

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

SECTION 1 – APPLICATION SUMMARY

Project Name: CAMBRIDGE ROAD TOWNHOMES
 Project Location: 3060-3070 CAMBRIDGE RD., CAMERON PARK
 TIM Fee Zone: 2
 Project Address: above
 Parcel Number: 082-531-15-100, 082-531-16-100
 Developer Name: LOUANN & BROOKE PARTRIDGE
 Developer Address: 2981 WINDSOR CT, RESCUE, CA 95672
 Contact Name: LOUANN PARTRIDGE or BROOKE PARTRIDGE
 Phone: (530) 672-6450 ← Fax: () same
 Email Address: SYLOU@SBCGLOBAL.NET BROOKE.PARTRIDGE@VITALWAVE.COM
 Anticipated date of project completion: 2011 - FALL

TOTAL PROJECT COST \$ 4,000,000 Cost per Unit: \$ 264,000, \$ 220,000
TOTAL NUMBER OF UNITS 16 Total Affordable Units 16
TIM FEE OFFSET REQUEST \$ 324,000 Per Unit Offset \$ 20,000
TARGET INCOME GROUP(S): LOW & MODERATE INCOME
AFFORDABILITY LEVEL: **20 years** **15 years** **10 years**

Income Category - Target Income Groups 2009 County Income Limits*		Number of Persons in Household					
		1	2	3	4	5	6
Extremely Low	<30% MFI	\$15,300	\$17,500	\$19,650	\$21,850	\$23,600	\$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	\$65,500	\$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.

El Dorado County Planning Services

Att: Shawna Purvines

January 15, 2010

Shawna:

Attached is our application for TIM Fee Offset.

In case you have questions, I want to let you know that I will be traveling from January 26 through February 19. You can contact my daughter, Brooke, if you something comes up during that time. Her contact information is:

Phone 650-387-7592

Email Brooke.Partridge@Vitalwaveconsulting.com

Regards,



Louann Partridge

530-672-6450

sylou@sbcglobal.net

11/15/10 10:00 AM

11/15/10 10:00 AM

PROJECT TYPE

- Ownership Housing

16 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: _____ Percent of TIM Offset: _____
 _____ Target Income Group: _____

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.



State of California Secretary of State

L

STATEMENT OF INFORMATION (Limited Liability Company)

Filing Fee \$20.00. If amendment, see instructions.

IMPORTANT — READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. LIMITED LIABILITY COMPANY NAME (Please do not alter if name is preprinted.)

Cambridge Road Townhomes, LLC

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

SEP 23 2008

This Space For Filing Use Only

DUE DATE:

FILE NUMBER AND STATE OR PLACE OF ORGANIZATION

2. SECRETARY OF STATE FILE NUMBER

200817210283

3. STATE OR PLACE OF ORGANIZATION

CALIFORNIA

NO CHANGE STATEMENT

If there has been no change in any of the information contained in the last Statement of Information filed with the Secretary of State, check the box and proceed to Item 13.

If there have been any changes to the information contained in the last Statement of Information filed, or no Statement of Information has been previously filed, this form must be completed in its entirety.

COMPLETE ADDRESSES FOR THE FOLLOWING (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE

2981 WINDSOR CT.

CITY AND STATE

RESERVE, CA.

ZIP CODE

95672

5. CALIFORNIA OFFICE WHERE RECORDS ARE MAINTAINED (DOMESTIC ONLY)

same

CITY

STATE

ZIP CODE

CA

NAME AND COMPLETE ADDRESS OF THE CHIEF EXECUTIVE OFFICER, IF ANY

6. NAME ADDRESS

LOWANN PARTRIDGE

2981 WINDSOR CT. RESERVE CA

ZIP CODE

95672

NAME AND COMPLETE ADDRESS OF ANY MANAGER OR MANAGERS, OR IF NONE HAVE BEEN APPOINTED OR ELECTED, PROVIDE THE NAME AND ADDRESS OF EACH MEMBER (Attach additional pages, if necessary.)

