

No Place Like Home (NPLH)

2021 NOTICE OF FUNDING AVAILABILITY

Supplemental Project Application



**State of California
Governor Gavin Newsom**

**Lourdes M. Castro Ramirez, Secretary
Business, Consumer Services and Housing Agency**

**Gustavo Velasquez, Director
Department of Housing and Community Development**

**2020 West El Camino Avenue, Suite 150
Sacramento, CA 95833
Phone: (916) 263-2771
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Website: <http://www.hcd.ca.gov/grants-funding/active-funding/nplh.shtml>

October 2021

Instructions	10/15/2021
<p>When opening this file, a yellow banner at the top may appear with a button that says "Enable Editing". It is essential that you click this box so that the macros are enabled. Enabling macros is necessary for full worksheet functionality. Macros do not work with Microsoft's Excel version for Apple Mac.</p>	
<p>Application materials must be submitted electronically via the FAAST system. Requirements for uploading the Application Workbook and required supporting documentation, including naming conventions, are described in the application instructions available at: https://www.hcd.ca.gov/grants-funding/active-funding/nplh.shtml. Applicants must upload all application materials to the FAAST system no later than 5:00 p.m. Pacific Standard Time on:</p>	
<p style="text-align: center;">January 19, 2022</p>	
<p>Applications must be on the Department's forms and cannot be altered or modified by the Applicant. Excel forms must be in Excel format and unprotected, not a .pdf document. For application errors please fill out the Application Support worksheet and email the entire workbook to AppSupport@hcd.ca.gov.</p>	
<p>General Instructions Additional instructions and guidance are given throughout the Supplemental Application in red text and in cell comments.</p>	
<p>Guideline references are made with "\$" and the corresponding guideline section number.</p>	
<p>Yellow cells are for Applicant input. Failure to provide the required attachments and documentation may disqualify your application from consideration or may negatively impact your point score.</p>	
<p>Required attachments (if applicable) are indicated in orange cells throughout the Supplemental Application. Failure to provide the required attachments and documentation may disqualify your application from consideration or may negatively impact your point score. Electronically attached files must use the naming convention in the Supplemental Application. For Example: "App1 Payee Data" for Applicant1 Payee Data Record/STD. 204.</p>	
<p>Self-score points awarded are indicated in blue cells in the 'Selection Criteria' worksheet. These are automated calculations based on the inputs provided by the Applicant.</p>	
<p>Red shaded cells indicate the Applicant has failed to meet a requirement of the program.</p>	
<p>Universal Application (UA) Instructions</p>	
<p>Applicants must complete the following worksheets in the UA.</p>	
<p>Narrative</p>	
<p>Site & Units</p>	
<p>Misc.</p>	
<p>Rents</p>	
<p>NPLH Rents</p>	
<p>Subsidies</p>	
<p>Dev Sources</p>	
<p>Dev Budget</p>	
<p>Perm S&U</p>	
<p>TBL and High Cost Test</p>	
<p>2019 Dev Fee</p>	
<p>Supportive Services Cost</p>	
<p>Reserves</p>	
<p>Operating</p>	
<p>Cash Flow</p>	
<p>NPLH COSR Calculation</p>	
<p>Supplemental Application Instructions</p>	
<p>Applicants must complete the following worksheets in the Supplemental Application.</p>	
<p>Project Threshold Req</p>	
<p>Local & Env Verification (ONLY IF COMPLETIVE ALLOCATION FUNDS ARE REQUESTED)</p>	
<p>Supportive Services Plan</p>	
<p>SS Verification (only if the County is NOT the Lead Service Provider)</p>	
<p>LSP Exp. with EBP (ONLY IF COMPLETIVE ALLOCATION FUNDS ARE REQUESTED)</p>	
<p>Lead Service Provider's Past Experience with Evidence Based Practices (to be completed by Lead Service Providers only)</p>	
<p>Loan Amount & Unit Mix</p>	
<p>Scoring (ONLY IF COMPLETIVE ALLOCATION FUNDS ARE REQUESTED)</p>	
<p>Certification & Legal</p>	
<p>Checklist</p>	
<p>Disclosure of Application (California Public Records Act Statutes of 1968 Chapter 1473): Information provided in the application will become a public record available for review by the public, pursuant to the California Public Records Act Statutes of 1968 Chapter 1473. As such, any materials provided will be disclosable to any person making a request under this Act. The Department cautions Applicants to use discretion in providing information not specifically requested, including but not limited to, bank accounts, personal phone numbers and home addresses. By providing this information to the Department, the Applicant is waiving any claim of confidentiality and consents to the disclosure of submitted material upon request.</p>	

NPLH Project Threshold Requirements

10/15/2021

Project Name: Hollister II		County: Santa Barbara		Zip: 93101		County Population: <input type="checkbox"/> Less than 200,000 (MUST CHECK ONE) <input checked="" type="checkbox"/> Greater or equal to 200,000	
Project Address: 115 W. Anapamu Street		Parcel Number 2: 039-222-002		Parcel Number 3:		Parcel Number 4:	
Project City: Santa Barbara		Parcel Number 5:		Parcel Number 6:		Parcel Number 7:	
Assessor Parcel Numbers (APNs):		Parcel Number 2:		Parcel Number 3:		Parcel Number 4:	
Which NPLH Allocation Are You Applying For?		<input checked="" type="checkbox"/> Competitive Allocation Only		<input type="checkbox"/> Non Competitive Allocation Only		<input type="checkbox"/> Both	
Will this be a TCAC hybrid Project?							No
<p>Projects must meet ALL of the following minimum requirements for loans underwritten by the Department using NPLH funds. Answers provided to the questions below are subject to verification by the Department. The Department may request other information as necessary to evaluate the Application.</p> <p align="center">Uses and Terms §200</p> <p>(a) Applicant acknowledges NPLH funds shall be used to finance capital costs of Assisted Units in Rental Housing Developments, including but not limited to, costs associated with the acquisition, design, construction, rehabilitation, or preservation of Assisted Units consistent with the eligible costs set forth under 25 CCR §7304(b) except that NPLH funds cannot be used to capitalize reserves other than as set forth in subsection (b). Yes</p> <p>(b) Applicant acknowledges NPLH funds may be used to fund a COSR for Assisted Units pursuant to the requirements of §209. For loans underwritten by the Department, NPLH funds may also be used to fund a COSR required under 25 CCR §8308. Yes</p> <p>(d) Applicant acknowledges that the total amount of Program funds awarded shall not exceed the eligible costs associated with Assisted Units. In determining these costs, the cost allocation rules in 25 CCR §7304(c) shall apply, but the term "Restricted Units" in such section shall be deemed to refer to "Assisted Units." Yes</p> <p>(e) Applicant acknowledges that pursuant to Administrative Notice Number 21-06, a maximum of four Department Funding Sources comprised of no more than two development loans and two housing-related infrastructure grants may now be used on a single Project. The funding limits set forth in Administrative Notice Number 21-06 shall not include Department funds awarded for purposes other than capital improvements, such as loans or grants for non-housing related infrastructure, transit amenities, programs, or rental and operating subsidies. See Administrative Notice Number 21-06 for further information. Yes</p> <p align="center">Eligible Applicant §202(a)</p> <p>Applicant is a single County acting as the Development Sponsor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Applicant is a County applying jointly with another County? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, is there a commitment from both Counties to collaborate on services and an expectation for NPLH tenants from each county to reside in the Project? N/A</p> <p>File Name: Joint County Commitment Documentation of commitment both Counties to collaborate on services and an expectation for NPLH tenants Uploaded to FAAST? N/A</p> <p>Applicant is applying jointly with another entity as the Development Sponsor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>County Applicant: Santa Barbara County</p> <p>Legal name of Applicant as stated on resolution: Santa Barbara County Behavior Wellness</p> <p>Auth Rep Name: Antonette Navarro Title: Director of Behavior Wellness Auth Rep Email: Phone: 805-681-5220</p> <p>Address: 315 Camino Del Remedio, Bldg 3 City: Santa Barbara State: CA Zip: 93110</p> <p>Contact Name: Natalia Rossi Title: Project Coordination/ Systems Training Coordinator Email: nrossi@sbcbswell.org Phone: 8056815366</p> <p>Address: 315 Camino Del Remedio, Bldg 3 City: Santa Barbara State: CA Zip: 93110</p> <p>File Name: App Cert & Legal Disclosure Reference Certification & Legal worksheet Uploaded to FAAST? Yes</p> <p>File Name: App Comp Resolution Reference NPLH webpage for Competitive Resolution document Uploaded to FAAST? Yes</p> <p>File Name: App Noncomp Reso Applicant Noncompetitive Allocation Resolution (if applicable) Uploaded to FAAST? Yes</p> <p>File Name: App Signature Block Signature Block - upload in Microsoft Word document Uploaded to FAAST? Yes</p> <p>File Name: App TIN Reference Taxpayer Identification Number (TIN) documents on the NPLH webpage Uploaded to FAAST? Yes</p> <p>County Applicant#2:</p> <p>Legal name of Applicant as stated on resolution:</p> <p>Address: City: State: Zip:</p> <p>Auth Rep Name: Title: Auth Rep Email: Phone:</p> <p>Contact Name: Title: Email: Phone:</p> <p>Address: City: State: Zip:</p> <p>File Name: App2 Cert & Legal Disclosure Reference Certification & Legal worksheet Uploaded to FAAST? Yes</p> <p>File Name: App2 Comp Resolution Reference NPLH webpage for Competitive Resolution document Uploaded to FAAST? Yes</p> <p>File Name: App2 Noncomp Reso NPLH Noncompetitive Resolution (if applicable) Uploaded to FAAST? Yes</p> <p>File Name: App2 Noncomp Allocation Applicant Noncompetitive Allocation (if applicable) Uploaded to FAAST? Yes</p> <p>File Name: App2 Signature Block Signature Block - upload in Microsoft Word document Uploaded to FAAST? Yes</p> <p>File Name: App2 TIN Reference Taxpayer Identification Number (TIN) documents on the NPLH webpage Uploaded to FAAST? Yes</p> <p>Owner/Borrower Entity</p> <p>Legal Name: Sanctuary Centers of Santa Barbara Inc Sponsor Type: Corporation Organization Type: Nonprofit</p> <p>Auth Rep Name: Barry Schoer Title: President/ CEO Auth Rep Email: bschoer@sanctuarycenters.org Phone: 805-569-2785</p> <p>Address: PO BOX 551 City: Santa Barbara State: CA Zip: 93102</p> <p>Contact Name: Amy Winslow Title: Development & Marketing Officer Email: awinslow@sanctuarycenters.org Phone: 805-569-2785</p> <p>Address: PO BOX 551 City: Santa Barbara State: CA Zip: 93102</p> <p>File Name: Ownr/Bwr Cert & Legal Disclosure Reference Certification & Legal worksheet Uploaded to FAAST? Yes</p> <p>File Name: Ownr/Bwr Comp Resolution Reference NPLH webpage for Competitive Resolution document Uploaded to FAAST? Yes</p> <p>File Name: Ownr/Bwr OrgDoc1, OrgDoc2, etc... Reference Sponsor Org Docs worksheet Uploaded to FAAST? Yes</p> <p>File Name: Ownr/Bwr OrgChart Owner Entity/Organization Chart Uploaded to FAAST? Yes</p>							

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File Name:	Ownr/Bwr Signature Block	Signature Block - upload in Microsoft Word document	Uploaded to FAAST?	Yes
File Name:	Ownr/Bwr Payee Data or TIN	Reference Payee Data Record (STD-204) or Taxpayer Identification Number (TIN) documents on the NPLH webpage	Uploaded to FAAST?	Yes
Managing General Partner				
Legal Name			Sponsor Type	Organization Type
Auth Rep Name	Title	Auth Rep Email	Phone	
Address	City	State	Zip	
Contact Name	Title	Email	Phone	
Address	City	State	Zip	
File Name:	MGP Cert & Legal Disclosure	Reference Certification & Legal worksheet	Uploaded to FAAST?	Yes
File Name:	MGP Comp Resolution	Reference NPLH webpage for Competitive Resolution document	Uploaded to FAAST?	Yes
File Name:	MGP OrgDoc1, OrgDoc2, etc...	Reference Sponsor Org Docs worksheet	Uploaded to FAAST?	Yes
File Name:	MGP OrgChart	MGP Entity/Organization Chart	Uploaded to FAAST?	Yes
File Name:	MGP Signature Block	Signature Block - upload in Microsoft Word document.	Uploaded to FAAST?	Yes
File Name:	MGP Payee Data or TIN	Reference Payee Data Record (STD-204) or Taxpayer Identification Number (TIN) documents on the NPLH webpage	Uploaded to FAAST?	Yes
Administrative General Partner				
Legal Name			Sponsor Type	Organization Type
Auth Rep Name	Title	Auth Rep Email	Phone	
Address	City	State	Zip	
Contact Name	Title	Email	Phone	
Address	City	State	Zip	
File Name:	AGP Cert & Legal Disclosure	Reference Certification & Legal worksheet	Uploaded to FAAST?	Yes
File Name:	AGP Comp Resolution	Reference NPLH webpage for Competitive Resolution document	Uploaded to FAAST?	Yes
File Name:	AGP OrgDoc1, OrgDoc2, etc...	Reference Sponsor Org Docs worksheet	Uploaded to FAAST?	Yes
File Name:	AGP OrgChart	Sponsor Organization Chart	Uploaded to FAAST?	Yes
File Name:	AGP Signature Block	Signature Block - upload in Microsoft Word document	Uploaded to FAAST?	Yes
File Name:	AGP Payee Data or TIN	Reference Payee Data Record (STD-204) or Taxpayer Identification Number (TIN) documents on the NPLH webpage	Uploaded to FAAST?	Yes
Project Contacts				
Property Management Company (must be entity qualifying for experience below)				
Legal Name	Sanctuary Centers of Santa Barbara Inc	Contact Name	Amy Winslow	Contact Email awinslow@sanctuarycenters.org
Phone	805-569-2785	Address	PO BOX 551	City Santa Barbara State CA Zip 93102
Lead (primary) Service Provider (must be entity qualifying for experience below)				
Legal Name	Santa Barbara County Behavior Wellness	Contact Name	Antonette Navarro	Contact Email
Phone	805-681-5220	Address	315 Camino Del Remedio Bldg 3	City Santa Barbara State CA Zip 93110
Financial Consultant				
Legal Name	Sanctuary Centers of Santa Barbara Inc (Boeard Committee)	Contact Name	Amy Winslow	Contact Email awinslow@sanctuarycenters.org
Phone	805-569-2785	Address	PO BOX 551	City Santa Barbara State CA Zip 93102
Borrower Legal Counsel				
Legal Name	Mullen and Henzell	Contact Name	Graham M. Lyons	Contact Email glyons@mullenlaw.com
Phone	805-896-3097	Address	112 E. Victoria Street	City Santa Barbara State CA Zip 93101
General Contractor				
Legal Name	Frank Schipper Construction	Contact Name	Paul Wiekowski	Contact Email paul@schipperconstruction.com
Phone	805-963-4359	Address	610 E Cota Street	City Santa Barbara State CA Zip 93103
Architect				
Legal Name	Cearnal Collective	Contact Name	Christine Pierron	Contact Email cp@cearnal.com
Phone	805-963-8077 x 211	Address	512 1/2 State Street	City Santa Barbara State CA Zip 93101
Development Funding Source				
Legal Name	First Republic Bank	Contact Name	Brent Wiblin	Contact Email Bwiblin@firstrepublic.com
Phone	818-388-3747	Address	1888 Century Park East	City Los Angeles State CA Zip 90067-1702
Development Funding Source				
Legal Name	County of Santa Barbara	Contact Name	Kimberly Shean	Contact Email kshean@co.santa-barbara.ca.us
Phone	805-882-3675	Address	117 E. Carrillo Street	City Santa Barbara State CA Zip 93101
Development Funding Source				
Legal Name		Contact Name		Contact Email
Phone		Address		City State Zip
Development Funding Source				
Legal Name		Contact Name		Contact Email
Phone		Address		City State Zip
Development Funding Source				
Legal Name		Contact Name		Contact Email
Phone		Address		City State Zip
Rent/Operating Subsidy Source				
Legal Name	Sanctuary Rental Assistance Fund	Contact Name	Barry Schoer	Contact Email bschoer@sanctuarycenters.org
Phone	805-569-2785	Address	PO BOX 551	City Santa Barbara State CA Zip 93102
Rent/Operating Subsidy Source				
Legal Name		Contact Name		Contact Email

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Phone	Address	City	State	Zip
Eligible Use of Funds §202(b)				
Does the Application request funds for the eligible costs set forth in §200 as listed on the UA Project Development Budget?				Yes
Does Project have a minimum of 5 units and serve persons qualifying as members of the Target Population?				Yes
Does Project involve new construction and demolition of existing residential structures?				No
If yes, does the number of bedrooms in the new Project at least equal the number of bedrooms in the demolished structures? (see UA 'Sites & Units' worksheet)				N/A
Is Applicant requesting an exception to the one-to-one replacement requirement in accordance with §202? If yes, please explain why:				N/A

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Experience §202(c)

Experience §202(c) - Collectively, among the members of the Project team consisting of the Applicant County, any other Development Sponsor, the Lead Service Provider, if not the County, and the property manager, all of the following minimum experience requirements must be met. For applications in Counties with a population of less than 200,000, the minimum experience requirements of the Project team may be satisfied by the requirements in §202(c)(1), or collectively the Project team must meet all the requirements §202(c)(2)(A): **(MUST click on the applicable County Population box in cells AE2-4 for the applicable questions to appear).**

1A. Applicant or Development Sponsor: List development, ownership, or operation of Permanent Supportive Housing experience or at least two affordable rental housing Projects in the last 10 years, with at least one of those Projects containing at least one Unit housing a tenant who qualifies as a member of the Target Population.

Project Name	Type of Project	Target Population Served §101	Date Developed, Owned, Operated
Arlington Inn	Permanent Supportive Housing	Chronically Homeless	1/1/95
Thompson House	Permanent Supportive Housing	Chronically Homeless	1/1/95
222 W Valerio	Permanent Supportive Housing	Chronically Homeless	1/1/89

1B. Lead Service Provider, (which may be the County): List experience totaling three or more years serving persons who qualify as members of the Target Population. If this experience is not within PSH, must include experience helping persons address barriers to housing stability or providing other services related to housing retention.

Project Name or Experience Description	Type of Experience	Target Population Served §101	# of months serving	Total Years
Garden Street Apartments	Permanent Supportive Housing	Chronically Homeless	26.00	15.83
Pescadero Lofts	Permanent Supportive Housing	Chronically Homeless	32.00	
Homebase on G	Permanent Supportive Housing	Chronically Homeless	132.00	

If claiming experience other than PSH, provide a detailed description of the type of experience and how it relates to the Project.

1C. Property Manager: List experience totaling three or more years serving persons who qualify as members of the Target Population.

