



County: **SM County**
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**San Mateo County – Department of Housing
 Application for AHF 5.0 Funds (FY 2017-18)
 Due by 4pm, August 31, 2017**

[Click Here](#) to see the NOFA for AHF 5.0 Funds FY17-18 for San Mateo County.

A. PROJECT SUMMARY INFORMATION

<input type="radio"/> New Construction Multifamily Rental Housing Project <input checked="" type="radio"/> Multifamily Resyndication-Rehabilitation Project			
Project Title:			
Project Address:		City:	Zip:
Project APN:			
Jurisdiction with Planning Entitlements authority:			
Provide a one sentence project summary:			
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>			

1. Funding Request and Unit Information

Total Amount Requested under this NOFA:		Total Project Cost:	
Total Units in Project:	0	Total Units at/below 60%:	0
Number of Extremely Low-Income units (at/below 30% AMI):			0
Number of Very Low-Income units (31% - 35% AMI):			0
Number of Very Low-Income units (36% - 50% AMI):			0
Number of Low-Income units (51% - 60% AMI):			0
Number of Low-Income units (61% - 80% AMI):			0
Number of Units above 80% AMI level:			0
Number of Manager's Units:			0

2. Physical Improvements Summary

a) # of Residential Buildings	
b) # of Stories	
c) # of Parking Spaces (total)	
d) Parking Type (podium, surface, etc.)	
e) Total Livable Space (sq. ft)	
f) Amount of Community Space (sq. ft)	
f) Community Facility Space, if any, not Exclusively for Project Residents (sq. ft.) -- e.g. Senior Center, etc.	
g) Uses of Community Facility Space not Exclusively for Project Residents	
h) Amount of Commercial Space (sq. ft.)	
i) Uses of any Commercial Space	

3. Anticipated Funding Sources - Enter the anticipated sources of capital funding for the Project for both construction and permanent financing periods. As described in Section C.10, for any committed sources, attach commitment letters as **Attachment 13**:

Construction Sources:

Number of lines needed for Construction Sources:

Source	Amount	Committed?	Commitment Date (or anticipated)
Total Amount:	\$0		

Permanent Sources:

Number of lines needed for Permanent Sources:

Source	Amount	Committed?	Commitment Date (or anticipated)
Total Amount:	\$0		

4. Use of Requested AHF Funds - check as many as applicable; indicate the total gap amount in the right column, and the sub-totals needed in the next 12 months, and the period after that to completion:

Check if Yes	Use	Amount to be Used Over the Next 12 Months	Amount to be Used from 13 months to Completion	TOTAL COUNTY GAP FUNDING NEEDED
<input type="checkbox"/>	Site Acquisition			\$0
<input type="checkbox"/>	Off-Site Improvements			\$0
<input type="checkbox"/>	Demolition			\$0
<input type="checkbox"/>	Predevelopment (e.g. Drawings, Engineering, Permits, Legal, etc.)			\$0
<input type="checkbox"/>	New Construction – direct Hard / Soft Costs			\$0
<input type="checkbox"/>	Rehabilitation work – direct Hard/ Soft Costs			\$0
<input type="checkbox"/>	Relocation (Occupants or Businesses)			\$0
Total Amount:				\$0

5. Previously Approved County Funding for this project:

Number of lines needed for Funding Sources:

Source	Amount	FY Approved

B. APPLICANT SUMMARY INFORMATION

Applicant Entity Name:			
Applicant Address:		City/State:	Zip:
Applicant Phone:		Applicant Email:	
Type of Entity:			
Federal EIN/TIN #:			
Contact Person:		Contact Title:	
Contact Phone:		Contact Email:	jag150s@yahoo.com
Company/Agency Director Name:		Title:	
Name of Person Authorized to Execute Legal Documents with the County for this Project			
Name:		Title:	

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C. DETAILED PROJECT INFORMATION

1. Project Description. Provide a concise narrative of the project addressing the following areas:

1.a. Brief descriptive summary of the project.

