2021 Request for Homekey Proposals



City of Oakland

Department of Housing and Community Development

Release Date: October 18, 2021

Table of Contents

l.	RFP Timeline	2
II.	Application Process and Pre-Application Meeting	3
III.	State Homekey Program Guidelines	3
IV.	City Capital and Operating Subsidy Guidelines	4
V.	City Program Guidelines	6
VI.	RFP Submittal Requirements	9
VII.	Project Scoring	11
VIII.	City Rules	12
IX.	Questions	13
X.	Relevant Definitions from State Homekey NOFA	13
EXH	IBITS	15
Exhi	ibit A: Required City Certifications	15
Exhi	ibit B: Homekey Workbook (20 pages)	18
Exhi	ibit C: City Workbook (6 pages)	19
Exhi	ibit D: Homekey and City Insurance Requirements (3 pages)	20
Exhi	ibit E: Qualified Teams Eligible to Apply to This RFP (1 page)	21

2021 City of Oakland Request for Homekey Proposals

The City of Oakland Department of Housing and Community Development (City) is seeking Request for Proposals (RFP) for permanent and/or interim affordable housing for homeless and formerly homeless individuals and households. Only teams that were qualified through the City's previous 2021 Homekey Request for Qualifications (RFQ) process are eligible to submit proposals through this RFP. Qualified teams ("Teams") are posted on the City's website and included in Exhibit E.¹

Teams seeking to be the City's co-applicant on a Homekey project must complete the application described below, including all supporting documentation. Applications must be submitted into the City's Homekey RFP portal https://www.oaklandca.gov/topics/city-homekey no later than 4:00 p.m. on Thursday, November 18, 2021. No email or hard copy submittals will be accepted. Applications submitted after this deadline will not be accepted.

The following City housing values and priorities guide the scoring priorities for this NOFA:

- 1. A commitment to advancing racial equity;
- 2. A commitment to assist housing projects that target homeless households; and
- 3. A commitment to provide housing for persons experiencing homelessness or At Risk of Homelessness, and who are, thereby, inherently impacted by or at increased risk for medical diseases or conditions due to the COVID-19 pandemic.²

I. RFP Timeline

September 9, 2021	State Homekey NOFA released
September 30, 2021	State Homekey NOFA application available
October 18, 2021	City of Oakland Homekey RFP released
October 25, 2021 at	City of Oakland Homekey RFP Q&A meeting
2:00PM	
November 18, 2021 at	Oakland RFP Proposals due to City via City website application portal
4:00PM	https://www.oaklandca.gov/topics/city-homekey
Early December 2021	City schedules State Pre-Application Consultation and Technical
	Assistance for top scoring RFP projects
December 7, 2021	City Council meeting – general approval of City submitting Homekey
	applications
December 13, 2021 -	City submits approved project applications to State Homekey program.
January 15, 2022	
January 2022	City Council meeting – project-specific approvals
January 31, 2022	Final day to submit Homekey application within geographic set-asides
	and within period for timely submission of application bonus award. City
	intends to submit all Oakland applications by this date.
February-March 2022	State makes award determinations for Oakland applications
October-November 2022	Homekey capital funding must be expended within 8 months of award

¹ Qualified teams are listed in Exhibit E and on the City's website here: https://s3.us-west-2.amazonaws.com/cao-94612/general-images/Memo-Homekey-RFQ-Summary-9-30-21.pdf

² Homeless or who are At Risk of Homelessness, as defined in 24 CFR part 578.3. https://homekey.hcd.ca.gov/sites/default/files/2021-09/NOFA Homekey 0.pdf

State Homekey NOFA Schedule Requirements

Project timelines:

- 1. Projects must complete all applicable construction and/or rehabilitation within 12 months of the date of State Homekey award.
- 2. All projects shall achieve a full occupancy (fully occupied with consideration for an average of 10% vacancy rate at any given time) within 90 days of construction/rehabilitation completion.
- 3. Homekey is offering an incentive for projects that reach full occupancy within eight months (evidenced by rent roll): \$10,000 per Homekey unit of additional operating subsidy.

Spending timelines:

- 1. Homekey may reimburse eligible costs incurred beginning on March 3, 2021.
- 2. Applications submitted to the State before January 31, 2022 will receive an additional \$10,000 per Homekey unit for capital or operating costs as bonus for timely submission of complete application. The City intends to submit all City applications no later than December 30, 2021 and expects the bonus to be applied towards operating costs.
- 3. All Homekey capital funds must be <u>expended within eight months of the date of state Homekey</u> award.
- 4. All Homekey operating funds must be fully expended by the grantee by June 30, 2026.

II. Application Process and Pre-Application Meeting

Applications must be submitted through the City's Homekey website. Paper or e-mail applications will not be accepted. See the City's Homekey website for application portal: https://www.oaklandca.gov/topics/city-homekey

Teams are strongly encouraged to attend a pre-application meeting via video conference on October 25, 2021 at 2:00PM. City Housing staff will review the online application process and be available for questions. Planning staff and Contracts and Compliance staff will be available for questions. The recording will be posted on the City's Homekey website afterwards. See below for Zoom meeting call-in info:

City of Oakland Homekey RFP Pre-Application Meeting

Monday, October 25, 2021 at 2:00PM

Zoom Meeting Link: https://us02web.zoom.us/j/3202776725

Meeting ID: 320 277 6725

One tap mobile

+16699009128,,3202776725# US (San Jose)

Dial by your location

+1 669 900 9128 US (San Jose)

III. State Homekey Program Guidelines

On September 9, 2021, the State issued the Homekey Program Notice of Funding Availability, Round 2 (State Homekey NOFA).³ The State Homekey NOFA makes \$1.45 billion available: \$1.2 billion from the

³ https://homekey.hcd.ca.gov/ https://homekey.hcd.ca.gov/sites/default/files/2021-09/NOFA Homekey 0.pdf

Coronavirus State Fiscal Recovery Fund established by the federal American Rescue Plan Act of 2021 (ARPA) and \$250 million from the State General Fund. California HCD will be accepting the applications on a continuous, over-the-counter basis until May 2, 2022, or until the available funds are exhausted, whichever occurs first.

As an eligible applicant to the State Homekey NOFA, the City intends to apply jointly with RFQ-qualified Teams as co-applicants for projects selected through this RFP. The State Homekey NOFA includes a California Environmental Quality Act (CEQA) exemption set forth at Health and Safety Code (HSC) section 50675.1.4 and the provision for land use consistency and conformity set forth at HSC section 50675.1.3, subdivision (i). Although the Homekey CEQA exemption is largely limited to existing buildings, the State has identified alternate streamlining pathways that the City encourages Teams to explore.⁴

Homekey Eligible Projects:

The State and City will consider a variety of innovative housing solutions. Awarded funds must be used to provide permanent or interim housing for individuals and families experiencing homelessness. The State has established a set-aside of funds for housing serving homeless youth and youth at risk of homelessness.

Eligible Homekey uses may include:

- Acquisition with or without rehabilitation of motels, hotels, hostels, or other sites and assets, including apartments or homes, adult residential facilities, residential care facilities for the elderly, manufactured housing, commercial properties, and other buildings with existing uses that could be converted to permanent or interim housing.
- Master leasing of properties for non-congregate housing.
- Conversion of units from nonresidential to residential.
- New construction of dwelling units.
- The purchase of affordability covenants and restrictions for units.
- Relocation costs for individuals who are being displaced as a result of the Homekey project.
- Capitalized operating subsidies for units purchased, converted, constructed, or altered with funds awarded under the Homekey Round 2 NOFA for FY 2021-22.
- Existing Homekey projects awarded under the 2020 Homekey round are ineligible for this RFP and the State Homekey NOFA.

IV. City Capital and Operating Subsidy Guidelines

The City understands that most projects will seek local capital subsidy to meet Homekey match requirements and to achieve project feasibility. This match requirement will be a limiting factor for the number of Homekey applications that the City will ultimately support and submit to the State.

1. **Capital Subsidy:** The City expects to dedicate at least \$10,000,000 of City funds as capital match for eligible Homekey projects, comprised of funds from the City's allocation of HOME funds through the American Rescue Plan (HOME-ARP), Measure KK, CDBG-CV, and the City's Affordable Housing Trust Fund.

⁴ In addition to guidelines in the Homekey NOFA, the State has issued a CEQA Exemption Q&A here: https://homekey.hcd.ca.gov/sites/default/files/2021-09/CEQA%20Exemption%20in%20AB%20140%20-%20Questions%20%26%20Answers.pdf

- a. HOME-ARP and CDBG-CV funds are subject to National Environmental Protection Act (NEPA) per HUD's implementing regulations at 24 CFR part 58.⁵ Please see City Program Guidelines below for more details.
- b. Measure KK funds may only be used for permanent housing.
- 2. The City and State recognize that any homeless housing project will require operating subsidy. This RFP identifies the following as potential sources of operating subsidy for Oakland Homekey projects:
 - a. Homekey Operating Subsidy: 3 years + potential bonuses
 - i. The State Homekey NOFA may provide up to three years of capitalized operating subsidy at a rate of \$1,000 per unit per month for most Homekey units, and \$1,400 per unit per month for units serving chronically homeless or homeless youth. These subsidy rates are included in the State's application workbook.
 - ii. **Timely Submission of Application Bonus**: State Homekey will award an additional \$10,000 per Homekey unit as a bonus award for each project with a timely submission of a complete application to State HCD by January 31, 2022. This bonus may be used for either operating or capital expenses. The City intends to submit all its applications by January 31, 2022, and will guide projects to apply the \$10,000 per unit bonus award towards operating expenses.
 - iii. **Expedited Occupancy Bonus**: State Homekey will award \$10,000 per Homekey unit as a conditional bonus amount for achieving full occupancy (with 10% vacancy) within eight (8) months of the date of award. This bonus award can be used for operating costs only. The City may prioritize projects that can feasibly commit to this expedited occupancy timeline.
 - b. The City expects to dedicate City's HHAP funds towards capitalized operating subsidy for Homekey projects. Please see instructions in Section VI for application proforma guidance.
 - c. Please do not assume that your project will have access to Project-Based Section 8.

 RFP proposal budgets should not include Project-Based Vouchers (PBVs). The City of Oakland does not award PBVs. The Oakland Housing Authority (OHA) awards and administers PBVs. The City will notify OHA of projects successfully awarded through this RFP, and OHA will evaluate projects for potential funding awards based on its priorities, established process, and funding availability. If PBVs or other resources are available, OHA may rely on this RFP process to award them.
 - d. The City may prioritize projects that have secured alternative sources of operating subsidy to those listed above.

⁵ <u>eCFR</u> :: 24 CFR Part 58 -- Environmental Review Procedures for Entities Assuming HUD Environmental Responsibilities

V. City Program Guidelines

Based on the State Homekey NOFA, the City has established the following conditions to the City Homekey Program.

- Only Teams that were qualified under the previous City of Oakland Homekey RFQ are eligible to apply to this RFP. Additions to the original qualified Team organizations are allowed, but substitutions are prohibited.
- 2. **Only one project per Team will be considered under this RFP.** Please put forth your strongest proposal for City consideration.
- 3. Through the City Homekey RFQ, a list of available properties has been posted for your information. Please see the City's Homekey website for the most current list of properties offered by sellers, as well as a list of City-owned sites that may be suitable for Homekey proposals.⁶
- 4. The City will not directly acquire any new Homekey properties, but will continue to own any City-owned sites. Teams must acquire, own, develop, and manage the proposed properties. The City's role will be limited to co-applying for Homekey funding, granting funds to project Teams, and enforcing the regulatory agreement. Any proposals on a City-owned site should assume that the City will retain ownership and enter into a long-term ground lease or license agreement for use of the site.
- 5. Because Homekey units or rooms must serve homeless or formerly homeless households, income and rent levels cannot exceed 30% of Area Median Income (AMI).

Proposed projects that <u>are not</u> requesting City subsidy should assume the following Multifamily Tax Subsidy Project (MTSP) income and rent limits adopted by the State Homekey program:⁷

2021 MTSP Regular Income Limits											
Household (HH) Size ⁸	1 person	2 persons	3 persons	4 persons	5 persons						
Income Limit	\$28,770	\$32,880	\$36,990	\$41,100	\$44,400						

2021 MTSP Regular Rent Limits											
Bedroom Size	SRO	0 BR	1 BR	2 BR	3 BR						
Rent Limit	n/a	\$719	\$770	\$924	\$1068						

Proposed projects that <u>are</u> requesting City matching funds should assume the following income and rent limits prescribed by Sections 50053 and 50052.5 of the California Health and Safety Code:

⁶ Seller Interest Form Responses as of October 6, 2021: https://s3.us-west-2.amazonaws.com/cao-94612/general-images/Seller-Interest-Form-Responses-as-of-October-6th.pdf

City Owned sites: https://cao-94612.s3.amazonaws.com/documents/Attachment-A-City-Surplus-Land-Sites-6-21-21.pdf

⁷ Pursuant to California Health and Safety Code Section 50675.1.3

⁸ https://www.oaklandca.gov/resources/rent-and-income-limits-for-affordable-housing

2021 Official State Income Limits (Use if Local Funds Anticipated)												
Household (HH) Size ⁹	1 person	2 persons	3 persons	4 persons	5 persons							
Income Limit	\$28,800	\$32,900	\$37,000	\$41,100	\$44,400							

2021 Rent Limits (Use if Local Funds Anticipated)											
Bedroom Size	SRO	0 BR	1 BR	2 BR	3 BR						
Rent Limit	\$494	\$659	\$753	\$847	\$942						

Through this program, the City is seeking to expand the supply of deeply affordable units, which includes both permanent supportive housing with services as well as extremely low-income housing with light touch services or service coordination only. However, because the incomes of Oakland residents currently in the Coordinated Entry System are typically well below 30% of AMI, the City may prioritize projects that restrict rents to 30% of tenants' income with very low or no minimum income requirements.

- 6. Although the State's Homekey NOFA does not require an entire project to be comprised of Homekey units, the City will prioritize projects with fully vacant units that will be quickly available for homeless Oakland residents. Further, the City will not consider projects that require permanent relocation of any existing tenants.
- 7. The City and Team will be co-applicants to the State for Homekey funding. The Team will prepare all application materials for City review, and when approved, the City will upload and submit the application through the Homekey portal. If awarded, the State will execute a Standard Agreement with both co-applicants. The City's Department of Housing and Community Development (HCD) will serve as the main point of contact for selected projects and Teams, including preparing for City Council approvals, funding the project, and ensuring expected Homekey program outcomes are met.
- 8. **The City will record a regulatory agreement against the project property** that will restrict rents and occupancy and enforce other Homekey and City operational requirements. Please note that the City will not subordinate the priority of its regulatory agreement to private financing.

The term of the regulatory agreement must be at least:

- a. 55 years for permanent affordable housing projects
- b. 15 years for interim/transitional housing projects
- c. 15 years for the purchase of affordability covenants and restrictions for existing residential units, or for master leasing projects.
- 9. The State may require that Homekey funds be provided as grants, as was required under the **2020** Homekey NOFA. Under this structure, the City will accept the Homekey grant capital and

⁹ https://www.oaklandca.gov/resources/rent-and-income-limits-for-affordable-housing

operating funds, combine those funds with local matching subsidy, and enter into a single recoverable grant agreement with the Developer/Owner organization of the Team.