7. NAME ADDRESS

BROOKE PARTRIDGE

101 ALMA ST. SOLO ALTO, CA

CITY AND STATE

ZIP CODE

94301

8. NAME ADDRESS

LOWANN PARTRIDGE

2981 WINDSOR CT. RESERVE, CA.

CITY AND STATE

ZIP CODE

95672

9. NAME ADDRESS

CITY AND STATE

ZIP CODE

AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California address. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to Corporations Code section 1505 and Item 11 must be left blank.)

10. NAME OF AGENT FOR SERVICE OF PROCESS

TOM C. ARMSTRONG

11. ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL

54 JEFFERSON, STE. 100

CITY

REDWOOD CITY

STATE

ZIP CODE

CA

94063

TYPE OF BUSINESS

12. DESCRIBE THE TYPE OF BUSINESS OF THE LIMITED LIABILITY COMPANY

BUILDING TOWNHOME RESIDENCES

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

S. LOWANN PARTRIDGE
TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM

Lowann Partridge
SIGNATURE

10-0243 F 5 of 73
TITLE

9/19/08
DATE



State of California Secretary of State

LLC-1

File # 200817210283

LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION

ENDORSED - FILED In the office of the Secretary of State of the State of California

JUN 20 2008

A \$70.00 filing fee must accompany this form.

IMPORTANT - Read instructions before completing this form.

This Space For Filing Use Only

ENTITY NAME (End the name with the words "Limited Liability Company," or the abbreviations "LLC" or "L.L.C." The words "Limited" and "Company" may be abbreviated to "Ltd." and "Co.," respectively.)

1. NAME OF LIMITED LIABILITY COMPANY Cambridge Road Townhomes, LLC

PURPOSE (The following statement is required by statute and should not be altered.)

2. THE PURPOSE OF THE LIMITED LIABILITY COMPANY IS TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED UNDER THE BEVERLY-KILLEA LIMITED LIABILITY COMPANY ACT.

INITIAL AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the agent must reside in California and both items 3 and 4 must be completed. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to Corporations Code section 1505 and item 3 must be completed (leave item 4 blank).

3. NAME OF INITIAL AGENT FOR SERVICE OF PROCESS Thomas C. Armstrong, Esq.

4. IF AN INDIVIDUAL, ADDRESS OF INITIAL AGENT FOR SERVICE OF PROCESS IN CALIFORNIA CITY STATE ZIP CODE 545 Middlefield Rd. Suite 250 Menlo Park CA 94025

MANAGEMENT (Check only one)

- 5. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY: [] ONE MANAGER [x] MORE THAN ONE MANAGER [] ALL LIMITED LIABILITY COMPANY MEMBER(S)

ADDITIONAL INFORMATION

6. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE A PART OF THIS CERTIFICATE.

EXECUTION

7. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.

6/20/08 DATE

S. Louann Partridge SIGNATURE OF ORGANIZER

S. Louann Partridge TYPE OR PRINT NAME OF ORGANIZER

10-0243 F 6 of 23



Secretary of State
Business Programs Division

1500 11th Street, 3rd Floor
Sacramento, CA 95814

200817210283

Business Entities
(916) 657-5448

LIMITED LIABILITY COMPANY (LLC) - DOCUMENT FILING REQUEST FORM

DATE: 6/20/08

THIS DOCUMENT IS BEING PROCESSED FOR: (Please type or print legibly.)

Name: S. Louann Partridge

Address: 2981 Windsor Ct.

City/State/Zip: Rescue, Ca. 95672

Waiting

Attn: Louann Partridge

Phone #: 530-672-6450 Mail Back
408-489-0262 (cell)

LIMITED LIABILITY COMPANY NAME: (Please type or print legibly.)

Cambridge Road Townhomes, LLC

RECEIVED
SACRAMENTO OFFICE
2008 JUN 20 PM 3:55
SECRETARY OF STATE

SPECIAL INSTRUCTIONS:

- In addition to the required filing fee, a \$15.00 special handling fee is applicable for processing documents delivered in person at the public counter.
- The \$15.00 special handling fee must be remitted by separate check for each submittal and will be retained whether the documents are filed or rejected.
- Please make both checks payable to the Secretary of State.
- If the documents have been previously rejected, please include a copy of this request form upon resubmittal.

