density §310(c) - 40 Points Max  Minimum Net Density = 0 % QIA meets or exceeds required Net Density = 0 % Q										0		
		,,,,, g, /// // // // // // // // // // //				- 7		,-				

					QI	A Scori	ng						6/21/21
					Access to Tra	•	` '						
Points	for prox	imity of QIP	to a Transit Station of	or Major Transit	Stop. Distance mu	ust be evi	denced by a s	caled map. Wa	alkable Ro	oute is defined in §3			
Туре			Transit Name			Contact			Phone		Planned Sta Service		
٠,		-	rter mile of a Transit tation or Major Transi		•	asured by	a Walkable Ro	oute from near	est bound	ary of QIP to the o	uter boundary		
(2) Is C	(IP with	in <b>one half</b>	mile of a Transit Stat	ion or a Major	Transit Stop, meas								
	-		Transit Station or Ma	-							area (see		0
		· · · · · ·	rea Maps) or disadva mile of a Transit Stat	_	• •			•			uter boundary		
of the	site of th		tation or Major Transi	t Stop? - 10 po	ints .					,			
File Na	ame	Transit Ac	cess		scaled map showing			•	•		Uploaded	to HCD?	
File Na	ame	TCAC Opp	oortunity Map		CAC/HCD Opport on and poverty or	•	•	•	ed in an ar	ea or nign	Uploaded	to HCD?	
File Na	ame	Transit Sc			ervice schedule purportunity and Pr						Uploaded	to HCD?	
Points	based o	on the proxi	nity or accessibility of					. ,			Rural Area		
			ance to amenities sha								Project?		0
			High or Highest Res										0
` '			distance from a Park	0 (), (	0 0			,	,	· ·			0
•		s)? - 3 or 5	for the parks/recreat	ional facilities a	and the school disti	rict provid	ing avallability	to the general	public of	the school grounds	5		U
Entity I		). 00.0	ponite				Resp	onsible jurisdic	ction				
Site Ac							City			State	Zip		
Contact File Na		Park Acce		Title	soled man shouis	a distance	Phone			Date In Sei		to UCD2	
			distance from a local		caled map showing moloyment Center			full time emplo	ovees? - 3	3 or 5 points	Uploaded	IO HCD?	0
Entity I			alotarios irom a rosa.	.y . 000g00 _	p.oyo come.	. 3002(.)		onsible jurisdic		от о рошног			
Site Ac							City		•	State	Zip		
Contac		Employme	unt Assass	Title	soled man shouis	a distance	Phone	nt Contor		Date In Sei		to UCD2	
File Na Entity I		Employme	ent Access	Provide s	scaled map showing	g distance		onsible jurisdic	ction		Uploaded	IO HCD?	
Site Ac							City	onoisio junicult	otion	State	Zip		
Contac				Title			Phone			Date In Sei	rvice		
			distance from a local						s - 3 or 5	points.			0
File Na		Retail Acc	ess distance from a publi		caled map certified				or 5 points	•	Uploaded	to HCD?	0
Entity i		Within What	distance from a publi	C 3011001 01 COI	illianity conege the	at residen		onsible jurisdic		).			
Site ac							City	,		State	Zip		
Contac				Title			Phone			Date in ser			
File Na		Education	distance from a social		caled map showing				inte		Uploaded	to HCD?	0
Entity i		within what	uistance nom a socia	al service racilit	y that operates to s	SCIVE ICSI		onsible jurisdic					U
Site ac							City	,		State	Zip		
Contac				Title			Phone			Date in ser			
File Na	ame	Social Ser	vice Access		caled map showing				Marr		Uploaded	to HCD?	
Dointe	awarda	d for each o	f the following	Cons	sistency with Re	egionai F	rians 9310(1)	- 10 Points	wax				0
			implementation of a	sustainable cor	mmunities strategy	or alterna	ative planning	strategy that h	as been d	etermined by the C	California Air		
/AN R	esource	s Board to a	achieve the region's g	reenhouse gas	emissions target.	Consisten	cy with such p	lans must be o	demonstra	ated by a letter or re	esolution		0
· / ex		•	r, or an equivalent rep	oresentative fro	m the metropolitar	n planning	organization,	regional transp	oortation a	igency, planning, o	r local		O O
			ssion - 5 points nunities strategy is no	t required for a	ragion by law, and	Lif the OL	\ oupporto o ro	aional plan the	at included	nolicion and prog	rome to		
re			as emissions. Eviden										
			tive from the metropo										0
	ints												
(C)	ot less t om the r	han 50% of netropolitan	land area is within a planning organization	Fransit Priority n, regional trans	Area evidenced by sportation planning	a letter o agency,	r resolution ex or local transp	ecuted by an c ortation commi	officer of, o	or an equivalent re <sub>l</sub> points	presentative		0
File Na		QIA Consi		Letters or	r resolutions from t	he local c	ouncil of gove	rnment, metrop	oolitan pla		Uploaded	to HCD?	
				Tor regiona	al transportation plants Tie Bre		07(b)(3); NO	-	<b>C.</b>				
In the	event tw	o or more a	pplications have the	same rating and			, ,, ,,		ined in the	NOFA.	Application	due date	7/12/21
			QIA having the lowes									Ratio=	0.00%
` '			s to the QIA for each	prior awarded	QIP developed by	the Applic			ficate of C		<del> </del>		
	pment I							or NOFA Date or NOFA Date		Cert. of Occup E		0	
	pment l							or NOFA Date		Cert. of Occup D	_	0	
	pment l						IIG prid	or NOFA Date		Cert. of Occup D		0	0
	pment l							or NOFA Date		Cert. of Occup D	_	0	
Develo	pment l	name:					IIG prid	or NOFA Date		Cert. of Occup D	vare:	0	