- a. Under this grant structure, for-profit partners will likely require a nonprofit partner in the ownership structure to feasibly accept the grant. (Please note that project Teams are responsible for determining the tax implications of receiving grant funds.)
- b. The City will secure the grant and the performance of grant covenants with a deed of trust recorded against the property.
- 10. The City supports Teams accessing the CEQA and land use streamlining tools provided by the State Homekey NOFA, and expect Teams to seek counsel for legal advice in applying the exemptions and obligations to their projects. Teams will be responsible for compliance with the applicable Skilled and Trained Workforce and Prevailing Wage requirements of the Homekey program.
- 11. **NEPA:** Projects that are awarded CDBG-CV or HOME-ARP must be assessed in accordance with the National Environmental Policy Act of 1960 (NEPA) prior to grant closing. Teams must sign a certification that they understand this restriction (see Exhibit A).
 - a. Choice-Limiting Actions Prohibited During NEPA Review. Teams must refrain from undertaking activities that would have an adverse environmental impact or would otherwise limit the choice of reasonable alternatives between the time of application submittal and when the City has completed its environmental review process. Such activities include acquiring, rehabilitating, converting, leasing, repairing or constructing property, any kind of site preparation, or committing or expending HUD or non-Federal funds for program activities with respect to any project eligible under this NOFA. The prohibition against choice-limiting actions begins on the date that the application is submitted to the City.
 - b. If the Team has entered into a purchase agreement or contract for any of the above activities prior to applying for NOFA funds, work may continue pursuant to that contract. But amendments to the contract or new contracts may not be entered into. CDBG-CV or HOME-ARP funds may not be used to reimburse a Team for project related costs incurred after the Team has submitted the application for funding and before the completion of the City's environmental review process except for activities that are excluded and not subject to federal environmental review requirements, and for certain relocation costs.
 - c. Teams may be required to hire a NEPA consultant to work with City Planning staff to complete a NEPA review. Completing the NEPA review, including local and federal noticing periods, takes a minimum of 8-12 weeks after receipt of all necessary information. Development budgets should include NEPA consultant costs.
- 12. Other Federal Requirements: The following federal statutes and laws may apply:
 - a. Section 3 of the U.S. Housing Act of 1968, as amended
 - b. Equal Opportunity and related requirements in 24 CFR Section 982.53
 - c. Section 504 of the Rehabilitation Act of 1973
 - d. Americans with Disabilities Act of 1990

- e. Architectural Barriers Act of 1968
- f. Fair Housing Act of 1988
- g. National Environmental Protection Act (NEPA)
- h. Federal prevailing wage requirements (please note that projects will be required to meet the higher of Federal or State prevailing wage requirements).
- 13. **Contract Compliance**: Teams must comply with the following City of Oakland employment and contracting programs:
 - a. Fifty percent (50%) Local and Small Local For Profit and Not For Profit Business Enterprise Program (L/SLBE) for construction contracts in the amount of \$50,000 or greater and professional services contracts in the amount of \$100,000 or greater
 - b. Fifty percent (50%) Local Employment Program
 - c. Fifteen percent (15%) Oakland Apprenticeship Program for construction contracts in the amount of \$15,000 or greater
 - d. Payment of State prevailing wages (Homekey and City requirement)
 - e. If awarded HOME-ARP or CDBG-CV funds, payment of Federal Davis-Bacon prevailing wages
 - f. City of Oakland Living Wage Ordinance
 - g. City of Oakland Equal Benefits Ordinance
 - h. Electronic Certified Payroll Submittals

More information can be found at the City of Oakland's website at https://www.oaklandca.gov/departments/workplace-employment-standards

If a project receives a funding commitment through this RFP and rehabilitation is part of the project, Teams are required to meet with Contract Compliance staff and contractors (if applicable) before the grant closes. Please contact Vivian Inman (vinman@oaklandca.gov) for more information.

14. **Maximum Developer Fee:** The maximum allowable developer fee for permanent affordable housing is the lesser of 10% of total development cost or \$1,000,000. Teams may request all or a portion of the developer fee at their discretion; developer fee is not a requirement. Higher limits may be considered for new construction project proposals on a case-by-case basis. Developer fee may be further restricted for transitional housing proposals at the City's discretion.

VI. RFP Submittal Requirements

To be considered complete, proposals in response to this RFP must include the following components. Failure to complete applicable worksheets will be recorded as a "0" for the applicable scoring category.

- 1. Enter following project info on City website:
 - a. Project Team (RFQ application number, lead contact)
 - b. Project address
 - c. Project type
 - d. Number of total units
 - e. Number of homeless units

- f. Target population(s) If relevant, please include additional details about proposed eligibility (e.g. minimum income levels, ability to live in shared housing, level of on-site supportive services required, etc.)
- g. Amount of capital match requested
- h. Amount of capitalized local operating subsidy requested for up to Year 15 of operations.

2. Required uploads

- a. Copy of applicable site control document, e.g. LOI or purchase contract.
- b. MOU or joint venture agreement between developer/owner partners: If the Team is a joint venture, an executed joint venture agreement is required, clearly describing the roles and responsibilities of each partner, and identifying who is the lead partner, or if the responsibilities are approximately equally split between the partners. If not applicable, select "N/A".
- c. Organizational chart of <u>partnership or joint venture</u> that features ownership percentages and roles & responsibilities. Not applicable for single entity Teams.
- d. Audited financial statements for all developer/owner organizations from the past two years. If these are consolidated financial statements, they must also include the standalone financial statements for the parent organization(s). If particular circumstances about an organization's financial position or capacity require explanation, include a narrative summary in addition to the financial statements.
- e. Homekey Workbook (Exhibit B) must have the following tabs completed. Please enter the Homekey Workbook content but disregard the Homekey Workbook questions regarding attachment uploads.
 - i. Overview
 - ii. Threshold
 - iii. Certification & Legal please complete the form and upload executed PDF
 - iv. Supportive Services Plan as part of the Supportive Services Plan narrative, please state commitment to referrals through Alameda County Coordinated Entry System (CES) based on countywide assessment and prioritization process. Please also describe any additional referral or screening process to implement, if any, in the context of Housing First principles.¹⁰
 - v. Award, Match, and Revenue
 - vi. Dev Sources
 - vii. Dev Budget
 - viii. Operating please include City asset monitoring fee of \$140 per unit per year
 - ix. Cash Flow
 - x. Note that the following tabs from the State Homekey workbook are <u>not</u> required to be completed for this RFP: Applicant Docs, Local & Environmental Verification, Application Scoring Criteria (see self-score in City workbook below), Application Support, and Upload Checklists.
- f. City of Oakland workbook (Exhibit C)
 - i. Capitalized Operating Subsidy Reserve worksheet that calculates capitalized operating reserve request through Year 15. Worksheet model assumes three

¹⁰ https://homekey.hcd.ca.gov/sites/default/files/2021-09/Housing%20First%20Guidance%20Checklist.pdf

- years of Homekey operating subsidy per Homekey guidelines, plus \$10,000 per door bonus for applying by 1/31/22.
- ii. Project timeline for approvals, permits, environmental clearances, and construction/rehabilitation. Please assume NEPA if requesting City subsidy.
- iii. Homekey Self-Score sheet
- iv. Team Experience details
- v. Systems outcome worksheet for applicable tenancy (transitional or permanent housing) to support self-score included in 2.f.iii above.
- g. Execute Certifications in Exhibit A.

Additional uploads, if available, such as appraisal, Physical Needs Assessment, Preliminary Title Report, Phase I Environmental Report, etc.

Although not required for this application, all proposals must commit to complying with the following requirements by the time of Homekey Application in late December (see Exhibit A):

- Resolutions: City and co-applicants must submit authorizing resolutions that, in the State HCD's
 reasonable determination, materially comports with the program's requirements and is legally
 sufficient. For the City, this will be the City Council resolution; for developer/owner
 organizations, this will be a resolution of the governing boards. In addition, each co-applicant
 shall submit a complete set of its organizational documents (including any amendments
 thereto).
- 2. **Appraisal:** "As is" appraisal to determine fair market value. Appraisals must conform to the Uniform Standards of Professional Appraisal Practice (USPAP), in particular Standards 1 and 2. In addition, appraisals must comply with the appraisal requirements of the Appraisal Institute's Regulation 3. All appraisers must be California State Licensed/Certified.
- 3. **PNA:** Acquisition projects must provide a copy of a Physical Needs Assessment (PNA) that describes the deficiencies to be addressed by the rehabilitation, emergency repairs, health and safety issues and lead abatement and asbestos report, if applicable. The PNA must also include preliminary cost estimates for the repairs.
- 4. **Executed Purchase Contract** with appropriate financing and due diligence contingencies.
- 5. Preliminary Title Report
- 6. Phase 1 Environmental Report
- 7. Preparation of CEQA Determination
- 8. Preparation of NEPA Determination (if federal funding awarded)

VII. Project Scoring

Projects will be scored as follows:

- 1. Threshold Requirements:
 - a. Only Teams that were qualified under the previous City of Oakland Homekey RFQ are eligible to apply to this RFP.
 - b. Absolutely no Team organization substitutions are allowed, only team additions.
 - c. Only one project proposal per Team.
 - d. Project must meet the minimum Homekey score of 120 points using reasonable assumptions.

- e. Project may not require permanent relocation
- f. All RFP certifications and submittals must be complete
- 2. Homekey score from Homekey application scorecard in Exhibit B (207 points max)
- 3. City in its discretion may award projects up to 60 additional points for the following:
 - a. Project is feasible with little to no City capital subsidy or operating subsidy, and/or has secured alternative sources of operating subsidy besides Homekey, HHAP, or Section 8 (20 points).
 - b. Purchase contract or exclusive purchase option contract already executed with appropriate financing and due diligence contingencies (20 points)
 - c. Project restricts rents to below 30% AMI rent levels, or down to 30% of income rather than requiring a minimum rent (up to 10 points depending on depth of rent affordability)
 - d. Project can <u>realistically</u> reach full occupancy well within eight months of the date of award and secure Homekey operating bonus (10 points)

VIII. City Rules

All applicants must agree not to discriminate on the basis of race, color, ancestry, national origin, religion, sex, sexual preference, age, marital status, family status, source of income, participation in a tenant-based rental assistance program, physical or mental disability, Acquired Immune Deficiency Syndrome (AIDS) or AIDS-related conditions (ARC), immigration status, past criminal background or any other arbitrary basis. Projects must meet the requirements of the Americans with Disabilities Act and other applicable disability laws.

Applicants should understand that under the California Public Records Act and the City's Sunshine Ordinance, all documents that are submitted in response to this RFP, including financial information, are considered public records and will be made available to the public upon request, unless specifically exempted under the law.

Please note that under conflict of interest laws, no public official of the City who participates in the decision-making process concerning selection of a developer or a project may have or receive a direct or indirect economic interest in the developer or the project.

The City's issuance of this RFP is not a promise or an agreement that the City will actually fund any project or enter into any contract. The City reserves the right at any time and from time to time, and for its own convenience, in its sole and absolute discretion, to do the following:

- Modify, suspend or terminate any and all aspects of the selection process, including, but not limited to this RFP and all or any portion of the developer selection process;
- Waive any technical defect or informality in any submittal or submittal procedure that does not affect or alter the submittal's substantive provisions;
- Reject any and all submittals;
- Request some or all applicants to revise submittals;
- Waive any defects as to form or content of the RFP or any other step in the selection process;
- Reject all proposals and reissue the RFP;
- Procure the desired proposals by any other means or not proceed in procuring the proposals; or

Negotiate and modify any and all terms of an agreement.

The City may modify, clarify and change this RFP by issuing one or more written addenda. Addenda will be posted on the City's website, and notice of the posting will be sent by electronic mail to each qualified Team. The City will make reasonable efforts to notify interested parties in a timely manner of modifications to this RFP but each applicant assumes the risk of submitting its submittal on time and obtaining all addenda and information issued by the City. Therefore, the City strongly encourages interested parties to check the City's web page for this RFP frequently.

IX. Questions

Please send questions to HCDinfo@oaklandca.gov and include "Homekey RFP" in the title. Responses to questions will be posted on a rolling basis on the Homekey page of the City HCD website.

X. Relevant Definitions from State Homekey NOFA

Below are relevant terms as defined by the State in its Homekey NOFA. Please refer to the State Homekey NOFA for more terms and details. 11

"At Risk of Homelessness" has the same meaning as defined in Title 24 CFR Part 578.3.

"Chronic Homelessness" means a person who is chronically homeless, as defined in Title 24 CFR Part 578.3.

"Door" refers to units at the time of the acquisition, which may differ from the number of units that are available after a conversion of the property. Homekey will fund a maximum grant amount per door, pursuant to the conditions of the Homekey NOFA, which includes both the acquisition cost and any needed Rehabilitation or new construction.

"Extremely Low Income" or "ELI" has the same meaning as in Title 24 CFR Part 93.2.

"Homeless" has the same meaning as defined in Title 24 CFR Part 578.3.

"Homeless Youth" or "Youth at Risk of Homelessness" has the same meaning as defined in Title 24 CFR Part 578.3.

"Interim Housing", "Transitional Housing" or "Congregate Shelter" means any facility whose primary purpose is to provide a temporary shelter for the Homeless in general or for specific populations of the Homeless, and which does not require occupants to sign leases or occupancy agreements.

"Operating Expenses" means the amount approved by the Department that is necessary to pay for the recurring expenses of the Project, such as utilities, maintenance, management fees, taxes, licenses, and supportive services costs, but not including debt service or required reserve account deposits.

¹¹ https://homekey.hcd.ca.gov/sites/default/files/2021-09/NOFA Homekey 0.pdf

"Permanent Supportive Housing" has the same meaning as "supportive housing," as defined at HSC section 50675.14, subdivision (b)(2), except that "Permanent Supportive Housing" shall include associated facilities if used to provide services to housing residents.

"Permanent Housing" means a housing unit where the landlord does not limit length of stay in the housing unit, the landlord does not restrict the movements of the tenant, and the tenant has a lease and is subject to the rights and responsibilities of tenancy.

"Target Population" means individuals and families who are experiencing homelessness or who are at risk of homelessness, as defined at HSC section 50675.1.3, subdivision (I), and who are inherently impacted by or at increased risk for medical diseases or conditions due to the COVID-19 pandemic or other communicable diseases.

"Unit" means a residential unit that is used as a primary residence by its occupants, including individual units within the project.

"Youth Assisted Unit" means an Assisted Unit serving Homeless Youth, or Youth at Risk of Homelessness, as defined in Title 24 CFR Part 578.3. Pursuant to Section 203, Youth Assisted Units may also serve current and former foster youth through the age of 25.

EXHIBITS

Exhibit A: Required City Certifications

CERTIFICATIONS

The Developer/Owner(s) ("Applicant") hereby certifies:

1. Truth of Application

That the information submitted in the Homekey proposal ("Project") and any supporting materials is true, accurate, and complete to the best of its knowledge. Applicant acknowledges and understands that if facts and/or information herein are found to be misrepresented, it shall constitute grounds for the default of the grant for which application is being made.

2. No Conflicts of Interest

That, to the best of its knowledge, no "covered person" (as defined below) associated with the City has or will obtain a financial interest or benefit from this grant or the Project, or has or will obtain an interest in any contract, subcontract or agreement with respect to the grant, the Project or the proceeds thereunder, either for themselves or those with whom they have immediate family or business ties, during that covered person's tenure with the City or for one year thereafter. A "covered person" for purposes of this paragraph includes any employee, agent, consultant, officer, or elected or appointed official of the City who, with respect to activities assisted with HUD funds, (a) exercises or have exercised any functions or responsibilities, or (b) is in a position to participate in a decision-making process, or (c) is in a position to gain inside information. No officer, employee, agent, or consultant of Applicant or Applicant's affiliates may occupy a Project Unit. Applicant's attention is directed to the conflict of interest rules for the HOME program codified in 24 CFR §92.356.

Applicant warrants and represents, to the best of its present knowledge, that no public official of Citywho has been involved in the making of this grant, or who is a member of a City board or commissionwhich has been involved in the making of this grant, has or will receive a direct or indirect financial interest in this grant or the Project in violation of the rules contained in California Government Code Section 1090, et seq., pertaining to conflicts of interest in public contracting. Applicant shall exercisedue diligence to ensure that no such official will receive such an interest. If Applicant, a general partner of Applicant, or an affiliate of Applicant or Applicant's general partner is a nonprofit corporation, Applicant warrants and represents, to the best of its present knowledge, that any such public official of City who is an employee or a non-compensated director or officer of said nonprofit corporation has disqualified himself or herself from participating in City's decision to make this grant.

Applicant further warrants and represents, to the best of its present knowledge and excepting any written disclosures as to these matter already made by Applicant to City, that (1) no public official of City who has participated in decision making concerning this grant or the Project or has used his or herofficial position to influence decisions regarding this grant or the Project, has an economic interest in Applicant or the Project, and (2) neither the Project nor the grant will have a direct or indirect financial effect on said

official, the official's spouse or dependent children, or any of the official's economic interests. Applicant agrees to promptly disclose to City in writing any information it may receive concerning any such potential conflict of interest. Applicant's attention is directed to the conflict of interest rules applicable to governmental decision making contained in the Political Reform Act (California Government Code Section 87100, et seq.) and its implementing regulations (California Code of Regulations, Title 2, Section 18700, et seq.).

3. No Use of Suspended/Disbarred Contractors

That Applicant its principal and its contractors:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three-year period preceding this Application been convicted of or had a civil judgment rendered against them for: commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; or violation of Federal or State antitrust statutes or commissions of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in the subsection (b) above; and
- (d) Have not within a three-year period preceding this Application had one or more public transactions (Federal, State, or local) terminated for cause or default.

If Applicant is unable to certify as to any of the above statements, Applicant has attached a written explanation to this Agreement.

4. Choice-Limiting Actions During NEPA Review Are Prohibited

That the Applicant acknowledges that any choice limiting actions or actions that have environmental consequences as defined in 11 of the City Program Guidelines section will not be undertaken during the period between application submittal and the completion of the City's environmental review process.

