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

## SECTION 1 - APPLICATION SUMMARY

Project Name: Kimbrough SDU ge
Project Location: $\frac{4640 \text { CHROME RIDGE RD, PLACERUULLE }}{6 \text { OF }}$
Project Address: AS ABOVE
Parcel Number:


Developer Name: = IOTVN KIMBIROUG16 (OWNER)
Developer Address: AS ABOVE
contact Name: JoHn Kimbroug 4
Phone: $(530) \underline{621}-3879$ Fax: (__
Email Address: bonnie Kimbrough@yahoo:com
Anticipated date of project completion:
TOTAL PROJECT COST SSEE NARRATTVE cost per Unit: \$ $\qquad$
TOTAL NUMBER OF UNITS $\qquad$ Total Affordable Units $\qquad$
TIM FEE OFFSET REQUEST $\$ 17.600 \quad 100 \%$ Per Unit offset $\$$ $\qquad$
TARGET INCOME GROUPS): $\qquad$ MODERATE AFFORDABILITY LEVEL: $\qquad$ 20 years $\qquad$ 15 years $\qquad$ 10 years


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.

| CASE CATG ST COMMISSION | REMARK |  |
| :--- | :--- | :--- |
| ASB REV | Asbestos Review Area | ASBESTOS REVIEW AREA |
| DOT1 TIM5 | T.I.M. FEES | DOT TIM FEE |
| ECOP MIT2 | RARE PLANT PRESERVES | MITIGATION AREA 2 |
| FIRE MOD | FIRE REGULATION REVIEW | MODERATE HAZARD GIO04281 |
| RAZ 2-5 | STATE TIM FEE-RAZ 2-5 | STATE TIM FEE - RAZ 2-5 |
| SDES CATC | SEISMIC DESIGN CATEGORY | SEISMIC DSGN CATG C M\#4593_CD |
| TIM CNTL | HWY 50 VARIABLE T.I.M. | T.I.M. CENTRAL DISTRICT |
| TIMG ZON6 | HWY 50 T.I.M. | T.I.M ZONE 6 |

LMC198A
F1=HELP 2=CLR 3=QUIT 7/8=SCROLL S7/8=PREV/NEXT F9=T99 F10=T07 11=L10 12=EXIT

## PROJECT TYPE

- Ownership Housing
$\qquad$ Ownership Units *Target Income Group: Affordability Level in Years: $\qquad$
- Rental Housing


## Rental Units

Target Income Group:
Affordability Level in years:_ 20 yr. min. Percent of TIM Offset: $\qquad$
Table 1
TIM Fee Offset
*Applies to Ownership Units

| Affordability Level | Very Low | Low | Moderate |
| :---: | :---: | :---: | :---: |
| $\mathbf{2 0}$ years | $100 \%$ | $75 \%$ | $25 \%$ |
| $\mathbf{1 5}$ years | $75 \%$ | $50 \%$ | $0 \%$ |
| $\mathbf{1 0}$ years | $50 \%$ | $25 \%$ | $0 \%$ |
| ${ }^{* *}$ Applies to Rental Units |  |  |  |
| Affordability Level | Very Low | Low | Moderate |
| $\mathbf{2 0}$ 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 TMM Offset: 100 Target Income Group: LOU TO NODFRATE

Table 2
Second Units

| Existing Homeowner building a $2^{\text {nd }}$ 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:

$\square$ 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)
$\square$ 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:


Title: $\qquad$
Date:


Phone:


Fax:
Email Address:


July 9, 2010
PROJECT SUMMARY/ DISCRIPTION - 4640 Chrome Ridge Rd.

The project consist of the conversion of a existing storage space into a one bedroom apartment of 670 sq. ft. The original dwelling on the property was constructed in 1978/79. Major additions were completed approximately 10 years ago, including a two story detached garage. The upper story of the garage was built for storage but was constructed to dwelling standards including insulation, sheetrock and finish. This is the space converted to the apartment. All the construction on the property was permitted and inspected up to the time of the conversion. The project is an individual dwelling unit on primary residential property.

The project was necessary due to medical/financial concerns of the owner, see attached letter.
The total cost of the project was approximately $\$ 8200$. This includes all interior finish, floors, cabinets, heating, hot water, appliances and a new septic system. This figure is low because the basic building was pre-existing. I did all the labor myself.

The unit will for the low to moderate income group, myself and my wife, both seniors. She is now $100 \%$ disabled.

We request wavier of $100 \%$ of the TIM fees.
There is no financing plan, all cost have been paid to date.

Thank you for your time and consideration in this matter. If you have additional questions we can be reached on our cell phones. (916) 825-7260, (916) 825-7271


## 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 $\quad$ No

## PART B - SITE CONTROL

1. Does Applicant have site control? If yes, form of control: " Deed

$\square$ Contract Expiration Date of Contract: ___ /_____

- Option to Purchase

Expiration Date of Option: $\qquad$ 1 _1 1 (Include copy of Statement of Intent from current site owner) If no, describe the plan for attaining site control:
$\qquad$
$\qquad$

Total Cost of Land: \$ $\qquad$ Site area size: $\qquad$ 2.67 ac acres or sq. ft.

Seller's Name:
Address:
City:
Phone: $\qquad$ - $\qquad$ FAX: (__ ) $\qquad$ $-$
2. Is the seller related to the Developer?
$\square$ Yes
$\square$ No

## PART C - ZONING AND UTILITIES

1. Is the site properly zoned for your development? If no, is site currently in process of rezoning?


Explain:
$\qquad$
2. Are utilities presently available to the site?

央Yes $\square$ No If no, which utilities need to be brought to the site:

- Electric
$\square$ Water
$\square$ Phone
$\square$ Gas
$\square$ Sewer
- Other:
$\qquad$ U aNa septet