SECRETARY OF STATE USE ONLY

LEGAL REVIEW NOTES:

()	LLC - CA/FGN	\$ 70.00	
()	AMENDMENT - CA/FGN	\$ 30.00	
()	RESTATED - CA	\$ 30.00	
()	CORRECTION - CA/FGN	\$ 30.00	
()	DISSOLUTION - CA	NO FEE	
()	CANCELLATION - CA/FGN	NO FEE	
()	CONTINUATION - CA	\$ 30.00	
()	CONVERSION - \$30, \$70 or \$150	\$ _____	
()	MERGER - between LLCs	\$ 70.00	
()	MERGER - between LLCs & OBEs	\$150.00	
()	AGENT RESIGNATION - CA/FGN	NO FEE	
()	PAGES	() CERTIFY	\$ _____
()	CERTIFICATE OF GOOD STANDING	\$ _____	
()	CERTIFICATE OF FILING	\$ _____	
()	SPECIAL HANDLING FEE	\$ 15.00	

CK MO TOTAL DUE \$ _____

CC CASH AMT REC'D \$ _____
10-0243 F 7 of 23

ACCTG. _____ REFUND \$ _____



State of California
Secretary of State

L

STATEMENT OF INFORMATION
(Limited Liability Company)

Filing Fee \$20.00. If amendment, see instructions.

IMPORTANT — READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. LIMITED LIABILITY COMPANY NAME (Please do not alter if name is preprinted.)

CAMBRIDGE ROAD TOWNHOMES, LLC
2981 WINDSOR CT.
RESCUE, CA. 95672

This Space For Filing Use Only

DUE DATE:

FILE NUMBER AND STATE OR PLACE OF ORGANIZATION

2. SECRETARY OF STATE FILE NUMBER

200817210283

3. STATE OR PLACE OF ORGANIZATION

CALIF.

COMPLETE ADDRESSES FOR THE FOLLOWING (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE

2981 WINDSOR CT.

CITY AND STATE

RESCUE, CA.

ZIP CODE

95672

5. CALIFORNIA OFFICE WHERE RECORDS ARE MAINTAINED (DOMESTIC ONLY)

same as above

CITY

STATE

CA

ZIP CODE

NAME AND COMPLETE ADDRESS OF THE CHIEF EXECUTIVE OFFICER, IF ANY

6. NAME

ADDRESS

CITY AND STATE

ZIP CODE

S. LOUANN PARTRIDGE, 2981 WINDSOR CT., RESCUE, CA. 95672

NAME AND COMPLETE ADDRESS OF ANY MANAGER OR MANAGERS, OR IF NONE HAVE BEEN APPOINTED OR ELECTED, PROVIDE THE NAME AND ADDRESS OF EACH MEMBER (Attach additional pages, if necessary.)

7. NAME

ADDRESS

CITY AND STATE

ZIP CODE

BROOKE ANN PARTRIDGE, 101 ALMA ST., PALO ALTO, CA 94301

8. NAME

ADDRESS

CITY AND STATE

ZIP CODE

BETH KLEIN 6035 SOUTHERNESS, EL DORADO HILLS, CA 95762

9. NAME

ADDRESS

CITY AND STATE

ZIP CODE

AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California address. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to Corporations Code section 1505 and Item 11 must be left blank.)

10. NAME OF AGENT FOR SERVICE OF PROCESS

Thomas Armstrong

11. ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL

545 Middlefield Rd., Ste. 250

CITY

MEUNO PARK

STATE

CA

ZIP CODE

94025

TYPE OF BUSINESS

12. DESCRIBE THE TYPE OF BUSINESS OF THE LIMITED LIABILITY COMPANY

CONSTRUCTION

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

S. L. PARTRIDGE

TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM

S. Louann Partridge Mgr. 9/4/08

SIGNATURE

TITLE

DATE

State of California
Secretary of State

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That the attached transcript of 7 page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