5. Applicant Will Abide by Program Rules

That if Applicant is successful in receiving funds as a result of this Application, it will abide by all applicable rules and regulations governing the City's Homekey program and the State's Homekey program.

6. Applications are Public Records

That Applicant acknowledges that the information submitted as part of this application may be made available to the public pursuant to a request under the California Public Records Act and the City of Oakland's Sunshine Ordinance.

7. Material Changes to Project

That Applicant acknowledges that any material changes to the Project not disclosed to <u>and</u> approved by City may result in termination of funding for the Project. Material changes include but are not limited to: changes to the Project's design, amenities, and number and size of units; changes to the development budget; changes to the proposed

sales prices, rents or operating expenses; changes to the sources, amounts or terms of financing; changes to the ownership entity or key staff and consultants identified in the Application, or changes to other Application items.

8. Coordinated Entry System

That Applicant commits to using the Alameda County Coordinated Entry System (CES) for all resident referrals, based on the countywide assessment and prioritization process. Referral processes in addition to the CES process but may be requested as part of this RFP.

9. Commitment to Homekey Application Requirements

That if selected through this RFP, Applicant will commit to providing the following items in time for the State Homekey application in late December:

- (a) Resolutions: City and co-applicants must submit authorizing resolutions that, in the State HCD's reasonable determination, materially comports with the program's requirements and is legally sufficient. For the City, this will be the City Council resolution; for developer/owner organizations, this will be a resolution of the governing board. In addition, each co-applicant shall submit a complete set of its organizational documents (including any amendments thereto).
- (b) Appraisal: "As is" appraisal to determine fair market value. Appraisals must conform to the Uniform Standards of Professional Appraisal Practice (USPAP), in particular Standards 1 and 2. In addition, appraisals must comply with the appraisal requirements of the Appraisal Institute's Regulation 3. All appraisers must be California State Licensed/Certified.
- (c) PNA: Acquisition projects must provide a copy of a Physical Needs Assessment (PNA) that describes the deficiencies to be addressed by the rehabilitation, emergency repairs, health and safety issues and lead abatement and asbestos report, if applicable. The PNA must also include preliminary cost estimates for the repairs.
- (d) Executed Purchase Contract with appropriate financing and due diligence contingencies.
- (e) Preliminary Title Report
- (f) Insurance: Applicant will provide documentation of ability to obtain insurance coverages required in Exhibit D for both the State Homekey application and the City of Oakland.

 Applicant understands that the City in its discretion may reject requests for waivers of the City insurance requirements in Exhibit D, and the City cannot waive the State's Homekey insurance requirements.
- (g) Phase 1 Environmental Report
- (h) Preparation of CEQA Determination
- (i) Preparation of NEPA Determination (if federal funding awarded)

Applicant Name(s):		
Signature/Date:		

Exhibit B: Homekey Workbook (20 pages)

					Hor	nekey	Roun	d 2 Pro	ject Ove	rview							1	10/2/21
									onsultati		uiremer	nt						
Has the lead	appli	can	t (a public entity	or tribal e	ntity) und	ertaken a	preap	plication	consultati	on with	HCD reg	gardin	g the propos	ed Ho	mekey	Project?		
								Instru	ıctions									
			re for Applicant in	•					•	•	documer	ntation	may result in	the ne	ed for	you to ame	nd and re	submit
			g in your applicat								0 :1 :						- 4 4l A	. L' t
			cate the Applicant ninimum points re		ralled to me	eet a Hon	пекеу ге	equiremen	it. Applicar	il Scorin	g Criteria	work	sneet cells sn	aded II	n rea	indicate th	at the App	olicant
			indicated required	•	nts. Electro	nically at	tached f	iles must	use the na	ming co	nvention	in the /	Application. F	or Exa	mple: "	Housing Si	te Map" f	or the
•			nal target housing			•							• •				•	
			dicate HCD Use															
			cate Application s			dia a NOT	- ^											
			es are made with to contact us wi							ag this	nnliaati	on						
									Completii	iy tilis a	аррисан	OII.						
			IOFA and program	•					rool applied	tion to:	announna	ort@bc	nd on gov					
For application	n spe	CIIIC	assistance compl											٠١				
	Max	imı	ım Homekey Av		y Summa	• •			sted Hon			venue	worksheet Lesser o		imum	and Pogu	instad A	ward
Capital Baseli			iiii noillekey A	waru 	\$0.00	Capital Ba			steu non	liekey F		\$0.00	Capital Basel			anu Kequ	iesteu P	\$0.00
Additional Cor						Additional						_	Additional Co					\$0.00
Total Maxi		Cap	ital Award					ed Capita	al Award			\$0.00			ard			\$0.00
Operating Sub 50% of Relocation		Cost	· c	1		Operating 50% of Re							Operating Su 50% of Reloc		`oete			\$0.00 \$0.00
§207 Bonus A		-						d - app si	ubmittal			_	§207 Bonus A			ubmittal		\$0.00
§207 Bonus A	ward	- ful	l occupancy		\$0.00	207 Boni	us Awar	d - full oc	cupancy			\$0.00	§207 Bonus A	Award-	full occ			\$0.00
			nekey Award						key Award		1	\$0.00	Total Hom	ekey A	Award			\$0.00
Number of Do			quisition omelessness Unit	0	Num				ne Project	0 nita	0	Num	nber of Homel	occ I In	nite	0		
			outh or Youth at F					0 IIICally H	lomeless U Numbei		sted Units			ess UI	IIIS	0		-
			sible to persons w				0	Ĭ					ole to persons	with h	earing	or vision d	isabilities	0
								Project	Overview	,								
Project Name																		
Project Addre	_								roject City	0 1 05		2 (State		Zip		
Project Count Assessor Pare	_		Enter parcel # En										the TCAC Me					
Number (APN				APN here	3 APN he		parcer# PN here	5 APN I		r parcei# PN here	7 APN		8 APN here		N here	10 APN h		APN here
Assessor Par			Enter parcel # En				parcel#			r parcel #			Enter parcel #			# Enter pare		er parcel #
Number (APN				APN here	14 APN he		PN here			.PN here			19 APN here		N here			APN here
Geographic S					<u> </u>			,										
		sitior	nal Housing and C	Congregate	Shelter are	e Interim	Housing	1)										
Building Type Other building		not	listed above (des	cribe helow	1													
Out of Dunding	typo	1101	iiotod abovo (aco	DI IDO DOIOW	,													
Project Narrat	tive																	
K Devile Attend				(-)		. 1												
			under another na le the name(s).	me(s) or w	as formerly	/ known u	ınder											
	· /· ·		ou plan to apply, o	or has the F	Project bee	n awarde	d other	HCD proc	ram funds	?								
			ICD Program(s)		,		inding A				g Status		NOFA [Date	Award	Date/Expe	ected Awa	ard Date
							§20	0 Eligib	le Applica	ints								
Applicant #1 Entity name													Organization	type				
Address Address										City			Organization	State C	CA.	Zip		
Auth Rep					Title					Email				- 1.010		Phone		
Contact					Title					Email						Phone		
Address										City				State		Zip		
			t & Legal		See Certifi											Uploaded		
			solution						cuments w	orkshee	t.					Uploaded		
File Name Co-Applicant			Form		See Applic	ani Docu	inents V	worksneet	l.							Uploaded	IO HCD?	
Entity name	· ** 1 (I	, ap	p.i.oublej										Organization	type				
Address										City				State		Zip		
Auth Rep					Title					Email						Phone		
Contact					Title					Email						Phone		
Address										City				State		Zip		

		Homekey Round 2 Project	Overview		11	0/2/21
File Name	Co-App1 Cert & Legal	See Certifications & Legal worksheet.	O TOT TIOT		Uploaded to HCD?	1
File Name	Co-App1 Cert & Legal Co-App1 Resolution	Signature required; see Applicant Docume	nts worksheet.		Uploaded to HCD?	
File Name	Co-App1 OrgDoc1, OrgDoc2, etc	See Applicant Documents worksheet.	were meaning a		Uploaded to HCD?	
File Name	Co-App1 OrgChart	See Applicant Documents worksheet.			Uploaded to HCD?	
File Name	Co-App1 Signature Block	See Applicant Documents worksheet.		Uploaded to HCD?		
File Name	Co-App1 Payee Data Record	See Applicant Documents worksheet.		Uploaded to HCD?		
File Name	Co-App1 TIN Form	See Applicant Documents worksheet.			Uploaded to HCD?	
File Name	Co-App1 Cert of Good Standing	Dated 30 days or less from the Application	due date.		Uploaded to HCD?	
	Co-App1 Tax-Exempt Status	Evidence of tax-exempt status from IRS at		ble	Uploaded to HCD?	
	t #2 (if applicable)				• • • • • • • • • • • • • • • • • • • •	
Entity name			Orga	nization type		
Address			City	State	Zip	
Auth Rep		Title	Email		Phone	
Contact		Title	Email		Phone	
Address			City	State	Zip	
File Name	Co-App2 Cert & Legal	See Certifications & Legal worksheet.			Uploaded to HCD?	
File Name	Co-App2 Resolution		Uploaded to HCD?			
File Name	Co-App2 OrgDoc1, OrgDoc2, etc	Signature required; see Applicant Docume See Applicant Documents worksheet.			Uploaded to HCD?	
File Name	Co-App2 OrgChart	See Applicant Documents worksheet.			Uploaded to HCD?	
File Name	Co-App2 Signature Block	See Applicant Documents worksheet.			Uploaded to HCD?	
File Name	Co-App2 Payee Data Record	See Applicant Documents worksheet.			Uploaded to HCD?	
File Name	Co-App2 TIN Form	See Applicant Documents worksheet.			Uploaded to HCD?	
File Name	Co-App2 Cert of Good Standing	Dated 30 days or less from the Application	due date.		Uploaded to HCD?	
File Name	Co-App2 Cert of Good Standing Co-App2 Tax-Exempt Status	Evidence of tax-exempt status from IRS at		rofit Corp	Uploaded to HCD?	
. IIO I WAITIE		lopment Team Contacts (provide info			opioaded to Hob!	
Droport: M.		iopinent ream contacts (provide info	imation that is currently avail	iabiej		
	nagement Company	Contact Name		Emcil		
Legal Name Phone	Address	Contact Name	City	Email	7:	
			City	State	Zip	
Financial Co	nsuitant	Our to at Normal		eal		
Legal Name	Address	Contact Name	lou l	Email		
Phone	Address		City	State	Zip	
Legal Couns	Sel			e 11		
Legal Name		Contact Name		Email	T T	
Phone	Address		City	State	Zip	
General Con	tractor					
Legal Name		Contact Name		Email		
Phone	Address		City	State	Zip	
			1			
Architect			[2.9]			
Architect Legal Name		Contact Name		Email	1 . 1	
Architect Legal Name Phone	Address	Contact Name	City		Zip	
Architect Legal Name Phone Developmen	Address t/Operating Funding Source			Email State	1 . 1	
Architect Legal Name Phone Developmen Legal Name	t/Operating Funding Source	Contact Name Contact Name	City	Email State	Zip	
Architect Legal Name Phone Developmen Legal Name Phone	t/Operating Funding Source Address			Email State	1 . 1	
Architect Legal Name Phone Developmen Legal Name Phone Developmen	t/Operating Funding Source	Contact Name	City	Email State Email State	Zip	
Architect Legal Name Phone Developmen Legal Name Phone Developmen Legal Name	t/Operating Funding Source Address t/Operating Funding Source		City	Email State Email State Email	Zip	
Architect Legal Name Phone Developmen Legal Name Phone Developmen Legal Name Phone Phone	t/Operating Funding Source Address t/Operating Funding Source Address	Contact Name	City	Email State Email State	Zip	
Architect Legal Name Phone Developmen Legal Name Phone Developmen Legal Name Phone Developmen Developmen	t/Operating Funding Source Address t/Operating Funding Source	Contact Name Contact Name	City	Email State Email State Email State Email State	Zip	
Architect Legal Name Phone Developmen Legal Name Phone Developmen Legal Name Phone Developmen Legal Name Developmen Legal Name	t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source	Contact Name	City	Email State Email State Email State Email Email	Zip Zip Zip	
Architect Legal Name Phone Developmen Legal Name Phone Developmen Legal Name Phone Developmen Legal Name Phone Developmen Legal Name Phone	t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address Address	Contact Name Contact Name	City	Email State Email State Email State Email State	Zip	
Architect Legal Name Phone Developmen	t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source	Contact Name Contact Name Contact Name	City	Email State Email State Email State Email State Email State	Zip Zip Zip	
Architect Legal Name Phone Developmen Legal Name	t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source	Contact Name Contact Name	City City City	Email State Email State Email State Email State Email Email Email	Zip Zip Zip Zip	
Architect Legal Name Phone Developmen Legal Name Phone	t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address Address Address	Contact Name Contact Name Contact Name	City	Email State Email State Email State Email State Email State	Zip Zip Zip	
Architect Legal Name Phone Developmen Developmen	t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source	Contact Name Contact Name Contact Name Contact Name	City City City	Email State Email State Email State Email State Email State Email State	Zip Zip Zip Zip	
Architect Legal Name Phone Developmen Legal Name Phone Legal Name Phone Legal Name Phone Developmen Legal Name	t/Operating Funding Source Address t/Operating Funding Source	Contact Name Contact Name Contact Name	City	Email State Email State Email State Email State Email State Email State Email Email Email	Zip Zip Zip Zip	
Architect Legal Name Phone Developmen Developmen Legal Name Phone	t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address Address Address	Contact Name Contact Name Contact Name Contact Name	City City City	Email State Email State Email State Email State Email State Email State	Zip Zip Zip Zip	
Architect Legal Name Phone Developmen Legal Name Phone Legal Name Phone Legal Name Phone Developmen Legal Name	t/Operating Funding Source Address t/Operating Funding Source	Contact Name Contact Name Contact Name Contact Name	City	Email State Email State Email State Email State Email State Email State Email Email Email	Zip Zip Zip Zip	
Architect Legal Name Phone Developmen Legal Name Phone Phone Developmen Legal Name Phone	t/Operating Funding Source Address t/Operating Funding Source	Contact Name Contact Name Contact Name Contact Name Contact Name Substituting	City	Email State Email State Email State Email State Email State Email State Email Email Email	Zip Zip Zip Zip	
Architect Legal Name Phone Developmen Legal Name Phone Select below	t/Operating Funding Source Address t/Operating Funding Source	Contact Name Contact Name Contact Name Contact Name Contact Name Secondact Name Secondact Name	City City City City City City Uses	Email State	Zip Zip Zip Zip Zip	
Architect Legal Name Phone Developmen Legal Name Phone Select below i. Acquisition	t/Operating Funding Source Address t/Operating Funding Source	Contact Name Contact Name Contact Name Contact Name Contact Name Substituting	City City City City City Uses	Email State	Zip Zip Zip Zip Zip Zip	
Architect Legal Name Phone Developmen Legal Name Phone Select below i. Acquisition facilities, resid	t/Operating Funding Source Address t/Operating Funding Source	Contact Name Contact Name Contact Name Contact Name Contact Name Secondary Name Secondar	City City City City City Uses	Email State	Zip Zip Zip Zip Zip Zip	
Architect Legal Name Phone Developmen Legal Name Phone Select below i. Acquisition facilities, resic permanent or	Address t/Operating Funding Source	Contact Name Contact Name Contact Name Contact Name Contact Name Second Eligible for: habilitation, of motels, hotels, hostels, or oth anufactured housing, commercial properties	City City City City Uses er sites and assets, including apare, and other buildings with existing	Email State	Zip Zip Zip Zip Zip Zip	
Architect Legal Name Phone Developmen Legal Name Phone Select below i. Acquisition facilities, resic permanent or	Address t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address Addre	Contact Name Contact Name Contact Name Contact Name Contact Name Secondary Name Secondar	City City City City City Uses er sites and assets, including apare, and other buildings with existing of structure(s) and overall scope of	Email State	Zip Zip Zip Zip Zip Zip Zip adult residential econverted to	
Architect Legal Name Phone Developmen Legal Name Phone Discovery Developmen Legal Name Phone Control Developmen Legal Name Control Developmen	Address t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address	Contact Name Contact Name Contact Name Contact Name Contact Name Second Eligible for: habilitation, of motels, hotels, hostels, or oth anufactured housing, commercial properties Narrative description of current condition of Physical Needs Assessment prepared by a	City City City City City Uses er sites and assets, including apare, and other buildings with existing of structure(s) and overall scope of a qualified independent third party	Email State	Zip Zip Zip Zip Zip Zip Zip Uploaded to HCD? Uploaded to HCD? Uploaded to HCD?	
Architect Legal Name Phone Developmen Legal Name Phone The phone Developmen Legal Name Phone The p	Address t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address	Contact Name Contact Name Contact Name Contact Name Contact Name Secondary Name Secondary Name Secondary Name Secondary Name Narrative description of current condition of Physical Needs Assessment prepared by a housing. If Yes, provide a recent market stu	City City City City City Uses er sites and assets, including apars, and other buildings with existing of structure(s) and overall scope of a qualified independent third party dy and/or rent roll, and/or other su	Email State	Zip Zip Zip Zip Zip Zip Zip Uploaded to HCD? Uploaded to HCD? Uploaded to HCD?	
Architect Legal Name Phone Developmen Legal Name Phone Select below i. Acquisition facilities, resic permanent or File Name: File Name: ii. Master leas	Address t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address	Contact Name Contact Name Contact Name Contact Name Contact Name Second Eligible for: habilitation, of motels, hotels, hostels, or oth anufactured housing, commercial properties Narrative description of current condition of Physical Needs Assessment prepared by a	City City City City City Uses er sites and assets, including apars, and other buildings with existing of structure(s) and overall scope of a qualified independent third party dy and/or rent roll, and/or other su ast year which conforms to Tax Cr	Email State	Zip Zip Zip Zip Zip Zip Zip Uploaded to HCD? Uploaded to HCD? Uploaded to HCD?	
Architect Legal Name Phone Developmen Legal Name Phone Select below i. Acquisition facilities, resic permanent or File Name: File Name: File Name:	Address t/Operating Funding Source Address Add	Contact Name Contact Name Contact Name Contact Name Contact Name Section 1 Contact Name Section 2 Contact Name Section 2 Contact Name Section 3 Contact Name Section	City City City City City Uses er sites and assets, including apars, and other buildings with existing of structure(s) and overall scope of a qualified independent third party dy and/or rent roll, and/or other su ast year which conforms to Tax Cr	Email State	Zip Zip Zip Zip Zip Zip Zip Uploaded to HCD? Uploaded to HCD? Uploaded to HCD? Uploaded to HCD?	
Architect Legal Name Phone Developmen Legal Name Phone Discount of the state of the low of the l	Address t/Operating Funding Source Address Add	Contact Name Contact Name Contact Name Contact Name Contact Name Section 1 Contact Name Section 2 Contact Name Section 2 Contact Name Section 3 Contact Name Section	City City City City City Uses er sites and assets, including apars, and other buildings with existing of structure(s) and overall scope of a qualified independent third party dy and/or rent roll, and/or other su ast year which conforms to Tax Cr	Email State	Zip Zip Zip Zip Zip Zip Zip Uploaded to HCD? Uploaded to HCD? Uploaded to HCD? Uploaded to HCD?	
Architect Legal Name Phone Developmen Legal Name Phone Discoversion Legal Name Phone Legal Name File Name: Iii. Master leas File Name: Iiii. Conversio Iv. New const	Address t/Operating Funding Source Address Address t/Operating Funding Source Address Ad	Contact Name Contact Name Contact Name Contact Name Contact Name Contact Name Section 1 Contact Name Contact Name Section 2 Contact Name Section 2 Contact Name Narrative description of current condition of current curre	City City City City City Uses er sites and assets, including aparate, and other buildings with existing and other buildings with existing are a qualified independent third party dy and/or rent roll, and/or other supporting document to Tax Crant roll, and t	Email State	Zip Zip Zip Zip Zip Zip Zip Uploaded to HCD?	
Architect Legal Name Phone Developmen Legal Name Phone Discover of the Name Phone In Acquisition facilities, resignermanent or File Name:	Address t/Operating Funding Source Address Add	Contact Name Contact Name Contact Name Contact Name Contact Name Contact Name Section Section of Contact Name Section Section of Contact Name Narrative description of current condition of Physical Needs Assessment prepared by a housing. If Yes, provide a recent market sture Provide a recent market sture Provide a recent market study within the procommittee (TCAC) guidelines, and/or a response of the NOFA. Contact Name Contact Name Section	City City City City City City Uses er sites and assets, including apara, and other buildings with existing at a qualified independent third party and year which conforms to Tax Cront roll, and/or other supporting documents.	Email State Email	Zip Zip Zip Zip Zip Zip Zip Zip	
Architect Legal Name Phone Developmen Legal Name Phone Discover of the Name Phone In Acquisition facilities, resignermanent or File Name:	Address t/Operating Funding Source Address Address t/Operating Funding Source Address Ad	Contact Name Contact Name Contact Name Contact Name Contact Name Contact Name Section Section of Contact Name Section Section of Contact Name Narrative description of current condition of Physical Needs Assessment prepared by Section Sect	City City City City City City Uses er sites and assets, including apara, and other buildings with existing at a qualified independent third party dy and/or rent roll, and/or other su ast year which conforms to Tax Cr arket study and/or rent roll, and/or ast year which conforms to TCAC	Email State Other supporting documentation per State Other supporting doguidelines,	Zip Zip Zip Zip Zip Zip Zip Uploaded to HCD?	
Architect Legal Name Phone Developmen Legal Name Phone File Name: File Name: iii. Conversio iv. New const v. The purcha	Address t/Operating Funding Source Address t/Operating Funding Source Address t/Operating Funding Source Address Address t/Operating Funding Source Address	Contact Name Contact Name Contact Name Contact Name Contact Name Contact Name Section Section of Contact Name Section S	City City City City City City Uses er sites and assets, including apara, and other buildings with existing a qualified independent third party dy and/or rent roll, and/or other su ast year which conforms to Tax Cr nt roll, and/or other supporting documentation per §205 of the NO	Email State Other supporting documentation per State Other supporting doguidelines,	Zip Zip Zip Zip Zip Zip Zip Zip	
Architect Legal Name Phone Developmen Legal Name Phone Select below i. Acquisition facilities, resic permanent or File Name: iii. Master leas File Name: iii. Conversio iv. New const v. The purcha File Name: Vi. Relocation	Address t/Operating Funding Source Address Add	Contact Name Contact Name Contact Name Contact Name Contact Name Contact Name Section Section of Contact Name Section S	City City City City City City Uses er sites and assets, including apars, and other buildings with existing of structure(s) and overall scope of a qualified independent third party dy and/or rent roll, and/or other su ast year which conforms to Tax Cr nt roll, and/or other supporting documentation per §205 of the NO ct.	Email State Email	Zip Zip Zip Zip Zip Zip Zip Zip	
Architect Legal Name Phone Developmen Legal Name L	Address t/Operating Funding Source Address Add	Contact Name Contact Name Contact Name Contact Name Contact Name Contact Name Section Section of Contact Name Section S	City City City City City City Uses er sites and assets, including apars, and other buildings with existing of a qualified independent third party dy and/or rent roll, and/or other su ast year which conforms to Tax Cr nt roll, and/or other supporting documentation per §205 of the NO ct. If unds provided pursuant to HSC §	Email State Email	Zip Zip Zip Zip Zip Zip Zip Zip	