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1.b. Identify the specific NOFA strategic priorities from Section II of the NOFA Overview and Funding Guidelines that your project meets:

↑
↓

1.c. Brief description of project amenities e.g. common space for residents; space for case managers and services providers to meet confidentially with clients; laundry facilities; space for classes, etc.:

1.d. Proximity to transit and services, e.g. public transit options, shopping and other neighborhood services, and whether site is located in a walkable area:

1.e. Please specify how you will address accessibility in terms of units and the project overall:

1.f. Please briefly describe the project's history leading to this request. Include such information as when site control was achieved; when the site was acquired or will be acquired; any previous requests for County funding (and whether successful); changes in the project since those requests were made; attempts to secure other financing; how the current project concept was conceived; and any other relevant information about the history of the project:

1.g. Please describe how the requested AHF funding will allow you to move closer to construction closing. Describe how and when the funding will allow you to close, if applicable. If the funds do not directly lead to a construction start, describe the intended use of the funds and when you expect to utilize them.

2. Structure /Roles. Fill in the table below on your project development and post-development structure. ***Note:** if Sponsor/Applicant is different from Developer, please provide a brief explanation here for how the parties are related:

Project Role	Name of Entity & Relationship to Sponsor/Applicant
Sponsor/Applicant:	
Developer:	
Owner:	
Property Management:	
Resident Services Agency:	

Brief Explanation (if necessary):

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3. Tenant population.

Indicate the proposed tenancy for the Project, including any units targeted to persons who are homeless, persons with disabilities/special needs, etc. (percentages may add up to greater than 100%):

Number of lines needed for Tenant Populations:

Tenant Population(s)	Anticipated No. of Units	% of Total Units
	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	

4. General Resident Services / Supportive Services

General Resident Services: Briefly summarize the types of overall resident services that will be provided:

General Services budget (pupa): Services Coordinator (%FTE):

Supportive Services for Supportive Housing Units: Briefly describe the types of supportive services to be made available (on- or off-site) to those in need of such services *that extend beyond the general resident services:*

Supportive Services Provider(s) for any Supportive Housing units: Please indicate which provider(s) will provide Supportive Housing services. If the specific provider(s) are not known at this time, indicate the general type

of supportive housing provider(s) that will be utilized and how/when you intend to identify provider(s):

How will Supportive Services be paid for?

Supportive Services budget :

5. Rents. Indicate the estimated monthly rent levels by income category before deduction of utility allowances:

Number of lines needed for Rents:

Income Category	Studio		1BR		2BR		3BR	
	Units	Rent	Units	Rent	Units	Rent	Units	Rent
% of AMI								
% of AMI								
% of AMI								
% of AMI								
% of AMI								
% of AMI								
Manager's Unit(s)								
Estimated Utility Allowance for Affordable Units								

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6. Affordability Restrictions. If the County provides AHF funds to your project, an affordability term will be required as described in the *NOFA Overview and Funding Guidelines*. Describe any affordability restrictions that will/may be imposed by other funding sources:

7. Developer Team Information Submit **Attachment 4**, specifying the names, experience, and roles and responsibilities, of each Developer Team member. Indicate the percentage of time each person will work on the Project.

8. Experience and Capacity of Key Parties. Briefly describe the experience and capacity of key project parties, including the Developer, Property Manager, and Service Provider(s). **[Note :** you will also need to submit **Attachment 5**, providing evidence that Developer meets the Developer Experience threshold criteria as described in Sec. V. (B.) of the *NOFA Overview & Funding Guidelines*]:

9. Project Schedule/Timeline. Briefly describe below the major project milestones that have been accomplished to date, and remaining major milestones (and anticipated dates) until project completion. **[Note:** you will also need to provide a table as Attachment 9, which lists all major project milestones, entitlement submissions/approvals, financing submissions/approvals, construction start/completion dates, etc. The table must indicate the status and actual or projected approval/completion dates.]:

10. Anticipated / Approved Financing Commitments Briefly describe below any anticipated or approved financing commitments provided by (a) the local jurisdiction or (b) another entity. **[Note:** you will need to provide any financing commitment letters, if any, as **Attachment 13**]:

11. Anticipated/ Approved Land Donation or Below-Market-Rate Land Provision. Briefly describe below any anticipated or approved land donation, or provision of below-market-rate land transfer or ground lease, provided by (a) the local jurisdiction or (b) another entity. **[Note:** you will need to provide evidence of such land donation or

land cost write-down, if any, as **Attachment 14**:

12. Anticipated / Approved Cost-Saving Incentives from the Local Jurisdiction Briefly describe whether the local jurisdiction with entitlement authority for the Project has provided, or is anticipated to provide the Project, one or more cost-saving incentives, such as fee reductions or waivers, by-right zoning, density bonus, parking requirement reduction, or other such cost-saving incentive. **[Note: you will need to provide evidence for such approved or anticipated cost-saving incentives, if any, as Attachment 15]:**

13. City Fees. Using the chart below, list any City/jurisdiction fees (in-lieu, impact, permitting, planning, park, other city/jurisdiction fees), confirmed or anticipated to be paid. This list should not include fees charged by other entities, such as a school district. If a fee waiver or reduction has been granted, or is anticipated, enter the fee amount with and without the reduction/waiver. If no waiver or reduction is anticipated for a given fee, enter the same amount in both columns. The sum of the fees listed in the "Amount with Reduction/Waiver" column should equate to the cost of City fees included in the Project development budget. Use the space below the table to explain any issues.

