

County of El Dorado
Traffic Impact Mitigation (TIM) Fee
Offset Program for Developments
With Affordable Housing

SECTION 1 – APPLICATION SUMMARY

Project Name: Amiri Home Second dwelling
 Project Location: 3454 PARK DR
 TIM Fee Zone: _____
 Project Address: 3454 park Dr, Eldorado Hills CA,
 Parcel Number: 107-780-12-100
 Developer Name: Amiri
 Developer Address: 9201 FISH GOLD WAY, SACRAMENTO, CA 95826
 Contact Name: Rasool Amiri / Naem Amiri
 Phone: (916) 212-7183 Fax: () - -
 Email Address: wizmaa@yahoo.com
 Anticipated date of project completion: 2012

TOTAL PROJECT COST \$ 100,000 Cost per Unit: \$ 100,000
TOTAL NUMBER OF UNITS one Total Affordable Units one
TIM FEE OFFSET REQUEST \$ _____ Per Unit Offset \$ _____
TARGET INCOME GROUP(S): Extremely low
AFFORDABILITY LEVEL: 20 years 15 years 10 years

Income Category - Target Income Groups		Number of Persons in Household					
2005 County Income Limits*		1	2	3	4	5	6
Extremely Low	<30% MFI	\$15,300	\$17,500	\$19,650	\$21,850	\$23,800	\$25,350
Very Low Income	<50% MFI	\$25,500	\$29,100	\$32,750	\$36,400	\$39,300	\$42,200
Low Income	<80% MFI	\$40,800	\$46,600	\$52,450	\$58,250	\$62,900	\$67,550
Moderate Income	<120% MFI	\$61,150	\$69,900	\$78,600	\$87,350	\$94,350	\$101,350
Median Income		\$50,950	\$58,250	\$65,600	\$72,800	\$78,600	\$84,450

Note: HUD Income Limits change annually. Visit <http://www.huduser.org/datasets/il.html> or <http://www.hcd.ca.gov/hpd/hrc/rep/state/incNote.html> for current limits.

SECTION 2 – CERTIFICATION

The undersigned hereby certifies that the information contained herein is true to the best of the undersigned's knowledge and belief. Falsification of information supplied in this application may disqualify the Project from a TIM Fee Offset. The information given by the applicant may be subject to verification by the El Dorado County Human Services Department. Submission of this application shall be deemed an authorization to the County to undertake such investigations, as it deems necessary to determine the accuracy of this application and the appropriateness of providing a County TIM Fee Offset to the project. If any information changes after submission of this application the undersigned agrees to notify the County immediately. In addition, any change in scope of proposal and/or costs must be reported to the County immediately.

The undersigned also agrees that any commitment by the County to provide TIM Fee Offsets that may be forthcoming from this application is conditioned by the El Dorado County Advisory Committee's TIM Fee Offset criteria, and the applicant's continued compliance with those guidelines.

The undersigned also hereby certifies that the governing body of the applicant has formally authorized the undersigned to execute the documents necessary to make this application.

Legal Name of Applicant: Naeem Amiri

Signature: 

Name: (please type) Naeem Amiri

Title: CO OWNER

Date: 01/05/10

Phone: (916) 912-7183

Fax: _____

Email Address: wizma@yahoo.com

Mailing Address: 9201 IRISH GOLD WAY

SACRAMENTO, CA 95825

SECTION 3 – PROJECT/PROGRAM NARRATIVE

1. **Completed Pre-Application Review:** The applicant will need to complete Planning Services' Pre-Application process in order to be eligible for funding. (Waived for homeowner building individual second dwelling unit on primary residential property)
2. **Project Summary:** Provide a short summary of the project. Include the project name, developer, project location, number of units, number of accessible and visitable units, total project costs, and amount of TIM Fee Offset requested.
3. **Project Description:** Describe the type of project and scope of activity being proposed, indicating:
 - Type of housing project (new construction, rental, homeownership, or second unit)
 - Unit size and number of units in each bedroom size
 - Population to be served by this development, including an estimate of the number of housing units to be sold or rented to each of the following income groups:
 - Household income below 50% of the area median
 - Household income 50%-80% of the area median
 - Household income 80%-120% of the area median
 - Applicants must provide estimates based on these income categories.
 - If the project proposed will serve a population with special housing needs, for example senior/disabled, describe the services to be offered to the residents and the funding sources for these services.
 - Street address and zip code of each property in the project.
 - Current ownership of each property.
 - Current zoning, use and occupancy status on the site.
 - Site control, including documentation of options to lease or buy.
 - Description of completed properties (house type, square footage, number of bedrooms and bathrooms, parking, lot size, etc.) Please provide renderings, site plans and floors plans if available.
4. **Location Map of parcel(s):** Provide maps of the site plan and location of the project.
5. **Financing Plan (Request for TIM Fee Offset):** Include a budget which identifies anticipated development and other costs for the project including potential funding sources.
6. **Timetable:** Identify key benchmarks for project development, including financing, predevelopment activities, construction start, construction end, and leasing or sales. Describe the timeline for using the TIM Fee offsets should they be granted and how the timeline may or may not match up to the issuance of building permits for a project already approved but not built.
7. **Developer Team Description:** Provide the business name, the primary contact person, street address, telephone number, fax number, and email address for each Developer team member consisting of at least the Developer, Architect, Property Manager and Social Service Provider, if applicable. Please also include the name and number for the Developer's project manager. (see Section 4)