Project Name	Type of Experience	Target Population Served §101	# of months serving	Total
Arlington Inn	Permanent Supportive Housing	Chronically Homeless	336.00	89.33
Thompson House	Permanent Supportive Housing	Chronically Homeless	336.00	
222 W. Valerio	Permanent Supportive Housing	Chronically Homeless	400.00	

Site Control §202(d), UMR §8303

Does Development Sponsor have site control? If yes, enter form of site control and most recent execution date. Describe site control special circumstances at bottom of worksheet. **§202(d)(2) At the time of application, site control documented shall be for a time period no shorter than through the anticipated date of the award of NPLH funds by the Department, as set forth in the most current NPLH NOFA under which the Project is applying for funds.**

Yes

Address	Form of Site Control	Current Owner	Execution Date	Expiration Date	Number of Units	Number of NPLH Units	APN
115 W. Anapamu St, Santa Barbara CA 93101	Fee Title	Sanctuary Centers of Santa Barbara, Inc.	9/20/1994	NA	42	20	039-222-002
							Parcel Number 2
							Parcel Number 3

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								Parcel Number 4
								Parcel Number 5
								Parcel Number 6
								Parcel Number 7

Provide details below for unusual site control special circumstances:
 NA Sanctuary Centers of Santa Barbara, Inc owns the property in fee title.

File Name:	Site Control	Provide documentation of the form of site control selected above meeting UMR §8303	Uploaded to FAAST?	Yes
File Name:	Preliminary Title Report	Provide a current preliminary report	Uploaded to FAAST?	Yes

Integration §202(e)

Assisted Units must be integrated with other Units in the Project (including, for purposes of this paragraph (1), any other project subject to restrictions as an affordable housing development of which the Project is a part or in which the Project is included for purposes of any other loan, grant, or other funds awarded by the Department, or by any other State or local agency, department, political subdivision, or other governmental entity, for funding of development, operating, or supportive services costs) and not separated, assigned, partitioned, or restricted onto separate floors, doors, common areas, legal parcels, or other areas or portions of the Project or of the building.

(1) Will the NPLH Units be integrated with other Units in the Project and not separated, assigned, partitioned, or restricted to separate floors, doors, common areas, legal parcels, or other areas or portions of the Project or of the building? Yes

For affordable housing developments built in phases, scattered site affordable housing developments, or TCAC hybrid transactions consisting of more than one building, the Department may grant exceptions to this requirement on a project -by -project basis if it can be demonstrated to the satisfaction of the Department that NPLH-eligible tenants or other tenants meeting eligibility criteria similar to that of NPLH could also be eligible to reside within those buildings or other sites not proposed to be part of the NPLH-funded portion of the project. In determining whether or not an exception to Section 202 (e) (1) will be provided, the Department will consider such factors as proposed income targeting, other target population requirements, and other requirements or restrictions at the other buildings or sites. **Are you requesting an exception to Integration requirements as described above?** N/A

If requesting an exception, explain how your exception meets the requirements for an exception as defined by the NPLH Guidelines, Integration §202(e) (1). In addressing this question please discuss proposed income targeting, other target population requirements, and other requirements or restrictions at the other buildings or sites:

We are not requesting an exemption.

(2) If Project has greater than 20 units, are the NPLH units as a % of the total units less than or equal to 49%? (see 'Loan Amount and Unit Mix' worksheet) Yes

(3) For a hybrid Project, the total number of Units may be allocated disproportionately to the 4% component of a hybrid transaction if all the following conditions are met: **A.** The hybrid transaction is a single building transaction and all of the NPLH Units will be located within the same physical structure; **B.** For Projects of greater than 20 Units, the total number of NPLH Units within the building containing both elements of the hybrid tax credit transaction are equal to or less than 49% of the total units within this building, and **C.** The Applicant can demonstrate to the reasonable satisfaction of the Department that the NPLH Units will be reasonably distributed throughout the building to facilitate compliance with the other requirements of §202(e).

(4) Applicant certifies that they will facilitate or provide regular community building activities and architectural design features that promote tenant interaction, as feasible, depending on the scope of the construction or rehabilitation activity. For example, community space within the Project, wide hallways, etc. Yes

(5) The service plan and property management plan submitted with the application document policies that promote participation by tenants in community activities, and impose no restrictions on guests that are not otherwise required by other project funding sources, or that would not be common in other unsubsidized rental housing in the community. Yes

Please provide a brief narrative on how the project will be integrated that addresses the issues in (1) –(5) above.:

The committed NPLH units are "floating" rather than fixed units to ensure that they will be fully integrated with the Non-NPLH units. Interaction among all residents will be encouraged through a variety of support services and other activities that will be held in the community center. These include financial literacy, healthy cooking, potluck dinners, as well as other various life-skill activities. These activities will be available to all residents at no charge, but not required as a condition of tenancy. Members of the faith community and other community-based organizations will also provide activities that will encourage resident participation with the community at large.

Amenities §202(f)

Is the Project site(s) reasonably accessible to public transportation, shopping, medical services, recreation, schools, and employment in relation to the needs of the Project's tenants and what is typically available in that County? Yes

File Name:	Amenities Map	If yes, provide a radius map with the above amenities identified by markers	Uploaded to FAAST?	Yes
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Article XXXIV §202(g)

Does Article XXXIV legal opinion submitted to the Department demonstrate that the Applicant has considered both the legal requirements of Article XXXIV and the relevant facts of the project? Any conclusion that the project is exempt from Article XXXIV must be supported by specific facts and a specific legal theory for exemption that itself is supported by the Constitution, statute, and/or case law. Documentation provided shall be subject to Department review and approval. Yes

File Name:	Article XXXIV Legal Opinion	If the Application includes an Article XXXIV Legal Opinion, provide a copy of Legal Opinion	Uploaded to FAAST?	Yes
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File Name:	Article XXXIV Authority	If the locality has sufficient Article XXXIV authority, provide documentation as set forth in the NOFA	Uploaded to FAAST?	Yes
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Department Application Requirements and Forms §202(h)

Applicant acknowledges that Applications shall be on forms made available by the Department. In addition, applications must contain all of the following:

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<p>§202(h)(1) A resolution from the County Board of Supervisors to make available to the Project's NPLH tenants, for a minimum of 20 years, mental health supportive services and to coordinate the provision or referral to other services as outlined in the County's supportive services plan for the Project, including but not limited to, substance use services. The County's obligations pursuant to this requirement shall begin when a Project receives its certificate of occupancy, or other evidence of Project completion for Projects already occupied. This resolution shall also contain other commitments related to the County's obligations as Applicant for the Project funds. NOTE: This language is already included in the NPLH Resolution template on the NPLH webpage.</p>		Yes		
<p>§202(h)(2) If applicable, a resolution from the governing body of the Development Sponsor related to its obligations as co-Applicant for the Project funds. Please use the applicable Authorizing Resolution template for Development Sponsors located on the NPLH webpage.</p>		Yes		
<p>§202(h)(3) An initial plan for providing supportive services based on the anticipated needs of the Target Population proposed to be served by the Project. The Supportive Services Plan must meet the requirements outlined in §203. The NPLH Supportive Services Plan is now a worksheet within the Supplemental Application. Complete the Supportive Services Plan worksheet. No separate Supportive Services Plan should be submitted.</p>		Yes		
<p>§202(h)(4) A property management plan that: A. Utilizes a low-barrier tenant selection process that prioritizes those with the highest needs for available housing; B. Implements Housing First practices, consistent with the core components set forth in Welfare and Institutions Code Section 8255(b); and C. Implements policies and practices to prevent evictions and to facilitate the implementation of reasonable accommodation policies.</p>		Yes		
File Name:	Property Management Plan	Provide a copy of Project's proposed Property Management Plan meeting requirements of §202(h)(4)	Uploaded to FFAST?	Yes
<p>§202(h)(5) If not already submitted by the County, the County's plan to combat homelessness that meets the requirements of §201(c).</p>		Yes		
<p>§202(h)(5) Was County's Plan to Combat Homelessness previously submitted meeting the requirements of §201(c)?</p>		Yes	If yes, date submitted:	1/13/2022
File Name:	Homeless Plan	If not previously submitted, provide a copy of the County's Plan to Combat Homelessness §201(c)	Uploaded to FFAST?	Yes
<p>§202(h)(6) Applicant must submit items (A)-(G) below in order to determine Project feasibility and compliance with Program requirements.</p>				
File Name:	Market Study	<p>§202(h)(6)(A) For Projects with Units that will not be assisted by NPLH, a market study prepared in accordance with TCAC requirements which demonstrates a market for the non-Assisted Units. Include information on the anticipated need for the Assisted Units, and how referrals will be made in compliance with the requirements of §206 and §211</p>	Uploaded to FFAST?	Yes
<p>§202(h)(6)(B) For Projects where 100% of the Units will be NPLH Assisted Units, information on the anticipated need for the Assisted Units, and how referrals will be made in compliance with the requirements of §206 and §211.</p>				
NA				
File Name:	Appraisal Report	Appraisals are required for all projects which include a land cost or value in their development budget. Appraisals shall be prepared in accordance with TCAC requirements as specified in §202(h)(6)(C) .	Uploaded to FFAST?	Yes
File Name:	Preliminary title report	§202(h)(6)(D) Preliminary title report dated within 30 days of NPLH Application due date	Uploaded to FFAST?	Yes
File Name:	Phase I/II reports	§202(h)(6)(E) For new construction projects, a Phase I Environmental Site Assessment prepared for the property prepared in accordance with ASTM E1527-13 within 12 months of the NPLH Application due date. A Phase II environmental report is required if recommended by the Phase I	Uploaded to FFAST?	Yes
File Name:	Lead-based paint, mold, asbestos reports	§202(h)(6)(F) For rehabilitation projects, lead-based paint, mold and asbestos reports	Uploaded to FFAST?	Yes
File Name:	Service Provider and Property Manager Experience	§202(h)(6)(G) Documentation of service provider and property manager experience meeting the applicable requirements of Section 202 (c) .	Uploaded to FFAST?	
Financial Feasibility §202(i)				
Does Project commit to complying with the §206 Occupancy and Income requirements?			Does Project comply with the §207 Rent Limits and Transition Reserves requirements? (UA 'Rents' and 'Dev Budget' worksheets)	
			Yes	
Environmental Conditions §202(j)				
Is the Project free from severe adverse environmental conditions that are economically infeasible to remove and cannot be mitigated?				Yes
Describe any known environmental condition:				

NPLH Project Threshold Requirements

10/15/2021

Relocation §202(k)

Will tenant relocation occur as a result of this Project? If development will result in displacement of tenant, the Development Sponsor shall be solely responsible for providing the assistance and benefits set forth in §202(k) and other applicable local, state and federal law. All relocation documents are subject to the Department review and approval.

Yes

(3) If the Applicant determines that relocation requirements are not applicable to the Project, the application must explain and document why relocation does not apply.

Plan provided

File Name: Relocation Plan Provide a relocation plan prepared in accordance with CCR Title 25, §6038 Uploaded to FAAST? Yes

State and Local Requirements §202(l)

Is the Project on a permanent foundation? Yes Will the project meet all applicable State and local requirements, including but not limited to, minimum square footage requirements, and requirements for maintaining the property in a safe and sanitary condition? Yes

Scattered Site Housing §202(m)

Is the Project a scattered site housing project? No

If yes, will it meet the §202(m) requirements including but not limited to all Project sites having a single owner and property manager, and no more than one lender with required payments senior to the Department's loan? N/A

Supportive Services §203

(a) Applicant acknowledges each NPLH application selected for funding must include a Project-specific supportive services plan developed by the County in partnership with the Project Sponsor, supportive service providers, and the property manager. Yes

(b) Applicant acknowledges that the property management staff and service providers must make participation in supportive services by NPLH tenants voluntary. Access to or continued occupancy in housing cannot be conditioned on participation in services or on sobriety. The supportive services plan must describe the services to be made available to NPLH tenants in a manner that is voluntary, flexible and individualized, so NPLH tenants may continue to engage with supportive services providers, even as the intensity of services needed may change. Adaptability in the level of services should support tenant engagement and housing retention. Yes

(c) Applicant acknowledges that the supportive services in §203(c) shall be made available to NPLH tenants based on tenant need. Available mental health services shall be provided directly by the County or through a subcontracted lead service provider. The County or the County's lead service provider for the Project shall coordinate the provision of or referral to services needed by individual tenants, including but not limited to substance use treatment services, for a minimum of 20 years. Except as otherwise noted, the required services can be provided onsite at the Project or offsite at another location easily accessible to tenants. Complete the Supportive Services Plan tab found within this NPLH Supplemental Application. No separate Supportive Services Plan is required to be attached. Yes

(d) Applicant acknowledges that the supportive services in §203(d) are not required to be made available, but are encouraged to be part of a County's supportive services plan. These services may be provided directly by the County or a County-contracted service provider, or the County may coordinate the provision of or referral to these services as needed by individual tenants. Yes

(e) Applicant acknowledges that the additional information in §203(e) shall be provided in the supportive services plan. Yes

(f) Applicant acknowledges that copies of draft written agreements or memoranda of understanding (MOUs) must be provided which identify the roles and responsibilities of the County, the project owner, other service providers, and the property manager. Specific organizations do not need to be identified unless those organizations are used to satisfy the experience requirements required to submit an application under Section 202. The draft written agreements or MOUs must be materially consistent with the information set forth in the supportive services plan. Yes

(g) Applicant acknowledges that the Department may request that any necessary updates to the supportive services plan or related documents, including fully executed written agreements between the County, service providers, the Project owner, and the property manager, be provided prior to the beginning of the initial rent-up period or prior to permanent loan closing. Yes

(h) Applicant acknowledges that for projects funded under Article II of these Guidelines, changes in which entity is the lead service provider may be permitted after application submittal with prior approval from the Department, as long as all Program requirements of the lead service provider continue to be satisfied, and as long as the change in lead service provider would not result in a lower application score for Projects scored under the rating factors in §205(e) and §205(f). Yes

File Name: MOU Memoranda of Understanding which identify the roles and responsibilities of the County, the project owner, other service providers, and the property manager Uploaded to FAAST? Yes

COSR Eligibility §209(d)

In order to be eligible to receive a COSR, the Applicant must first demonstrate, and the Department must verify prior to issuing an award letter for the Project that, in lieu of relying in whole or in part on COSR assistance for Assisted Units, the Applicant or its development partners have provided documentation as required in either subsection (1) or (2) below.

(1) **A.** Identified all possible federal, state, and local sources of rental assistance and other operating assistance to support the Assisted Units; and **B.** Submitted applications or other written requests to the appropriate entity to secure Project-based rental or other operating assistance to support the Assisted Units; **OR**

(2) **A.** Identified all possible federal, state, and local sources of rental assistance and other operating assistance to support the Assisted Units; and **B.** Can provide other evidence from the appropriate entities that rental assistance and other operating assistance is not available to support the Assisted Units.

Discuss efforts undertaken to meet the requirements of §209(d).

Documentation readily available from the City Housing Authority- attached on the digital file.

File Name: COSR Eligibility Provide evidence from local housing authority or other entities addressing §209(d) Uploaded to FAAST? Yes

Tenant Selection §211

Applicant acknowledges that tenants shall be selected through use of a CES or other similar system for those At-Risk of Chronic Homelessness in accordance with the provisions of 25 CCR Section 8305 and in compliance with Housing First requirements consistent with the core components set forth in Welfare and Institutions Code Division 8 Chapter 6.5 Section 8255 subsection (b), and basic tenant protections established under federal, state, and local law. Tenant eligibility criteria must be satisfied prior to being referred to an NPLH Project. All referral protocol for NPLH units must be developed in collaboration with the local Continuum of Care and implemented consistent with Program requirements. Yes

NPLH Project Threshold Requirements

10/15/2021

NOTE: Pursuant to Welfare and Institutions Code Section 5849.9, Projects utilizing funds from a County's Noncompetitive Allocation shall prioritize persons with mental health supportive service needs who are Homeless or At-Risk of Chronic Homelessness.

State Prevailing Wage Requirements

Applicant certifies the Project will comply with State Prevailing Wage Law, as set forth in Labor Code Section 1720 et seq., which requires the payment of prevailing wages unless the project meets one of the exceptions of Labor Code 1720(c) as determined by the Applicant on a case-by-case basis.	Yes
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Applicant certifies that the Project falls within an exception to Labor Code Section 1720(c) et seq; therefore State Prevailing Wage does not apply.	Yes
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Provide description of how Project falls within an exception to Labor Code Section 1720(c):

Conclusion of a letter provided in the local approvals tab (Tab 66) "State Prevailing Wage Exemption for Sanctuary Centers Hollister II" states that " For the foregoing reasons, the construction of the 35-unit residential project at 115 W. Anapamu Street for Sanctuary Centers of Santa Barbara is not subject to prevailing wage requirements." - Katrina S. Hagen

Explanations

Provide details below for all "No" answers that are shaded red above (if more space is needed attach separate sheet):

Local Jurisdiction and NEPA Responsible Entity Verification				10/15/2021
Applicant: Submit this form to the agency or department of local government responsible for administration of the items listed. This form may be submitted to more than one agency or department if necessary. If the NEPA Responsible Entity is not a local government (e.g. State of Calif. HOME Program, USDA RD), also submit a copy of this form to the appropriate NEPA Responsible Entity. If an item is not required, indicate the reason in the box below. Complete both Sections 1 & 2.				
Project Applicant:	Santa Barbara County Behavior Wellness			
Applicant Address:	315 Camino Del Remedio, Bldg 3			
Applicant City:	Santa Barbara			
Project Name:	Hollister II			
Project Address/site:	115 W. Anapamu Street			
Project City:	Santa Barbara			
Project County:	Santa Barbara			
Assessor Parcel Numbers (APNs):	039-222-002, Parcel Number 2, Parcel Number 3, Parcel Number 5, Parcel Number 6, Parcel Number 7			
SECTION 1				
Local jurisdiction or NEPA Responsible Entity: The Applicant named above has submitted an application to the State Dept. of Housing and Community Development (the Department) requesting funding for the project named above, under the No Place Like Home (NPLH) program. Projects submitted for program funding are subject to a competitive rating process. Project readiness is a component of that process. Verification of items listed below will be used in evaluating NPLH applications.				
		Not Required for this Project	Final date of Public Comment Period	Approved Date
All Environmental Clearances (CEQA and NEPA) necessary to begin construction are either final approved or unnecessary:	CEQA		1/15/20	12/15/20
	NEPA	X	N/A	N/A
Specify in the box below, items not required and explain why (include documentation, if applicable):				
SECTION 2				
No federal funding sources requiring NEPA review				
		Not Required for this Project	Verified as Complete and date completed	
All necessary land use approvals or entitlements necessary prior to issuance of a building permit, including any required discretionary approvals, such as site plan or design review.			8/10/20	
Specify in the box below, items not required and explain why (include documentation, if applicable):				
AB 2162 (Section .2 65583.a.4.B: (B) The permit processing, development, and management standards applied under this paragraph shall not be deemed to be discretionary acts within the meaning of the California Environmental Quality Act (Division 13 (commencing with Section 21000) of the Public Resources Code).				
Project Applicant has submitted a complete application to the relevant local authorities for land use approval under a nondiscretionary local approval process, where the application has been neither approved or disapproved. A nondiscretionary local approval process is one that includes little or no subjective judgement by the public official and is limited to ensuring that the proposed development meets a set of objective zoning, design review and/or subdivision standards in effect at the time the application is submitted to the local government. A "nondiscretionary local approval process" includes Streamlined Ministerial Approval Processing under to Chapter 366, Statutes of 2017 (SB 35), By-Right Processing for Permanent Supportive Housing under Chapter 753, Statutes of 2018 (AB 2162), housing element law (Government Code Section 65583.2(i)), or other local process that meets the definition of non-discretionary approval process.				Yes
Projects located within the boundaries of an incorporated city, the city shall make the necessary determinations, and for Projects located in the unincorporated areas of a county, the county shall make the necessary determinations. The appropriate entity shall sign below.				
Dated:				1/10/22
Statement completed by (please print):	Ted Teyber			
Signature:				
Title:	Sr. Housing Program Specialist			
Agency or Department Name:	Community Services Department, County of Santa Barbara			
Agency or Department Address:	123 E. Anapamu Street, Suite 202, Santa Barbara CA 93101			
Agency or Department Phone:	805-568-3513			