Number of lines needed for City Fees:

City Fee	Amount without Reduction/Waiver	Amount with Reduction/Waiver

Explain any issues:

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14. Section 3 Requirements. Although AHF 5.0 funds do not include federal funds, the Department of Housing encourages Developers to make an effort to comply with the federal Section 3 requirements. Therefore, please briefly describe below whether Developer meets the Section 3 requirements of the Housing & Urban Development Act of 1968 (12 U.S.C. 1701u) (Section 3) by having either: (a) a Section 3 plan, or (b) a history of meeting Section 3 requirements **[Note: if available, submit a Sec. 3 Plan as Attachment 20]:**

D. SITE/ RELOCATION INFORMATION.

1. Property information:

Number of lines needed for APNs:

Parcel (APN)	Street Address	City

Census Tract:	Find Census Tracts: Click Here
Total acreage:	
Is the site, or any part of it, within a 100-year floodplain?	<input type="radio"/> Yes <input type="radio"/> No FEMA Floodzone map If yes, explain:
List FIRM Map number:	

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2. Site Location. Submit a site location map as **Attachment 8**.

3. Appraisal. If Project involves site acquisition please submit, as **Attachment 16**, an appraisal obtained within the past 12 months. **Note:** *If no appraisal is available and site acquisition is part of the Project, please explain below when an appraisal will be obtained.*

4. Current use of the site. Briefly describe below the current use of the site:

5. Status of Site Control: Please identify below the Applicant's form of site control, which means the Applicant has obtained an enforceable right to use a parcel of land for the proposed development prior to submission of this application, such as fee title, purchase agreement, ground lease, or enforceable option agreement) and dates of any key expirations (e.g. when an option agreement expires) and applicant's current access to each parcel **[Note:** you will need to submit evidence of Site Control as **Attachment 6**, and Preliminary Title Report as **Attachment 7**].

6. Relocation of Residential or Commercial Occupants Describe whether the Project will involve relocation of residential or commercial occupants and explain status of these activities below: **[Note:** If relocation is necessary, please submit Relocation Plan as **Attachment 21**]

E. DETAILED FINANCING INFORMATION

1. Development Budget Narrative. Submit, as **Attachment 10**, a brief narrative describing committed or anticipated construction and permanent sources, attempts to leverage County funds to the greatest degree possible, and considerations for including 4% or 9% tax credit financing scenarios for the Project. Include also a discussion of the applicability of Affordable Housing and Sustainable Communities funding for the Project and the status of any applications for AHSC funding. If you do not expect to apply for AHSC funding, provide your reasoning for excluding it as a financing source. If multiple financing scenarios are currently under consideration, describe the variables, what information you expect will lead to the determination of the final financing plan, and your expectations for the outcome.

2. Development Budget. Submit, as **Attachment 11**, a Development Financial Proforma, including itemized development budget, construction and permanent sources and uses table, year 1 income projection with unit breakdown by AMI level and size, year 1 operating expense projections (including services), loan sizing worksheet, and tax credit assumptions with basis calculation and equity raise expectations.

3. Operating Budget. Submit, as **Attachment 12** a 30-year cash flow projection showing estimated project income, operating expenses (including services), reserves, debt service and distributions.

Attachment Checklist

[\(Upload Instructions\)](#)

ALL pre-checked attachments below (#1-12) are REQUIRED in order to submit your application, and your application WILL NOT be submitted with missing REQUIRED attachments! Please take this into consideration when timing your submission of this application. Attachments #13-23 are to be submitted if applicable/available. Please check the appropriate box if you are submitting any of these optional attachments. If you have other attachments you would like to include, please check one of the "Other" boxes below and identify the Attachment in the box. If required attachments are unavailable or you have questions about the attachment, please contact Ray Hodges at rhodges@smchousing.org. If you have technical problems with the attachments or any part of this application, please contact Chris Davidson at 415.572.4572.