Debra Bowen

DEBRA BOWEN
Secretary of State

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: S. LOUANN PARTRIDGE
Signature: S. Louann Partridge
Name: (please type) S. LOUANN PARTRIDGE, CAMBRIDGE ROAD
Title: MANAGER TOWN HOMES, LLC
Date: 1/14/10
Phone: 530-672-6450
Fax: _____
Email Address: SYLOU@SBCGLOBAL.NET
Mailing Address: 2981 WINDSOR CT.
RESCUE, CA.
95672

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)

PROJECT NARRATIVE

This narrative is submitted as part of the application for TIM Fee offsets for a project in El Dorado County located at 3060/3070 Cambridge Road, Cameron Park. Current ownership of this property is under the name Cambridge Road Townhomes LLC. A copy of the deed is attached. The principal managers of the LLC are Louann Partridge and Brooke Partridge.

The site is across the road from Cameron Park Lake providing excellent recreational activities for residents –adults and children alike. There are good schools, convenient shopping and recreational opportunities in the community, as well.

Original plans for this project together with necessary fees, studies, and other requirements were submitted to the planning department in 2007 and tentative map approval was received from the planning commission in 2008. At that time the project was designed to include twelve 3 bedroom 2 ½ bath single family 2-story homes with attached 2-car garages and inside laundry. The size of the units varied between 1500 and 1700+ sq. feet. Two of these units are designed to be accessible for handicapped persons. A copy of the Discussion Document for the project is attached and provides photos of the parcel and surrounding area, sketches of the project, and biographical information on the owners and architect.

Due to the economic climate and the state of the real estate market, owners hope to take this project in a different direction that would serve the needs of potential home buyers in the affordable housing market. This new construction project will include 16 single family units ranging from 1000 to 1200 square feet and will include 12 three bedroom units and 4 two bedroom units.

The goal of the project is to provide affordable housing to be sold to buyers in the low income and moderate income groups. The estimate is that 7 of the units would be targeted for the low income homeowner while the remainder would be built with the moderate level income buyer in mind. A copy of an estimated budget is attached.

Also, rough sketches of the project as revised are attached. There will be 12 three bedroom / two bath units of approximately 1200 sq. ft. The remaining homes will be 2 bedroom/2 bath floorplans of 1000 sq. ft. All units will have a 2 car attached garage with the exception of 2 homes that will have 1 attached garage and an attached carport. It is very possible to modify 2 of the units for handicap access. Provision has been made for 9 off-street guest parking spots.

The timelines of this project are somewhat difficult to estimate since tentative map approval of the original project has already been granted. In addition the application for site improvement permit as well as plans for sewer/water have already been submitted. The time for modification/resubmittal is unknown, but hopefully this process might be minimal due to previous approval. Our target is to accomplish all of these tasks in order to begin excavation in summer of 2010. We then would hope to apply for a building permit in summer and at that time would like to apply TIM fee offset.

At this time efforts are being made to contact non-profit developers to act as partners in this endeavor. In addition, owners are seeking financing from lenders.

ESTIMATED BUDGET FOR CAMBRIDGE ROAD TOWNHOME
DEVELOPMENT

Construction cost:

12 units of 1200sq. ft. @\$120/sq.'	\$1,728,000
4 units of 1000 sq. ft. @\$120/sq.'	480,000
Landscaping	25,000
Legal costs	12,000
Financing	300,000
Sales/marketing costs	50,000

Fees:

School 18,400x3.97	73,000
Fire 18,400 x 1.10	20,240
TIM fee	96,000
EID and Sewer	235,000
Miscell. Add'l	<u>30,000</u>