	Certification & Legal D	Disclosure	6/21/21
	ts included in this application are, to the best of application on behalf of the entity identified in the identities of interest - of all persons or entities Related Party" to any person or entity that will p	,	
As of the date of application, the Project, or Federal appellate level.	the real property on which the Project is property	osed (Property) is not party to or the subject of any claim or action at the	State or
I have disclosed and described below any c In addition, I acknowledge that all information i			
Printed Name	Title of Signatory	Signature	Date
Filliteu Ivallie	Legal Discle	· · · · · · · · · · · · · · · · · · ·	Date
applicant or joint applicant if the subsidiary is in In addition to each of these entities themselves in the entity, as well as the officers, directors, partnership, and the members or manager who will be executing the bond purchase agree who will be executing the bond purchase agree	nvolved in (for example, as a guarantor) or will s, the term "applicant" shall also include the di principals and senior executives of the entity if its of the entity if the entity is a limited liability of ement. If or each entity and person qualifying as an "a	rect and indirect holders of more than ten percent (10%) of the ownershi the entity is a corporation, the general and limited partners of the entity company. For projects using tax-exempt bonds, it shall also include the in pplicant," or "joint applicant" as defined above.	p interests if the entity
Public entity applicants without an ownership in members, are not required to respond to this quembers of the boards of directors of non-professional states.	questionnaire. fit corporations, including officers of the board	not limited to cities, counties, and joint powers authorities with 100 or mo s, are also not required to respond. However, chief executive officers (Enief financial officers (Treasurers, Chief Financial Officers, or their equiva	xecutive
Civil Matters			
<ol> <li>Has the applicant filed a bankruptcy or receil against in past ten years?</li> </ol>	ivership case or had a bankruptcy or receivers	ship action commenced against it, defaulted on a loan or been foreclosed	1
condition of the applicant's business, or (b) the	e project that is the subject of the application?	il litigation that may materially and adversely affect (a) the financial he applicant within the past ten years that materially and adversely affec	ted
(a) the financial condition of the applicant's bus	siness, or (b) the project that is the subject of	the application?	.eu
state or federal licensing or accreditation agen	cy, a local, state or federal taxing authority, or	vil or administrative proceeding, examination, or investigation by a local, a local, state or federal regulatory or enforcement agency?	
		ling, examination, or investigation by a local, state or federal licensing or ulatory or enforcement agency that resulted in a settlement, decision, or	
	• •	a party to or the subject of, any criminal litigation, proceeding, charge, charges against the applicant?	
		a party to or the subject of, any criminal litigation, proceeding, charge, neanor charges against the applicant for matters relating to the conduct	of
complaint, examination or investigation, of any financial or fraud related crime?	kind, involving, or that could result in, crimina	a party to or the subject of, any criminal litigation, proceeding, charge, il charges (whether felony or misdemeanor) against the applicant for any	
complaint, examination or investigation, of any	kind, that could materially affect the financial	a party to or the subject of, any criminal litigation, proceeding, charge, condition of the applicant's business?	
<ol> <li>Within the past ten years, has the applican</li> <li>Within the past ten years, has the applican</li> </ol>	• •	to the conduct of the applicant's business?	
12. Within the past ten years, has the applican	nt been convicted of any misdemeanor for any	financial or fraud related crime?	
Please provide a letter of explanation if you File Name:   Cert & Legal Explanation	u responded "Yes" to any of the questions  Letter of explanation for any "Yes" answer	•	D?
, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,		

