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

SECTION 1 - APPLICATION SUMMARY

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Project Name: GRANNY FLAT ADDITION
Project Location: PARque del Robles CAMINO CH 95709
TIM Fee Zone:
Project Address: PARQUE del Robles CAMINO CA. 95709
Parcel Number: APN 077-780
Developer Name: OWNER /BUILDER ROFER DECANTILLON
Developer Address: PARQUE del Robles CAMINO CA.
Contact Name: Roger De CANTITION
Phone: (<u>530</u>) 4 Fax: ()
Email Address:
Anticipated date of project completion:
TOTAL PROJECT COST \$ 40,000 (Approx.) Cost per Unit: \$
TOTAL NUMBER OF UNITS / Total Affordable Units
TIM FEE OFFSET REQUEST \$ 8720.00 Per Unit Offset \$ #8720.00
TARGET INCOME GROUP(S): LOW INCOME
AFFORDABILITY LEVEL: 20 years 15 years 10 years

			Number of F	usehold			
Income Category		gory Person		3 Persons	4 Persons	5 Persons	6 Persons
Extremely Low Income	<u>30% AMI</u>	\$16,000	\$18,300	\$20,600	\$22,850	\$24,700	\$26,550
Very Low Income	50% AMI	\$26,650	\$30,450	\$34,250	\$38,050	\$41,100	\$44,150
Low Income	80% AMI	\$42,650	\$48,750	\$54,850	\$60,900	\$65,800	\$70,650
Median Income	100% AMI	\$53,250	\$60,900	\$68,500	\$76,100	\$82,200	\$88,300
Moderate Income	120% AMI	\$63,900	\$73,050	\$82,150	\$91,300	\$98,600	\$105,900

Note: State Income Limits change annually. Visit <u>http://www.hcd.ca.gov/hpd/hrc/rep/state/incNote.html</u> for current income limits.

PROJECT TYPE

- Ownership Housing
 - Ownership Units *
 - ____ Target Income Group:___
 - Affordability Level in Years:_____
- <u>Rental Housing</u>
 - Rental Units **
 - Target Income Group: _____
 - Affordability Level in years: <u>20 yr. min.</u> Percent of TIM Offset: _____

	Table TIM Fee		
	*Applies to Own	ership Units	111111 - 1111 - 1111 - 1111 - 1111
Affordability Level	Very Low	Low	Moderate
20 years	100%	75%	25%
15 years	75%	50%	0%
10 years	50%	25%	0%
	**Applies to R	ental 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.)

X New Construction of Second Unit on Owner Occupied Property

____ Level of Affordability in Years: _____ Percent of TIM Offset: 100 70

Towart Income Cusum	100.	1.1.11.12.1	
Target Income Group:	Low	INCOME	_

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

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

Y 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:	ROGER K. De CANTIllow
Signature:	Kn. L. V. Littl'
Name: (please type)	ROGER K. DECANTILLON
Title:	OWNER Builder
Date:	APRIL 17 3 2013
Phone:	530-
Fax: _	
Email Address:	@ ATT. NET
Mailing Address:	RANCHO del Sol
_	CAMINO CA 95709

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.
- 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

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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	- NONE-
Contact Person: Address: E-Mail Address: Phone:	
Name: Role Contact Person: Address: E-Mail Address: Phone:	
Name: Role Contact Person: Address: E-Mail Address: Phone:	

SECTION 5 - PROJECT DEVELOPMENT TEAM

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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.