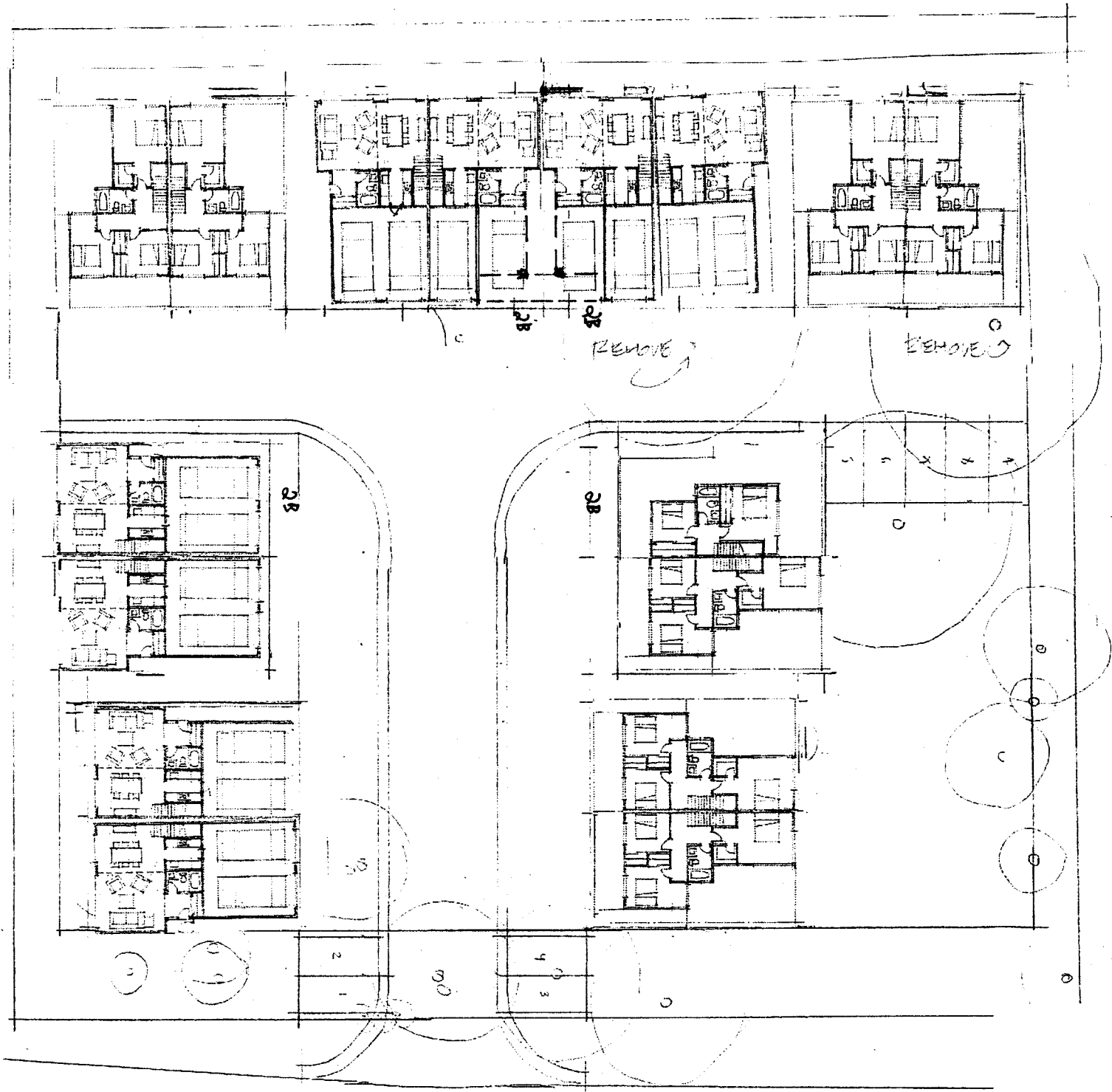
3,049,240

Costs already incurred for studies, plans, fees, land

1,000,000

TOTAL

\$4,049,420

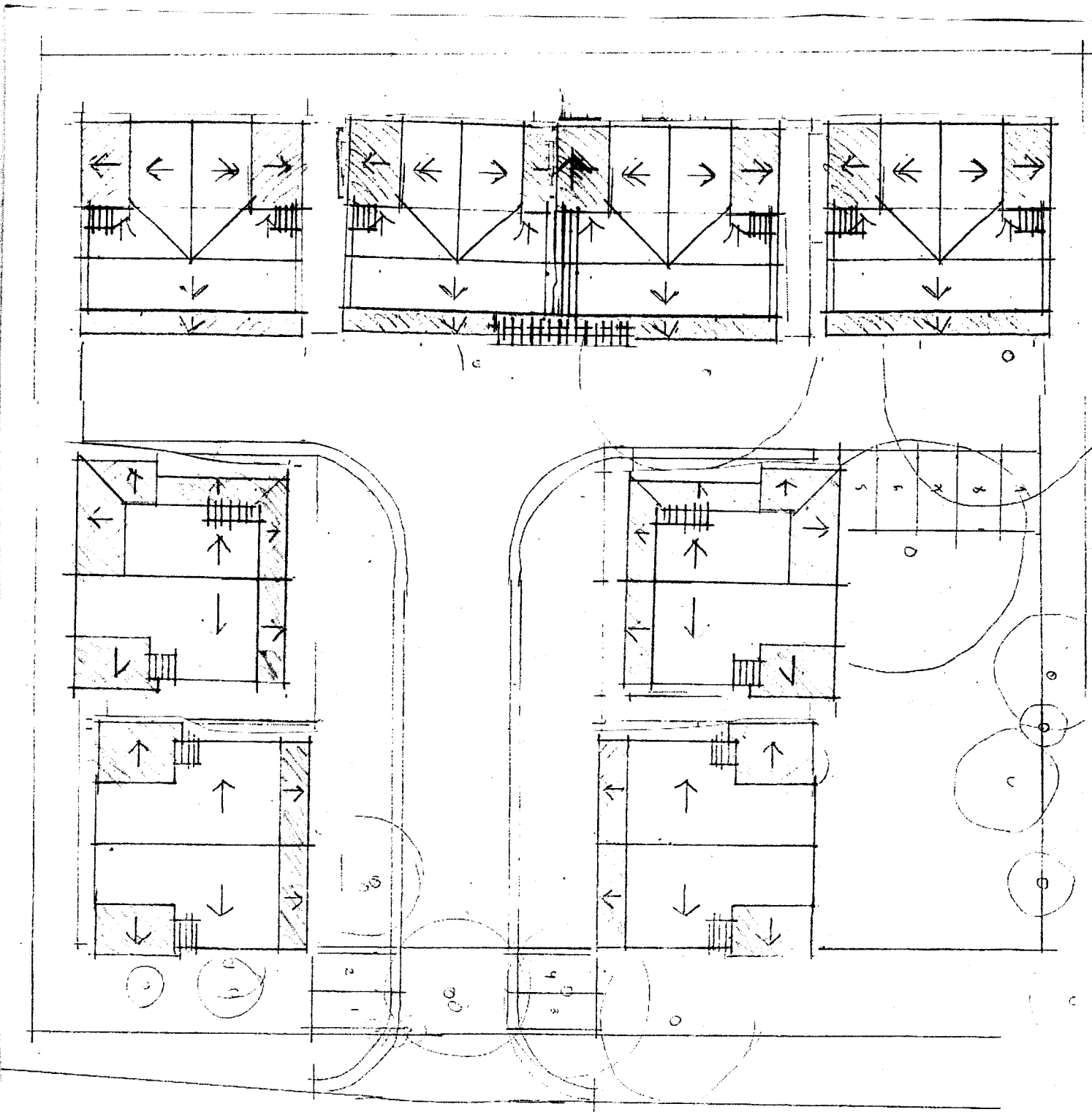


14 JAN 10
Date:
Project:
060918

1

**3060-3070 Cambridge
Road Homes**
3060-3070 Cambridge Road,
Cameron Park, California

STUDIO BERGTRAUN, AIA
ARCHITECTS
Emeryville, California 910-432-0638
www.studiobergtraun.com
10-02431-14-01-23