Dear Board:

I am requesting a TIM fee offset due to my financial situation. I am a family of five consisting of me, my wife, and three children. For the past three years I have worked at Round Table Pizza and my wife currently holds an on call position as a medical assistant for Kaiser. Our combined total income is approximately 18,000 per year.

My Father and I are planning to build a second dwelling on the property 3454 park drive. I plan on making this dwelling my permanent residence for the foreseeable future as my father plans to live in the main residence. I have been pre-approved for a loan of 80,000 dollars; this is the max amount I can receive due to my income. My father is confident that he can build the second dwelling within 6 to 8 months with this amount. The residence is a 1,200 square foot, three bedrooms, two bath single story home. It is a beautiful house, However if we are un-able to receive the TIM fee offset it would be extremely difficult if not impossible for me to build.

I have enclosed a completed application along with this letter. I have completed the application to the best of my understanding of how the program works. If you find anything lacking in my packet please allow me to provide whatever additional documentation or proofs that you may require of me. I find myself in need of the TIM fee offset, my family and I will benefit greatly from this program.

Thank You,

Sincerely Naeem Amiri

Cell: 916-212-7183

PROJECT TYPE

• Ownership Housing

Ownership Units *
 Target Income Group: Extremely low
 Affordability Level in Years: 20 years

• Rental Housing

Rental Units **
 Target Income Group: _____
 Affordability Level in years: 20 yr. min. Percent of TIM Offset: _____

Table 1 TIM Fee Offset			
*Applies to Ownership Units			
Affordability Level	Very Low	Low	Moderate
20 years	100%	75%	25%
15 years	75%	50%	0%
10 years	50%	25%	0%
**Applies to Rental Units			
Affordability Level	Very Low	Low	Moderate
20 years (minimum)	100%	75%	25%

• Second Dwelling Units

New Construction of Second Units in a New Subdivision
 (Minimum 20 year affordability for 100% offset.)
 New Construction of Second Unit on Owner Occupied Property
 Level of Affordability in Years: 20 Percent of TIM Offset: 100%
 Target Income Group: Extremely low

Table 2 Second Units			
Existing Homeowner building a 2 nd Unit		New Construction	
Length of Affordability	% of TIM Offset	Length of Affordability	% of TIM Offset
20 years	100%	Not less than 20 years	100%
15 years	75%		
10 years	50%		

DEVELOPER INFORMATION CHECKLIST

Please mark one and include all listed information when you submit the application:

- Not-For-Profit Organization**
 - evidence of 501(c)(3) or 501(c)(4) status
 - articles of incorporation and by-laws
 - certified financial statement (or recent certified audit)

- Private For-Profit Organizations**
 - certified financial statement
 - nature of ownership entity:
 - partnership - evidence of current ownership percentages of partners
 - sole proprietorship
 - corporation
 - if a corporation, Articles of Incorporation and by-laws; if a partnership, Partnership Agreement and, if applicable, Certificate of Limited Partnership

- Private Homeowner (Owner Occupied)**
 - evidence of current ownership
 - provide as much information as possible in Section 3, Project/Program Narrative, including potential tenant information, if available.

PART D – FINANCING PLAN

Include a budget which identifies anticipated development and other costs for the project.

For homeownership projects:

- The Development Pro Forma, which identifies the total development cost and the sources and uses of funds.
- The Home Sale Analysis Pro Forma to provide the estimated purchase price of the housing units to be developed and to describe the income group for which the properties are affordable.
- Attach Developer Agreement of sustained affordability with housing authority.