Supportive Services Plan (SSP) §203		10/15/2021
Instructions: All Projects must complete the Supportive Services Plan below for the NPLH units and attach the requested documents.		
Part I. Tenant Selection Narrative		
This section asks for a detailed description of the tenant selection process. Using the titled sections below, the narrative should be as specific as possible, delineating the roles of property management and the Lead Service Provider and how these functions will be coordinated. Your description should clearly and conclusively document processes to ensure NPLH tenant households occupy NPLH Assisted Units following tenant selection and Housing First Practices.		
Section 1: Tenant Selection Criteria		
1. Target Tenant Population and Eligibility Criteria		
a. Do you use Housing First Practices?	Yes	
b. Description of the Target Population to be served, and identification of any additional subpopulation target or occupancy preference for the NPLH Project that the Applicant wishes to undertake beyond what is permitted under the Target Population requirements. NOTE: Any additional subpopulation targeting or occupying preference for an NPLH Project must be approved by the Department prior to construction loan closing and must be consistent with federal and state fair housing requirements.		
The developer will receive and screen referrals of County NPLH tenants out of CES only. Reasonable selection criteria, as referred to in 25 CCR Section 8305(a)(1) shall include only priority status under our local CES which was developed pursuant to 24 CFR578.7(a)(8). Developer will accept tenants regardless of sobriety, participation in services or treatment, history of incarceration, credit, or history of eviction in accordance with practices permitted pursuant to Welfare and Institutions Code Section 8255.		
c. Describe the criteria relating to the applicant's NPLH status, income eligibility, Homelessness status (Chronically Homeless, Homeless, or At-Risk of Chronic Homelessness), and disability.		
The eleven NPLH units will not be restricted to chronically homeless, but our local CES has a priority for chronic homeless referrals, as well as individuals with multiple co-morbidities and disabilities. As NPLH units, the CES referral individuals must also have a diagnosis as severe and persistent mental illness.		
d. Describe any additional eligibility criteria other than those indicated above, i.e., information needed to determine if applicant can comply with lease terms. Note: Selection criteria designed to assess anything other than the ability to comply with lease terms generally run afoul of fair housing laws designed to protect equal access to housing for people with disabilities.		
The CES criteria have been reviewed for Fair Housing compliance.		
e. List the tenant disclosures you provide to applicants/tenants. Example: Megan's Law disclosures.		
We will provide Megan's law disclosures, as well as information on the proximity of the project to the Highway 101, with information about measured noise levels and a disclosure about indoor and outdoor air quality. The building will include heat pumps and indoor air circulation through HEPA filters.		
f. Describe the criteria that will be used to ensure families will remain housed in the event that the qualifying NPLH Tenant should exit the unit. Address any conflicts with federal regulations or policies that could result in the family's removal and detail how this conflict will be mitigated.		
The NPLH units are all studio units. Statistically, we would expect very few, if any, "family" households other than co-habiting adults that decide to split up.		
g. Describe the criteria that will be used to ensure that applicants are eligible to occupy the NPLH Assisted Units. How will credit, rental, criminal history, and substance use be used to determine eligibility for NPLH Assisted Units?		
The CES criteria will be used, which advises sponsors of convictions for repeated instances of physical violence against persons. Follow-up interviews will be conducted about the incidence of violence.		
h. Describe any known conflicts and/or the mitigation strategy for when Public Housing Authority (PHA) requirements conflict with Housing First practices, as applicable.		
At this point, the project does not have Project Based Vouchers, so no specific conflict exists. A potential conflict could result from tenants using tenant-based Housing Choice Vouchers.		
i. If your tenants may include minor children and/or adult dependents of NPLH Tenants, describe any additional criteria that will be used to ensure applicants are eligible to occupy the NPLH Assisted Units.		
With studio units, intended for NPLH-qualified persons, we anticipate very few, if any, non-NPLH household members. There will be no additional criteria, if the head of household is eligible for NPLH housing, then all family members that met the screening criteria used for NPLH tenants will be eligible to be housed.		

Supportive Services Plan (SSP) §203		10/15/2021
<p>2. Marketing/Outreach: The following addresses use of the Coordinated Entry System for all NPLH referrals or an alternate comparable system for those At Risk of Chronic Homelessness. Note that use of standard waiting lists is prohibited, in that both of these systems must prioritize referrals based on highest acuity needs, rather than first-come first served.</p>		
<p>a. Describe how the local CES will be used to fill NPLH-assisted units based on the use of a standardized assessment tool which prioritizes those with the highest need for PSH and the most barriers to housing retention. Include the CES agency's name, primary staff person's name, and contact information. If the local CES is not yet operational, describe the plan to use it when it is established.</p>		
<p>Our CES agency is the Santa Maria/ Santa Barbara Continuum of Care. Our coordinated Entry System consistently uses the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT) to assess individuals, the TAY VI-SPDAT to assess Transition Age Youth and the Family VI-SPDAT to assess homeless families. Those with the highest scores are prioritized highest for longer term housing solutions. Our CoC uses the Coordinated Entry process to prioritize persons within our CoC's geographic area for access to housing and supportive services.</p>		
<p>b. If a separate alternate system must be used to refer persons At-Risk of Chronic Homelessness, a minimum of 40 percent of the NPLH Assisted Units must be reserved for persons who qualify as Chronically Homeless and a maximum of 30 percent of the NPLH Assisted Units may be reserved for persons who are At-Risk of Chronic Homelessness. All referrals must be based on a prioritization of those with the highest need for Permanent Supportive Housing, and the most barriers to housing retention (provide description of system below).</p>		
<p>We are not using a separate alternate system.</p>		
<p>3. Housing First Characteristics</p>		
<p>a. Please confirm compliance by checking all of the characteristics that apply to the NPLH units in the Project:</p>		
Tenants have a lease and all the rights and responsibilities of tenancy, as outlined in California's Civil, Health and Safety, and Government codes	Yes	
Tenant has his/her own room or apt. and is individually responsible for selecting a roommate in any shared tenancy	Yes	
Tenant may stay as long as he/she pays his or her share of rent and complies with the terms of his/her lease	Yes	
Unit is subject to applicable state and federal landlord tenant laws	Yes	
Participation in services or program compliance is not a condition of permanent housing tenancy	Yes	
Tenant screening and selection practices that promote accepting applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services	Yes	
Applicants are not rejected on the basis of poor credit or financial history, poor or lack of rental history, criminal convictions unrelated to tenancy, or behaviors that indicate a lack of "housing readiness"	Yes	
Supportive services that emphasize engagement and problem solving over therapeutic goals and service plans that are highly tenant-driven without predetermined goals?	Yes	
The use of alcohol or drugs in and of itself, without other lease violations, is not a reason for eviction?	Yes	
In communities with coordinated assessment and entry systems, incentives for funding promote tenant selection plans for supportive housing that prioritize eligible tenants based on criteria other than "first-come-first-serve," including, but not limited to, the duration or chronicity of homelessness, vulnerability to early mortality, or high utilization of crisis services. Prioritization may include triage tools, developed through local data, to identify high-cost, high-need homeless residents	Yes	
Case managers and service coordinators who are trained in and actively employ evidence-based practices for client engagement, including, but not limited to, motivational interviewing and client-centered counseling	Yes	
Services are informed by a harm-reduction philosophy that recognizes drug and alcohol use and addiction as a part of tenants' lives, where tenants are engaged in nonjudgmental communication regarding drug and alcohol use, and where tenants are offered education regarding how to avoid risky behaviors and engage in safer practices, as well as connected to evidence-based treatment if the tenant so chooses	Yes	
The project and specific apartment may include special physical features that accommodate disabilities, reduce harm, and promote health and community and independence among tenants	Yes	
Part II. Lead Service Provider (LSP) Detail		
Section 1: LSP		
<p>The County or other LSP is the entity that has overall responsibility for the provision of supportive services & implementation of the Supportive Services Plan. The County or other LSP provides comprehensive case management services (individualized services planning & the provision of connections to mental health, substance use, employment, health, housing retention) and may also coordinate with other agencies that do so.</p>		
1. County/LSP Name:	Behavioral Wellness of the County of Santa Barbara	
Relationship to Applicant:	Memorandum of Understanding	
How long has the County/LSP been providing services to homeless:	12	Years
	2	Months
How many Projects have the Applicant and LSP completed together? (Provide list of completed Projects when submitting)	0	
<p>2. List any additional agencies that will be providing comprehensive case management services to residents. Describe population(s) they will serve and how their services will be coordinated by the LSP.</p>		
Agency Name	Populations the Agency will serve	
Describe how services will be coordinated.		
Agency Name	Populations the Agency will serve	
Describe how services will be coordinated.		
Agency Name	Populations the Agency will serve	
Describe how services will be coordinated.		

Supportive Services Plan (SSP) §203	10/15/2021
Section 2: Service Delivery	
1a. Describe how the clinical interventions listed below will be used in your service delivery model. (Note: Do not include basic definitions of these interventions.) Descriptions must also include periodic training plans including who will be trained, the type of training, cost and how often training occurs.	
Describe benefits counseling and advocacy, including assistance in accessing SSI/SSP, enrolling in Medi-Cal	
Staff are trained in SOAR, which directly trains staff to engage with homeless populations using trauma-informed practices to aid homeless populations in accessing benefits as part of their recovery model. Our clinicians and caseworkers that work with homeless populations all complete a 20 hour online training in SOAR, offered through SAMHSA. It is our policy that all staff that directly engage with homeless populations complete this training within the first six months of employment.	
Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.	
the training is provided to our staff and is a mandated training for our Homeless Outreach staff. This intervention is used with our homeless population to help them connect to long-term support from community resources. Our Homeless Outreach staff maintains continuity of care during the first nine months of a client's transition while simultaneously passing the responsibility onto community supports such as Peers, Resource Learning Centers and other community-based organizations.	
Describe Critical Time Intervention	
This training is provided to our staff and is a mandated training for our Homeless Outreach staff. This intervention is used with our homeless population to help them connect to long-term support from community resources. Our Homeless Outreach staff maintains continuity of care during the first nine months of a client's transition while simultaneously passing the responsibility onto community supports such as Peers, Resource Learning Centers and other community based organizations.	
Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.	
We are setting up a Basic 4-day training that will only be provided to our staff that provide onsite case management at our Housing sites. The cost will be approximately \$3500. We will be offering this initial training to all onsite case managers and then will be offering follow up consultations with the Trainer related to implementation. After the initial training, the basic training will be offered on an as-needed basis to train new onsite case managers.	
Describe Trauma-Informed Care Strategies	
We offer a yearly basic Foundations of Trauma-Informed Care and then offer three elective courses on Trauma-Informed Care, including a course on Trauma and Homelessness. Other courses offered are: Trauma and Substance Abuse, and the Neurobiology of Trauma. All our trauma-informed trainings are offered live, and are six hours. All staff who work with Homeless are required to attend all the trainings listed within two years of employment, and at least one Trauma Informed Care training per year of employment. Trauma Informed Care is an intervention used with all our consumers. This intervention is used by engaging with clients by first addressing their need for physical, psychological and emotional safety. These trainings have been offered via zoom successfully for the last twenty one months.	
Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.	
All our trauma-informed trainings are offered live, and are six hours. All staff who work with Homeless are required to attend all the trainings listed within two years of employment, and at least one Trauma Informed Care training per year of employment. These trainings have been offered via zoom successfully for the last twenty one months.	
Describe Motivational Interviewing	
We offer Motivational Interviewing at least twice yearly, and this training is mandatory for all clinical staff within the first year of employment. Motivational interviewing is offered as an online 4 hour training, at this time. Motivational Interviewing is a technique used by all our clinical staff to engage with clients. This intervention is used by our clinical staff in the following ways: when engaging with clients, staff must resist telling clients what to do; seek to understand their motivations, listen with empathy and seek to empower them to set achievable goals and to overcome barriers. Motivational interviewing techniques are always a work in progress, and staff continue to take trainings in this technique throughout their practice.	
Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.	
We offer Motivational Interviewing at least twice yearly, and this training is mandatory for all clinical staff within the first year of employment. Motivational interviewing is offered as an online 4 hour training, at this time. Motivational Interviewing is a technique used by all our clinical staff to engage with clients. This intervention is used by our clinical staff in the following ways: when engaging with clients, staff must resist telling clients what to do; seek to understand their motivations, listen with empathy and seek to empower them to set achievable goals and to overcome barriers. Motivational interviewing techniques are always a work in progress, and staff continue to take trainings in this technique throughout their practice.	
Describe Voluntary Moving on Strategies	
Our staff are trained prior to lease up on Voluntary Moving On Strategies. Staff will enable stable tenants of permanent supportive housing who no longer need on-site services to move to private apartments with rental support, with the goal of backfilling vacated supportive housing units with our targeted tenancy. This intervention will be used by our onsite case worked to help tenants who no longer need supportive housing to find housing that is still economically feasible for them.	
Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.	
There are resources, guidebooks, lesson and a series of webinars available to anyone, for free on the "HUD exchange" website. All onsite case management staff must complete a minimum of eight hours of training on implementing voluntary moving on strategies. This training is free and only required of new onsite case management staff, no ongoing training is needed, staff can refer to the resources on "HUS Exchange" throughout their service.	
Describe Peer Support	
Our Department has had a Peer Support Program for over twenty years. Our Peer Support staff all take Peer Support Basics Training, and WRAP training, or similar trainings, on leading Peer Support Groups. We have Peer Support staff onsite already that lead a variety of Peer Groups at the housing site, and we offer additional Peer Support Groups at our Santa Barbara clinic. There are also Substance Use Peer Support Groups offered onsite and our onsite staff will be able to provide coordination of registration and transportation to mental health or substance use support groups. This intervention will be used to support tenants with their Recovery Model.	
Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.	
All peer support staff, including all peer support staff that will be working onsite at NPLH sites, receive a series of trainings when they are onboarded with the Department. These trainings are all available for free on the WISE website. These trainings are: Recovery 101; Peer Support 101; Ethics, Boundaries and Confidentiality in the Workplace. Additionally, we offer a three-day intensive training on leading WRAP groups bi annually and this costs around \$13,000. This training is available to all full time Recovery Assistants who have not previously been WRAP certified.	
Describe Case Conferencing	

Supportive Services Plan (SSP) §203	10/15/2021
<p>Our community based organization that works with our Homeless Outreach team facilitates a training on CES case conferencing when onboarding new staff. Our Homeless Outreach team collaboratively developed a case conferencing tool/ worksheet with our local organizations serving homeless populations, and this tool/ worksheet is located on our website under the "resources for providers" page. This is a tool we use, not really an intervention, but all our Homeless Outreach staff are trained in case conferencing.</p>	
<p>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</p>	
<p>CES Case conferencing training is provided through the County at no cost to our Department. This training is available on a bi-monthly basis to any staff that wish to take it. All new Homeless Outreach staff, including onsite case managers, receive this training as part of their onboarding experience. Additionally, case conferencing training materials are available on our Department website for all staff, at all times.</p>	
<p>1b. Describe how the practices listed below will be implemented in your service delivery model, including a description of policies and procedures. Descriptions must also include periodic training plans including who will be trained, the type of training, cost and how often training occurs.</p>	
<p>Describe policy and procedures for safety and security of staff and residents.</p>	
<p>Our Homeless Outreach and Property Management teams are trained in Mental Health first Aid training, and this training is offered annually. Mental Health First Aid covers how to keep tenants and staff safe and secure. This intervention will be used by all our onsite staff to keep the staff and tenants safe and secure.</p>	
<p>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</p>	
<p>We recently used SCRIP grant funding in the amount of \$20,000 to provide for six department staff to be trained as trainers in both Youth and Adult Mental Health First Aid. We have trainers certified in both Spanish and English. Trainings will be open to all staff and be offered on a quarterly basis. All Homeless Outreach and onsite case managers will receive this training on an annual basis to retain certification.</p>	
<p>Describe how Applicant and LSP's program philosophy, values, and principles is communicated.</p>	
<p>All new staff, including temporary and volunteer staff, are required to read our Department Mission Statement, which covers our Department Philosophy, Values and Principles. Additionally, all new staff are required to take our Department Code of Conduct training, which also covers these topics. Other than the costs to maintain our online Learning Management System, there are no costs associated with this training. Also, these principles are communicated to new staff through our actions, staff learn our values through the examples provided by their supervisors and other line staff. We are a person-first organization, and that is conveyed to staff at every level.</p>	
<p>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</p>	
<p>All new staff, including temporary and volunteer staff, are required to read our Department Mission Statement, which covers our Department Philosophy, Values and Principles. Additionally, all new staff are required to take our Department Code of Conduct training, which also covers these topics. Other than the costs to maintain our online Learning Management System, there are no costs associated with this training. Also, these principles are communicated to new staff through our actions, staff learn our values through the examples provided by their supervisors and other line staff. We are a person-first organization, and that is conveyed to staff at every level.</p>	
<p>Describe policies for rent due from residents during periods of hospitalization.</p>	
<p>Staff are trained to adhere to the Development Sponsor's Tenancy Policy. No rent will be due during periods of hospitalization that last less than 30 days. Tenants can not be evicted without just cause, short periods of hospitalization are not considered just cause. Staff are trained to try and aid their clients with payment of rent if clients are hospitalized but alert, and if tenants are incapacitated, staff alert housing manager of the situation.</p>	
<p>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</p>	
<p>All new onsite case managers are required to read and review the Housing Management tenancy policy and advocate for tenants when needed. There are no costs associated with this training.</p>	
<p>Describe policy and procedures for resident privacy and confidentiality.</p>	
<p>The entire Homeless Outreach team is required to take annual trainings in Code and Conduct and HIPPA Privacy and Security. These trainings are required annually of all our staff. These HIPPA trainings cover confidentiality and privacy of personal medical information. Our Code of Conduct training covers privacy and confidentiality for all scenarios involving our staff, including resident privacy and confidentiality. This isn't an intervention, but staff receive at least two hours training annually on HIPPA privacy and Security and confidentiality of all clients/ tenants.</p>	
<p>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</p>	
<p>These trainings are required of all staff, including temporary and volunteer staff, within 30 days of hire and then annually thereafter. Trainings are created by our Department and uploaded to our Learning Management System so that they are available to staff at all times. The only costs associated are the costs for our LMS, which is about \$25,000/year.</p>	
<p>Describe policy and procedures for services & PM Staff work together to prevent evictions, adopt & ensure compliance with harm reduction principles, & facilitate implementation of reasonable accommodation policies.</p>	
<p>Our entire Homeless Outreach team is trained in Housing First Principles. They have participated in two live trainings in the last year, and we offer an additional training online that covers the basics of Housing First. Our staff understands that Housing First is one of the facets of Harm Reduction Principles. Housing First principles are integrated in all our interactions with Homeless Populations, we are committed to housing everyone with the recognition that housing is a human right. Supportive Services Staff and Property Management Staff will work together to prevent evictions, adopt and ensure compliance with harm reduction principles, and facilitate implementation of reasonable accommodation policies.</p>	
<p>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</p>	
<p>All Homeless Outreach staff Staff are trained in Housing First Principles through ongoing Trauma Informed Care trainings on homeless populations, at a cost of about \$1400 per training. Staff are also trained through our Department policy on Housing First, which all new employees are required to read and attest that they understand these principles. We also provide a Harm Reduction conference that includes Housing First principles about every three years, this conference is provided through SAFT grant funding, and the last conference cost about \$95,000 and was open to all staff and community-based organizations.</p>	
<p>Describe policy and procedures for communication between property management and service providers.</p>	