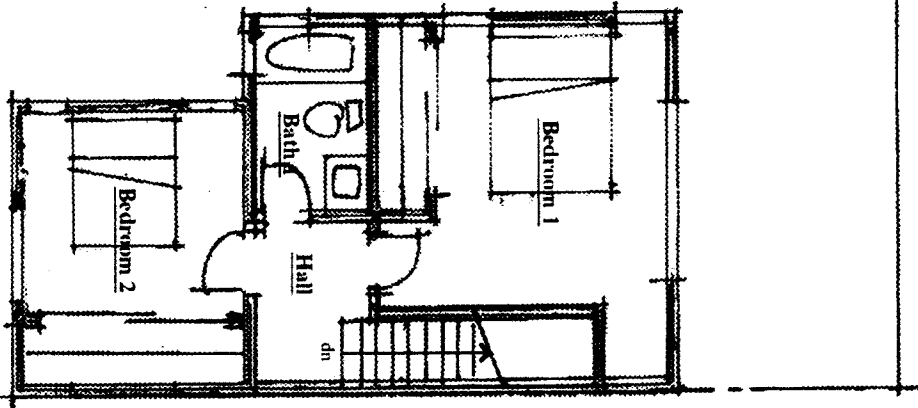
Date: 14 JAN 10
 Project: 060418

2

3060-3070 Cambridge Road Homes

3060-3070 Cambridge Road,
 Cameron Park, California

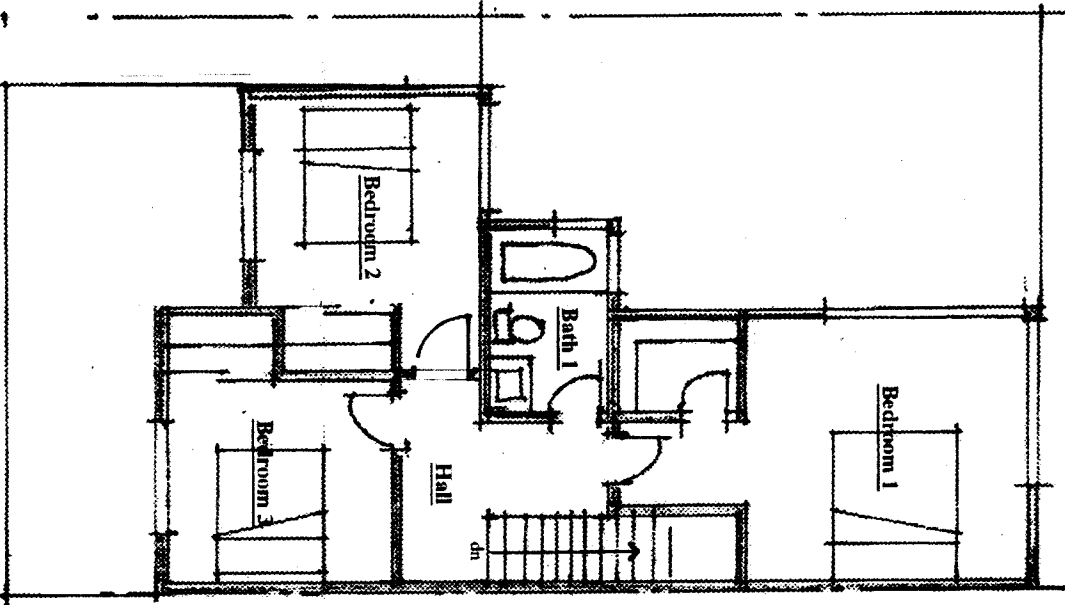
STUDIO BERGTRAUN, AIA
 ARCHITECTS
 Encinitas, California 919-452-0512
www.studiobergtraun.com