		Homekey Round 2 Project Overview	1	10/2/21
Select below	the eligible project types you	are applying for:	·	
i. Conversion	of nonresidential structures to re-	sidential dwelling units.		
ii. Conversio	n of commercially zoned structure	s, such as office or retail spaces, to residential dwelling units.		
iii. Adult resid	dential facilities, residential care fa	acilities for the elderly, manufactured housing, and other buildings with existing residential uses.		
iv. Multifamily	y rental housing projects.			
v. Excess sta	ate-owned properties.			
vi. Shared ho	· ·	permitted as long as the resulting housing has common ownership, financing, and property manager	nent, and each	
Applicants to requirements	explore financing alternatives to I, including the requirements for us	n such as manufactured home, recreational vehicle, and floating home, for temporary use only. HCD Homekey for such structures. Must submit with application a detailed explanation of how the use will real and affordability restrictions set forth at §208 of the NOFA. Applicants seeking HCD's approval of set their options at the required pre-application consultation.	meet all Homekey	
File Name:	Non-Perm Structure	Detailed narrative of how the use will meet all Homekey Program requirements, including the requirements for use and affordability restrictions set forth at §208 of the NOFA	Uploaded to HCD?	,
Other eligible	project not listed above (describe	e below)		
Applicate	t sakravuladgas Hamakay A = :-t-	rd Units previously awarded under the first round of Homekey funding are ineligible for Homekey Rou	nd 2 funding	

				Threshold			10/2/21				
				00 Threshold Requirements							
				requirements as they relate to the Eligible A	· · · · · · · · · · · · · · · · · · ·						
• •	•	• • • •	•	y by an Eligible Applicant, as defined in §200 an orporation as Co-Applicant?	d Article VII. Alternative	iy, each or the					
<u> </u>		, ,, ,	<u> </u>	f the Target Population per Article VII(xxxi)?							
	 		 	d on the anticipated needs of the Target Popula	tion and any proposed s	ub-populations to b	е				
served by the	Project?										
				f the plan and timeline for any required entitleme			?				
				olicants are encouraged to discuss their land us	e and environmental cle	arance plans, and					
related statuto	ory authorities at the	e required pre-appl	lication consultation.								
File Name	Env. Report 1		Phase I (prepared or up	odated no earlier than 12 months prior to the ap	olication due date).	Uploaded to HO	CD?				
File Name	Env. Report 2		If Phase I requires a Ph	nase II study, submit a Phase II (prepared or upo	lated no earlier than	Uploaded to H0	rD2				
	•		12 months prior to the a	* * * * * * * * * * * * * * * * * * * *		<u> </u>					
	CEQA		Copy of CEQA Determi			Uploaded to HO					
File Name	NEPA			e Grant Funds (NHTF Verification from Respon	• • • • • • • • • • • • • • • • • • • •	Uploaded to HO	DP?				
File Name	Local Approvals			n' worksheet(s) completed and signed by local a	authority or	Uploaded to HO	CD?				
				ifferent from jurisdiction.		·					
Construction s				Construction completion date		cupancy date					
v. Applicant a	cknowleages the re	equirement to subm		Data Worksheet (reports Continuum of Care (,	etnnicity)?					
File Name	Racial Demograph	nics	The worksheet on the	ata Worksheet, which reports CoC outcomes by	race and ethnicity.	Uploaded to HO	CD?				
vi Δnnlicant r	nust have site cont	rol of all properties		n, and control must not be contingent on the ap	proval of any other party	Does Annlicant ha	ave				
• • •			• • • • • • • • • • • • • • • • • • • •	cent execution date. Describe site control speci-		. Does Applicant ne	140				
						Execution	Expiration				
	APN	A	ddress	Type of Site Control	Current owner	date	date				
Do not comp	lete this row										
20 110t 00111p	1010 11110 1011										
Do not comp	lete this row										
_											
Do not comp	lete this row										
Do not comp	lete this row										
Do not comp	icte tills row										
Do not comp	lete this row										
Do not comp	lete this row										
Do not comp	lete this row										
Do not comp	icte tills row										
Do not comp	lete this row										
Do not comp	lete this row										
Do not comp	o not complete this row										
Jonip											

Threshold 10/2/21															
						Thresh	old							1	0/2/21
Do not comp	olete this row														
	cknowledges that e processes, so a							usin	g, Applicant must si	ubmit a	a commitme	ent and plan to t	acilitate or		
File Name:	Use Change			<u> </u>				e or e	expedite the use ch	nange p	rocesses		Uploaded to H	CD?	
	ls below for unus	ual site								<u> </u>			•		
File Name:	Site Control1, Si	ite Cont	rol2, etc F	Provide docume	entation	of the typ	e of site o	contr	ol for each site abo	ve			Uploaded to H		
File Name:	Prelim1, Prelim2	2, etc	F	Provide current	prelimi	nary title r	eport for e	each	site above				Uploaded to H	CD?	
File Name:	Liability Insurance	се	F	Proof of Genera	ıl Liabili	ty Insuran	ce that m	eets	the requirements in	n §800((i)		Uploaded to H		
File Name:	Automobile Insu								ets the requirement		800(ii)		Uploaded to H		
File Name:	Property-Hazard								uirements in §800(v	,			Uploaded to H		
vii. Applicant acknowledges that the Eligible Applicant applying for the Homekey funding is the entity that HCD relies upon for experience and capacity, and will control the project during acquisition, development, and occupancy?															
the project during acquisition, development, and occupancy? Indicate which Eligible Applicant HCD can rely on for experience and capacity:															
viii. Applicant agrees to provide a development plan that supports acquisition of a site and fund expenditure before all program deadlines and demonstrates evidence of strong organizational and financial capacity to develop the project?															
					onmo	nlan							Uploaded to H	CD3	
	ne: Development Plan Provide a developm														
	0			,					e and local requirem elated to maintaining					t	
limitation, all	Applicants must b	e qualif	fied to do busin	ess in the State	of Cal	ifornia and	d must be	in go	all agencies and de ood standing with th HCD awards may fa	he Calif	fornia Secr	etary of State a			
xi. Applicant a	acknowledges tha	at HCD	will require Elig	ible Applicants	to subr	mit a com	olete appli	catio	on with all required o				ght to request		
	f unclear or ambig acknowledges th	_							nents. ssistance Narrative?	? The N	Narrative m	ust show the A	oplicant's		
the Applicant'	s Homekey-funde	ed activi	ities. This Relo	cation Assistan	ce Narr	rative doe	s not take	the	sinesses, or farm op place of the relocat a condition of fundi	tion plai		•		ılt of	
	Relocation Narra								or no relocation	iiig.			Uploaded to H	CD?	
	Train and a second a second and		,						equirements				<u> </u>	<u> </u>	
	philanthropic/priv								ce costs with specif operations and serv				the recordation	n of	
ii. Is the Appl			ating, and opera	ating a Permane	ent Hou	sing proje	ct? If Yes	, the	Applicant or Co-Ap	pplicant	t must dem	onstrate the foll	owing minimu	m	
a. Developme	ent, ownership, or	operati	ion experience	(a1. or a2. mu	st be Y	es to pas	s Thresh	old)				Р	asses thresh	old?	No
a1. Has Appli	cant developed,	owned,	or operated a p	project similar in	scope	and size	to the Pro	ject?	If Yes, provide det	tails be	low:				
	Projec	t name	and address			Who provides the experience		he	Experience type	1	ısing 'pe	Population	Population served		est date reloped, ned, or perated
а											dable				
o) If all abou	va ia Van akin A	onlinent	bas sparated a	at least two offs	rdoblo	rontal bay	sing prolo	oto i	n the last ten years		ntal	of those project	to containing o		
		•	•				0.,		nformation below)?		at least one	or triose projec	as containing a	11	No
	Projec	t name	and address				rovides tl perience	he	Experience type	1	ising (Qualifying unit serve		dev ow	est date reloped, ned, or perated
											dable				
											ntal dable				
											ntal				
	helping persons widing support se		s barriers to ho	using P		manager ice years	0.00		Supportive Ser Provider service y	- 1	0.00		old (three or n s of experien		No
Has a propert	, ,		If Yes, enter pr and com	plete experienc			'					t certifies that the future solicitation	•	dum	
					DOIOW.					- 1	Housing			9:	# of months
		Proje	ect name and a	audress		_			xperience provide Property Manager	Affordable					serving
									Property Manager	Affordable					
									Property Manager	. ,	Affordable				
									. , 5		Rental				

			Threshold							10.	/2/21
				Property Man	ager	Affordable Rental					
						Affordable				-	
				Property Man	ager	Rental					
Enter Suppor	rtive Service Provider name and comp	lete experience cha	art below:				1				
				Supportive Se Provider	rvice	Affordable Rental					
				Supportive Se	rvice	Affordable					
				Provider		Rental					
				Supportive Se	rvice	Affordable					
				Provider Supportive Se	rvice	Rental Affordable				-	
				Provider	IVICC	Rental					
				Supportive Se	rvice	Affordable					
- 5	and a similar and the single Clark and and	414 in -1		Provider		Rental					
	e administering a Housing First progra		e administering a Housi			uction and lov	v barriers				
File Name:	Housing First Perm	to entry	o daminiotomig a modol	ng i not program or	nam rout	aotion and io	• barrioro	Uplo	aded to H0	CD?	
	ne replacement of assisted housing							•			
	equired housing or site be redeveloped				e needs of	Target Popu	lation and	commun	ity?		
b. II Yes to III	a. above, will the target site be demo		acquired housing or sit	<u> </u>	ed/renositi	oned per the	locality's	ı			
F" 11			dress the needs of the T							200	
File Name:	One-for-one Replacement	" "	to be demolished before			et Population), provide	Uplo	aded to H0	יטנ	
			ment to ensure one-for-	•	units.						
c. Will all of t File Name:	he proposed housing be located within Housing Site Map		housing location neighb original target housing		accod hou	oing location	(0)	Linio	aded to H0	202	
riie ivairie.	Housing Site Map		using is proposed outsid				` ,	Орю	aueu to i ic	יטכ	
File Names	Outside Neighborhood		s necessary to locate thi				battori	Linio	adad ta UC	CD3	
File Name:	Outside Neighborhood	,	, offsite) and how doing	so supports and en	ables the	Target Popul	ation to	Uplo:	aded to H0	יטכ	
		maintain housing.									
	almonded as a the Interior Herrina Dec		302 Interim Housing	•	-61						
	icknowledges the Interim Housing Proj funding sources (government/philanth		•				•				
	ordation of the use restriction.	opio/privato/ for the	or reject for hive years o	ma oubmit a baagot	10 00 00 1	oporatione an	u 001 11000	, 00010 1111	ough you	.0	
	licant acquiring, rehabilitating, and/or o						perience b	elow:			
	Il development, ownership, or operatio				or Transit	ional	/ears	0.00	1	ass	No
nousing for a	at least three of the last ten years for in	idividuais who quai	lly as members of the 13	arget Population.					Thres		months
											ing in
			Who provided		Interin	n Housing					ast ten
	Project Name and Address		experience	Experience type	proj	ect type	Рорі	ılation S	erved	ye	ears
Explanations	:										
b. Does Appl	licant have experience linking Interim I										
File Name:	Interim Hsg Exp		e in linking Interim Hous	sing program partici	pants to P	ermanent Ho	using to	Uplo	aded to H0	CD?	
c Does Appl	icant have experience administering a	ensure long-term		oles of harm reduction	on and lov	v barriers to e	entry?	<u> </u>			
			e administering a Housi					Date.	adad ta 110	·Da	
File Name:	Housing First Interim	reduction and low	barriers to entry					Upio	aded to H0	יטי	
			§500 Article								
	knowledges per HSC §37001, subdivis										
	ehabilitation, reconstruction, alteration established by the federal American Re									om	
development			(, (i abiio Law								
			§501 Housin	g First							

Threshold 10/2/21

Applicant acknowledges that the Eligible Applicant shall certify to employ the core components of Housing First, as set forth at Welfare and Institutions Code §8255, in its property management and tenant selection practices? Projects shall accept tenants regardless of sobriety, participation in services or treatment, history of incarceration, credit history, or history of eviction in accordance with practices permitted pursuant to Housing First practices, including local Coordinated Entry System prioritization protocols, or other federal or state Project funding sources..