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<p>Both our staff and the staff of the general service provider receive training in Housing First Principles prior to lease up. Working from the shared goals of reducing harm and understanding that we house residents regardless of sobriety, credit history, or history of incarceration, our staff and the project managers meet weekly to discuss tenant success. These communication protocols ensure that staff and the property manger have the shared goal of keeping all tenants in housing.</p>	
<p>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</p>	
<p>Staff are trained in Housing First Principles through ongoing Trauma Informed Care trainings on homeless populations, at a cost of about \$1400 per training. Staff are also trained through our Department policy on Housing First, which all new employees are required to read and attest that they understand these principles. We also provide a Harm Reduction conference that includes Housing First principles about every three years, this conference is provided through SAFT grant funding, and the last conference cost about \$95,000 and was open to all staff and community-based organizations</p>	
<p>Describe policy and procedures for making applicants aware of the reasonable accommodation procedure.</p>	
<p>All staff will be trained in the Reasonable Accommodations procedures prior to lease up and will make applicants aware that they are entitled to reasonable accommodations for their disability that will enable them to live in housing.</p>	
<p>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</p>	
<p>All onsite case managers must read the housing management reasonable accommodations and follow up with any questions. For questions relating to reasonable accommodations for providing mental health services, all mental health providers must read through and attest that they understand our reasonable accommodations for mental healthcare providers training. There are no costs associated with this training.</p>	
<p>Describe policy and procedures for receiving and resolving tenant grievances.</p>	
<p>Property Management and Supportive Services Staff are trained in both Housing First and Mental Health First Aid principles, which then dictate their responses to tenant grievances. Mental Health First Aid principles will be used in any intervention with tenants in grivance. Additionally, there is extensive onsite supportive services staff, provided by the development sponsor, that are trained in grivances.</p>	
<p>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</p>	
<p>We recently used SCRIP grant funding in the amount of \$20,000 to provide for six department staff to be trained as trainers in both Youth and Adult Mental Health First Aid. We have trainers certified in both Spanish and English. Trainings will be open to all staff and be offered on a quarterly basis. All Homeless Outreach and onsite case managers will receive this training on an annual basis to retain certification.</p>	
<p>Describe policy and procedures for appropriate response to tenant crises.</p>	
<p>Staff are trained in both Housing First and Mental Health First Aid principles, which then dictate their responses to tenant crisis. Mental Health First Aid principles will be used in any intervention with tenants in crisis. Additionally, there is extensive onsite supportive services staff, provided by the development sponsor, that are trained in crisis intervention and trauma-informed care.</p>	
<p>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</p>	
<p>We recently used SCRIP grant funding in the amount of \$20,000 to provide for six department staff to be trained as trainers in both Youth and Adult Mental Health First Aid. We have trainers certified in both Spanish and English. Trainings will be open to all staff and be offered on a quarterly basis. All Homeless Outreach and onsite case managers will receive this training on an annual basis to retain certification.</p>	
<p>Describe policy and procedures for retention of tenants regardless of use of substances.</p>	
<p>Staff are trained in Harm Reduction principles, one of which is Housing First. Staff understand that we house tenants regardless of use of substances and that under Harm Reduction, that we first do no harm, and our staff will not engage in any harm reduction strategies with tenants unless they are voluntary. Our staff will use harm reduction principles as an intervention strategy when working to retain tenants in housing. Tenants shall not be evicted for substance use, unless instances or repeated instances of violence or threats of violence occur.</p>	
<p>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</p>	
<p>Harm Reduction principles are covered in our Co-Occurring Disorders trainings which are offered to Mental Health staff on an annual basis, and Substance Use Disorder providers on a bi-annual basis. We also cover Harm reduction principles in our Medication-Assisted Treatment trainings, which are offered to all staff on an annual basis. We also provide a Harm Reduction conference that includes Housing First principles about every three years, this conference is provided through SAFT grant funding, and the last conference cost about \$95,000 and was open to all staff and community-based organizations.</p>	
<p>Describe policy and procedures for cultural & linguistic competency.</p>	
<p>Our staff are required to take 2 hours of Cultural Competency annually. We offer live (through Zoom or other formats) training for staff or engaging with LatinX communities, Sexual Orientation and Gender Identity, Implicit Bias, and Behavior Health Interpreter Trainings annually. We are continually striving to offer our staff relative training in cultural humility and update our training selections frequently. Training staff to have cultural humility is not an intervention, it is a continual journey to try to have staff interact with all genders, races, ethnicities, gender expression and sexual orientations in a manner that is always culturally sensitive. We will endeavor to have our staff always engage in ways that are culturally sensitive.</p>	
<p>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</p>	
<p>All staff, including volunteers and temporary staff, are required to take a minimum of one hour per year in Cultural Competency Training. At least six live rainings a year are offered that address cultural humility in working with different populations. The costs associated for these trainings are around \$10,000 per year. All staff are also offered a "Training Menu" online that offers ten different cultural competency trainings that staff can choose from if they do not attend one of the live offered trainings throughout the year. All trainings are located on our Learning Management System and only costs associated are for the LMS, which is about \$25,000/ year. Populations addressed include LGBTQIA, Hard of Hearing, Older Populations, Mixtec populations, LatinX men, LatinX women, LatinX families, those living in Poverty, Those experiencing homelessness, and many more.</p>	
<p>Part III. Supportive Services Detail</p>	
<p>Section 1: Supportive Services Chart</p>	
<p>Required Services: List and describe all services under Section 203(c) of the NPLH Guidelines required to be offered to tenants of the NPLH Assisted Units. The chart must include each of the services listed. Attach the agreement for each of the services listed.</p>	

Supportive Services Plan (SSP) §203							10/15/2021
Resident Service	Service Description	Hours	Service Provider(s)	Relationship to Applicant	Agreement	Off-site Service Location	
List each service separately	Describe service, including the frequency and degree to which services are provided.	Provide the hours of availability	Provider's Name	Applicant, separate division of Applicant's organization, or a Project Partner	If service will be provided by a non-Applicant entity, indicate type of agreement under which service will be provided.	If service is on-site, leave blank. Enter distance, in miles, to off-site service and list resident commuting options. Reasonable access is access that does not require walking more than one-half mile.	
Case management with individual service plans	Individuals will have annual service plans developed, which will include an assessment of impairments and treatment targeted at promoting recovery	9-4, five days per week	Behavioral Wellness	Applicant			
Peer support activities	Peer Support Group are offered at recovery learning centers in Santa Barbara, in addition there are peer support professionals that operate as case managers in the employ of Behavioral Wellness and community-based providers.	9-4, five days per week	Behavioral Wellness	Applicant			
Mental health care	Therapeutic services will be offered by the County of Santa Barbara and will include access to psychiatric care assessments and therapy	9-4, five days per week	Behavioral Wellness	Applicant			
Substance use services	Substance use care is part of the behavior wellness continuum and would include individual and opportunities for group treatment	9-4, five days per week	Behavioral Wellness	Applicant			
Support in Linking to Physical Health Care	Care coordination activities include linkage and referral to the public health department or community based providers and will be incorporated into the plan of care to the extent possible including after care plans	9-4, five days per week	Behavioral Wellness	Applicant			
Benefits counseling and advocacy	Benefits counseling will be arranged by care coordinators and will be completed by Behavior Wellness's partner agency, County of Santa Barbara Social Services	9-4, five days per week	Behavioral Wellness	Applicant			
Basic housing retention skills	Care coordination will include rehab services to address basic housing retention skills, will extend to assistance & advocacy from available funding to offset housing costs and support for individuals interacting w/ landlords and rental agencies	9-4, five days per week	Behavioral Wellness	Applicant			
Encouraged Services: List and describe all services under Section 203(d) of the NPLH Guidelines encouraged to be offered to tenants of the NPLH Assisted Units. If multiple services will be provided in the service categories provided below, attach any additional description. Empty spaces are available at the bottom of the table for the applicant to describe services not listed. Attach the agreement for each of the services listed.							
Resident Service	Service Description	Hours	Service Provider(s)	Relationship to Applicant	Agreement	Off-site Service Location	

Supportive Services Plan (SSP) §203						10/15/2021
List each service separately	Describe service, including the frequency and degree to which services are provided.	Provide the hours of availability	Provider's Name	Applicant, separate division of Applicant's organization, or a Project Partner	If service will be provided by a non-Applicant entity, indicate type of agreement under which service will be provided.	If service is on-site, leave blank. Enter distance, in miles, to off-site service and list resident commuting options. Reasonable access is access that does not require walking more than one-half mile.
Services for persons with co-occurring mental and physical disabilities or co-occurring mental and substance use disorders not listed in the above table	Care coordination to access services to assist with referrals to target agencies specializing in the care and rehabilitation for those with physical disabilities. Groups will be held on-site to support individuals in recovery from substance use disorders	9-4, five days per week	Behavioral Wellness	Applicant		
Recreational and social activities	Recovery Learning Centers in the Santa Maria area provide opportunities for socialization, greater community connection and skill building toward utilizing resources for recreation	9-4, five days per week	Behavioral Wellness	Applicant		
Educational services	Care coordination and care planning will include opportunities to explore local educational resources	9-4, five days per week	Behavioral Wellness	Applicant		
Employment services	The Dept of Behavioral Wellness collaborates with the Dept of Rehabilitation for SB County for employment and counseling services.	9-4, five days per week	Behavioral Wellness	Applicant		
Obtaining access to other needed services						
File Name:	LSP Agreement	Lead Service Provider Contract, Agreement, or Letter of Intent			Uploaded to FFAST?	
File Name:	Written Agreements	Copy of written agreements or memoranda of understanding (MOUs) which identify the roles and responsibilities of the County, the project owner, other service providers, and the property manager covering all of the Required and Encouraged Services that are part of the Supportive Services Plan. Please submit one master services MOU or other written agreement for the project. However, if separate agreements will also be entered into with each service provider, the Master document must reference and include these separate agreements.			Uploaded to FFAST?	Yes
Section 2: Supportive Services Coordination						
1. Describe the accessibility of community services to which you propose linkages, whether they are on-site or in close proximity to the Project, and the frequency, travel time and cost to the tenant for transportation required to access the services to include both public transportation and private transportation services (e.g. van owned by the provider).						
<p>Santa Barbara's largest transportation hub is located less than one quarter mile from this Project and it will connect you with all bus routes in Santa Barbara. For seniors, persons with disabilities or persons with Medi-Care cards, the cost is \$.85. For others, the cost is \$1.25. Our county's largest metropolitan grouping, including a library, art museum, restaurants, theaters and movie theaters, is a 5-7 minute walk from residence. NPLH tenants at this project will be extremely fortunate, because this project houses the most complete set of onsite services in Santa Barbara County, it is truly unique in this manner. There is a medical and dental health clinic onsite, peer support groups, and a psychiatric health clinic onsite. Additionally, for all medical appointments, our case workers hand out Medi-Cal transportation cards, with the toll free number to call and arrange for free door-to-door transportation for</p>						
2. Describe how the supportive services will be provided in a manner that is culturally and linguistically competent for persons of different races, ethnicities, sexual orientations, gender identities, and gender expressions. This includes explaining how services will be provided to NPLH tenants who do not speak English, or have other communication barriers, including sensory disabilities, and how communication among the services providers, the property manager and these tenants will be facilitated.						

Supportive Services Plan (SSP) §203	10/15/2021
<p>All supportive services will be offered in a manner that is both culturally and linguistically competent. County offers live or online trainings annually or engaging with LatinX communities, Sexual Orientations and Gender Identity. We also offer trainings on Implicit Bias and using Mental Health interpreters. In SB County, our threshold languages are English and Spanish, and we continue to make recruiting Spanish-speaking supportive staff a priority. For other language or communication barriers, we use certified interpreters to provide services including interpreters for those sensory impaired. The development sponsor will be using onsite supportive staff to fulfill the role of property manager, so our property management as well as supportive services staff, will be trained in cultural humility and providing culturally competent services.</p>	
<p>3. Describe how services will accommodate trauma-based, barriers to services.</p>	
<p>Our supportive services team will accommodate trauma-based barriers to service, the two most common barriers to service are clients not reporting trauma and providers who overlook trauma. We attempted to address this by providing consistent trauma-informed trainings to our staff, and providing Seeking Safety trainings to staff. the most effective way to accommodate trauma-based barriers to service it to engagewith clients using Seeking Safety methods.</p>	

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4. Describe which community/county/state funded programs will be utilized to meet the needs of the residents, particularly if those residents are dependents of tenants. Medi-Cal providers include services for early intervention which are culturally competent, age appropriate and co-occurring capable. Behavioral Wellness care providers as needed based on the care plan will collaborate with providers of care in the schools including physical health providers and child welfare services.					
5. Is the Applicant currently working with the with the CoC in the area?				Yes	
If No, please explain:					
6. Documentation of Supportive Services Coordination provided in the form of Memorandum of Understanding, Memorandum of Agreement, letters of support, or contracts demonstrating who will be responsible for ensuring access to services and how accessibility will be accomplished.					
Documentation Attached?		Yes			
		File Name:			
Section 3: Verification from Appropriate Public or Non-profit Funding Agency					
All applications where the County is not the LSP shall include a verification from an appropriate funding entity (either public or non-profit) knowledgeable about the supportive service needs of the Target Population, indicating that the proposed services are appropriate to meet the needs of the Target Population. The verification shall endorse the primary service provider as a known provider of support services to the Target Population. The Development Sponsor and/or Service Provider are not eligible to provide the Funding Agency Verification.					
Please use the attached Supportive Service Verification form from the appropriate public or non-profit agency. Please submit one verification if serving different subpopulations of NPLH tenants who qualify as Chronically Homeless, Homeless, or At-Risk of Chronic Homelessness. If appropriate, a single funder may provide a verification for multiple populations (i.e. a County Department of Health Services could provide a verification for a Project serving individuals who are Chronically Homeless, Homeless, or At-Risk of Chronic Homelessness). Please be sure to indicate on the verification form the subpopulations to which each verification applies.					
Part IV. Tenant Safety And Engagement					
Section 1: Tenant Engagement					
Applicant should describe strategies to engage residents in services, services planning/operations, and in building community and facility operations. NOTE: The tenant engagement plan is distinct from the marketing and outreach efforts for attracting applicants to the Project.					
1. Will the services engagement outreach strategy include:					
Outreach to applicants and residents?	Yes	Door-knocking?	Yes	Leafleting?	Yes
Assessment prior to leasing?	Yes	Peer contacts?	Yes	Outreach to organizations that work directly with target population?	Yes
Other strategies? Please describe:					
The Behavioral Wellness team and the supportive services staff will engage with tenants to find points of interest that will entice them to participate in onsite supportive services on an individual basis. Frequently, this involves distribution of surplus food, as well as, peer group common meal prep and social activities.					
2. Describe the strategies to engage residents in social interaction, building operations, and community involvement within the Project.					
Staff will use motivational strategies, trauma-informed strategies, and WRAP peer-led strategies to engage residents in social interaction, building operations and community involvement. Tenants will be given the opportunity to participate in tenant-led committee on resolving tenants grievances and maintaining the development's community spaces and planning community events.					
3. Describe the strategies to engage residents in planning and delivery of resident's services.					
Additionally, the peer-led support groups are vital in supporting tenants in planning, adapting, and then communicating to their recovery team what services the tenants need and the manner in which they should be delivered. The development of tenants' WRAP plan will help them plan and deliver their services, as part of their Recovery Model. Tenants will have the opportunity to serve on the tenant-led committees.					
4. Describe how the physical building space supports social interaction and the provision of services.					
The Project design will foster tenant engagement and provision of onsite supportive services. The project will have a community room, laundry room, and trash enclosures. On-site services will be centered in the community room and our adjacent supportive services office space. The centralized location of tenant-use facilities supports tenant interaction and an awareness of services. The project is part of a "village" that includes two other buildings that house formerly homeless and/or low income people, and a medical and dental clinic. There is a lot of engagement and peer-led activities onsite in the community areas of the "village" and all the various engagement activities are promoted to tenants through the community spaces, clinics and outdoor spaces onsite. The project design fosters safety and security through enclosed gates, and the robust twenty-four hour onsite staff. There is a					
5. If planning on conducting tenant satisfaction surveys, describe types of questions asked, how they are reviewed, outcomes measured, and how often survey will be conducted.					
Our staff is working with Development Sponsor to formulate a tenant satisfaction survey, which includes questions regarding the general provision of services in the project. The survey will be put in each tenant's mailbox, and surveys can be left anonymously in the manager's post box. Surveys will be reviewed jointly by Be Well staff and housing staff quarterly and the outcome measured will include: general rating of the tenatn's happiness living in the project, overall satisfaction with housing accommodations and suggestions for additional supportive services.					
Section 2: Safety and Security					
1. Summarize the written policies and procedures on privacy and confidentiality of residents.					
Anything regarding a tenant's mental or physical health is protected under HIPAA privacy laws. All our staff are required to complete two hours of HIPAA training prior to commencing work, and are required to take an hour of training on privacy and security annually thereafter. The Development Sponsor will train our staff in their written policy on privacy and confidentiality of residents prior to lease up. This policy explains tenant's privacy rights and ensures that client information can only be released with a properly executed release form, and that private information may only be released by authorization of the Executive Director and written consent of the affected party or pursuant to a court subpoena. Any information regarding a person's disability is marked "confidential" and may only be released as needed when considering how to accommodate a person's disability. Staff will not discuss family					
2. Summarize the written policies and procedures on sign in/out procedures, fire/safety drills, and posted local contacts in case of emergency.					
All local contacts in case of emergency are posted in the community and laundry rooms. There are no sign in/out policies. The developer implements fire/safety drills on a bi-annual basis at all buildings onsite.					

