

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

SECTION 1 – APPLICATION SUMMARY

Project Name: Schuck - 2nd dwelling

Project Location: [REDACTED] Karl Dr. Diamond Spg, CA 95619

TIM Fee Zone: _____

Project Address: [REDACTED] Karl Dr. Diamond Spg, CA 95619

Parcel Number: 097-030-[REDACTED] /

Developer Name: _____

Developer Address: _____

Contact Name: _____

Phone: (530) [REDACTED] Fax: (____) _____ - _____

Email Address: [REDACTED]@comcast.net

Anticipated date of project completion: _____

TOTAL PROJECT COST \$ _____ Cost per Unit: \$ _____

TOTAL NUMBER OF UNITS 1 Total Affordable Units _____

TIM FEE OFFSET REQUEST \$ 23,300⁰⁰ Per Unit Offset \$ _____

TARGET INCOME GROUP(S): _____

AFFORDABILITY LEVEL: 20 years 15 years 10 years

PLANNING DEPARTMENT
 11/15/11 10:25 AM

| 2011 State HCD Income Limits for El Dorado County | | | | | | |
|---|--------------------------------|----------|----------|-----------------|----------|-----------|
| Income Category | Number of Persons in Household | | | | | |
| | 1 | 2 | 3 | 4 | 5 | 6 |
| HCD MFI 2011 for El Dorado County | | | | | | |
| Extremely Low (<30% MFI) | \$15,800 | \$18,050 | \$20,300 | \$22,550 | \$24,400 | \$26,200 |
| Very Low Income (<50% MFI) | \$26,300 | \$30,050 | \$33,800 | \$37,550 | \$40,600 | \$43,600 |
| Low Income (<80% MFI) | \$42,100 | \$48,100 | \$54,100 | \$60,100 | \$64,950 | \$69,750 |
| Median Income (100% MFI) | \$52,550 | \$60,100 | \$67,600 | \$75,100 | \$81,100 | \$87,100 |
| Moderate Income (80%-120% MFI) | \$63,050 | \$72,100 | \$81,100 | \$90,100 | \$97,300 | \$104,500 |

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.

PROJECT TYPE

- Ownership Housing

Ownership Units *
 Target Income Group: _____
 Affordability Level in 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: Low - moderate

| 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.

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: Robert M. Schuck Rachaela A. Schuck

Signature: R M Schuck R A Schuck

Name: (please type) _____

Title: Home owners

Date: _____

Phone: [Redacted] - cell [Redacted]

Fax: _____

Email Address: [Redacted]@comcast.net

Mailing Address: [Redacted] Karl Dr.

Diamond Spg, CA 95619.

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)

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 Date acquired: ___/___/___
 Contract Expiration Date of Contract: ___/___/___
 Option to Purchase
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: \$ _____ Site area size: _____ 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: Septic

permit # 3595 5/23/94

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 (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 st & 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.**

Schuck – Second dwelling
Parcel #097-030-04

Our family has lived in Diamond Springs since 1985. My husband and I had a mobile home moved on to the property in 1994, so that, my mother and papa could live in the permanent dwelling. We have lived in the mobile home under the Mother- in-law quarters since that time. Our daughter and her son now live with us and we are faced with housing four generations on a very low income. We are applying for the TIM Offset program in order to make our temporary mobile home a second dwelling on our property.

We have been unable to refinance our home due to the temporary home situation. Therefore, we need to make this a second dwelling in order to refinance and lower our monthly cost of living, and to continue to be able to provide for our extended family.

Our home has three bedrooms and two bathrooms, approximately 1110 sq. ft. My [REDACTED] live in this home. My [REDACTED] who lives on a fixed income lives in the 900 sq.ft. permanent dwelling. Our household income would be [REDACTED] of the area median.

All aspects of the temporary home have been approved and permitted. There is no construction required in order to turn this into a 2nd dwelling. All fees were paid at time of application for the temporary mobile home permit TMA# [REDACTED] parcel [REDACTED]

If we are approved for the TIM Offset program, our additional cost will be covered by the [REDACTED]

Robert Schuck
Rachaela Schuck
530-[REDACTED]
530-[REDACTED]

We were not sure about some of the fees on the worksheet.

↑
N
W E
 S

SCALE:

1" = 50'

.745 ACRE

30' road
to house

distance from house 5'
back 30' to house 43' to road
fall 20' to house 25' road
off 25' easement.

WEST SIDE

easement 20'

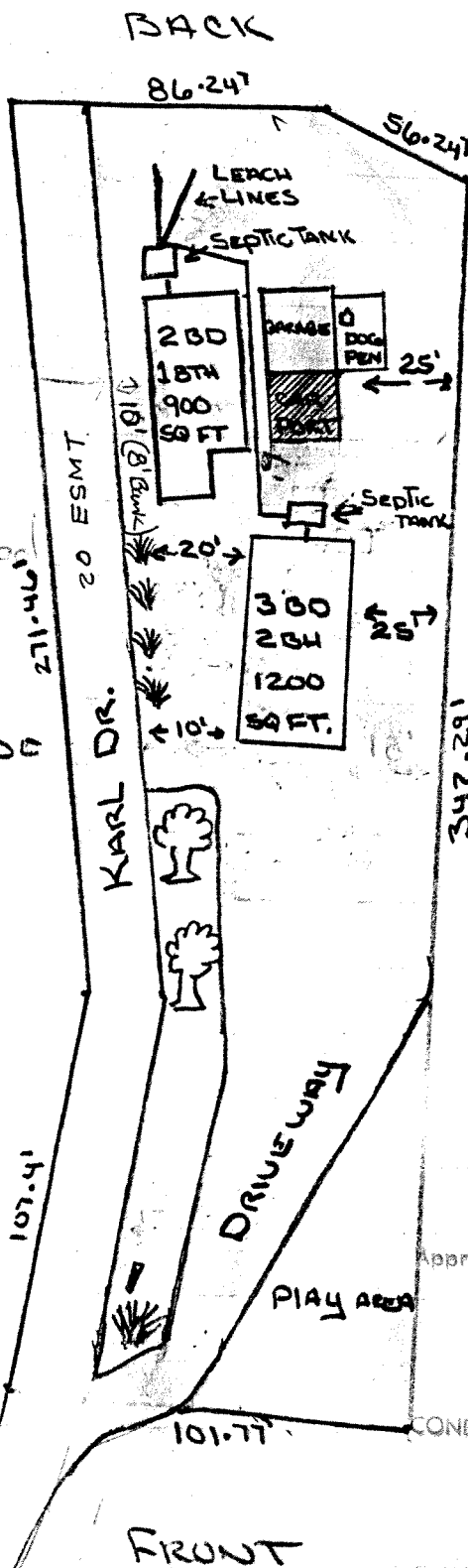
RIA Zoning

17.14.020

Set backs front & Rear
may be equal to, but
not less than existing
structure (Home & Garage)

Don Carroll 6-22-94

(per Bob B)



EAST SIDE

El Dorado County
Planning Department
Approved by _____

JUN 27 1994

Plans comply with Zoning
Ordinances and Resolutions
CONDITIONS Sub-Std
Set backs
Apvt