§502 Tenant Selection

Applicant acknowledges that referrals to Homekey Assisted Units shall be made through the local Coordinated Entry System (CES) for persons who are experiencing Homelessness? For persons At Risk of Homelessness, CES or another comparable prioritization system based on greatest need shall be used. All referral protocols for Homekey Assisted Units must be developed in collaboration with the local CoC and implemented consistent with the requirements set forth in the NOFA. CoC collaboration in Project and supportive service design is also strongly encouraged to help target and serve greatest need populations.

§503 Participation in Statewide HDIS/HMIS

Applicant acknowledges Homekey Grantees must support CoC participation in the statewide Homeless Data Integration System (HDIS), and, in accordance with state and federal law (including all applicable privacy law), disclose relevant data to the local Homeless Management Information System (HMIS)?

§504 Relocation

Applicant acknowledges Homekey Grantees must comply with all applicable federal, state, and local relocation law. Grantees must have a relocation plan prior to proceeding with any phase of a project or other activity that will result in the displacement of persons, businesses, or farm operations?

File Name: Relocation Plan Relocation Assistance Narrative for relocation or no relocation Uploaded to HCD?

§505 Accessibility and Non-Discrimination

Applicants acknowledges all developments shall adhere to the accessibility requirements set forth in California Building Code Chapter 11A and 11B and the Americans with Disabilities Act, Title II?

File Name: Access & Non-Discrimination Provide a non-discrimination policy Uploaded to HCD?

§506 Prevailing Wage

Applicant acknowledges use of Homekey funds is subject to California's prevailing wage law (Lab. Code, § 1720 et seq.). Applicant is urged to seek professional legal advice about the law's requirements. Prior to disbursing the Homekey funds, HCD will require a certification of compliance with California's prevailing wage law, as well as all applicable federal prevailing wage law. The certification must verify that prevailing wages have been or will be paid, and that labor records will be maintained and made available to any enforcement agency upon request. The certification must be signed by the general contractor(s) and the Grantee.

File Name: Prevailing Wage Provide a prevailing wage certification Uploaded to HCD?

§507 Environmental Clearances

Applicant acknowledges HCD encourages Eligible Applicants to fully engage with HCD's technical assistance and to consider the CEQA exemption set forth at HSC §50675.1.4 and the provision for land use consistency and conformity set forth at HSC §50675.1.3, subdivision (i)? Applicants should consult with their counsel for legal advice in construing application of the foregoing exemptions to their Project. It is entirely within an Applicant's discretion to determine whether to use the statutory CEQA exemption, whether the exemption applies to the Applicant's proposed activity, or whether some other mechanism applies and could be used to satisfy obligations under CEQA.

	Certification & Lega	I Disclosure	10/2/21
On behalf of the entity identified in the s			
	nents included in this application are, to the best	· · · · · · · · · · · · · · · · · · ·	
	is application on behalf of the entity identified in	-	
	·	es, including affiliates, that will provide goods or services to the Project either (` '
		vide goods or services to the Project. "Related Party" is defined in Section 103	302 of the
California Code of Regulations (CTCAC Reg	guiations):		
1. As of the data of application, the Broket	or the real property on which the Project is pro	posed (Property) is not party to or the subject of any claim or action at the Sta	to or
Federal appellate level.	of the real property on which the Project is proj	posed (Property) is not party to or the subject of any claim of action at the Sta	ile oi
• •	y claim or action undertaken which affects or po	ntentially affects the feasibility of the Project	
	on in this application and attachments is public,		
in addition, raciniomodgo that all illionnatio	m in the application and attachments to public,	and may be discissed by the state.	
Printed Name	Title of Signatory	Signature	Date
	Legal Dis		
For nurposes of the following questions, and		oplicant" shall include the applicant and joint applicant, and any subsidiary of the	20
	·	vill be benefited by the application or the project.	10
, ,	,	direct and indirect holders of more than ten percent (10%) of the ownership int	toracte in
	· · · · · · · · · · · · · · · · · · ·	the entity is a corporation, the general and limited partners of the entity if the e	
· · · · · · · · · · · · · · · · · · ·		pany. For projects using tax-exempt bonds, it shall also include the individual	•
be executing the bond purchase agreement		, , , , , , , , , , , , , , , , , , ,	
		'applicant," or "joint applicant" as defined above.	
•	e sheet and include with this questionnaire in th		
Exceptions:	•		
Public entity applicants without an owner	ership interest in the proposed project, inclu	uding but not limited to cities, counties, and joint powers authorities wit	h 100 or
more members, are not required to respo			
Manakana af tha kaanda af dinaatana af man m			.41
•		ds, are also not required to respond. However, chief executive officers (Execuchief financial officers (Treasurers, Chief Financial Officers, or their equivalent	
Directors, Criter Executive Officers, Freside	This of their equivalent, must respond, as must t	Silier illiancial officers (Treasurers, Officer) financial officers, of their equivalent	1).
Civil Matters			
 Has the applicant filed a bankruptcy or re 	ceivership case or had a bankruptcy or receive	ership action commenced against it, defaulted on a loan or been foreclosed	
against in <i>past ten years</i> ?			
		ivil litigation that may materially and adversely affect (a) the financial condition	1
of the applicant's business, or (b) the projec			
		the applicant within the past ten years that materially and adversely affected	
` '	business, or (b) the project that is the subject or	• • • • • • • • • • • • • • • • • • • •	
11	, , ,	civil or administrative proceeding, examination, or investigation by a local, state	е
		ocal, state or federal regulatory or enforcement agency?	
		eding, examination, or investigation by a local, state or federal licensing or	
accreditation agency, a local, state or ledera judgment?	ai taxing authority, or a local, state or lederal re-	gulatory or enforcement agency that resulted in a settlement, decision, or	
Criminal Matters	a subject of ar been notified that it may become	e a party to or the subject of, any criminal litigation, proceeding, charge,	
11 3 1 3 7	e subject of, or been notified that it may become any kind, involving, or that could result in, felony	1 3 7 3 6 71 6 7	
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	e a party to or the subject of, any criminal litigation, proceeding, charge,	
		e a party to or the subject or, any climinal litigation, proceeding, charge, emeanor charges against the applicant for matters relating to the conduct of th	20
applicant's business?	any kina, involving, or that obtain result in, misuc	meanor onarges against the applicant for matters relating to the conduct of the	
**	e subject of or been notified that it may become	e a party to or the subject of, any criminal litigation, proceeding, charge,	
		nal charges (whether felony or misdemeanor) against the applicant for any	
financial or fraud related crime?	,,g,,		
	e subject of, or been notified that it may become	e a party to or the subject of, any criminal litigation, proceeding, charge,	
	any kind, that could materially affect the financia		
10. Within the past ten years, has the applic	· · · · · · · · · · · · · · · · · · ·		
	cant been convicted of any misdemeanor relate	d to the conduct of the applicant's business?	
	cant been convicted of any misdemeanor for an		
	ponded "Yes" to any of the questions above		
File Name: Cert & Legal Explanation	Letter of explanation for any "Yes" ans)?
B	T 601		
Printed Name	Title of Signatory	Signature	Date

	§300(iii) Supportive Services Plan (SSP) 10/2/21
	ations must include an initial plan for providing supportive services based on the anticipated needs of the Target Population and any proposed sub-populations to be
Part I.	oject. The checklist below shall serve as a guide to ensure your SSP is complete. Tenant Selection
Pait i.	Section 1: Tenant Selection Criteria
	Section 2: Referrals
	Section 3: Housing First Certification §501
Part II.	Supportive Services Detail
	Section 1: Supportive Services Provider Information
	Section 2: Supportive Services Chart
	Section 3: Supportive Services Coordination
Part III.	Staffing Costinu 10: Staffing Description
	Section 1a: Staffing Description Section 1b: Staffing Chart
	Section 2: Staffing Ratios
Part IV.	Supportive Services Budget
Part V.	Property Management Plans and Tenant Selection
	Section 1: Property Management Plans and Tenant Selection
Part VI.	Measurable Outcomes and Plan for Evaluation
	Section 1: Measurable Outcomes
	Section 2: Plan for Evaluation
	Part I. Tenant Selection
management an compliance with Section 1: Tena	detailed description of the Tenant Selection process. Using the titled sections below, the narrative should be as specific as possible, delineating the roles of property d the support service provider and how these functions will be coordinated. Your description should clearly and conclusively document processes to ensure the Homekey Round 2 NOFA for Tenant Selection and Housing First Practices. In Selection Criteria
	n and Eligibility Criteria busing First Practices?
	oriteria that will be used to ensure that tenants are eligible to occupy the Homekey Assisted Units.
c Description of	the Target Population to be served, and identification of any additional subpopulation target or occupancy preference for the Project. (all sub-population targeting
	the rarget reputation to be served, and identification of any additional subpopulation target of occupancy preference for the Project. (all sub-population targeting and by HCD prior to standard agreement issuance and must be consistent with federal and state fair housing requirements).
e Describe any	additional eligibility criteria other than those indicated above, i.e., information needed to determine if the tenant can comply with lease terms. NOTE: Selection criteria
designed to asse	ess anything other than the ability to comply with lease terms generally run afoul of fair housing laws designed to protect equal access to housing for people with Between the Lines, A Question and Answer Guide on Legal Issues in Supportive Housing Chapter 4.
f. Identify all disc	losures that will be provided to applicants/tenants. Example: Megan's Law disclosures.
Section 2: Refe	
those At Risk of	dresses the required use of the Coordinated Entry System (CES) for all referrals into Homekey Assisted Units or an alternate comparable prioritization system for Homelessness based on greatest need. Note that use of standard waiting lists is prohibited, in that both of these systems must prioritize referrals based on highest her than first-come first served.
•	the local CES will be used to fill Homekey Assisted Units based on the use of a standardized assessment tool which prioritizes those with the highest need and the
most barriers to	the local QES will be used to his riometey / issisted on its based on the use of a standardized assessment teet which prioritizes those what the highest need and the housing retention. Include the CES agency's name, primary staff person's name, and contact information. If the local CES is not yet operational, describe when it'll be the plan to use it.
	arate comparable prioritization system than CES to refer persons At Risk of Homelessness describe that system. All referral protocols for Homekey Assisted Units ed in collaboration with the local CoC and implemented consistent with the requirements set forth in the Homekey NOFA.
The Eligible App	sing First Certification §501 licant shall certify to employ the core components of Housing First, as set forth at Welfare and Institutions Code §8255, in its property management and tenant es. Complete the checklist below to certify compliance with Housing First.
Tenant Screeni	

		§300(iii) Supporti	ive Services Pl	an (SSP)		1	10/2/21
elsewhere.						access to housing and services	
	rerything possible not to reje nterpreted as indicating a lac		d on poor credit or fi	nancial histor	y, poor or lack of renta	history, minor criminal convictions,	
unnecessary condition	not imposed by the terms o	of the funding itself.				participation in services, or any other	
and units include phys	ical features that accommod		accommodations wit	hin applicatior	ns and screening proce	esses and during tenancy. Building	
Housing-Based Volu	•						1
		rvices use a positive youth dev					
		osophy that recognizes that su		•		5 5	
, 	d service coordinators who a	se and are offered education rare trained in and actively emp	<u> </u>			rs. luding, but not limited to, motivational	
4. Participation in serv			f tenancy but are rev	viewed with te	nants and regularly off	ered as a resource to tenants.	
		d problem-solving over therap	neutic goals				
Housing Permanence			g				
		se violations, is not considered	d a reason for eviction	on.			
2. Tenants in supportiv	ve housing are given reason		hare of rent on time		pecial payment arrang	ements for rent arrears and/or	
eviction back into hom	elessness is avoided.					y is in jeopardy. Whenever possible,	
4. Program Requires I protections).	Housing Providers to Provide	e Tenants with Leases and Re	flects Tenants' Righ	its & Respons	ibilities Of Tenancy Un	der CA Law (including eviction	
		Part II.	Supportive Service	ces Detail			
	e Services Provider Inform						
	it the supportive service prov cribe how services will be co		tion and any propos	ed sub-popula	ations to be served by t	he Project. If more than one Provider	will be
Provi	ider Name	Populations th	ne Provider will ser	ve		Services Provider will offer	
Doscribo any known c	onflicts and/or the mitigation	stratogy for when Homekey fi	unding or other prog	ram raquiram	ents conflict with House	ing First practices, as applicable.	
Besonbe any known o	ormots and/or the imagation	stategy for when Homekey it	unding or other prog	ram requirem	one commet with Flour	пут посртавноев, из арриваль.	
If your tenants include Homekey Assisted Un		dependents of Homekey Tena	ants, describe any a	dditional criter	ia that will be used to e	ensure applicants are eligible to occup	by the
Section 2: Supportive							
<u> </u>		as required in §300 to be offere				00.00.00.00.00.00.00	
Resident Service	Service I	Description	Frequency	Hours	Service Provider	Off-site Service Location	
List each service separately		the degree to which services rovided.	Frequency of services provided	Provide the hours of availability	Provider's Name	If service is on-site, leave blank. distance, in miles, to off-site service resident commuting options. Reas access is access that does not re walking more that one-half mi	e and list conable equire
Case management							
Behavioral health services							
Physical health services							

	§300(iii) Supporti	ive Services PI	an (SSP)					10/2/21
Assistance obtaini benefits and esser documentation								
Education and employment service	ees							
Other services, su as housing retention skills, legal assistance, family connection service etc.	on							
Other Residential Services (specify)								
Other Residential Services (specify)								
Section 3: Suppo	rtive Services Coordination							
to the tenant for tra provide documenta	cessibility of community services to which you propose linkage ansportation required to access the services to include both pution, in the form of Memorandum of Understanding, Memorar and how accessibility will be accomplished.	ublic transportation a	and private tra	ansportatio	on service:	s (e.g. \	van owned by the provider). I	f available,
2 Describe how th	e supportive services will be provided in a manner that is cult	urally and linguistica	ully competen	t for perso	one of diffe	rent rad	res ethnicities sexual orienta	ations
gender identities, a barriers, including services will accor	and gender expressions. This includes explaining how service sensory disabilities, and how communication among the serving modate trauma-based, barriers to services. If available, provided the demonstrating who will be responsible for ensuring access.	s will be provided to ces providers, the p ide documentation,	Homekey te roperty mana in the form of	nants who ger and th Memoran	do not sponese tenan dum of Ur	eak Eng ts will b derstar	glish, or have other communi pe facilitated. Additionally, des	cation scribe how
0 - 1 - 1 - 0 - 1	- Bereiter	Part III. Staffing						
Section 1a: Staffi Describe the overa	ng Description Ill staffing pattern, including the roles and responsibilities for e	each position listed in	n the Staffing	Chart belo	ow. List the	e target	t populations served through	each
Project. Include the resides, and the lo	ng Chart ns that will provide services to the tenants of the Homekey As e services coordination staff. For each position, list the position cation of the position (on-site or off-site). Do not include staff of that portion (i.e., % FTE) of the staff position dedicated to Hon	n title, minimum requ which serve non-Ho	uirements, the mekey Units.	e full-time If a staff p	equivalent	(FTE), rves bo	the organization under which th tenants in Homekey and n	h the position on-Homekey
NOTE: Indicate w	hich staff position will be responsible for Homeless Mana	gement Informatio	n System da	ta entry a		oordin	ation.	
Title	Minimum requiremen	nts			Total FTE:	0	Employing Organization	Location
List each staff position	List min. required staff preparation include (e	education & experie	nce).		Indicate staff posit Homeke (half-time	ons for units	List which organization will employ each staff position	Select "On- Site" or "Off Site"