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3. Describe the building design safety features for ensuring resident and staff safety (include lighting, entrance/exits, locked doors, common area locations). Common Areas: The community room, laundry room (both key fob accessible) and trash enclosures are located in a central location and are near ADA accessible parking for automobiles and vans. Entrances/Exits: Vehicular entrance/exit, and provide ADA accessible path of travel from the street to the building entrance. All units as well as common areas features on an ADA accessible path of travel which are lighted. Lighting: Parking areas are lighted according to the standard of the Illuminating Engineering Society (IES). All pedestrian walkways are lighted by low level lighting maintaining safety levels but avoiding light pollution to residential neighbors. Door Locks: All units will have locked entry doors. There are no shared living components such as kitchens or baths. All residents will have access to the secure community room and laundry per management rules and regulations.		
4. Summarize the written policies and procedures on ensuring staff safety. There is a Loss Prevention Coordinator who reviews current safety practices, trains all staff in safety matters. On-Site supervisor will maintain a safe environment on site, and maintaining CRP certification. All staff are trained annually in illness and injury prevention. Development Sponsor will attempt to limit property damage and accidents on site through frequent building and facility inspections, and to mitigate hazardous conditions. The Supervisor will properly report any accident or injury. Supervisors are thoroughly trained on investigating and reporting any property damage or public accidents. Any staff found to be in violation of either written safety policy or common sense safety procedures will receive a safety violation warning notice.		
5. Summarize the written policies for addressing violations of resident/staff safety by residents or staff. Under Fair Housing Laws, "Discrimination, Harassment or Intimidation" include abusive, foul, or threatening language or behavior directed at a tenant, staff person or guest because of their protected class. Protected classes include a person's race, color, religion, national origin, sex (gender), disability, familial status, age, ancestry, gender identity, marital status, sexual orientation, medical condition, arbitrary characteristics or source of income. It is the Development Sponsor's Policy that the intimidation or harassment of a tenant, staff person, or guest because they are a member of a protected class will not be tolerated and could be ground for termination of tenancy. Tenants who experience or witness such conduct are strongly encouraged to report it to the area Housing Manager by written declaration. If unable to prepare a written declaration the tenant should contract the Housing Manager to		
6. The service plan and property management plan submitted with the application must impose no restrictions on guests that are not otherwise required by other project funding sources or would not be common in other unsubsidized rental housing in the community. Describe the guest/visitor policy for residents. According to the guest policy of our Development Sponsor, a guest is a person temporarily staying in the unit with the consent of a family member of the household who has expressed or implied authority to so consent. A guest can only remain in a unit no longer than 30 consecutive days. Children who are subject to a joint custody arrangement or for whom a family has visitation privileges, that are not included as a family member because they live outside of the assisted home for more than 50 percent of the time, are not subject to the time limits of guests. An exception to this policy may be granted for valid reasons, for example care of a relative recovering from medical procedures expected to last more than 40 days. (per Property Management Plan, page 10)		
7. Summarize the written policies for coordination with property management for integration of the Target Population with the general public. While we have no specific written policy, our property managers interact with community-based organizations that provide support services and activities for the benefit of our residents. When appropriate, members of the community are invited to participate. Our property managers and resident service staff also coordinate dinners and other dinners sponsored by the faith community and other community-based organizations that enhance the lives of our residents and provide on-site activities to interact with neighbors.		
Part V. Staffing		
Section 1a: Staffing Description		
Describe the overall staffing pattern, including the roles and responsibilities for each position listed in the Staffing Chart below. List the target populations served through each position. Under supervision, (on a supportive services contract) the Behavioral Wellness Case Worker will assure continuity of care for clients in a community mental health program; and perform related duties as required for the residents at Hollister II. Incumbents fulfilling this role work within a system of interdisciplinary departmental teams and/or contract service agencies providing assessment, prevention, intervention, treatment, and related ancillary support services via an integrated service delivery system to people with alcohol and other drug-related problems, mental illness, and/or co-occurring conditions.		
Section 1b: Staffing Chart		
List all staff positions that will provide services to the tenants of the NPLH Assisted Units. Include County, other LSP, or Development Sponsor staff positions, and any staff positions of partnering organizations who have committed time to the Project. Include the services coordination staff. For each position, list the position title, minimum requirements, the full-time equivalent (FTE), the organization under which the position resides, and the location of the position (on-site or off-site). Do not include staff which serve non-NPLH Units. If a staff position serves both tenants in NPLH and non-NPLH units, include only that portion (i.e., % FTE) of the staff position dedicated to NPLH Assisted Units. Attach a copy of each position's duty statement, if these documents are available.		
NOTE: All staff positions listed here must be reflected in the Supportive Services Budget Table. Be sure to indicate which staff position will be responsible for Homeless Management Information System data entry. If the cost of supportive service position is included as part of the Project's operating budget and the position will serve NPLH units, that position must be included in this chart.		

Title	Minimum requirements	Total FTE:	2.75	Employing Organization	Location
List each staff position	List min. required staff preparation include (education & experience) NOTE: Doesn't take place of the job description or duty statement.	Indicate FTE staff positions for NPLH units (half-time is 0.5 FTE)		This could be the County, another LSP, Sponsor or a Project Partner	Select "On-Site" or "Off-Site"
Case Manager	Possession of a bachelor's degree in psychology, sociology, social work, or other behavioral science related to the mental health field; or completion of 30 semester units or 45 quarter units	2.75		Lead Service Provider	On-Site

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File Name:	Duty Stmt1, Duty Stmt2, Duty Stmt3, Duty Stmt4	Staff Duty Statements (all providers, if available)	Uploaded to FAAST?	Yes
Section 2: Staffing Ratios				
1. Indicate the overall services staffing level for the Project by completing the calculation below.				
a.	Total NPLH Assisted Units			20
b.	Total FTE Service Staff from the Staffing Chart for the NPLH Assisted Units - Provide only the number of ongoing direct service staff positions that will provide services to the tenants of the NPLH Assisted Units, (for example, case manager, psychiatric nurse, services coordinator, etc.). Do not include supervisors, peer support positions, or HMIS Administration positions.			2.75
c.	Number of NPLH units per FTE Staff Person (a÷b)			7.272727273

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2. Complete case manager staffing ratio chart. Include all case mgmt. staff in staffing & budget forms, requires FTE case mgr. to resident ratios be appropriate to specific NPLH populations, as determined by the County or other LSP.				
Population Type	Chronic Homeless	Homeless	At-Risk of Chronic Homeless	
Case Mgr. Ratio	20			
Part VI. Supportive Services Budget				
Section 1: Supportive Services Budget Table.				
In addition to including the direct costs associated with providing supportive services, include the pro-rata costs associated with supervision of the NPLH supportive services staff, and other necessary pro-rata administrative costs, including HMIS data entry costs.				
NOTE: If the cost of supportive services is included as part of the Project's Operating Budget (as documented in the UA) and the funds will serve NPLH units, this position/expense item and the dollars associated with it (or that portion connected to the NPLH units) must be included in this Supportive Services Budget Table.				
Income Source/Program Name	Amount	Type	Status	% of Total Budget
Funding comes from the operational budget for first year - After the first year half the funding comes from Sanctuary Centers and the other half from Medi-Cal (Billed through Behavioral Wellness)	\$84,000.00	Cash	Committed	50.58%
Net operational Funding	\$82,080.00	Cash	Committed	49.42%
				0.00%
				0.00%
				0.00%
				0.00%
				0.00%
Total Revenue:	\$166,080.00			100.00%
Expense Item	Amount	Type	Status	% of Total Budget
Staff Salaries: List by title of position. (This list must match the Staffing Chart above.)				
Case Manager	2.75	\$122,680.00	Cash	Committed
Staff Position	FTE			73.87%
Staff Position	FTE			0.00%
Staff Position	FTE			0.00%
Staff Position	FTE			0.00%
Staff Position	FTE			0.00%
Staff Position	FTE			0.00%
Staff Position	FTE			0.00%
Fringe Benefits		\$33,000.00	Cash	Committed
Total Staff Expenses		\$155,680.00		93.74%
Tenant Transportation		\$6,000.00		3.61%
Equipment		\$1,200.00		0.72%
Supplies		\$1,200.00		0.72%
Travel		\$1,000.00		0.60%
Office Rent/Occupancy Costs (don't include rent/leasing costs for SH units)				0.00%
Training		\$1,000.00		0.60%
Consultants: List by Function				0.00%
Subcontractors/Partners (list by Entity & Service Type)				0.00%
Other Expenses (type in expense description)				0.00%
Other Expenses (type in expense description)				0.00%
Other Expenses (type in expense description)				0.00%
Total Expenses		\$166,080.00		100.00%
Supportive Services Cost Per Unit: Permanent supportive housing best practice suggests a range between \$5,000 - \$10,000 annually in services per household, depending upon the intensity of the needs of the target population. Complete the following calculation about supportive services cost per unit for the Project. If the supportive services cost per unit, as calculated below, differ from industry practice, provide a narrative explanation. The Project must meet/address the industry standard.				
Supportive Services Expense Per Unit Calculation Table				
a. Total NPLH Assisted Units				20
b. Total Supportive Services Expenses				166080
c. Total Supportive Services Expenses per Unit: (b ÷ a)				8304
Section 2: Budget Narrative and Funding Commitments				
1. Describe how budgeted amounts are adequate to provide services described in Supportive Services Plan and in Services Staffing Table. Include a calculation showing the budgeted transportation assistance amount per NPLH household, if any, and justify its adequacy to meet all transportation needs.				
Case load has been determined by the department to provide adequate support to facilitate the Housing First Model and assist with housing retention for those that were recently homeless.				
2. Document committed funds with letter from committing agency that includes the items below. Documented services/funding must appear in Supportive Services Budget Table.				
a) Project name; b) Description of services to be funded or provided; c) Dollar value of funds or in-kind services. If cash is provided, state funding source; d) Funding term or service provision; e) A description and history of agency/organization providing funding or services.				
File Name:	SS Fund Ltr1, SS Fund Ltr2, SS Fund Ltr3, etc....	Attach letter(s). Include: Project name; description of services; dollar value of funds or in-kind services; if cash is provided, state funding source; funding term; description & history of agency/org. providing funding or services.	Uploaded to FAAST?	Yes
3. Describe in specific terms the plan to fill any service gaps that occur during Project life due to expiration of grants, partner withdrawals, cancellation of a commitment or any other reason.				

Supportive Services Plan (SSP) §203					10/15/2021
<p>In the past, we have used MHSA, PLHA, HEAP, HMIO and ESG funds to fund onsite supportive services. In the past, we have also utilized funds and supportive services donated from local mental health community organizations to fill gaps in our funding sources for Supportive Housing projects. With the implementation of CalAim, we anticipate having services covered at least 50% through MediCal billing.</p>					
<p>4. Specifically describe experience filling major services funding gaps in similar housing.</p> <p>Our plan is to budget for case worker expenses are part of the operating budget for the 20 NPLH units. As a department, we are committed to providing housing along with supportive services. Our projects demonstrate the stability and feasibility of increasing this line item by 3.5% per year through the 20 year term of commitment. We foresee seeking Medi-Cal reimbursement for additional services as available. However, we also recognize the importance of finding new funding sources, to supplement the services needed for new mentally disabled housing projects. We are planning to apply for HHAP, and other state funding sources to augment our supportive services budget. In the past, we used HMIOT funding to provide supportive services. Also, with a previous project, we partnered with local charities and non-profits to provide services when needed.</p>					
<p>Section 3: Service Funding History Table: The purpose of this section is to document the funding history of the LSP. The LSP shall document a history of securing supportive service funding sufficient for the Department to make a determination that the provider will be able to access funds from the programs that fund the services identified in the Supportive Services Chart. List only funding obtained in the last five years. Complete the table containing the information required below:</p>					
Funding History for: (LSP)		Behavioral Wellness of the County of Santa Barbara			
Source of Funds/Funding Program		Purpose of Award (Use of Funds)	Amount	Award Date & Funding Term	Population(s) Served
MHSA		Provide Sup services for housing projects	\$2,410,379	8/28/2018	MHSA served populations
MHSA		Provide housing and services to MHSA	\$1,250,000	10/8/2013	MHSA served populations
PHLA		Provide Sup services for housing projects	\$250,000	12/15/2020	MHSA served populations
HEAP		Provide onsite supportive services	\$45,000	1/1/2020	MHSA served populations
Part VII. Property Management Plans, Tenant Selection, and Reporting					
Section 1: Property Management Plans and Tenant Selection					
<p>The Property Management Plan and tenant selection policies submitted with the NPLH application will be evaluated for the following consistent with state Housing First requirements. These documents must identify, describe, and utilize Housing First and low-barrier tenant selection processes that prioritize those with the highest needs for available housing. The descriptions of the use of Housing First and tenant selection in this Supportive Services Plan must be consistent with the Property Management Plan and the tenant selection policies. The Property Management Plan and tenant selection policies should address the following and be consistent with state Housing First requirements, as well as and other NPLH requirements:</p> <ol style="list-style-type: none"> 1.Applicant eligibility and screening standards 2.Confidentiality 3.Substance abuse policy 4.Communication between property manager and supportive services staff 5.Eviction policies and eviction prevention procedures 6.Process for assisting tenants to apply for different forms of cash and non-cash benefits to aid the household in retaining their housing, if needed 7.How applicants and residents will be assisted in making reasonable accommodation requests, in coordination with the services provider and persuasive to outside entities, such as Housing Authorities, to ensure that persons with disabilities have access to and can maintain housing 8. Policies and practices to facilitate Voluntary Moving On strategies 					
Section 2: Reporting Requirements Certification (REQUIRED)					
<p>Applicant certifies that not later than 90 days after the end of each Project's fiscal year, the Applicant shall submit an independent audit for the Project prepared by a certified public accountant and in accordance with the requirements noted in the Project's regulatory agreement and the Department's current audit requirements, which are posted to the Department's website and which may be amended from time to time. §214(c) On an annual basis, the County shall submit the data listed in §214(e) for each of its NPLH Assisted Units. The County shall work with each Project's property manager and Lead Service Provider to gather the data. The data may be, but is not required to be, gathered from the local Homeless Management Information System (HMIS). §214(d) The data shall be submitted in electronic format on a form provided by the Department. The County, the property manager and the Lead Service Provider shall work together to resolve any data quality concerns to the best of their ability prior to submission of the data to the Department.</p>					Yes
Dated:					1/12/2022
Statement Completed by (please print):		Natalia Rossi			
Signature:					
Title:		Program Coordinator			
Agency or Department:		Department of Behavior Wellness			
Agency or Department Address:		315 San Antonio Road, Santa Barbara CA 93110			
Agency or Department Phone:		805-681-5220			

Supportive Services Verification		10/15/21
<p>If the County is not the Lead Service Provider, the County needs to complete the Project Applicant, Lead Service Provider, Project Name and contact information, Target Population, and name of Verifying Funding Agency information sections below. Then submit this form along with a copy of the Supportive Housing Project Plan contained in the application to the appropriate funding agency (public or nonprofit) knowledgeable about the supportive services needs of the targeted population(s). For example, for a Project serving chronically mentally ill people, the funding entity could be the County Department of Mental Health.</p>		
<p>Submission of this form shall constitute certification by the Applicant that a true copy of the Supportive Housing Project Plan submitted in the application has been submitted to the funding agency named below. The form may be submitted to more than one agency or department if necessary.</p>		
Project Applicant:	Santa Barbara County Behavior Wellness	
Lead Service Provider:	Santa Barbara County Behavior Wellness	
Project Name:	Hollister II	
Project Address/Site:	115 W. Anapamu Street	
Project City:	Santa Barbara	
Project County:	Santa Barbara	
Name of Verifying Funding Agency:	Santa Barbara County Behavioral Wellness	
Target Population(s):	Homeless	
<p>Public or non-profit funding agency: The project Applicant named above is submitting an application to the State Department of Housing and Community Development (the Department) requesting funding for the project named above under the No Place Like Home (NPLH) program. The application for NPLH funding is subject to the Department's determination that the project qualifies as a Supportive Housing Project. The findings of your agency will be considered in arriving at this determination. Review the attached copy of the Supportive Housing Project Plan, note your findings in the chart below, and complete the signature block below the chart. Attach comments for any "No" and as otherwise necessary.</p>		
We, as signed below, have reviewed the Supportive Housing Project Plan submitted for the project named above.		Yes
The services proposed in the Supportive Housing Project Plan are appropriate to meet the needs of the Target Population(s) named above.		Yes
The project Lead Service Provider is a known provider of support services to the Target Population(s) listed above.		Yes
Dated:		1/13/22
Statement Completed by (please print):	Antonette Navarro	
Signature:		
Title:	Director for the Department of Behavioral Wellness	
Agency or Department Name:	Santa Barbara County Behavioral Wellness	
Agency or Department Address:	315 San Antonio Rd. Bldg 3, Santa Barbara CA 93110	
Agency or Department Phone:	805-681-5220	

Lead Service Provider's Past Experience with Evidence Based Practices		10/15/21
Provide a description of the Lead Service Provider's past experience with Evidence Based Practices below.		
Project Applicant:	Santa Barbara County Behavior Wellness	
Lead Service Provider:	Santa Barbara County Behavior Wellness	
Project Name:	Hollister II	
Project Address/Site:	115 W. Anapamu Street	
Project City:	Santa Barbara	
Project County:	Santa Barbara	
Does LSP have experience with critical time intervention or assertive community treatment model?		Yes
If Yes, describe LSP's experience:		
Our Homeless Outreach staff are required to do the Critical Time Intervention training for the last year. Our Homeless Outreach staff have used this training to help our homeless populations connect to Long-Term support from community resources.		
Does LSP have experience with cognitive behavioral therapy?		Yes
If Yes, describe LSP's experience:		
Yes, tons. Our staff have been trained in CBT for the last twenty years at least. All our Homeless Outreach Staff are either caseworkers, Licensed Marriage and Family Therapists, or Licensed Clinical Social Workers who received extensive training in Cognitive Behavioral Therapy prior to be employed by our Department. Additionally, we then offer live trainings on implementing Cognitive Behavioral Therapy at least twice a year. Staff are also encouraged to add CBT trainings they are interested in to their elective curriculum.		
Does LSP have experience with trauma-informed care?		Yes
If Yes, describe LSP's experience:		
Yes, tons. For the last three years at least, we have offered live trainings on Trauma-Informed Approaches to Care, and all our clinical staff receive training in Trauma-Informed Care prior to employment with our Department. For the last three years we have offered a minimum of three live trainings on Trauma-Informed Care. All clinical staff are required to always be offering care through a trauma-informed lens because of our Department's policy to always engage from a place of being trauma-informed.		
Does LSP have experience with motivational interviewing and other tools to encourage engagement in services?		Yes
If Yes, describe LSP's experience:		
Yes, tons. All our Clinical Staff use Motivational Interviewing when engaging with consumers, and have done so for at least the last ten years. We offer live Motivational Trainings Bi-annually, we also offer them online, and staff are encouraged to add Motivational Interviewing Trainings they are interested in to their elective curriculum. Our Homeless Intervention staff are also trained in SOAR, to help them engage with homeless populations with the goal of helping them connect to long-term support from community resources.		
Does LSP have experience with other practices recognized as evidence-based by SAMHSA, DHCS, HUD, or other federal or state public agency?		Yes
If Yes, describe LSP's experience:		
Yes. We also train our staff annually, or bi-annually in the following evidence- based practices: Seeking Safety, Trauma Resiliency Model, Community Resiliency Model, Dialectical Behavioral Therapy Skills, and Early Intervention Psychosis Program (we are in the midst of switching programs for this, so I don't have our specific early intervention with psychosis training at this time).		