- 1. IRS Determination Letter for 501(c)(3) tax-exempt status (non-profits only)**
- 2. Financial Information:** (a) Borrower's Financial Statements for last two (2) years; (b) most recent completed final audit report available; (c) IRS Form 990 for most recent tax year.
- Attached

- Submitted to Department of Housing within the past 7 months
- 3. **Corporate Borrowing Resolution** authorizing submission of this funding application, **OR** an explanation of when you anticipate receiving such authorization and sending to the County (*authorization may be submitted within 30 days after application submission due date*)
- 4. **Development Team Information:** Specify the names, experience, responsibilities, and roles of each Development Team member. Indicate the percentage of time each person will work on the Project.
- 5. **Evidence of Developer Experience** (see Sec. V. (B.) in the *AHF NOFA Overview and Funding Guidelines*)
- 6. **Evidence of Site Control.** (see Sec. VI (A.) and (B.) in *AHF NOFA Overview and Funding Guidelines*)
- 7. **Preliminary Title Report.** Provide a copy of the most recent title policy or title report (issued within the past 6 months)
- 8. **Site Location Map.**
- 9. **Project Schedule/ Timeline.** Provide a project schedule with three columns: the first lists all major milestones, entitlement submissions/approvals, financing submissions/approvals, construction start/completion dates, occupancy, etc.; the second indicates the status for each item; and the third indicates the date for anticipated or actual approval/completion.
- 10. **Development Budget Narrative.** Provide a narrative describing committed or anticipated construction and permanent sources, attempts to leverage County funds to the greatest degree possible, and considerations for including 4% or 9% tax credit financing scenarios for the Project. Include also a discussion of the applicability of Affordable Housing and Sustainable Communities funding for the Project and the status of any applications for AHSC funding. If you do not expect to apply for AHSC funding, provide your reasoning for excluding it as a financing source. If multiple financing scenarios are currently under consideration, describe the variables, what information you expect will lead to the determination of the final financing plan, and your expectation for the outcome.
- 11. **Financial Proforma. Using your own format,** provide: Major categories of Sources & Uses by Development phase, Itemized [ssf.txt](#) Development Budget, Detailed Income and Unit Breakdown by AMI level and bedroom size, Operating Expenses, Loan Sizing, and Tax Credit assumptions. **If your financial proforma indicates the use of Sec. 8 Project-Based vouchers which have NOT be committed, you MUST ALSO submit a second proforma showing NO Project-Based vouchers.**
- 12. **30-Year Cash Flow Projection for Project, using your own format.**

OTHER ATTACHMENTS – items to be submitted if applicable / available:

- 13. **Financing Commitment Letters, if any**
- 14. **Evidence, if any, of Land Donation or Provision of Below-Market-Rate Land**
- 15. **Evidence, if any, of Local Jurisdiction Commitment to grant the Project one or more Cost-Saving Incentives,** such as fee reductions or waivers, by-right zoning, density bonus, parking requirement reduction, or other such cost-saving incentive.
- 16. **Appraisal, obtained within the last 12 months, if Project involves property acquisition, whether or not County of San Mateo funds will be used for this purpose.**
- 17. **Environmental Clearances/Reports, if available.**
- 18. **Architectural:** Site Plan and Elevations, Schematic Drawing, *if available (ok on legal-size sheet)*
- 19. **Construction Estimate.** Provide copies of any construction bids/estimates obtained, *if available.*
- 20. **HUD Section 3 Plan, if available.**
- 21. **Relocation Plan, if the proposed project will require relocation of residential or commercial tenants other than yourself.** If relocation plan is not yet available, please indicate when you will provide.
- 22. Other -
- 23. Other -

[Click here to go to the Upload Documents page](#) (Your application will be saved)

This application was prepared by:

Name: Title: Email:

Please check your application carefully before submission. All questions **must** be answered, and incomplete or missing answers will adversely affect consideration of your application.

I/We certify that the information and statements submitted in and attached to this application, are true, accurate and complete to the best of my/our knowledge. I/We authorize the Department of Housing to verify any information pertaining to this application. I/We acknowledge and understand that if facts and/or information herein are found to be misrepresented, it may constitute grounds for rejection of the application or default of the allocation for which this application is being made.

This application must be filled out and submitted electronically.
Please fill in all applicable boxes above, enter your name, and click the "Submit Application" button

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