			§300(iii) Supp	ortive Se	rvices Plan (SS	SP)					10/2/21
Section 2: Staffin		16 (1 5									
Indicate the ove Total Homekey	rall services staffing I	evel for the Pro	ject by completing th	e calculation	below.						0
	ice Staff from the Sta	ffing Chart for th	ne Homekev Assiste	d Units - Pro	vide only the numbe	er of ongoing d	irect servi	ce staff n	nsitions that will	nrovide	U
b. services to the	tenants of the Homekns, or HMIS Administr	key Assisted Un									
	mekey units per FTE		(a÷b)								0
	manager staffing ratio			ssigned per	client (for example 2	2:1, 3:1, etc.).	Include all	case ma	nagement.		
Population Type:		Chronically I	Homeless		Homele	ess			At-Risk of H	omelessne	ss
Case Manager Ra	tio										
					tive Services Bud						
	supportive services										
	plementing your SSP										
	expenses should equa osts are associated v								n providing servi	ces in non-l	Homekey
Income Source/P		VILLI DOLLI I TOTTICE	Amount	Assisted OII	Type	l lolliekey Assi		unding S	tatue	% of T	otal Budget
income oddrem	logram Name		Amount		туре			unung o	tatus		0.00%
											0.00%
										(0.00%
											0.00%
	To	otal Revenue	\$0								0.00%
Expense Item	by title of position. (T	'l-i- li-44	Amount		Туре		F	unding S	tatus	% of T	otal Budget
match the Staffing	, ,	nis iist must									
Staff Position		FTE:								(0.00%
Staff Position		FTE:									0.00%
Staff Position		FTE:									0.00%
Staff Position		FTE:									0.00%
Fringe Benefits	Total St	aff Expenses	\$0								0.00% 0.00%
Tenant Transporta		un Expenses	ΨΟ								0.00%
Staff training (per S	. ,										0.00%
Equipment											0.00%
Supplies											0.00%
Travel	anay Caata (dan't ina	ludo								(0.00%
rent/leasing costs	ancy Costs (don't inc for SH units)	iuue									0.00%
Training											0.00%
Consultants: List b	y Function rtners-list by Entity/S	envice type									0.00%
	type in expense desc										0.00%
	type in expense desc										0.00%
	type in expense desc										0.00%
,	· · · · · · · · · · · · · · · · · · ·	tal Expenses	\$0							_	0.00%
			Part V. Property	y Managen	ent Plans and Te	nant Selecti	on				
Section 1: Proper	ty Management Plai	ns and Tenant									

§300)(iii)	Su	pp	ortiv	<u>/e Ser</u>	vices	Pla	an (SSP)						

10/2/21

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

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

Part VI. Measurable Outcomes and Plan for Evaluation

Specific target populations will likely have varying outcomes and evaluation strategies. List outcomes and evaluations plans specific to each target population.

Section 1: Measurable Outcomes

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

Category	Outcomes	Outcome Objectives
Residential Stability: Tenants maintain permanent		
housing (see examples in cell comments to the right)		
Increased Skills and/or Income: Tenants gain job- related skills, participate in job-related training and/or education, gain stipend part-time or full-time supported employment, gain access to mainstream service/income support Programs for which they are eligible (see examples in cell comments to the right)		
Greater Self- Determination: Tenants gain daily living skills and ability to plan and advocate for themselves to maximize independence and self-sufficiency (see examples in cell comments to the right)		
Other (specify)		

Section 2: Plan for Evaluation

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

Homekey Round 2 Page 13 of 20 Supportive Services Plan

							§20	5 Maxim	um Prograi	m Award,	Capital Fu	unding Mate	h, and Rent	/Subsidy F	levenue						_															
Do	ors at Acq	uisition										Proposed Un	its for Projec	t							10/2/21															
									Monthly Unit F	Rent		Subsidy Pro	gram #1 Name	Subsidy Pro	gram #2 Name	Target F	opulation - He	omekev Assis	ted Units (Article	VII)	<u>'</u>					Maximum Capi	tal Award (Basel	ine and Additi	onal Contributio	n) Based on D	oors at Acquis	ition				
\vdash		Baseline]			12.00				,				1						.,		Per Unit				
1		Award																	Homeless										Adjusted			Local Match	Additional	Maximum	Maximum	
1		based on														1			Youth or		Baseline Award		Maximum		% of	Unit's Pro-	Non-Assisted		Award			(Lesser of	Per Unit	Match	Additional	
1		Units and							Proposed							1			Youth at Risk		based on Units B	aseline Award	Baseline Award		Total	Rated Share of	Units Project		lesser of			Per Unit	Award	(Proposed	Award	
1	Number of	Bdrm Size	•	Number of	Unit Size				Rent for		Monthly		Monthly Rent		Monthly Rent	At-Risk of	Chronically		of	Total	and Proposed b	ased on Units	based on	Total Unit	Unit	Project Cost	Costs		Assisted Unit	Funding Gap		Funding	(Equal to	Assisted Units	(Equal to	
Bdrm	Doors at	at	Bdrm	Units	(Square	Income	Mngr		Restricted		Utility		Subsidy		Subsidy	Homelessness	Homeless	Homeless	Homelessness A	Assisted	Population a	ind Proposed	Proposed	Square	Square	Based on		Project Cost	Project Cost	on Assisted	Per Unit	Gap and	Local	x Per Unit	Maximum	Maximum
size	Acquisition	Acquisition	n size	Proposed	Feet)	Limit AM	I Units	Restricted	d Units	Unrestricte	d Allowance	Subsidy Unit	Amount	Subsidy Units	Amount	Units	Units	Units	Units	Units	Served	Bdrm Size	Project	Feet	Feet	Square Feet	must fund)	Assisted Units	and Baseline	Units	Funding Gap	\$100,000)	Match)	Amount)	Local Match)	Capital Award
		\$0	0					\$1	0											0	\$0.00	\$0.00	\$0.00	0	0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0 \$0.00	\$0.00	\$0.00	\$0.00	
		\$0	0					\$1	10											0	\$0.00	\$0.00	\$0.00	0	0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		\$0	0					\$1	10											0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00	\$0.00
		\$0	0					\$1	10											0	\$0.00	\$0.00	\$0.00	0	0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		\$0	0					Şi	0											0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0 \$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		\$0	0					Şi	0											0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		\$0	0				_	Şi	0											0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00
\vdash		\$0	0			_	_	51	10											0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00 \$0.00	\$0.00	\$0.00 \$0.00				\$0.00	\$0.00 \$0.00	\$0.00
\vdash		\$0	0			_	_	51	10	ļ		1								0	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00		0.00%	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00		0 \$0.00		\$0.00	\$0.00	
\vdash		\$0	0			_		31	0											0						\$0.00		\$0.00	\$0.00					\$0.00	\$0.00	\$0.00
\vdash		\$0	0				1	9	:0											0	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	1 0	0.00%	\$0.00	\$0.00 \$0.00	\$0.00	\$0.00	\$0.00 \$0.00				\$0.00	\$0.00	\$0.00
		90	0			_	_		0	+		1								0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00				\$0.00	\$0.00	\$0.00
-		\$0	0			_	+	S	in in											0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00
		\$0	0					Si	10											0	\$0.00	\$0.00	\$0.00		0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00
		\$0	ŏ					Si	0											0	\$0.00	\$0.00	\$0.00	ő	0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		\$0	0					Š	0											0	\$0.00	\$0.00	\$0.00	Ó	0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		\$0	0					\$1	0											0	\$0.00	\$0.00	\$0.00	Ó	0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		\$0	0					\$1	0											0	\$0.00	\$0.00	\$0.00	0	0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		\$0	0					\$	10											0	\$0.00	\$0.00	\$0.00	0	0.00%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total	0	\$0	0	0			0					0		0		0	0	0	0	0	\$0.00	\$0.00	\$0.00	0	0%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00				\$0.00	\$0.00	\$0.0
						Annual N	et Rents	\$	\$0	\$	0 Annual Su	bsidy Revenue	\$0		\$0	0.00%	0.00%	0.00%	0.00%	0.00%	Total Budgeted De	velopment costs	from 'Dev Budge	t' worksheet	cell L123	\$0.00				-						
File Na	me:	Utility Allowa	vance		¹ Local hous chart, with				ng current utility	y allowance	Upl	oaded to HCD				•																				

		Homekey A	ward including Capi				sidy, Reloca	ation, and B	onuses		
File Name:	Appraisal		If land costs will be inc				Uploa	aded to HCD?			
	I		appraisal dated within	60 days of the applic	ation submitt	al date.					
§205 Capital Awa	rd Calculati	on							HCD Amount	Requested	Actual
1. Maximum Home	kov Conital	Award based on:	1						\$0	Amount	Amount \$1
			from above cell AJ25						\$0		\$ \$
		Capital Award (1							\$0	\$0	S
			from above cell U25	0	Total pr	posed Projec	ct units from a	bove cell E25	0 72		
									Monthly		
§206 Homekey O	perating Sul	bsidy Calculation							Amount		
i.a. Assisted Units	reserved for	those experiencina	Chronic Homelessness	. for Homeless							
			above cells R25 + T25		0	Monthly am	ount per unit	\$1,400	\$0		
i.b. All other Assist	ed Units fron	above cells Q25 +	· S25		0	Monthly am	ount per unit	\$1,000	\$0		
Total qualifying mo	nthly amoun	t per unit							\$0		
									Annual		
		n Homekey Amou							Amount		
ii. Operating Subsi		Operating S	Subsidy: (specify)	Subsidy term			ng Homekey	0	\$0		
'Operating' worksh				(in years)			ubsidy years		•		
ii. Operating Subsi		Operating S	Subsidy: (specify)	Subsidy term			ng Homekey	0	so		
Operating worksh				(in years)			ubsidy years				
		alysis - sum of nega 8 for the first five ve	tive Net Operating Inco	me from 'Cash Flow'	worksheet ro	w 43 and Res	serve Deposits	s from 'Cash			
		o for the first live ye	ars						Five Year		
Operating Subsice Analysis	iy: Need	Year 1	Year 2	Year 3	V ₀	ar 4		ar 5			
Cash Flow' works	heet	\$0	\$0	\$0		0		ai 5	Total \$0		
			er of support from the lo								
			ch as rental subsidies, v								
	T		A letter template and a	list of potential Hom	nekey comple	mentary					
File Name:	Op Subsi	dy Confirmation	funding can be found of			,	Upioa	aded to HCD?			
B. Homekey Ope	rating Subsi	dy if requested in '(Overview' worksheet cel	I AK129 (lesser of N	leed Analysi	and Max Ho	mkey Amou	nt)	\$0		\$
50% of Relocation	Costs if requ	ested on 'Overview	worksheet cell AK128	('Dev Budget' works	heet cell L31	x .5)			\$0		\$
			efore Feb. 1, 2022? If Y						\$0		\$
		's Assisted units ac	hieve full occupancy with	nin eight months of a	ward date? If	Yes, \$10,000	bonus		\$0		s
award per Assiste									\$0		
C. Total Other Ho	mekey Awa	rd							\$0	\$0	\$
Maximum Homel	ev Program	Award (Canital n	lus Operating Subsidy	nlus Other) (A + B	+ C)				\$0	\$0	SI

Proposed Project Unit	ts by Bedrooi	m Size
Total 0 bedroom units	0	0.00%
Total 1 bedroom units	0	0.00%
Total 2 bedroom units	0	0.00%
Total 3 bedroom units	0	0.00%
Total 4 bedroom units	0	0.00%
Total 5 Bedroom units	0	0.00%
Total proposed units	0	0.00%

Assisted Units by	Bedroom Si	ze
Total 0 bedroom units	0	0.00%
Total 1 bedroom units	0	0.00%
Total 2 bedroom units	0	0.00%
Total 3 bedroom units	0	0.00%
Total 4 bedroom units	0	0.00%
Total 5 Bedroom units	0	0.00%
Total Assisted units	0	0.00%

				Sources	of Funds						10/2/21
undina (Committed by				Lien	Funding	Interest Rate		Repayment Terms		Required Debt Service
Application	on Due Date?	Source Name		Source Type	No.	Amount	Type Rate		Туре	Due in (yrs)	Amount
1	Yes	Homekey Program Award from 'Overview' worksheet cell Al23	\$0	State-HCD							
2											
3											
4											
5											
6											
7											
8											
9											
10											
				-		\$0					\$(

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

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

10/2/21	1				Source	s/Uses of	Funds				
10/2/21					Source	3/0363 01	i uiius				
USES OF FUNDS	Homekey Award	o	0	0	0	0	0	0	0	0	Total Sources/Costs
Project Development Costs		•	v	•	•			v	•	•	550.000,00000
LAND COST/ACQUISITION											
Land Cost or Value											\$0
Demolition											\$0
Legal Land Lease Rent Prepayment											\$0 \$0
Total Land Cost or Value	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Existing Improvements Cost or Value											\$0
Off-Site Improvements											\$0
Total Acquisition Cost	\$0	\$0	\$0		\$0			\$0		\$0	
Total Land Cost / Acquisition Cost	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Predevelopment Interest/Holding Cost											\$0
Assumed, Accrued Interest on Existing Debt (Rehab/Acq)											\$0
Excess Purchase Price Over Appraisal											\$0
REHABILITATION											
Site Work											\$0 \$0
Structures General Requirements											\$0
Contractor Overhead											\$0
Contractor Profit											\$0
Prevailing Wages											\$0
General Liability Insurance											\$0
Urban Greening											\$0
Other Rehabilitation: (Specify)											\$0
Other Rehabilitation: (Specify) Other Rehabilitation: (Specify)											\$0 \$0
Other Rehabilitation: (Specify) Total Rehabilitation Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Total Relocation Expenses	Ţ.	Ų.	Ţ	Ţ	Ţ	Ţ,	ţ	Ţ	Ţ	Ţ.	\$0
NEW CONSTRUCTION											
Site Work											\$0
Structures											\$0
General Requirements											\$0
Contractor Overhead											\$0
Contractor Profit Prevailing Wages											\$0 \$0
General Liability Insurance											\$0
Urban Greening											\$0
Other New Construction: (Specify)											\$0
Other New Construction: (Specify)											\$0
Other New Construction: (Specify)											\$0
Other New Construction: (Specify)											\$0
Other New Construction: (Specify)											\$0 \$0
Other New Construction: (Specify) Total New Construction Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
ARCHITECTURAL FEES	***	4 0	*	\$ 0	***	\$ 0	\$0	\$ 0	ų,	Ų.	***
Design											\$0
Supervision											\$0
Total Architectural Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Total Survey & Engineering											\$0
CONSTRUCTION INTEREST & FEES Construction Loan Interest											\$0
Origination Fee											\$0
Credit Enhancement/Application Fee											\$0
Bond Premium											\$0
Cost of Issuance											\$0
Title & Recording											\$0
Taxes											\$0
Insurance Employment Reporting											\$0 \$0
Other Construction Int. & Fees: (Specify)											\$0
Other Construction Int. & Fees: (Specify)											\$0
Other Construction Int. & Fees: (Specify)											\$0
Other Construction Int. & Fees: (Specify)											\$0
Total Construction Interest & Fees	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PERMANENT FINANCING											\$0
Loan Origination Fee Credit Enhancement/Application Fee											\$0
Title & Recording											\$0
Taxes											\$0
Insurance											\$0
Other Perm. Financing Costs: (Specify)											\$0
Other Perm. Financing Costs: (Specify)											\$0
Other Perm. Financing Costs: (Specify)											\$0
Other Perm. Financing Costs: (Specify) Total Permanent Financing Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0 \$ 0
Subtotals Forward	\$0	\$0	\$0		\$0 \$0			\$0 \$0			
LEGAL FEES	,,,	70	70	40	40	***	40	40	40	4 0	,
Legal Paid by Applicant											\$0
Other Attorney Costs: (Specify)											\$0
Other Attorney Costs: (Specify)											\$0
Other Attorney Costs: (Specify)	60	60		^^		^^	^^	^^	60		\$0
Total Attorney Costs RESERVES	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
MEDERALO											