For rental projects:

- The Development Pro Forma, which identifies the total development cost and the sources and uses of funds.
- Describe the income groups for which the units are affordable.
- Provide proposed rents for each unit size.
- Provide supporting evidence of all funding commitments received, and a list of pending applications with dates of submission and expected awards.
- Provide proposed rent limitation agreement with housing authority.

For second dwelling units on owner occupied property:

- Describe financing available which identifies the total development cost and the sources and uses of funds.
- Describe the income group for which the unit is affordable (2008 HUD Income Limits Table on Page 2).

PART E – ANNUAL DEADLINES AND SUBMISSION DATES

Pre-submission meeting at the Development Services Department is required*	June 15 & December 15
Questions and requests for additional information accepted	June 15 - 30 & December 15 - 30
Application Submission	**July 1 - 15 & January 1 - 15
Notification to developer team who failed to meet submission requirements	January 16 - February 28 & July 16 - August 28
Advisory Group meetings to recommend projects	January 20 - February 28 & July 30 - August 28
Board of Supervisors awards funding	Not later than March 31* & September 30 th

* A pre-submission meeting will be held to ensure that all potential applicants understand the process for submitting petitions. Location may vary. Attendance is strongly encouraged.

**** Deadline is at 5 p.m. of the final date. Deadlines that occur on weekends and holidays will be extended to the next business day.**

SECTION 4 – PROJECT PARTNERS

PROJECT PARTNERS

If the program will involve other entities (financial institutions, social service providers, etc.), please list them and provide a brief description of their roles in the program. Use additional sheets if necessary.

Name: _____
Role: _____
Contact Person: _____
Address: _____
E-Mail Address: _____
Phone: () - **FAX:** () - _____

Name: _____
Role: _____
Contact Person: _____
Address: _____
E-Mail Address: _____
Phone: () - **FAX:** () - _____

Name: _____
Role: _____
Contact Person: _____
Address: _____
E-Mail Address: _____
Phone: () - **FAX:** () - _____

SECTION 5 – PROJECT DEVELOPMENT TEAM

Complete the following information for each proposed development. If this project is a co-venture please list the co-partner and/or the owner organization: *Indicate by asterisk any identity of interest among the development team members.

1a. Co-Partner

Contact: _____
Address: _____
E-Mail Address: _____
Phone: (____) ____ - _____ FAX: (____) ____ - _____

1b. Owner:

Contact: _____
Address: _____
E-Mail Address: _____
Phone: (____) ____ - _____ FAX: (____) ____ - _____

2. Attorney:

Contact: _____
Address: _____
E-Mail Address: _____
Phone: (____) ____ - _____ FAX: (____) ____ - _____

3. Contractor:

Contact: _____
Address: _____
E-Mail Address: _____
Phone: (____) ____ - _____ FAX: (____) ____ - _____

4. Architect:

Contact: _____
Address: _____
E-Mail Address: _____
Phone: (____) ____ - _____ FAX: (____) ____ - _____

5. Management Agent:

Contact: _____
Address: _____
E-Mail Address: _____
Phone: (____) ____ - _____ FAX: (____) ____ - _____

6. Supportive Service Provider

Contact: _____
Address: _____
E-Mail Address: _____
Phone: (____) ____ - _____ FAX: (____) ____ - _____

Attach this information for other key entities involved in the project.

SECTION 6 – GENERAL SITE AND FINANCING INFORMATION

Attach evidence of site control, evidence of proper zoning, sketch plan of site, schematic drawing if new construction, and picture of building if rehabilitation.

PART A – GENERAL SITE INFORMATION

Has a site been determined for this project? Yes No

PART B – SITE CONTROL

1. Does Applicant have site control? Yes No

If yes, form of control: Deed Contract Option to Purchase
Date acquired: 8/15/01
Expiration Date of Contract: / /
Expiration Date of Option: / /
(Include copy of Statement of Intent from current site owner)

If no, describe the plan for attaining site control:

Total Cost of Land: \$ 99,000 Site area size: 1.07 acres or sq. ft.

Seller's Name: _____
Address: _____
City: _____
Phone: (____) _____ - _____ FAX: (____) _____ - _____

2. Is the seller related to the Developer? Yes No

PART C – ZONING AND UTILITIES

1. Is the site properly zoned for your development? Yes No
If no, is site currently in process of rezoning? Yes No
When is the zoning issue expected to be resolved? / /
Explain: _____

2. Are utilities presently available to the site? Yes No

If no, which utilities need to be brought to the site:
 Electric Water Phone Gas Sewer Other: _____