Maximum NPLH Loan Amount and Unit Mix														10/15/21			
Project Tax Credits Applied For? (Must make selection)		None		A. Loan Amount Requested for NPLH Competitive NOFA				\$3,900,700		B. COSR (from UA, 'NPLH COSR Calculation worksheet')							
Maximum NPLH Capital Loan Amount Chart - click here for 2021 NPLH loan limits - (beginning on page 161)																	
A	Efficiency Units			1 Bedroom Units			2 Bedroom Units			3 Bedroom Units			4+ Bedroom Units				
	AMI Level	Non 9% PU loan limit amount	# of NPLH assisted units	Total Allowed (BxC)	Non 9% PU loan limit amount	# of NPLH assisted units	Total Allowed (E x F)	Non 9% PU loan limit amount	# of NPLH assisted units	Total Allowed (H x I)	Non 9% PU loan limit amount	# of NPLH assisted units	Total Allowed (K x L)	Non 9% PU loan limit amount	# of NPLH assisted units	Total Allowed (N x O)	
30%	\$269,495		\$0	\$276,265		\$0	\$296,576		\$0	\$315,302		\$0	\$331,579		\$0		
25%	\$285,340		\$0	\$293,263		\$0	\$316,743		\$0	\$338,782		\$0	\$357,652		\$0		
20%	\$301,041		\$0	\$310,116		\$0	\$337,053		\$0	\$362,117		\$0	\$383,725		\$0		
15%	\$316,743	20	\$6,334,851	\$326,970		\$0	\$357,364		\$0	\$385,453		\$0	\$409,797		\$0		
	Efficiency	20	\$6,334,851	1 Bdrm	0	\$0	2 Bdrm	0	\$0	3 Bdrm	0	\$0	4+ Bdrm	0	\$0		
C. Shared Cost Calculation \$200(d)																	
1. Total residential development cost (from the UA - Dev Budget worksheet, cell C115)														\$20,790,735			
2a. Gross square footage of NPLH Assisted Units (refer to the UA - Site & Unit worksheet rows 41 - 52)														13,640			
2b. Gross square footage of manager Units (refer to the UA - Site & Unit worksheet rows 41 - 52)														0			
2c. Gross square footage of Non-NPLH Assisted Units (refer to the UA - Site & Unit worksheet rows 41 - 52)														13,639			
2d. Total residential gross square feet (C2a + C2b + C2c)														27,279			
2e. Residential gross square feet without managers units (C2a + C2c)														27,279			
3. Assisted proration % of costs based on square feet (C2a / C2e)														50.00%			
														NPLH Assisted Units share of costs (C1 x C3)*		\$10,395,749	
NPLH Maximum Loan Amount																	
D. Maximum capital loan \$200(I)(5)(A) or (B) & (7) (from chart above)														\$6,334,851			
E. Maximum capital loan amount per NOFA - \$20,000,000 less COSR (from B above)														\$20,000,000			
F. Maximum capital loan per Shared Cost Calculation (from C* above)														\$10,395,749			
G. Maximum capital loan amount (lesser of D, E or F above)														\$6,334,851			
H. Maximum Competitive capital loan amount (G minus K)														\$5,884,851			
I. Competitive loan amount requested by Applicant (from A above)														\$3,900,700			
J. Competitive capital loan amount (lesser of H and I)														\$3,900,700			
K. Noncompetitive capital loan amount requested for this project (see cell comments)														\$450,000			
L. Capital Operating Subsidy Reserve - COSR (from B above)														\$0			
M. Max Loan Amount = Noncompetitive + Competitive Capital Loan + COSR (J + K + L)														\$4,350,700			
Unit Mix																	
Assisted Unit §101(e) - "Assisted Unit" or "NPLH Assisted Unit" means a residential housing Unit that is subject to the Rent, occupancy and other restrictions specified in these Guidelines as a result of the financial assistance provided under the Program. Pursuant to Administrative Notice Number 21-06, a maximum of four Department Funding Sources comprised of no more than two development loans and two housing-related infrastructure grants may now be used on a single Project. The funding limits set forth in Administrative Notice Number 21-06 shall not include Department funds awarded for purposes other than capital improvements, such as loans or grants for non-housing related infrastructure, transit amenities, programs, or rental and operating subsidies. See Administrative Notice Number 21-06 for further information. PLEASE INCLUDE ALL PROJECT UNITS IN THE CHART BELOW, NOT JUST NPLH UNITS.																	
A	B	C	D	E	F	G	H	I	J	K	L	M	N				
				0.0%	47.6%	0.0%	47.6%										
				0.0%	100.0%	0.0%	100.0%										
NPLH Assisted Units																	
Number of Units	Number of Bedrms	Restricted % of Area Median Income	Manager Units	NPLH Assisted Units			Total NPLH Assisted Units	Number of NPLH Units with Operating Subsidy	Number of NPLH Units with (non-NPLH) Rental Subsidy	Number of Other Department Assisted Units	Other Department Funding Sources as set forth in Administrative Notice 21-06.	Total Restricted Units	Total Unrestricted Units				
				Homeless	Chronically Homeless (CH)	At-Risk of CH											
20	0	15% AMI			20		20					20	0				
16	0	60% AMI					0					16	0				
6	0	60% AMI					0					6	0				
							0					0	0				
							0					0	0				
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							0					0	0				
							0					0	0				
42			0	0	20	0	20	20	0	0		42	0				
File Name:		Utility Allowance		Documentation from the local housing authority substantiating the amount of the Utility Allowance used								Uploaded to FFAST?		N/A			

Santa Barbara

Scoring §205							10/15/21
(200 Points Max - points in blue shaded cells)						Total Self-score	200.00
Percentage of Total Project Units Restricted to the Target Population §205(a) - 65 Points Max							
(1) Percentage of Projects Units that are Assisted Units - 30 points max							
Total Number of Units	42	Total Number of Assisted Units	20	Percentage of Project Units that are Assisted Units	47.6%		30
(2) Projects will receive 35 points if the Applicant commits to do either of the following for the term of the Department's loan. If applicable, select either A or B.							
A. Commit to use a Coordinated Entry System (CES) to fill all of the NPLH Assisted Units based on use of a standardized assessment tool which prioritizes those with the highest need for Permanent Supportive Housing and the most barriers to housing retention (provide description of system below).							35
If applicable, provide description of system.							
File Name:	Entry System	Documentation and narrative of Coordinated Entry System or alternate system				Uploaded to FAAST?	Yes
						Total Points - (65 points max)	65.00
Leverage of Development Funding §205(b) - 20 Points Max							
Applications will be scored based on the ratio of permanent development funding attributable to NPLH Assisted Units from sources other than the Competitive Allocation to the requested capital portion of the Program amount provided under the Competitive Allocation, not including any capitalized operating reserves. To be counted, all sources of leverage must have an Enforceable Funding Commitment, except as otherwise provided in 205 (b). In addition, deferred developer fee and funds deposited in a reserve to defray scheduled operating deficits will not be counted in this computation. Land donations will be counted, where the value is established by a current appraisal. Contingencies in commitment documents based upon the receipt of tax-exempt bonds or low-income housing tax credits will not disqualify a source from being counted as an Enforceable Funding Commitment.							
1. Total residential development cost (Loan Amount & Unit Mix worksheet, cell AJ14)			\$20,790,735				
2. Less: Deferred Developer Fee (UA Dev Fee worksheet)			\$0				
3. Less: Land Donations where value is not established by current appraisal (UA Dev Sources worksheet)			\$0	<= Must attach land appraisal if including a land donation as part of leverage calculation			
4. Less: financing not permanently committed (UA Dev Sources - Permanent Sources of Funds)			\$0				
5. Less funds deposited in a reserve to defray scheduled operating deficits.			\$0				
6. Eligible residential development costs (1 minus 2 minus 3 minus 4 minus 5)			\$20,790,735				
7. Percentage of Total Development Cost attributed to NPLH-Assisted Units (Loan Amount & Unit Mix worksheet, cell S35)			47.62%				
8. Funding Attributable to NPLH Assisted Units (6 times 7)			\$9,900,350				
9. Less: NPLH maximum Competitive Allocation capital loan amount (Loan Amount & Unit Mix worksheet, cell AJ28)			\$3,900,700				
10. Other Development Funds (All other funds except NPLH Competitive Allocation funds) attributable to NPLH Assisted Units (8 minus 9)			\$5,999,650	153.81%	<= Other development funds as a % of NPLH Competitive Allocation capital funds (9 divided by 7)		
Is this Project applying for or receiving 9% Tax Credits? (Loan Amount & Unit Mix worksheet, cell I2)			No				
File Name:	Appraisal	Attach current appraisal if including a land donation as part of leverage calculation				Uploaded to FAAST?	Yes
For Projects not utilizing 9% competitive low-income housing tax credits, approximately 0.13 points will be awarded for each percentage point of leveraged funds. For example, an Application proposing other development funds equal to 100% of the NPLH non-COSR portion of the award will receive 13 points, and an Application where other funds equal 150% of the NPLH non-COSR portion of the award will receive 20 points.						Total Points - (20 points max)	20
Leverage of Rental or Operating Subsidies §205(c) - 35 Points Max							
Applications will be scored based on the percentage of NPLH Assisted Units that have Enforceable Funding Commitments for operating assistance, or for Project-based or Sponsor-based rental subsidies with commitment terms substantially similar in terms to project-based housing choice vouchers, 1.75 points will be awarded for each five-percentage increment of committed assistance up to a maximum of 35 points. The assistance must meet the requirements of an Enforceable Funding Commitment, and it must be allocated to the Project or to an affiliated rental-assistance sponsor, or the Department must approve other evidence that the assistance will reliably be available. Contingencies in commitment documents based upon the receipt of tax-exempt bonds or low-income housing tax credits will not disqualify a source from being counted as an Enforceable Funding Commitment.							
							A
Total Number of NPLH Assisted Units (Loan Amount & Unit Mix worksheet)							20
B		C	D	E	F	G	H
Operating assistance, Project-based rental subsidy, Sponsor-based rental subsidy Source		Number of Subsidized NPLH Assisted Units	AMI Level of Units	% Of Total (C divided by A)	Scoring Increment Factor	Increments	Points 1.75 x G
Sanctuary Rental Fund		20	15% AMI	100%	5%	20	35.00

Number of Rental or Operating Subsidy Sources		1	Totals		20		
File Name:	Subsidy (followed by source name)	Commitment Letter(s) or other documentation that the leverage source(s) will be readily available			Uploaded to FAAST?	Yes	
					Total Points - (35 points max)	35.00	
Readiness to Proceed §205(d) - 50 Points Max							
Points will be awarded as shown below for each of the following circumstances. Attach documentation demonstrating that a particular category is not applicable to project readiness for the subject project to receive points in that category.							
Point Category							Points
(1)	5 points for 9% tax credit Projects, and 4% tax credit Projects that will be part of an application to TCAC seeking hybrid tiebreaker incentives; 10 Points for other Projects - Obtaining Enforceable Funding Commitments for all needed construction financing, not including tax-exempt bonds, 4 percent low-income housing tax credits, and deferred developer fee. A. The assistance will be deemed committed if it has been awarded to the Project or if the Department approves other evidence that the assistance will be reliably available. Contingencies in commitment documents based upon the receipt of tax-exempt bonds or low-income housing tax credits will not disqualify a source from being counted as committed. B. To receive credit for funds from other Department programs, these funds must be awarded prior to finalizing the preliminary point scoring of the NPLH application.						10
(2)	5 points for 9% tax credit Projects, and 4% tax credit Projects that will be part of an application to TCAC seeking hybrid tiebreaker incentives; 15 Points for other Projects - Obtaining Enforceable Funding Commitments for all deferred-payment permanent financing, grants, and subsidies, not including deferred developer fee, tax-exempt bonds, and 4 percent low-income housing tax credits, in accordance with TCAC requirements and with the same exceptions as allowed by TCAC. A. The assistance will be deemed committed if it has been awarded to the Project or if the Department approves other evidence that the assistance will be reliably available. Contingencies in commitment documents based upon the receipt of tax-exempt bonds or low low-income housing tax credits will not disqualify a source from being counted as committed. B. To receive credit for deferred payment financing, grant funds, or subsidies from other Department programs, these funds must be awarded prior to finalizing the preliminary point scoring of the NPLH application.						15
(3)	10 points - Completion of all necessary environmental clearances, (California Environmental Quality Act and National Environmental Policy Act). Must be submitted with Application.						10
(4)(a)	15 points - Obtaining all necessary land use approvals or entitlements necessary prior to issuance of a building permit, including any required discretionary approvals, such as site plan review or design review.						15
(4)(b)	10 points - Submission of a complete application to the relevant local authorities for land use approval under a nondiscretionary local approval process, where the application has been neither approved or disapproved.						10
(4)(c)	To receive points under subdivisions (a) or (b) above, for Projects located within the boundaries of an incorporated city, the city shall make the necessary determinations, and for Projects located in the unincorporated areas of a County, the County shall make the necessary determinations.						
File Name:	Const EFC #1, #2, etc	Commitment letter or other evidence documenting construction financing commitments			Uploaded to FAAST?	Yes	
File Name:	Perm EFC #1, #2, etc	Commitment letter or other evidence documenting deferred-payment permanent financing commitments			Uploaded to FAAST?	Yes	
File Name:	Local Approvals, CEQA, and NEPA	Local Approvals, CEQA, and NEPA, as evidenced by the completed and signed Local Jurisdiction and NEPA Responsible Entity Verification worksheet			Uploaded to FAAST?	Yes	
File Name:	NEPA Authority to Use Grant Funds (if applicable)	NEPA Authority to Use Grant Funds issued by the Responsible Entity if the project is proposing use of federal funds			Uploaded to FAAST?	Yes	
					Total Points (50 points max)	50	
Extent of On-Site and Off-Site Supportive Services §205(e) - 20 Points Max							
Points will be awarded in each of the following categories as indicated below based on information provided in the Supportive Services Plan submitted with the Application							
(1) Case management services provided on-site - 5 points. Will case management services be provided on-site? (Case manager does not need to have offices located on-site, as long as they provide on-site visits)					Yes	5	
(2) Implementing evidence-based practices to engage and assist tenants in addressing behaviors that could lead to eviction or to assist in accessing other housing - 1 point per practice - 5 points max					Practice Categories	8	5
Critical time intervention	Will be implemented	Motivational interviewing	Will be implemented	Seeking Safety	Will be implemented		
Cognitive behavioral therapy	Will be implemented	Voluntary "moving-on" strategies	Will be implemented	Mental Health First Aid	Will be implemented		
Trauma-informed care	Will be implemented	Assertive community treatment	Will be implemented	Enter other practices implemented*			
*Other practices must be recognized as a promising or innovative strategy by the federal Substance Abuse and Mental Health Services Administration (SAMHSA), the California Department of Health Care Services (DHCS), HUD, or other federal or State public agency.							
(3) Projects offering Supportive Services - 2 points for each category of services offered as listed in §203(d) - 8 points max					Categories	5	8
§203(d)(1) Services for persons with co-occurring mental and physical disabilities or co-occurring mental and substance use disorders not listed above		Will be offered	§203(d)(2) Recreational and social activities			Will be offered	
§203(d)(3) Educational services, including assessment, GED, school enrollment, assistance accessing higher education benefits and grants, and assistance in obtaining reasonable accommodations in the education process		Will be offered	§203(d)(4) Employment services, such as supported employment, job readiness, job skills training, job placement, and retention services, or programs promoting volunteer opportunities for those unable to work			Will be offered	
§203(d)(5) Obtaining access to other needed services, such as civil legal services, or access to food and clothing		Will be offered					
(4) Resident involvement - 2 points max							2
Project will implement resident involvement practices, such as strategies to engage tenants in community building and services planning and operations, and tenant satisfaction surveys to inform and improve services provision, building operations, and property management (If yes, provide details below)							Yes

Annual tenant satisfaction survey with both structured qualitative rating questions and open ended common areas additionally, there will be a procedure for suggestion box and direct access to housing management for mid-year evaluations.

Total Points (20 points max) 20

Past History of Evidence Based Practices §205(f) - 10 Points Max						
<p>Up to 10 points will be awarded to Projects where the Lead Service Provider, which may be the County behavioral health department or its equivalent County department, or another entity that has contracted with the County to be the Lead Service Provider, can document past experience with implementing evidence-based best practices that have led to a reduction in the number of Chronically Homeless or At-Risk of Chronic Homelessness individuals within the Target Population. Similar experience with evidence-based practices for other special needs populations can also be included if this experience can be shown to be relevant to serving the Target Population. Examples of evidence-based practices include the items below. To receive points under this rating factor, all such experience provided must be verified in the manner set forth in the application. <i>(Complete LSP Exp. with EBP worksheet)</i>.</p>				Number of Past Practices	5	10
(1) Critical time intervention or assertive community treatment model	Yes	(2) Cognitive behavioral therapy	Yes	(3) Trauma-informed care	Yes	
(4) Motivational interviewing	Yes	(5) Enter Other practices*	Yes			

Certification & Legal Status				10/15/21
Certification				
<p>On behalf of the entity identified in the signature block below, I certify that:</p> <p>1. The information, statements and attachments included in this application are, to the best of my knowledge and belief, true and correct.</p> <p>2. I possess the legal authority to submit this application on behalf of the entity identified in the signature block.</p> <p>3. The following is a complete disclosure of all identities of interest - of all persons or entities, including affiliates, that will provide goods or services to the Project either (a) in one or more capacity or (b) that qualify as a "Related Party" to any person or entity that will provide goods or services to the project. "Related Party" is defined in Section 10302 of the California Code of Regulations (CTCAC Regulations).</p>				
<p>4. As of the date of application, the Project, or the real property on which the Project is proposed (Property) is not part to or the subject of any claim or action at the State or Federal appellate level.</p> <p>5. I have disclosed and described below any claim or action undertaken which affects or potentially affects the feasibility of the Project.</p> <p>In addition, I acknowledge that all information in this application and attachments is public, and may be disclosed by the State.</p>				
Barry Schoer	President/ CEO			1/12/22
<small>Printed Name</small>	<small>Title of Signatory</small>	<small>Signature</small>	<small>Date</small>	
Entity Name:	Sanctuary Centers of Santa Barbara, Inc.	Phone Number:	805-569-2785	
Entity Address:	PO BOX 551	City:	Santa Barbara	State: CA Zip: 93102

Sponsor Organizational Documents

10/15/2021

Organizational Documents

The following is intended as a brief summary of legal documents commonly required to verify the legal authority of the private entity or entities applying to the Department for an award of funds. The following does not apply to public applicants. Additionally, the documents required to apply for funds are legally distinct from those required to enter into a contract for award. The lists below only address documentation necessary for the application phase of the award process. If your application is successful, then additional corporate formation and authorization documentation will be required.

The Sponsor shall submit an organizational chart depicting the entity structure control of the Project

Corporations

Articles of Incorporation (Corp. Code §154, 200 and 202) as certified by the CA Secretary of State
 Bylaws and any amendments thereto (Corp. Code §207(b), 211 and 212)
 Certificate of Amendment of Articles of Incorporation (Corp. Code §900-910 (general stock), §5810-5820 (public benefit and religious corporations), §7810-7820 (mutual benefit corporations), or §12500-12510 (general cooperative corporations)) as applicable
 Restated Articles of Incorporation (Corp. Code §901, 906, 910 (general stock), §5811, 5815, 5819 (public benefit and religious corporations), §7811, 7815 and 7819 (mutual benefit corporations) and §12501, 12506 and 12510 (general cooperative corporations)) as applicable
 Statement of Information (CA Secretary of State form SI-100 or SI-200)
 Shareholder Agreements (Corp. Code §186) if applicable
 Certificate of Good Standing certified by Secretary of State

Limited Liability Company

Articles of Organization (CA Secretary of State form LLC-1)
 Certificate of Amendment (CA Secretary of State form LLC-2) if applicable
 Restated Articles of Organization (CA Secretary of State form LLC-10) if applicable
 Certificate of Correction (CA Secretary of State form LLC-11) if applicable
 Statement of Information (CA Secretary of State form LLC-12 or LLC-12NC)
 Operating Agreement (Corp. Code §17707.02(s) and 17701.10)
 Certificate of Good Standing certified by Secretary of State

Limited Partnership

Although potentially eligible to apply as the Sponsor, limited partnerships very rarely qualify to be a Sponsor because they lack sufficient historical development experience. Instead, limited partnerships that are Sponsor-controlled-subidiaries may be named as the actual borrower in the NPLH loan documents if the UMR "Sponsor" subsidiary control requirements are met. The following documents are necessary to establish whether the UMR subsidiary control requirements are met.