Signature

Date

Title of Signatory

Printed Name

Please o	Application Development Team (ADT) Support Form e complete the "yellow" cells in the form below and email a copy to: AppSupport@hcd.ca.gov. A member of the Application Development Team will respond to your request within ASAP.  me: Date Requested: Application Version Date:												
Full Name	э:			,50		Ap Vers	oplication ion Date:						
Organiza	tion:			Email:		Contact Phone:							
Justificati	on:												
Issue #	Program Name 8	n Tab	Section	Cell#	Update/Comment	Urgency	ADT Status	Status Date					
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		IIG 2021 Upload Document Checklist		6/21/21
File Name:	Site Plan	§308(a)(1) Provide documentation of compliance with certified by a California State-licensed professional such as an engineer, surveyor, or landscape architect.	File uploaded?	0
File Name:	App1 Cert of BIPOC	See Applicant Documents worksheet.	File uploaded?	0
File Name:	App2 Cert of BIPOC	See Applicant Documents worksheet.	File uploaded?	0
File Name:	App1 Cert & Legal	Certification & Legal Disclosure	File uploaded?	0
File Name:	App2 Cert & Legal	Certification & Legal Disclosure	File uploaded?	0
File Name:	App1 Reso	Resolution	File uploaded?	0
File Name:	App2 Reso	Resolution	File uploaded?	0
File Name:	App1 OrgChart	Organizational Chart	File uploaded?	0
File Name:	App2 OrgChart	Organizational Chart	File uploaded?	0
File Name:	App1 Org1, App1 Org2, etc.	Organizational Documents	File uploaded?	0
File Name:	App2 Org1, App2 Org2, etc.	Organizational Documents	File uploaded?	0
File Name:	App1 Signature	Signature Block (Upload in Microsoft Word Document)	File uploaded?	0
File Name:	App2 Signature	Signature Block (Upload in Microsoft Word Document)	File uploaded?	0
File Name:	App1 Payee Data or TIN	Payee Data Record STD-204 or Taxpayer Identification Number (TIN)	File uploaded?	0
File Name:	App2 Payee Data or TIN	Payee Data Record STD-204 or Taxpayer Identification Number (TIN)	File uploaded?	0
File Name:	Utility Allowance	Local housing authority document showing current utility allowance chart, with relevant components circled.	File uploaded?	0
File Name:	Rural Status	TCAC Method for determining Rural status.	File uploaded?	0
File Name:	CIP Integral to QIP	Applicant narrative and documentation evidencing the Locality requiring the CIP.	File uploaded?	0
File Name:	Urban Area	Provide documentation of location in an Urbanized Area.	File uploaded?	0
File Name:	Replacement Housing Plan	Provide the Replacement Housing Plan if there will be replacement units	File uploaded?	0
File Name:	Development Agreement	Agreement executed prior to August 24, 2007 that contains affordability covenants.	File uploaded?	0
File Name:	Relevant Development Plan	Provide, label and attach a copy of the relevant plan showing area designation.	File uploaded?	0
File Name:	Net Density Verification	Provide a minimum density ordinance, recorded binding covenant or date stamped map and letter certified by a California State-licensed professional such as an engineer, surveyor or landscape architect confirming the Net Density.	File uploaded?	0
File Name:	Construction exception	If applicable, label and attach agreement requiring AUs be built as a local approval condition.	File uploaded?	0
File Name:	CIP Site Control	Appropriate documentation to demonstrate the form of Site Control indicated above.	Files uploaded?	0
File Name:	QIP Relocation Plan	Applicants must provide a Relocation Plan or documentation supporting no relocation.	File uploaded?	0
File Name:	Fair Housing Self-Certification	Must provide a self-certification document that is acceptable to HCD certifying that the Occupancy restrictions will be carried out in a manner that is consistent with federal fair housing laws.	File uploaded?	0