2-Bedroom / 2 Bath

Second Floor Plan

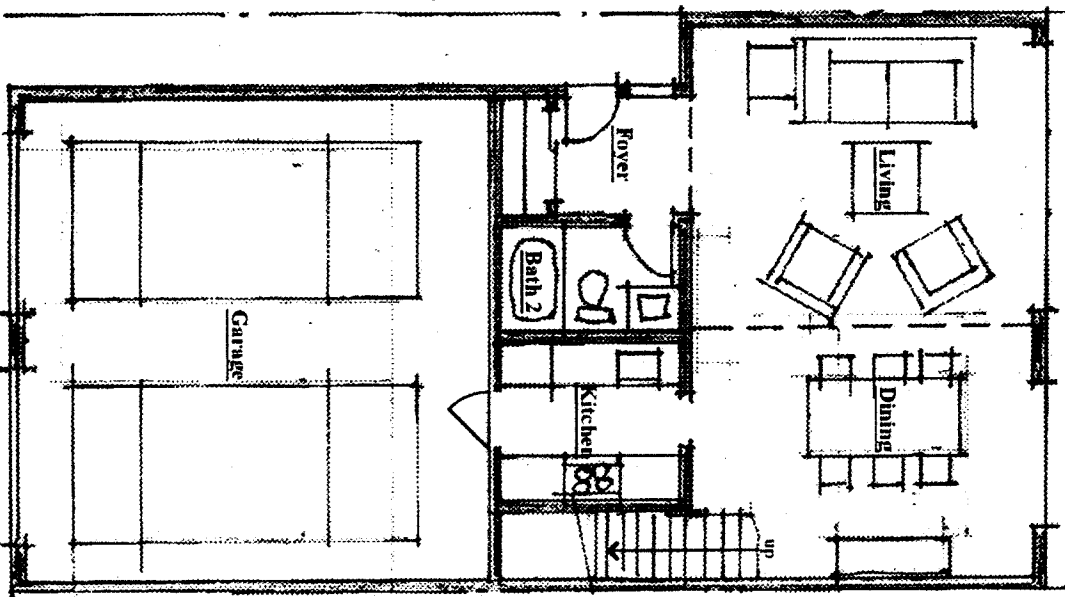
408 SF Second floor living
 600 SF Ground floor living
 1008 SF Total living



3-Bedroom / 2 Bath

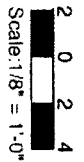
Second Floor Plan

580 SF Second floor living
 600 SF Ground floor living
 1180 SF Total living



Ground Floor Plan

600 SF Ground floor living
 484 SF Garage
 1084 SF Total footprint



3

3060-3070 Cambridge Road Homes
 3060-3070 Cambridge Road,
 Cameron Park, California

STUDIO BERGTRAUN, AIA
 ARCHITECTS
 Emeryville, California 94608-5012
www.studiobergtraun.com

Project: 060918
Date: 14 Jan 10

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: LOUANN PARTRIDGE, CAMBRIDGE ROAD
Role: MANAGER, OWNER TOWNHOMES, L.L.C.
Contact Person: above
Address: 2981 WINDSOR CT, RESCUE, CA. 95672
E-Mail Address: SYLOW@SBCGLOBAL.net
Phone: (530) 672-6450 **FAX:** () -

Name: BROOKE PARTRIDGE
Role: OWNER, MANAGER
Contact Person: above
Address: 101 ALMA ST. #908 PALO ALTO, CA. 94301
E-Mail Address: BROOKE.PARTRIDGE@VITALWAVECONSULTING.COM
Phone: (650) 387-7592 **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: ___/___/___
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: \$ _____ 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: _____

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 (2009 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.**

ESTIMATED BUDGET FOR CAMBRIDGE ROAD TOWNHOME
DEVELOPMENT

Construction cost:

12 units of 1200sq. ft. @\$120/sq.'	\$1,728,000
4 units of 1000 sq. ft. @\$120/sq.'	480,000
Landscaping	25,000
Legal costs	12,000
Financing	300,000
Sales/marketing costs	50,000

Fees:

School 18,400x3.97	73,000
Fire 18,400 x 1.10	20,240
TIM fee	96,000
EID and Sewer	235,000
Miscell. Add'l	<u>30,000</u>

3,049,240

Costs already incurred for studies, plans, fees, land

1,000,000

TOTAL

\$4,049,420

A budget is attached which provides an estimate of total costs. Owners have provided approximately \$1,000,000 to the development and are seeking a partnership with a non-profit developer for the remainder of costs.

Purchase price of the 3 bedroom units is estimated to be \$290,000 and \$250,000 for the 2 bedroom units. The income groups targeted for marketing are the low income and moderate income levels.