10/2/21					Source	es/Uses of	Funds				
USES OF FUNDS	Homekey Award	0	0	0	0	0	0	0	0	0	Total Sources/Costs
Project Development Costs									•		
Operating Reserve											\$0
Replacement Reserve											\$0
Transition Reserve											\$0
Rent Reserve											\$0
Other Reserve Costs: (Specify)											\$0
Other Reserve Costs: (Specify)											\$0
Other Reserve Costs: (Specify)											\$0
Total Reserve Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
CONTINGENCY COSTS											
Construction Hard Cost Contingency											\$0
Soft Cost Contingency											\$0
Total Contingency Costs	\$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
Other Costs: (Specify)											\$0
Other Costs: (Specify)											\$0
Other Costs: (Specify)											\$0
Other Costs: (Specify)											\$0
Other Costs: (Specify)											\$0
Other Costs: (Specify)											\$0
Total Other Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
SUBTOTAL PROJECT COST	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
DEVELOPER COSTS											
Developer Overhead/Profit											\$0
Consultant/Processing Agent											\$0
Project Administration											\$0
Broker Fees Paid to a Related Party											\$0
Construction Oversight by Developer											\$0
Other Developer Costs: (Specify)											\$0
Total Developer Costs	\$0		\$0	\$0	\$0						
Total Project Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

10/2/21	Year '	I Annual Incom	ne and Expenses	
	Employee Informatio		TO UTTU EXPONED	Comments
	· · · · · · · · · · · · · · · · · · ·		Value of Free Rent	Comments
	Employee Job Title On-Site Manager(s)	Salary/Wages \$0	value of Free Refit	
	On-Site Manager(s) On-Site Assistant Manager(s)	\$0	\$0	
	Supportive Services Staff Supervisor(s)	\$0	40	
	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	
		\$0	\$0	
	Total Salaries and Value of Free Rent Units	\$0	\$0	
6711	Payroll Taxes	\$0	Show free rent as an	
	Workers Compensation	\$0	expense?	
	Employee Benefits	\$0	Yes	
	mployee(s) Payroll Taxes, Workers Comp. & Benefits	\$0		
	Total Employee(s) Expenses	\$0		
	Employee Units		•	
Income Limit	Job Title(s) of Employee(s) Living On-Site	Unit Type	Square Footage	
LIIIIL		(No. of bdrms.)	0	
		0	0	
		0	0	
	To	otal Square Footage	0	
		nnual Operatin		
Acct. No.	Revenue - Income	Residential	Commercial	Comments
5120/5140	Rent Revenue - Gross Potential		\$0	
	Restricted Unit Rents	\$0	40	
	Unrestricted Unit Rents	\$0		
5121	Tenant Assistance Payments			
ļ	Subsidy Program #1 Name	\$0		
	Subsidy Program #2 Name	\$0		
	Operating Subsidy: (specify)	\$0		
	Operating Subsidy: (specify)	\$0	\$0	
5910	Laundry and Vending Revenue	\$0		
5170	Garage and Parking Spaces	\$0	\$0	
5990	Interim Housing 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: Operating Subsidy: (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
	Administrative Expenses: 6200/6300			
6203	Conventions and Meetings	\$0	\$0	
6210	Advertising and Marketing	\$0	\$0	
6250	Other Renting Expenses	\$0	\$0	
6310	Office/Administrative Salaries from above	\$0	\$0	
6311	Office Expenses	\$0	\$0	
	Office or Model Apartment Rent	\$0	\$0	
6312	·		\$0	
6312 6320	Management Fee	\$0		
6312 6320 6330	Management Fee Site/Resident Manager(s) Salaries from above	\$0	\$0	
6312 6320 6330 6331	Management Fee Site/Resident Manager(s) Salaries from above Administrative Free Rent Unit from above	\$0 \$0	\$0 \$0	
6312 6320 6330 6331 6340	Management Fee Site/Resident Manager(s) Salaries from above Administrative Free Rent Unit from above Legal Expense Project	\$0 \$0 \$0	\$0 \$0 \$0	
6312 6320 6330 6331 6340 6350	Management Fee Site/Resident Manager(s) Salaries from above Administrative Free Rent Unit from above Legal Expense Project Audit Expense	\$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0	
6312 6320 6330 6331 6340	Management Fee Site/Resident Manager(s) Salaries from above Administrative Free Rent Unit from above Legal Expense Project	\$0 \$0 \$0	\$0 \$0 \$0	

10/2/21	Year 1	Annual Income	e and Expenses	
Acct. No.	Expenses	Residential	Commercial	Comments
	Utilities Expenses: 6400			
6450	Electricity	\$0	\$0	
6451	Water	\$0	\$0	
6452	Gas	\$0	\$0	
6453	Sewer	\$0	\$0	
	Other Utilities: (specify)	\$0	\$0	
6400T	Total Utilities Expenses	\$0	\$0	
0.00.	Operating and Maintenance Expenses: 6500	ΨΟ	Ψ	Comments
6510	Payroll from above	\$0	\$0	Comments
6515	Supplies	\$0	\$0	
6520	• • •		· ·	
	Contracts	\$0	\$0	
6521	Operating & Maintenance Free Rent Unit from above	\$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	, ,	, ,	Comments
6710	Real Estate Taxes	\$0	\$0	Comments
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			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	
6990	Other Supportive Services Costs: (specify) Other Supportive Services Costs: (specify)	\$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	\$0	\$0	Comments
	Funded Reserves: 7200	Residential	Commercial	
7210	Required Replacement Reserve Deposits	\$0	\$0	
7220	Other Reserves: (specify)	\$0	\$0	
7230	Other Reserves: (specify) Other Reserves: (specify)	\$0	\$0	
7240	Other Reserves: (specify) Other Reserves: (specify)			
1240	(1 2)	\$0	\$0	
	Total Reserves	\$0	\$0	
	Ground Lease	Residential	Commercial	
	Ground Lease	\$0	\$0	
	Total Ground Lease	\$0	\$0	
	Net Operating Income	\$0	\$0	
	Financial Expenses: 6800	T		Comments
6820	1st Mortgage Debt Service	\$0	\$0	Comments
6830	2nd Mortgage Debt Service	\$0	\$0	
6840	0 0			
	3rd Mortgage Debt Service	\$0	\$0	
6890	Misc. Financial Expenses: (specify)	\$0	\$0	
6890	Misc. Financial Expenses: (specify)	\$0	\$0	
6890	Misc. Financial Expenses: (specify)	\$0	\$0	
6890	Misc. Financial Expenses: (specify)	\$0	\$0	
		\$0	\$0	
6800T	Total Financial Expenses	φυ	ΨΟ	
6800T	Total Financial Expenses Cash Flow	\$0 \$0	\$0	

						Cash FI	ow Analy	/sis								10/2/21
Income from Restricted U	nits will l	be based on l	Proposed R	Rents?			Proposed								<u> </u>	
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 Unrestricted Unit Rents	2.5% 2.5%	0 0	0 0	0 0	0	0	0	0	0 0	0	0	0	0	0	0	0
Tenant Assistance Payments Subsidy Program #1 Name	2.5% 2.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Subsidy Program #2 Name Operating Subsidy: (specify)	2.5%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operating Subsidy: (specify)		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gross Potential Income - Housi	ng [0	0	0	0	Ō	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
Gross Potential Income - Total		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	ő	0	0	0	0	ő	0	Ő	0	0	0	0	0
Operating Subsidy: (specify)	5.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laundry/Vending/Other Income	5.0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Commercial Income Total Vacancy Loss	50.0%	0 0														
Effective Gross Income		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operating Expenses & Reserve	Deposits															
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 Total Expenses & Reserves	3.5%	0	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																
1st Mortgage		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Bridge Loan (repaid from Investor	equity)	0	0	0	0	0										
2nd Mortgage		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3rd Mortgage Debt Service	2 201	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Misc. Financial Expenses: (specify Misc. Financial Expenses: (specify		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Misc. Financial Expenses: (specify		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Misc. Financial Expenses: (specify		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Required Debt Service	·	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	SCR)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Use of Cash Flow After Debt Se	rvice - HCI		_	_		_	_	_	_	_		_		_	_	
Asset Mgmt./ Similar Fees	0.50/	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Max Asset Mgmt/Similar Fees Target NOI to get to 1.1 DSCR	3.5%	0	0	0	0	0	0	0	0	U	U	0	0	U	0	0
Subsidy needed to get to 1.1 DSCR	SCR	0 0														
Homekey Operating Subsidy an	ount	0 0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Net Operating Income (NOI) Cash Flow after all debt service		0	0	0	0 0	0 0	0	0 0	0 0	0	0	0 0	0	0 0	0	0
Homekey Subsidy Draw*		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cash Flow after Homekey subsidy	,	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Net Operating Income after HK su		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
DSCR with Homekey subsidy	,	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
*HK Subsidy balance after draw	s	0	0	0	0	0									****	

Exhibit C: City Workbook (6 pages)

EXHIBIT C: City of Oakland Workbook Capitalized Operating Subsidy Reserve Worksheet

Instructions: If you are not seeking operating subsidy from the City for your project, please do not fill out this worksheet.

If you <u>are</u> seeking operating subsidy from the City for your project, please fill in the yellow cells below to calculate your project's capitalized operating reserve request through Year 15. The worksheet model assumes three years of Homekey operating subsidy per Homekey guidelines, plus the \$10,000 per unit bonus for applying by 1/31/22. Per Homekey rules, debt service is not an eligible expense for operating subsidy; please do not include debt service or deferred developer fee as part of the calculation below.

RFQ Team Application Number	
Project Address	
Total Homekey Homeless Units	
# Units Set-Aside for Homeless	
Youth or Chronic Homeless Units	
# All Other Homeless Units	0

Cash Flow	Year	1	2	3		4		5	6		7		8		9		10		11		12		13		14		15
Project Income (please match to Net Rents in	Homekey Workbook	's "Award, Ma	tch, and Re	venue" tab)																							
Rent	2.00%		\$ -	\$	- \$	-	\$	-	\$	- :	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Vacancy	5.00% \$	-	\$ -	\$	- \$	-	\$	-	\$	- :	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Homekey Operating Subsidy	\$	-	_ \$ -	\$	- \$	-	\$	-	\$	- :	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
<u>Other</u>	2.00%		\$ -	\$	- \$		\$		\$:	\$ -	\$		\$		\$		\$		\$		\$		\$		\$	
Total Project Income	\$	-	\$ -	\$	- \$	-	\$	-	\$	- :	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Operating Expenses (please match to Homek Services All Other Operating Expenses Total	ey Workbook's "Oper 3.50% 3.50%	rating" tab)	\$ - \$ - \$ -	\$ \$ \$	- \$ - \$ - \$		\$ \$	<u>-</u> -	\$ \$	- ! <u>-</u> !	\$ - \$ - \$ -	\$ \$	<u>-</u>	\$ \$	<u>-</u>	\$ \$	<u>-</u>	\$ \$	<u>-</u>	\$ \$	<u>-</u> -	\$ \$	<u>-</u> -	\$ \$ \$	<u>-</u>	\$ \$	<u>-</u>
Net Operating Income	\$	-	\$ -	\$	- \$	-	\$	-	\$	-	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Assumed Homekey Bonus for Applying by	1/31/22 \$	-																									
Capitalized Operating Subsidy Needed	\$	-																									

EXHIBIT C: City of Oakland Workbook

Project Timeline

Assuming Homekey award in February 2022, please enter estimated dates for each listed event. Enter "N/A" if the event is not applicable. Please feel free to add notes or additional relevant events and dates. Please note that the State Homekey NOFA requires all capital funds to be expended within 8 months of award, all construction to be complete within 12 months of award, and lease up to be complete within 90 days of construction completion.

Date	Event	Notes and Deadlines
2/1/2022	Homekey Award	
	NEPA report completed by Team's consultant	
	Acquisition of property	
	Planning application submitted to City	
	Construction/rehabilitation permit application submitted to City	
	Start of construction/rehabilitation	
	Homekey capital funds fully expended	9/29/2022
	Completion of construction/rehabilitation	2/1/2023
	Project fully occupied (10% vacancy allowance)	5/2/2023