File Name:	Market Study	Applicants must provide a completed market study prepared within one year of the application due date.	File uploaded?	0
File Name:	Tax Credit Reservation	If Project has already received a tax credit reservation, attach documentation.	File uploaded?	0
File Name:	Auth to Use Grant Funds	For NEPA only, provide a copy of the HUD 7015.16 "Authority To Use Grant Funds" or clarify the current status of the issuance of the HUD form.	File uploaded?	0
File Name:	Environmental	Provide a copy of all environmental clearances or Notice of Exemption.	File uploaded?	0
QIP Scoring Do				
File Name:	E&L Use	Provide signed copies of Verification of Environmental Review & Land Use Entitlements (Env & Land Use Verification worksheet). Identify name of Locality at beginning of document.	File uploaded?	0
File Name:	Perm EFC #1, #2, etc	Proof(s) of permanent financing, see §302(I)	File uploaded?	0
File Name:	Local EFC #1, #2, etc	Proof(s) of local support, see §309(a)(4)(B)	File uploaded?	0
File Name:	Transit Access	Provide scaled map showing Transit Stations or Major Transit Stops and Walkable Routes.	File uploaded?	0
File Name:	TCAC Opportunity Map	Provide 'TCAC/HCD Opportunity Area Map' showing QIP is located in an area of high segregation	File uploaded?	0
File Norman	Tropoit Cob - dula	and poverty or low resource opportunity area.	File male and a de-	_
File Name:	Transit Schedule	Transit service schedule publicly posted between January 2020 and date of application.	File uploaded?	0
File Name:	Park Access	Provide scaled map showing distance to Park.	File uploaded?	0
File Name:	Employment Access	Provide scaled map showing distance to Employment Center.	File uploaded?	0
File Name:	Retail Access	Provide scaled map certified showing distances to Retail Center.	File uploaded?	0
File Name:	Education	Provide scaled map showing distances to public school/college.	File uploaded?	0
File Name:	SPN or SH	Provide scaled map showing distances to social service facility.	File uploaded?	0
File Name:	QIP Consistency	Submit letters or resolutions from the local council of government, metropolitan planning organization or regional transportation planning agency confirming points above.	File uploaded?	0
QIA Scoring Docs				
File Name:	E&L Use	Provide signed copies of Verification of Environmental Review & Land Use Entitlements (Env & Land Use Verification worksheet). Identify name of Locality at beginning of document.	File uploaded?	0
File Name:	Perm EFC #1, #2, etc	Proof(s) of permanent financing, see §302(I)	File uploaded?	0
File Name:	Local EFC #1, #2, etc	Proof(s) of local support, see §310(a)(5)(B)	File uploaded?	0
File Name:	Transit Access	Provide scaled map showing Transit Stations or Major Transit Stops and Walkable Routes.  Provide 'TCAC/HCD Opportunity Area Map' showing QIP is located in an area of high segregation	File uploaded?	0
File Name:	TCAC Opportunity Map	and poverty or low resource opportunity area.	File uploaded?	0
File Name:	Transit Schedule	Transit service schedule publicly posted between January 2020 and date of application.	File uploaded?	0
File Name:	Park Access	Provide scaled map showing distance to Park.	File uploaded?	0
File Name:	Employment Access	Provide scaled map showing distance to Employment Center.	File uploaded?	0
File Name:	Retail Access	Provide scaled map certified showing distances to Retail Center.	File uploaded?	0
File Name:	Education	Provide scaled map showing distances to public school/college.	File uploaded?	0
File Name:	SPN or SH	Provide scaled map showing distances to social service facility.	File uploaded?	0
File Name:	QIA Consistency	Letters or resolutions from the local council of government, metropolitan planning organization or regional transportation planning agency confirming points above.	File uploaded?	0