Certificate of Limited Partnership (CA Secretary of State form LP-1)
 Amendment to Certificate of Limited Partnership (CA Secretary of State form LP-2) if applicable.
 Certificate of Correction (CA Secretary of State form LP-2) if applicable.
 Limited Partnership Agreement (CA Corp. Code §15901.02(x) and 15901.10)
 Certificate of Good Standing certified by Secretary of State.

No Place Like Home Checklist

10/15/2021

The Checklist below is intended to be used after the Applicant completes the NPLH Supplemental Application. If a header indicates that an area is "Not Applicable", Applicant does not need to provide the requested documents. Use the electronic file name descriptions below for the electronic submission via the FAAST system. Application materials, workbooks, and supporting documentation must be submitted no later than 5:00 p.m. Pacific Daylight time on January 19, 2022

Threshold Requirement	Electronic File Name	Document Description	Included?
X	01. Checklist	Attachment Checklist	
X	02. Universal Application	Completed Universal Application	
X	03. Supplemental Application	Completed Supplemental Application	
County Applicant Organizational Documents			
X	04a. App Cert & Legal Disclosure	Reference Certification & Legal worksheet	
X	04b. App Resolution	Reference NPLH webpage for Competitive Resolution document (if applicable)	
X	04c. App Noncomp Reso	NPLH Noncompetitive Resolution (if applicable)	
X	04d. App Noncomp Allocation	Applicant Noncompetitive Allocation (if applicable)	
X	04e. App Signature Block	Signature Block - upload in Microsoft Word document	
X	04f. App TIN	Reference Taxpayer Identification Number (TIN) documents on the NPLH webpage	
X	04g. Joint County Commitment	Document of commitment both Applicant Counties (if applicable)	
County Applicant 2 Organizational Documents (If Applicable)			
X	04a. App2 Cert & Legal Disclosure	Reference Certification & Legal worksheet	
X	04b. App2 Comp Resolution	Reference NPLH webpage for Competitive Resolution document (if applicable)	
X	04c. App2 Noncomp Reso	NPLH Noncompetitive Resolution (if applicable)	
X	04d. App2 Noncomp Allocation	Applicant Noncompetitive Allocation (if applicable)	
X	04e. App2 Signature Block	Signature Block - upload in Microsoft Word document	
X	04f. App2 TIN	Reference Payee Data Record (STD-204) or Taxpayer Identification Number (TIN) documents on the NPLH webpage	
X	04g. Joint County Commitment	Documentation of commitment both Counties to collaborate on services and an expectation for NPLH tenants (if applicable)	
Development Sponsor Organizational Documents (If Applicable)			
X	05a. Sponsor Cert & Legal Disclosure	Reference Certification & Legal worksheet	
X	05b. Sponsor Comp Resolution	Reference NPLH webpage for Competitive Resolution document	
X	05c. Sponsor Noncomp Reso	Development Sponsor NPLH Noncompetitive Resolution (if applicable)	
X	05d. Sponsor Org Doc	Reference Sponsor Org Docs worksheet	
X	05e. Sponsor Org Chart	Joint Applicant Development Sponsor Entity/Organization Chart	
X	05f. Sponsor Signature Block	Signature Block - upload in Microsoft Word document	
X	05g. Sponsor Payee Data or TIN	Reference Payee Data Record (STD-204) or Taxpayer Identification Number (TIN) documents on the NPLH webpage	
Owner/Borrower Entity (If Applicable)			
	06a. Bwr Cert & Legal Disclosure	Reference Certification & Legal worksheet	
	06b. Ownr/Bwr Comp Resolution	Reference NPLH webpage for Competitive Resolution document (if applicable)	
	06c. Ownr/Bwr Noncomp Resolution	Reference NPLH webpage for Noncompetitive Resolution document (if applicable)	
	06d. Ownr/Bwr Org Doc	Reference Sponsor Org Docs worksheet	
	06e. Bwr Org Chart	Owner Entity/Organization Chart	
	06f. Bwr Signature Block	Signature Block - upload in Microsoft Word document	
	06g. Bwr Payee Data or TIN	Reference Payee Data Record (STD-204) or Taxpayer Identification Number (TIN) documents on the NPLH webpage	
Managing General Partner (If Applicable)			
	07a. MGP Cert & Legal Disclosure	Reference Certification & Legal worksheet	
	07b. MGP Comp Resolution	Reference NPLH webpage for Competitive Resolution document (if applicable)	
	07c. MGP NonComp Resolution	Reference NPLH webpage for Noncompetitive Resolution document (if applicable)	
	07d. MGP Org Doc	Reference Sponsor Org Docs worksheet	
	07e. MGP Org Chart	MGP Entity/Organization Chart	
	07f. MGP Signature Block	Signature Block - upload in Microsoft Word document	
	07g. MGP Payee Data or TIN	Reference Payee Data Record (STD-204) or Taxpayer Identification Number (TIN) documents on the NPLH webpage	
Administrative General Partner #1 (If Applicable)			
	08a. AGP1 Cert & Legal Disclosure	Reference Certification & Legal worksheet	
	08b. AGP1 Comp Resolution	Reference NPLH webpage for Competitive Resolution document (if applicable)	
	08c. AGP1 NonComp Resolution	Reference NPLH webpage for Noncompetitive Resolution document (if applicable)	
	08d. AGP1 Org Doc	Reference Sponsor Org Docs worksheet	
	08e. AGP1 Org Chart	Sponsor Organization Chart	
	08f. AGP1 Signature Block	Signature Block - upload in Microsoft Word document	
	08g. AGP1 Payee Data or TIN	Reference Payee Data Record (STD-204) or Taxpayer Identification Number (TIN) documents on the NPLH webpage	
Site Control			
X	09a. Site Control	Provide documentation of site control meeting UMR §8303	

X	09b. Preliminary Title Report	Provide a current preliminary report	
Amenities			
X	10a. Amenities Map	If applicable, provide a radius map with the amenities identified by markers	
Article XXXIV			
X	11a. Article XXXIV Legal Opinion	If the Application includes an Article XXXIV legal opinion, provide a copy of legal opinion	
X	11b. Article XXXIV Authority	If the locality has sufficient Article XXXIV authority, provide documentation as set forth in the NOFA	
Department Application Requirements and Forms			
X	12a. Property Management Plan	Provide a copy of Project's proposed Property Management Plan meeting requirements of §202(h)(4)	
X	12b. Homeless Plan	If not previously submitted, provide a copy of the County's Plan to Combat Homelessness §201(c)	
X	12c. Market Study	§202(h)(6)(A) For Projects with Units that will not be assisted by NPLH, provide a market study prepared in accordance with current TCAC Market Study Guidelines which demonstrates a market for the non-Assisted Units. Include information on the anticipated need for the Assisted Units, and how referrals will be made in compliance with the requirements of §206 and §211	
X	12d. Appraisal Report	Appraisals are required for all projects which include a land cost or value in their development budget. Appraisals shall be prepared in accordance with TCAC requirements as specified in §202(h)(6)(C)	
X	12e. Phase I/II	§202(h)(6)(E) For new construction projects, a Phase I Environmental Site Assessment prepared for the property prepared in accordance with ASTM E1527-13 within 12 months of the NPLH Application due date. A Phase II environmental report is required if recommended by the Phase I	
X	12f. Lead-based paint, mold, asbestos reports	§202(h)(6)(F) For rehabilitation projects, lead-based paint, mold and asbestos reports	
Relocation			
X	13a. Relocation Plan	Provide a relocation plan prepared in accordance with CCR Title 25, §6038	
Supportive Services			
X	14a. MOU	Memoranda of Understanding which identify the roles and responsibilities of the County, the project owner, other service providers, and the property manager	
X	14b. LSP Agreement	Lead Service Provider Contract, Agreement or Letter of Intent (non-Applicant provider)	
X	14c. Written Agreements	Copy of written agreements or memoranda of understanding (MOUs) which identify the roles and responsibilities of the County, the project owner, other service providers, and the property manager covering all of the Required and Encouraged Services that are part of the Supportive Services Plan. Please submit one master services MOU or other written agreement for the project. However, if separate agreements will also be entered into with each service provider, the Master document must reference and include these separate agreements.	
	14d. Duty Stmt 1, 2, 3, 4 etc.	Staff Duty Statements (all providers, if available)	
	14e. SS Fund Ltr1, 2, 3, etc...	Attach letter(s) including: Project name; description of services; dollar value of funds or in-kind services; if cash is provided, state funding source; funding term; description & history of agency/org. providing funding or services. Include agreements covering both Required and Encouraged Services that are part of the Supportive Services Plan.	
Supportive Services Verification (if applicable)			
	15a. Supportive Services Verification worksheet	Complete and attach the Supportive Services Verification worksheet if applicable.	
COSR Eligibility			
	16a. COSR Eligibility	Provide evidence from local housing authority or other entities addressing §209(d)	
Maximum NPLH Loan Amount and Unit Mix			
	17a. Utility Allowance	Documentation from the local housing authority substantiating the amount of the Utility Allowance used	
SCORING			
Percentage of Projects Units that are Assisted Units			
	18a. Entry System	Documentation and narrative of Coordinated Entry System or alternate system	
Leverage of Rental or Operating Subsidies			
	19a. Subsidy (followed by source name)	Commitment Letter(s) or other documentation that the leverage source(s) will be readily available	
Readiness to Proceed			
	20a. Const EFC #1, #2, etc	Commitment letter or other evidence documenting construction financing commitments	
	20b. Perm EFC #1, #2, etc	Commitment letter or other evidence documenting deferred-payment permanent financing commitments	
	20c. Local Appr, CEQA, and NEPA	Local Approvals, CEQA, and NEPA, as evidenced by the completed and signed Local Jurisdiction and NEPA Responsible Entity Verification worksheet	
	20d. NEPA Authority to Use Grant Funds (if applicable)	NEPA Authority to Use Grant Funds issued by the Responsible Entity if the project is proposing use of federal funds	



**STATE OF CALIFORNIA
UNIVERSAL APPLICATION FOR THE
DEVELOPMENT OF AFFORDABLE RENTAL HOUSING**

UA Version 9/15/2021

INSTRUCTIONS

1. Use this application form to apply for assistance for a multifamily rental housing development from HCD. A separate submission is required for each agency; please indicate which agency you are currently applying to in the top section of the next sheet, and revise this section for subsequent applications to other agencies. Also, please update the rest of the application to reflect changes in your development proposal.
2. In addition to this application form, each agency requires submission of program-specific documentation. Please review the checklists and instructions applicable to each program, located in each agency's website for specific requirements.
3. Areas intended for applicant entry are shaded in yellow. Instructions are included as Excel comments, such as the one to the right. To view these comments, hold your mouse over the red marks.
4. Some information carries over from one section to the next. If you start from the beginning "General" worksheet and continue in order, you will minimize error messages.
5. To navigate between worksheets (pages), click the tabs at the bottom of your screen, or right-click on the triangles to the left of the tabs. To print the entire application at once, go to File, Print, then under the "Print what" heading select "Entire workbook."
6. If you have technical issues specific to this application form, please contact the following Departmental staff:

<u>Department Program</u>	<u>Contact</u>	<u>Phone</u>	<u>Email</u>
California Dept. of Housing and Community Development: Affordable Housing and Sustainable Communities (AHSC) Home Investment Partnerships (HOME) Program Housing for a Healthy California (HHC) Infill Infrastructure Grant Program (IIG) Joe Serna, Jr. Farmworker Housing Grant Multifamily Housing Program (MHP) - General MHP - Supportive Housing MHP - Homeless Youth National Housing Trust Fund (NHTF) No Place Like Home (NPLH) Permanent Local Housing Allocation (PLHA) Program Transit Oriented Development (TOD) Housing Program Veterans Housing and Homelessness Prevention (VHHP)	George Rodine	(916) 263-6105	grodine@hcd.ca.gov



**STATE OF CALIFORNIA
UNIVERSAL APPLICATION FOR THE
DEVELOPMENT OF AFFORDABLE RENTAL HOUSING**

GENERAL INFORMATION

Date of this Application or Update:

UA Version 9/15/2021

Hollister II

Getting Started: When you open this file, you may see a yellow banner at the top with a button that says "Enable Content" or "Enable Editing". It is essential that you click this box so that the macros are enabled. Enabling macros is necessary for full workbook functionality. Macros may not work with Apple Mac Microsoft Excel, but users have stated Mac MS Excel version 16.16.11 (Office 365) works.

THIS APPLICATION REQUESTS FINANCING OR AN ALLOCATION FROM THE FOLLOWING:

<input checked="" type="checkbox"/> HCD
NPLH -No Place Like Home
Amount <input type="text" value="\$3,900,700"/>

PROPOSED DEVELOPMENT

Proposed Name		Street Address or Location(s)		City	Zip Code	County
Hollister II		115 West Anapamu Street		Santa Barbara	93101	Santa Barbara
Development Type	Age Restrictions	Special Facility Type	Tenure Type	APN(s)		Census Tract(s)
New Const. & Acq/Rehab	None	SRO	Permanent	039-222-002		10
# of Units	LIHTC Units	Project Site Area	Units per Acre	Multiple Parcels?		
42	0	0.25 Acres	168 Per Acre	No - one legal parcel		
Relocation Req'd.?	Commercial Space?	HOPE VI Project?	Federally "At Risk"?	"At-Risk" expiration date	Rental Subsidy?	HUD 811 Project?
Temporary Only	Yes	No	No	n/a	Yes	No

APPLICANT (Update based on funding source -- see comment in first box)

Legal Name of Organization Sanctuary Centers of Santa Barbara, Inc.	Applicant Role Project Sponsor / Developer
---	--

LEGISLATIVE INFORMATION

Congressperson Name(s)	District #	State Senator Name(s)	District #	State Assembly Member Name(s)	District #
Salud Carbajal	24	Monique Limon	19	Steve Bennett	37

Hollister II**PROPOSED PROJECT DESCRIPTION**

Instruction: Describe, at minimum, the following topics. Narrative used for Project Summary

1) Type of Development

New construction of 34 studio apartments, significant common spaces, and a licensed health care facility on the excess land now being used as a rental parking lot, including demolition of two small non-residential structures and the continued occupancy of an 8 unit apartment building at the western end of the site. Twenty of the 34 new units will be financed and operated under the No Place Like Home program.

2) Topography and Special Site Features

The site is nearly flat, sloping gently to the west (Anapamu Steet) and to the southeast from a point approximately 2/3 of the distance to the rear of the lot. The two existing, one story, non-residential structures at the eastern end of the parcel will be demolished.

3) Surrounding Neighborhood

The surrounding neighborhood is built up with a single building with two stories, three buildings with three stories, and two large office buildings with four stories. The new building is approved for a 60 foot height in five floors above a basement level.

4) Proposed Tenant Population and Any Special Occupancy Restrictions (inc. those tied to land use approvals)

The building is required to operate as 100% low income housing (at or below 60% AMI). The Sponsor is electing to offer 20 units under the NPLH program, plus 16 additional units for the County's Community Corrections Partnership, as well as the original 6 of the 8 apartments as housing for mentally ill participants in the behavioral wellness programs of the Sponsor.

5) Any On-Site Services

The project offers extensive on-site services in the Integrated Care Clinic, substantially funded by Medi-Cal and Medi-Care and of little or no cost to the residents and clients from the neighborhood with dental, physical health, and behavioral wellness programs. The project will have its own Supportive Services agreement to provide additional wellness and education, social and recreational services to project residents.

6) Specific Issues (relocation, environmental, historical, etc.)

The City of Santa Barbara approved a very significant density bonus, greater building heights, and parking reduction for this special needs projects. All City approvals are in place, except issuance of building permits.

7) Any Demolition

Two non-residential buildings at the eastern end of the site will be demolished. The supportive services operating in these structures will be temporarily located in the neighborhood and will return to the basement and first floor on completion in the new building.

8) Scope of Rehabilitation Work

There is no significant relocation. New construction work is substantial.

9) Expected Start and Completion Date of Construction/Rehabilitation

The scheduled date for start of construction is September 1, 2022, with a 24 month construction period, through August 31, 2024..

10) Changes in Land Area during Development (e.g. subdivision)

No changes are proposed.

11) Rent Subsidies

The project is applying for the COSR, which helps reduce scheduled rents at the 30% AMI level (\$656 per month for a studio) to 30% of the tenant's income (approximately \$300), as well as offsetting project operating costs, pursuant to a State formula for maximum annual disbursements from the COSR fund. The "Sanctuary Fund" will also supplement the 30% AMI rents to \$1,093 per month (50% AMI) under a rent supplement program similar to Project-Based Vouchers with private funding.

12) Whether Prevailing Wages will be paid.

The project has obtained an exemption from the payment of state prevailing wages from the Division of Industrial Relations. No federal funds are being used that will trigger Davis-Bacon wages.

SITE & UNIT INFORMATION

SITE CONTROL

Site address or location: 115 West Anapamu Street, Santa Barbara					
Type of Site Control Fee Title	Dated 2/1/94	Expires	Extensions Available	Purchase Price \$3,500,000	Total Land Area 0.44 acres
Current Owner Sanctuary Centers of Santa Barbara, Inc.			Current Owner Address PO BOX 551 Santa Barbara CA 93102		

PLANNED AND COMPLETED PROPERTY TRANSFER(S)

Ground Lease Planned? No	Lessor	Term	Annual Payment Amount
Below, describe property transfers occurring in connection with development of the Project None.			