	IT C: City of Oakland Workbook OF OAKLAND HOMEKEY SELF-SCORE S	ET			PROJECT NAME Team #
#	Categories and Maximum Point Scores	Evaluation Criteria	PO	INTS	Team Name
		TOTAL POINTS AV	AILABLE 2	07	0
		Identification of the site suitable for development and evidence of site control, or a plan and timeline for obtaining site control along versity of the supporting evidence (e.g., letter of intent, an exclusive negotiating agreement, ground lease, etc.). NOTE: Sections 300-303 of NOFA further outline site control requirements related to specific project type. (Up to 20 points) - Fee titlerleasehold (20 points) - Option agreement/sales contract (20 points) - Exclusive negotiating agreement (15 points) - Letter of intent (15 points)	this	20	
1	Ability to expend funds timely and demonstration of operating leverage (Up to 40 points)	Documented commitment of non-Homekey rental or operating subsidies that will be used to maintain the ongoing affordability of the (Up to 20 points) Project-Based or Grantee-Based Enforceable Funding Commitments for operating assistance, or rental subsidies (including, but not to project-based vouchers, VASH vouchers, tenant-based vouchers, or locally funded rental assistance): (1 point for each 5 percen increment of Assisted Units with committed funding, up to a maximum of 20 points)	limited tage	20	
		Contingencies in commitment documents based upon the receipt of Round 2 Homekey funding will not disqualify a source from bein counted as committed. However, the Department must approve evidence that funding will reliably be available.			
	1	Sub-Total (ability to expend funds and operating le Demonstration of Applicant or member(s) of development team's experience in development, ownership, or operation of a project(s)		10	0
	Experience (Up to 55 points)	in scope and size to the proposed Project. NOTE: Sections 300-303 of this NOFA further outline threshold experience requirements to specific project type. (Up to 25 points) - Development, ownership, or operation of one project similar in scope and size to the proposed Project; or development, ownership, or operation of a tleast two affordable rental housing or interim projects in the last ten years, with at least one of those projects containt least one unit housing a tenant who qualifies as a member of the Target Population. (10 points) - 5 additional points awarded for each additional project (development, ownership, or operation of affordable rental housing or interir projects in the last ten years serving at least onemember of the Target Population) (up to 15 additional points)	or ng at	25	
2	PLEASE FILL OUT TEAM EXPERIENCE TAB TO SUPPORT SELF-SECORE	Demonstration of service provider's experience helping persons address barriers to housing stability and providing other support sen not necessarily within a housing project. Service provider may be Applicant, or a member of the deopment team described in App response to point category 2.c., below. Service provider experience must be with the specific population(s) housed within the Homek to count toward points in this section (e.g., families, singles, Homeless Youth, Chronically Homeless) (Up to 15 points) - 1 point awarded for each year of service experience, up to a maximum of 15 points of the NOTE: Sections 300-303 of this NOFA further outline threshold experience requirements related to specific project type. Commitment letter(s) or MOU(s) documenting how the complete development and management leam (which may include Applicant.	licant's	15	
		 developer, property manager, lead service provider, etc.) are connected and will work together on the Project. Applicants are encour complete due diligence checklists to ensure all members of the team are aware of roles and responsibilities (Up to 15 points) 	aged to	15	
		Sub-Total (Exp	erience) 5	55	0
3	Racial Equity and Community Engagement (Up to 20 points)	Racial Disparities Analysis (Up to 10 points) Using the Racial Demographic Data Worksheet (in application), provide the Continuum of Care Outcomes by Race and Ethnicity and following analysis. NOTE: Section 300 of this NOFA further outlines this threshold requirement. Using the data from the worksheet, provide a narrative analysis of the racial and ethnic disparities in systems outcomes. What are the causes or factors leading to these racial inequities? For service providers with prior experience, provide an analysis of prior program outcomes.		10	
	PLEASE FILL OUT SYSTEMS OUTCOMES TAB TO SUPPORT SELF- SCORE	Detail how the Applicant will address racial and ethnic disparities in program outcomes at each stage of the project design and devel Community Engagement (Up to 10 points). Detail how the Applicant has engaged or will engage with the target community, including people currently experiencing homelessnes people with lived experience of homelessness, to inform the design of the project. Provide documentation of this engagement, including but not limited to meeting notes, community planning documents, MOU of part withcommunity organization, etc.	ss and	10	
		Sub-Total (Racial Equity and Community Enga	gement) 2	20	0
		a. The Project serves specific sub-populations (20 points) -25% or more of Assisted Units are reserved for those experiencing Chronic Homelessness (20 points); OR -50% or more of Assisted Units are reserved for those experiencing Homelessness (20 points); OR -25% or more of Assisted Units are reserved for Homeless Youth or Youth at Risk of Homelessness (20 points);	2	20	
		Assisted Units include units for large family housing types (10 points) b. At least twenty-five percent (25%) of the Assisted Units in the project shall be three-bedroom or larger units, AND - At least an additional twenty-five percent (25%) of the Assisted Units in the project shall be two-bedroom or larger units, consistent TCAC Regulations (4 CCR § 10325(g)(1)(A-I)), (10 points)	with	10	
		Commitment to 55 year deed restriction to serve Target Population, waiving any potential accommodation by the Department to increase income limits as described in Section 303. (Up to 20 points) - At least 25% of Assisted Units restricted (5 points) - At least 50% of Assisted Units restricted (10 points) - At least 75% of Assisted Units restricted (15 points) - At least 75% of Assisted Units restricted (15 points) - 100% of Assisted Units restricted (15 points)		20	
		The extent to which the Project (with 20 or more units) commits to being accessible to persons with disabilities (Up to 10 points) Exceeds the state and federal accessibility requirements set forth Section 505, specifically providing a minimum of 15 percent of ur features accessible to persons with mobility disabilities, as defined in 24 C.F.R. Section 8.22 and the parallel ADAAG 2010 and CBC provisions; (5 points) A minimum of 10 percent of units with features accessible to persons with hearing or vision disabilities, as defined in 24 CFR Part 8 the parallel ADAAG 2010 and CBC Chapter 11B provisions. (5 points)	1	10	
		The proposed project requires no Rehabilitation or construction, or the Rehabilitation/construction and full occupancy can be comple e. within eight (9) months of award. Those receiving points in this category are also able to utilize the bonus award as outlined in Sectic (10 points)	007	10	
4	Community Impact and Site Selection (Up to 92 points)	For any project where the Applicant's capital match exceeds the minimum match required per Assisted Unit, one (1) point will be ass for every \$10,000 over the minimum match required (Up to 10 points); OR For any project where the average total cost per Assisted Unit is below the minimum baseline per door, one (1) point will be assigned every \$10,000 under the baseline amount. (Up to 10 points)	· 1 .	10	
		Site Selection (Up to 12 points) The project site is located within 1/2 mile of a bus rapid transit station, light rail station, commuter rail station, ferry terminal, bus station public bus stop OR the project includes an alternative transportation service for residents (e.g., van or dial-a-ride service), if costs of obtaining and maintaining the van and its service are included in the budget and the operating schedule is either on demand by tena regular schedule is provided (4 points) The Project site is in proximity to essential services: i. Grocery store — within 1/2 mile of a full-scale grocery store/supermarket where staples, fresh meat, and fresh produce are sold. (1 iprojects in rural areas) (2 points); NOTE: if applying for TCAC, it is advisable that the grocery store be at least 25,000 gross interior.	nts or a		
		feet. ii. Health facility – within 1/2 mile (1 mile for projects in rural areas) of a qualifying medical clinic with a physician, physician's assista iii. Inurse practitioner on-site for a minimum of 40 hours each week, or hospital (not merely a private doctor's office). A qualifying medica must accept Medi-Cal payments, or Medicare payments, or Health Care for the Homeless, or have a qualy comprehensive subsid program for low-income patients; (1 point) iii. Library – within 1/2 mile of a book-tending public library (1 mile for projects in rural areas); (1 point) iv. Pharmacy – within 1/2 mile of a pharmacy (1 mile for projects in rural areas). May be included in a grocery store or health facility in points) iv. Porpojects with units serving Homeless Youth: within one mile of at least two of the following: community colleges, universities, it yeshools, apprenticeship programs, employment programs, childcare centers for parenting youth, and/or community centers for youth LGBTO+ centers, drop-in youth centers (2 points)	nt, or al clinic y	12	
	·	Sub-Total (Community Impact & Site Sc	election) 9	92	0
5	Negative Points (Up to -20 points)	a. For any project resulting in the permanent displacement of residents (not businesses or farm operations), as outlined below: - The project permanently displaces existing residents in 5% of total units. (-5 points) - Applicants lose one point (up to an additional 15 points) for each additional percentage point of households displaced out of total units.	nits.	20	
				20	

Sub-Total (Negative Points)

6	City of Oakland Points (Up to 60 points)	a. Project is feasible with little to no City capital subsidy or operating subsidy, and/or has secured alternative sources of operating subsidy besides Homekey, HHAP, or Section 8 b. Purchase contract or exclusive purchase option contract already executed with appropriate financing and due diligence contingencies Project restricts rents to below 30% AMI rent levels, or down to 30% of income rather than requiring a minimum rent (up to 10 points depending on depth of rent affordability) d. Project can realistically reach full occupancy well within eight months of the date of award and secure Homekey operating bonus	20 20 10 10	
		Sub-Total (City Points	60	0

2. Experience - max 55 points						
a. Development, ownership, or operation experience - max 25 points						
a1. Does Applicant have the following experience: Development, ownership, or operation of one project similar in scope and size to the						
Project name and address	Who provides the experie	ence Experience type	Housing type	Population ser	ved	Latest date developed,
a2. If a1 above is Yes, 10 points already earned. Does Applicant have the following experience? Development, ownership, or opera						
Project name and address	Who provides the experie	ence Experience type	Housing type	Qualifying unit popula	tion served	Latest date developed,
a3. 5 additional points awarded for each additional project (development, ownership, or operation of affordable rental housing or interin	m projects in the last ten years serving a	t least one member of the Target Por	oulation) - max 15 points			
						4
						4
b. Experience helping persons address barriers to housing stability and providing other support services; 1 point awarded for each year					Years 0.0	
Project Name and address	Who provides the experience	Experience Provider	Housing	type Popula	tion Served	# of months servin
			+			
Explanation:						

Systems Outcomes Worksheet
This is the Homekey worksheet for service providers to complete with past project experience, per question 3 of the Homekey Self-Score tab. Please fill out the tables below for your project type: Permanent Housing or Interim Housing.

If your team does not have project experience to fill out the forms below, you may provide an explanation in the green box below:

PERMANENT PROJECTS: For permanent housing project proposals, please provide prior systems outcomes from a past permanent housing project by filling in yellow and orange cells below. Name of Prior Project:

	Using da	ta from yo	ur HMIS,	please ins	sert outco	mes here	(using the	e period fr	om 8/2020) - 8/2021)	:			
	Number of Tenants		Number of Service Plans Created			Average Duration of Tenancy			Number of Evictions			Number of Referrals to Outside Services		
	#	%	#	%	Disparity	#	%	Disparity	#	%	Disparity	#	%	Disparity
Total														
White, Non-Hispanic/Non-Latino														
White, Hispanic/Latino														
Black or African American														
Asian														
American Indian or Alaska Native														
Native Hawaiian/Other Pacific Islander														
Multiple Races														
Unknown														

Name of Prior Project:																	
		Usir	ng data fro	m your H	MIS, pleas	e insert o	utcomes	here (usin	g the peri	od from 8	/2020 - 8/2	2021):					
	People Housed Within Interim Project		Number of People Exited With a Plan			Average Length of Stay			Involuntary Returns to Homelessness			Voluntary Program Withdrawal			Number of Referrals to Outside Services		
	#	%	#	%	Disparity	#	%	Disparity	#	%	Disparity	#	%	Disparity	#	%	Disparity
Total																	
White, Non-Hispanic/Non-Latino																	
White, Hispanic/Latino																	
Black or African American																	
Asian																	
American Indian or Alaska Native																	
Native Hawaiian/Other Pacific Islander																	
Multiple Races																	
Unknown																	

Exhibit D: Homekey and City Insurance Requirements (3 pages)

Homekey Insurance Requirements

As outlined in the <u>HCD Homekey NOFA</u> and City of Oakland Schedule Q

Department of Housing and Community Development – Homekey NOFA

City of Oakland Department of Housing and Community Development

i. Commercial General Liability

Applicants shall maintain general liability on an occurrence form with limits not less than \$1,000,000 per occurrence and \$2,000,000 aggregate for bodily injury and property damage liability. The policy shall include coverage for liabilities arising out of premises, operations, independent contractors, products, completed operations, personal and advertising injury, and liability assumed under an insured agreement. This insurance shall apply separately to each insured against which claim is made, or suit is brought subject to the Applicant's limit of liability. The policy must name the "State of California and the Department of Housing and Community Development" AND the "City of Oakland", as well as the respective appointees, officers, agents, and employees of each, as additional insureds, but only with respect to work performed under the contract.

If available in the open market at a reasonable cost, the policy shall also include an endorsement for physical abuse and child/sexual molestation coverage. Coverage shall include actual or threatened physical abuse, mental injury, sexual molestation, negligent hiring, employment, supervision, investigation, reporting to proper authorities, and retention of any person for whom the Applicant is responsible. This insurance shall apply separately to each insured against which claim is made, or suit is brought subject to the Applicant's limit of liability. Coverage shall include the cost of defense and the cost of defense shall be provided outside the coverage limit.

If available in the open market at a reasonable cost, the policy shall also include an endorsement for assault and battery.

ii. Automobile Liability

Applicant shall maintain motor vehicle liability with limits not less than \$1,000,000 combined single limit per accident. Such insurance shall cover liability arising out of a motor vehicle including owned, hired, and non-owned motor vehicles. The policy must name the "State of California and the Department of Housing and Community Development" AND the "City of Oakland", as well as the respective appointees, officers, agents, and employees of each, as additional insureds, but only with respect to work performed under the contract.

If Applicant will not have or use any commercially owned vehicles during the term of the Standard Agreement, by signing the Standard Agreement, the Applicant certifies that the Applicant and any appointees, employees, subcontractors, or servants possess valid automobile coverage in accordance with California Vehicle Code sections 16450 to 16457, inclusive. The Department reserves the right to request proof at any time.

iii. Workers' Compensation and Employer's Liability

Applicant shall maintain statutory worker's compensation and employer's liability coverage for all its employees who will be engaged in the performance of the contract. In addition, employer's liability limits of \$1,000,000 are required. By signing the Standard Agreement, Applicant acknowledges compliance with these regulations. A Waiver of Subrogation or Right to Recover endorsement in favor of the State of California and the Department of Housing and Community Development must be attached to the certificate.

iv. Builder's Risk/Installation Floater

If there is installation or construction of property/materials on or within the facility at any time during the term of the Standard Agreement, the Applicant shall maintain in force, at its own expense, Builders Risk/Installation Floater covering the labor, materials, and equipment to be used for completion of the Work performed under this contract against all risks of direct physical loss, excluding earthquake and flood, for an amount not less than the full amount of the property and/or materials being installed and/or constructed on or within the facility. The Applicant agrees as a provision of the contract to waive all rights of recovery against the state.

v. Property Insurance

The Applicant shall maintain fire, lightning and extended coverage insurance on the facility which shall be in a form of a commercial property policy, in an amount equal to one hundred percent (100%) of the then current replacement cost of the facility, excluding the replacement cost of the unimproved real property constituting the site. The extended coverage endorsement shall, as nearly as practicable, include but not be limited to loss or damage by an explosion, windstorm, riot, aircraft, vehicle damage, smoke, vandalism, and malicious mischief and such other hazards as are normally covered by such endorsement.

vi. Self-Insured

If a state, regional, or local public entity is the sole Applicant, and if that entity is self-insured in whole or in part as to any of the above-described types and levels of coverage, then that entity shall provide the Department with a written acknowledgment of this fact before execution of the Standard Agreement. If, at any time after the execution of the Standard Agreement, the state, regional, or local public entity abandons its self-insured status, that entity shall immediately notify the Department of this fact and shall comply with all of the terms and conditions of this Section pertaining to insurance requirements. The Department may accept evidence of self-insurance from other Eligible Applicants in its sole and absolute discretion.

(The Below Requirements are from the City of Oakland Schedule Q)

vii. Pollution Liability

I. For Contractors engaged in: environmental remediation, emergency response, hazmat cleanup or pickup, liquid waste remediation, tank and pump cleaning, repair or installation, fire or water restoration or fuel storage dispensing, the

Contractor must maintain Contractor's Pollution Liability Insurance of at least \$1,000,000 for each occurrence and \$2,000,000 in the aggregate.

- II. For Contractors engaged in transporting waste, then transportation (1st and 3rd Party) must be included with the pollution liability.
- III. Regardless of the coverage limits in I. through II. above, contractor's coverage must be compliant with the Motor Carrier Act of 1980, California Vehicle Code Sections **34630-34634** and California Health and Safety Code Section 25169
- viii. **Professional Liability/Errors and Omissions** insurance as appropriate for design/build operations with limits not less than \$2,000,000 each claim and \$2,000,000 aggregate. If the professional liability/errors and omissions insurance is written on a claims made form:
 - I. The retroactive date must be shown and must be before the date of the contract or the beginning of work.
 - II. Insurance must be maintained and evidence of insurance must be provided for at least three (3) years after completion of the contract work.
 - III. If coverage is cancelled or non-renewed and not replaced with another claims made policy form with a retroactive date prior to the contract effective date, the contractor must purchase extended period coverage for a minimum of three (3) years after completion of work.

Exhibit E: Qualified Teams Eligible to Apply to This RFP (1 page)

Qualified Homekey Development Sponsor Teams

App #	Developer/Owner	Property Manager	Services Provider
7	Danco Communities/ Operation Dignity, Inc.	Danco Property Management	Operation Dignity, Inc.
8	Bay Area Community Services Housing Corporation (BACS HC)/ Memar Properties, Inc.	Bay Area Community Services Housing Corporation (BACS HC)	Bay Area Community Services (BACS)
9	Kingdom Builders Transitional Housing Program	Bay Area Community Benefit Organizations	Kingdom Builders Transitional Housing Program
13	East Bay Asian Local Development Corporation (EBALDC)	EBALDC	EBALDC
14	Bonita House, Inc.	Bonita House, Inc.	Bonita House, Inc.
16	Satellite Affordable Housing Associates (SAHA)	SAHA	SAHA
17	Resources for Community Development (RCD)	The John Stewart Company (JSCo)	RCD
19	The Unity Council (3	The Unity Council	The Unity Council`
37	submittals for each	(Casitas of Hayward)	
40	category, combined)		
21	MidPen Housing Corporation	MidPen Property Management Company	MidPen Resident Services
24	Affirmed Housing Group	Solari Enterprises, Inc.	LifeLong Medical Care
25	DignityMoves	Five Keys Schools and Programs	Five Keys Schools and Programs
26	Housing Consortium of the East Bay	Housing Consortium of the East Bay	Housing Consortium of the East Bay
27	LifeMoves	LifeMoves	LifeMoves
28	Shangri-La Industries,	Step Up on Second	Step Up on Second
31	LLC (4 submittals to	Street, Inc.	Street, Inc.
32	include more than 3		
33	properties, combined)		
29	Abode Communities	Abode Communities	LifeLong Medical Care
30	LAKE MERRITT LODGE	Khazen CRE Group DBA KAMCO Housing	НСЕВ

34	Holliday Development/ EBALDC/Allied Housing	EBALDC	Abode Services
35	Bay Area Community Services Housing Corporation (BACS HC)	Bay Area Community Services Housing Corporation (BACS HC)	Bay Area Community Services (BACS)
38	Lao Family Community Development, Inc. (LFCD)	Five Keys Schools and Programs	Lao Family Community Development, Inc. (LFCD)
39	Youth Employment Partnership, Inc. (YEP)	Bay Area Community Services (BACS)	Youth Employment Partnership, Inc. (YEP)
41	Allied Housing, Inc.	Housing for Independent People, Inc.	Abode Services
43	Oakland Community Land Trust (OakCLT)	Kalco Properties	A Diamond in the Ruff, Inc.
47	Related	Related Management Company	LifeSTEPS
48	Related/ EBALDC	Related Management Company	EBALDC
53	First Community Housing	JSCo	WeHOPE
54	Unity Care Group - Vallejo	Unity Care Group - Vallejo	Unity Care Group - Vallejo
56	Interfaith Council of Alameda County	Interfaith Council of Alameda County	Interfaith Council of Alameda County
57	Allen Temple	HumanGood	Allen Temple Development Corporation
59	Arcspace/ USF Architecture & Community Design Team/ BDE Architecture	Bay Area Community Land Trust	iDev Data (fiscal sponsor) and Landless Peoples Alliance