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1a.	Co-Partner				N	UNI	_		1.11	
	Contact:									
	Address:									
	E-Mail Address:									
	Phone:	(_)			FAX:	(_)		
1b.	Owner:									
	Contact:						~~~~~		and the second	
	Address:									
	E-Mail Address:									
	Phone:	(_)			FAX:	(_)		
2.	Attorney:									
	Contact:									
	Address:									
	E-Mail Address:									
	Phone:	(_)			FAX:	(_)		
3.	Contractor:		in the second						1 11.	
	Contact:									
	Address:									
	E-Mail Address:									
	Phone:	(_)			FAX:	(_)		
4.	Architect:									
	Contact:				_					
	Address:									
	E-Mail Address:									
	Phone:			-			(_)		
5.	Management									
	Contact:									
	Address:									
	E-Mail Address:									
	Phone:	(_)			FAX:	(_)		
6.	Supportive Se	rvice	Provide	r						
	Contact:									
	Address:					2				
	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 determine	d for this project?	Yes	□ No
PAR1	B - SITE CONT	ROL		
1. Doe	es Applicant have sit	e control?	Yes	□ No
			Date acquired: <u>04</u>	
ту	es, form of control:			
		□ Contract.	Expiration Date of (Contract: / /
		Option to Purchas	se	
		Expiration Date of (Option: / /	
		(Include copy of Sta	atement of Intent from	h current site owner)
If n	o, describe the plan	for attaining site cont	trol:	
Total	Cost of Land: \$	Site area	size:a	cres or sa ft
rocur				
Seller's	s Name:			
Addres				
City:		and an original second s		
Phone	()_		FAX: ()	······
2. Is	the seller related to	the Developer?	□ Yes	⊓ No
			2.00	2.110
PART	C – ZONING AN	ID UTILITIES		
1.		zoned for your develo	pment? 🕅 Yes	□ No
1.		ly in process of rezon		
		issue expected to be		
	when is the zoning	issue expected to be	Expl	
	• • • • • • • • • • • • • • • • • • •			
			an a	
2.	Are utilities present	ly available to the site	? 🔀 Yes	□ No
	The subtable stilling	and to be housed to	the sheet of the states	
	Electric Wa	s need to be brought t ter	© the site: □ 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:

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- 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

Submission of one original plus five (5) copies of the application and all attachments must be received by the County beginning no sooner than January 1 and no later than January 15 and July 1 and no later than July 15 of each year.

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.

Roger K. DeCantillon Rancho del Sol Camino, CA 95709 530e-mail: Canton @att.net

13 APR 19 PM 3: 45 RECEIVED PLANNING DEPARTMENT

April 17, 2013

Planning Services 2850 Fair lane Court Bldg C Placerville, CA 95667

I ask the Department of Transportation to consider granting a waiver of the "TIM Fee Offset". C.J. Freeland has been extremely helpful in guiding me through the necessary forms (copy of our deed, house plans, & Plot map) which I have enclosed with this letter. Due to the situation of our parents as explained below we are submitting the required documentation to start the building permit to Eldorado County next week.

My wife and I have two parents that are 85 & 89 years of age (both widowed). They are both experiencing

Both currently live alone in their own homes. My father-in-law is in New Hampshire and my mother is in Florida. We are the only siblings that are currently capable of assisting them. We do not want them in a nursing facility if at all possible. They both like their independence but need some family supervision and transportation to

We love our parents and appreciate the sacrifices they made for us when we were children. We have a home in Camino that we built ourselves 25 years ago. My wife and I were both working for the Department of Defense at the Sacramento Army Depot. I was forced into an early retirement with base closure after moving from the Sacramento Army Depot to Mather AFB and finally to McClellan AFB (all three installations were closed due to BRAC (base realignment and closure)). We currently are assisting our oldest daughter while she is finishing her college degree by providing housing. She works in San Jose three days a week and stays with us the remaining four days so that she can attend classes at American Page 2

River and Folsom Lake College - El Dorado Center. I would like to add a Granny Flat to our home so we can accommodate our parents during their senior years and provide them as many years of independence as possible. We will be owner builders as we cannot afford to have the work contracted. Please let us know if we qualify for a waiver of the TIM Fee.

Thanks for your time.

Sincerely,

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Syn K. L z





-----PARCEL: 077 780 SITUS: PARQUE DEL ROBLES CIR

CASE	CATG ST	COMMISSION	REMARK
ECOP	MIT2	RARE PLANT PRESERVES	MITIGATION AREA 2
DOT1	TIM5	T.I.M. FEES	DOT TIM FEE
DVWY	SLPE	Driveway Slope Review	Driveway Slope Review
FIRE	VHGH	FIRE REGULATION REVIEW	VERY HIGH HAZARD GI004281
H2OS	STRM	Conservation Water Resources	Int Stream Setback 50 ft
RAZ	2-5	STATE TIM FEE-RAZ 2-5	STATE TIM FEE - RAZ 2-5
SDED	CATD	SEISMIC DESIGN CATEGORY	SEISMIC DSGN CATG D M#4593_CD
TIM	CNTL	HWY 50 VARIABLE T.I.M.	T.I.M. CENTRAL DISTRICT
TMG5	ZON5	HWY 50 T.I.M.	T.I.M ZONE 5
RCD	PVL	EDC RCD/PLACERVILLE	RCD - PLACERVILLE

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