SITE USE

Current Use 8 Unit Apartment Building, 2 Office Spaces	Proposed Zoning (code and name) GC, R3	Is Site Improved? Yes	Year Improvements Built 1948
Demolition Planned? or Done? Yes No	Rent Control? No	Access Road Maintenance Private	Applicant Notes

SITE CONDITIONS AND ADJOINING LAND USES

No	Poor drainage	No	Grade 5-10%	Describe adjoining land uses within 300 feet of the Project	
No	Erosion problems	No	Grade over 10%		
No	Unstable soil	No	Airport within 2 miles		
No	Retaining wall	No	Possible high noise levels		
No	Possible lead paint	No	Abandoned well(s)		
No	Possible asbestos	No	Railroad tracks w/i 100 yards		
No	Wetlands area	No	Unusual ingress/egress		
No	On-site stream/creek	No	Ground water contamination		
No	100-yr. flood plain	No	High water table		
No	Possible soil pollution	No	Underground storage tanks		
					West City Park
					East Parking Lot for Social Club
					North 2 Office Buildings
				South Low Income Senior Housing Development	
				Unique Features No Resident Parking	

EXISTING VERSUS PROPOSED UNITS (include manager's units)

	Beds	0 Bdrm	1 Bdrm	2 Bdrm	3 Bdrm	4 Bdrm	5 Bdrm	Total # Units	Total # Bedrooms	Total # Buildings	Total # Mgr. Units	Total # of Parking Spaces
EXISTING		8						8	8	1	0	0
PROPOSED		42						42	42	2	0	0

BUILDING TYPES	New Construction			Rehabilitation		
	Units	Stories	Bldgs.	Units	Stories	Bldgs.
Townhouse/Row House				8	2	1
One or Two Story Walk-Up						
Mid-Rise (3-5 stories)	34	5	1			
High-Rise (6+stories)						
Detached Single Family						
Duplex/4-Plex						
Non-Residential Bldg(s)						
TOTALS	34		1	8		1

Unit Size	Baths	Layout	Ave. Sq. Ft.	No. of Units
0 Bdrm.	1	Flat	610	8
0 Bdrm.	1	Flat	682	34
Total Units				42

Applicant Notes

UA Version 9/15/2021

AMENITIES

Unit Amenities/Features				Project Amenities				Security & Other		Other On-Site Services
Yes	Air Conditioning	No	Ceiling Fans	Yes	Elevator(s)	2		Yes	Gated Entry	Significant physical, dental and mental health care services available on site. 24 hour awake employee for first response.
Yes	Refrigerator	Yes	Curtains/Blinds	Yes	Laundry Rms	1		Yes	Bldg. Card Key	
Yes	Range	No	Fireplace		Washers	8		No	Security Patrol	
Yes	Microwave	No	Emergency Call		Dryers	8		Describe any mandatory charges to tenants beyond allowable rents.		
No	Disposal	Yes	Free Cable TV	Yes	Community Room			No mandatory charges.		
Yes	Dishwasher	No	Lofts	Yes	Community Kitchen					
No	Walk-In Closet	No	Storage Area	Yes	Computer Room					
No	Fenced Rear Yard	No	Balcony	Yes	High Speed Internet					
		No	Patio	No	Fitness Room					
				No	Picnic/BBQ Area(s)					
Laundry Hookups or Appliances in Units Only common laundry areas.				No	Tot Lot/Playground					
				No	Sports Court					
				No	Tennis Court					
				No	Pool					
				No	Jacuzzi/Sauna					

MISCELLANEOUS INFORMATION

RESIDENTIAL SPACE	RESIDENTIAL PARKING	COMMERCIAL SPACE
Residential Square Footage Residential Units 27,279 Residential Common Areas Community Room Leasing Office Additional Storage Space Subtotal 27,279 Maintenance Shop Childcare Center Service Area Service Office Other Circulation 666 Total Residential SF 27,945	Free Residential Parking Spaces Uncovered Tenant Parking Covered Tenant Parking 1 Enclosed Tenant Parking Tenant Guest Spaces Subtotal Parking Spaces 1 Extra Spaces Tenants Can Rent Uncovered Parking Covered Parking Enclosed Parking Grand Total Parking Spaces 1 Total Handicap Parking Spaces 1 (included in totals above)	Commercial Square Footage Commercial Area Offices 9,472 Childcare Center Storage Space Other Total Commercial SF 9,472 Parking Spaces for Commercial Tenants Uncovered Covered Spaces Total Spaces 0 Describe other available parking for commercial patrons. <div style="border: 1px solid black; padding: 5px; text-align: center;">None</div>

INCOME FROM SOURCES OTHER THAN RESIDENTIAL RENTS AND SUBSIDIES

Laundry No. of Units Using Central Laundry 42 Weekly Assumed Income Per Unit \$4.00 Annual Total Laundry Income \$8,736	Other Leased Spaces <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Residential</th> <th>Lease Terms</th> <th>Sq. Feet</th> <th>Rent/SF/Mo.</th> <th>Annual Gross</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td>\$0</td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td>\$0</td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td>\$0</td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td>\$0</td></tr> <tr> <th>Commercial</th> <th colspan="3"> </th> <th> </th> </tr> <tr> <td>Medical and dental offices</td> <td>NNN</td> <td>9,472</td> <td>\$2.40</td> <td>\$272,554</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td>\$0</td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td>\$0</td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td>\$0</td></tr> <tr> <td colspan="4" style="text-align: right;">Total Income from Other Leased Spaces</td> <td>\$272,554</td> </tr> </tbody> </table>	Residential	Lease Terms	Sq. Feet	Rent/SF/Mo.	Annual Gross					\$0					\$0					\$0					\$0	Commercial					Medical and dental offices	NNN	9,472	\$2.40	\$272,554					\$0					\$0					\$0	Total Income from Other Leased Spaces				\$272,554
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Total Income from Other Leased Spaces				\$272,554																																																				
Residential Parking Tenant Rental Spaces 0 Monthly Income Per Space \$0 Annual Residential Parking Income \$0	Commercial Parking Number of Rental Spaces 0 Monthly Income Per Space \$0 Annual Commercial Parking Income \$0																																																							

MONTHLY UTILITY ALLOWANCE

Utilities	Type of Utility (Gas, Electric, etc.)	Does the owner or tenant pay utilities?	Enter Allowances for Tenant Paid Utilities by Bdrm. Size					
			0 bdrm	1 bdrm	2 bdrms	3 bdrms	4 bdrms	≥5 bdrms
Heating	Electric	Owner	\$0	\$0	\$0	\$0	\$0	\$0
Cooking	Electric	Owner	\$0	\$0	\$0	\$0	\$0	\$0
Other Electric	Electric	Owner	\$0	\$0	\$0	\$0	\$0	\$0
Air Conditioning	Electric	Owner	\$0	\$0	\$0	\$0	\$0	\$0
Water Heating	Electric	Owner	\$0	\$0	\$0	\$0	\$0	\$0
Water	Public	Owner	\$0	\$0	\$0	\$0	\$0	\$0
Sewer	Public	Owner	\$0	\$0	\$0	\$0	\$0	\$0
Trash	Public	Owner	\$0	\$0	\$0	\$0	\$0	\$0
Other			\$0	\$0	\$0	\$0	\$0	\$0
Total Tenant Utility Allowance			\$0	\$0	\$0	\$0	\$0	\$0

Source for Utility Allowances
 Local PHA **Name** Housing Authority of the City of Santa Barbara **Effective Date**
 HUD USDA RD Utility Company (Actual Survey) Other

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Applicant Notes

RENTS & UNIT MIX INFORMATION

Tax Credit 50% **Income** Limits for County of : Santa Barbara HUD Notice Date: 4/1/21

Household Size:	1	2	3	4	5	6	7	8
Income Limit:	\$43,750	\$50,000	\$56,250	\$62,450	\$67,450	\$72,450	\$77,450	\$82,450

Rows 18-24 are only for restricted manager units. Show rent limits set by the most restrictive regulatory agency.
 CTCAC, CDLAC, MHP and CalHFA rent limits are calculated based on the above income limits, and are automatically shown below. If the most restrictive rent limits applicable to some units are required by another program, such as HOME or USDA Rural Development, [click here](#) to enter these limits. (Or scroll to bottom of worksheet)

NPLH projects must use the rent limit sets in rows 18-24, 26-32, 34-40, 42-48 and 50-56 for 15%, 20%, 25% and 30% AMI restricted units (these limits will flow to the 'NPLH Rents' worksheet).

Income Limit (% AMI)		Unit Size	No. of Units	Maximum Gross Rent	Less Utility Allowance	Maximum Net Rent	Proposed Net Rent	Monthly Income at Proposed Rents	Monthly Income at Maximum Rents
		Beds	0	\$0	\$0	\$0	\$0		
Rows 18-24 enter restricted manager unit(s) only; unrestricted Manager's unit(s) use rows 121-123. % of Restricted Units in this category 0%		0 Bdrm.	0				\$0		
		1 Bdrm.	0				\$0		
		2 Bdrm.	0				\$0		
		3 Bdrm.	0				\$0		
		4 Bdrm.	0				\$0		
		5 Bdrm.	0				\$0		
			0	Subtotal				\$0	\$0
30%	TCAC	Beds	0	\$0	\$0	\$0	\$0		
% of Restricted Units in this category 48%		0 Bdrm.	20	\$656	\$0	\$656	\$656	\$13,120	\$13,120
		1 Bdrm.	0				\$0		
		2 Bdrm.	0				\$0		
		3 Bdrm.	0				\$0		
		4 Bdrm.	0				\$0		
		5 Bdrm.	0				\$0		
			20	Subtotal				\$13,120	\$13,120
60%	TCAC	Beds	0	\$0	\$0	\$0	\$0		
% of Restricted Units in this category 38%		0 Bdrm.	16	\$1,312	\$0	\$1,312	\$0	\$0	\$20,992
		1 Bdrm.	0				\$0		
		2 Bdrm.	0				\$0		
		3 Bdrm.	0				\$0		
		4 Bdrm.	0				\$0		
		5 Bdrm.	0				\$0		
			16	Subtotal				\$0	\$20,992
60%	TCAC	Beds	0	\$0	\$0	\$0	\$0		
% of Restricted Units in this category 14%		0 Bdrm.	6	\$1,312	\$0	\$1,312	\$0	\$0	\$7,872
		1 Bdrm.	0				\$0		
		2 Bdrm.	0				\$0		
		3 Bdrm.	0				\$0		
		4 Bdrm.	0				\$0		
		5 Bdrm.	0				\$0		
			6	Subtotal				\$0	\$7,872
		Beds	0	\$0	\$0	\$0	\$0		
% of Restricted Units in this category 0%		0 Bdrm.	0				\$0		
		1 Bdrm.	0				\$0		
		2 Bdrm.	0				\$0		
		3 Bdrm.	0				\$0		
		4 Bdrm.	0				\$0		
		5 Bdrm.	0				\$0		
			0	Subtotal				\$0	\$0

RENTS & UNIT MIX INFORMATION									Hollister II	
Income Limit (% AML)	Rent Limit Calc. Formula	Unit Size	No. of Units	Maximum Gross Rent	Less Utility Allowance	Maximum Net Rent	Proposed Net Rent	Monthly Income at Proposed Rents	Monthly Income at Maximum Rents	
		Beds	0	\$0	\$0	\$0	\$0			
% of Restricted Units in this category	0%	0 Bdrm.	0				\$0			
		1 Bdrm.	0				\$0			
		2 Bdrm.	0				\$0			
		3 Bdrm.	0				\$0			
		4 Bdrm.	0				\$0			
		5 Bdrm.	0				\$0			
			0	Subtotal				\$0	\$0	
		Beds	0	\$0	\$0	\$0	\$0			
% of Restricted Units in this category	0%	0 Bdrm.	0				\$0			
		1 Bdrm.	0				\$0			
		2 Bdrm.	0				\$0			
		3 Bdrm.	0				\$0			
		4 Bdrm.	0				\$0			
		5 Bdrm.	0				\$0			
			0	Subtotal				\$0	\$0	
		Beds	0	\$0	\$0	\$0	\$0			
% of Restricted Units in this category	0%	0 Bdrm.	0				\$0			
		1 Bdrm.	0				\$0			
		2 Bdrm.	0				\$0			
		3 Bdrm.	0				\$0			
		4 Bdrm.	0				\$0			
		5 Bdrm.	0				\$0			
			0	Subtotal				\$0	\$0	
		Beds	0	\$0	\$0	\$0	\$0			
% of Restricted Units in this category	0%	0 Bdrm.	0				\$0			
		1 Bdrm.	0				\$0			
		2 Bdrm.	0				\$0			
		3 Bdrm.	0				\$0			
		4 Bdrm.	0				\$0			
		5 Bdrm.	0				\$0			
			0	Subtotal				\$0	\$0	
		Beds	0	\$0	\$0	\$0	\$0			
% of Restricted Units in this category	0%	0 Bdrm.	0				\$0			
		1 Bdrm.	0				\$0			
		2 Bdrm.	0				\$0			
		3 Bdrm.	0				\$0			
		4 Bdrm.	0				\$0			
		5 Bdrm.	0				\$0			
			0	Subtotal				\$0	\$0	
Total Restricted Units			42	Monthly Rental Income from Restricted Units			\$13,120	\$41,984		
Unrestricted Units			0				\$0	\$0		
			0				\$0	\$0		

RENTS & UNIT MIX INFORMATION

	0				\$0	\$0
	0				\$0	\$0
	0				\$0	\$0
	0				\$0	\$0
	0				\$0	\$0
	0				\$0	\$0
	0				\$0	\$0
Manager Unit	0				\$0	\$0
Manager Unit	0				\$0	\$0
Manager Unit	0				\$0	\$0
Total Unrestricted Units	0				Subtotal	\$0
Total Units	42					

Other Rent Limits

Enter below any **rent** limits that are both the most restrictive and that are required by sources other than tax credits, bonds, or MHP (e.g.. HOME or USDA Rural Development). Describe the limits in the box to the right. After you are done, complete the table above.

Income Level	Gross Rent Limits						Description of Other Rent Limits
	Unit Size (Bdrms)						
	0	1	2	3	4	5	
65%	\$0	\$0	\$0	\$0	\$0	\$0	
60%	\$0	\$0	\$0	\$0	\$0	\$0	
55%	\$0	\$0	\$0	\$0	\$0	\$0	
50%	\$0	\$0	\$0	\$0	\$0	\$0	
45%	\$0	\$0	\$0	\$0	\$0	\$0	
40%	\$0	\$0	\$0	\$0	\$0	\$0	
35%	\$0	\$0	\$0	\$0	\$0	\$0	
30%	\$0	\$0	\$0	\$0	\$0	\$0	
25%	\$0	\$0	\$0	\$0	\$0	\$0	
20%	\$0	\$0	\$0	\$0	\$0	\$0	
15%	\$0	\$0	\$0	\$0	\$0	\$0	

Restricted Units by Income and Unit Size

Income Level	No.	% of Restricted Units
65%	0	0%
60%	22	52%
55%	0	0%
50%	0	0%
45%	0	0%
40%	0	0%
35%	0	0%
30%	20	48%
25%	0	0%
20%	0	0%
15%	0	0%
Total:	42	100%

Unit Size	Units	% of Restricted Units
Beds	0	0%
0 Bdrm.	42	100%
1 Bdrm.	0	0%
2 Bdrm.	0	0%
3 Bdrm.	0	0%
4 Bdrm.	0	0%
5 Bdrm.	0	0%
Total:	42	100%

**No Place Like Home (NPLH) Program - Rents and Unit Mix
for units assisted by NPLH**

Income Limit (% AMI)	Rent Limit Calc. Formula	Unit Size	No. of NPLH Units	Maximum Gross Rent	Less Utility Allowance	Maximum Net Rent	Proposed Net Rent	Monthly Income at Proposed Rents	Monthly Income at Maximum Rents
		Beds					\$0		
% of Restricted Units in this category	0%	0 Bdrm.					\$0		
		1 Bdrm.					\$0		
		2 Bdrm.					\$0		
		3 Bdrm.					\$0		
		4 Bdrm.					\$0		
		5 Bdrm.					\$0		
0			Subtotal				\$0	\$0	
30%	TCAC	Beds	0	\$0	\$0	\$0	\$0		
% of Restricted Units in this category	100%	0 Bdrm.	20	\$656	\$0	\$656	\$656	\$13,120	\$13,120
		1 Bdrm.	0				\$0		
		2 Bdrm.	0				\$0		
		3 Bdrm.	0				\$0		
		4 Bdrm.	0				\$0		
		5 Bdrm.	0				\$0		
20			Subtotal				\$13,120	\$13,120	
60%	TCAC	Beds					\$0		
% of Restricted Units in this category	0%	0 Bdrm.					\$0		
		1 Bdrm.					\$0		
		2 Bdrm.					\$0		
		3 Bdrm.					\$0		
		4 Bdrm.					\$0		
		5 Bdrm.					\$0		
0			Subtotal				\$0	\$0	
60%	TCAC	Beds					\$0		
% of Restricted Units in this category	0%	0 Bdrm.					\$0		
		1 Bdrm.					\$0		
		2 Bdrm.					\$0		
		3 Bdrm.					\$0		
		4 Bdrm.					\$0		
		5 Bdrm.					\$0		
0			Subtotal				\$0	\$0	
		Beds					\$0		
% of Restricted Units in this category	0%	0 Bdrm.					\$0		
		1 Bdrm.					\$0		
		2 Bdrm.					\$0		
		3 Bdrm.					\$0		
		4 Bdrm.					\$0		
		5 Bdrm.					\$0		
0			Subtotal				\$0	\$0	
0			Subtotal				\$0	\$0	
20			Monthly Rental Income from Restricted Units				\$13,120	\$13,120	

SUBSIDY INFORMATION

Incremental Income from Rent/Operating Subsidies Based on Contract Rents

The top part of this section estimates incremental income from rent subsidy contracts, such as Section 8, above and beyond either 1) maximum restricted rents or 2) proposed rents. Complete this part only if the Project will have a rent subsidy based on contract rents.

List all Project-based or sponsor-based rent/operating subsidies in the bottom portion of this section, under the "Rent/Operating Subsidy Programs" heading.

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Is Subsidy payments over net rent based on Restricted or Proposed Rents? Proposed Rents

		Incremental Income from Rent/Operating Subsidy				
		Subsidy Program Name: Sanctuary Fund				
Income Limit (% AMI)	Rent Limit Calc. Formula	Unit Size	Gross Monthly Contract Rent	Subsidy Payment Over Net Rent	Units Subsidized	Total Monthly Extra Income
		Beds	\$0		0	
		0 Bdrm.	\$0		0	
		1 Bdrm.	\$0		0	
		2 Bdrm.	\$0		0	
		3 Bdrm.	\$0		0	
		4 Bdrm.	\$0		0	
		5 Bdrm.	\$0		0	
30%	TCAC	Beds	\$0		0	
		0 Bdrm.	\$1,093	\$437	20	\$8,740
		1 Bdrm.	\$0		0	
		2 Bdrm.	\$0		0	
		3 Bdrm.	\$0		0	
		4 Bdrm.	\$0		0	
		5 Bdrm.	\$0		0	
60%	TCAC	Beds	\$0		0	
		0 Bdrm.	\$0		0	
		1 Bdrm.	\$0		0	
		2 Bdrm.	\$0		0	
		3 Bdrm.	\$0		0	
		4 Bdrm.	\$0		0	
		5 Bdrm.	\$0		0	
60%	TCAC	Beds	\$0		0	
		0 Bdrm.	\$0		0	
		1 Bdrm.	\$0		0	
		2 Bdrm.	\$0		0	
		3 Bdrm.	\$0		0	
		4 Bdrm.	\$0		0	
		5 Bdrm.	\$0		0	
		Beds	\$0		0	
		0 Bdrm.	\$0		0	
		1 Bdrm.	\$0		0	

Incremental Income from Rent/Operating Subsidy			
Subsidy Program Name:			
Gross Monthly Contract Rent	Subsidy Payment Over Net Rent	Units Subsidized	Total Monthly Extra Income
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	
\$0		0	

SUBSIDY INFORMATION

		Incremental Income from Rent/Operating Subsidy				Incremental Income from Rent/Operating Subsidy				
		Subsidy Program Name: Sanctuary Fund				Subsidy Program Name: 0				
Income Limit (% AMI)	Rent Limit Calc. Formula	Unit Size	Gross Monthly Contract Rent	Subsidy Payment Over Net Rent	Units Subsidized	Total Monthly Extra Income	Gross Monthly Contract Rent	Subsidy Payment Over Net Rent	Units Subsidized	Total Monthly Extra Income
		2 Bdrm.	\$0		0		\$0		0	
		3 Bdrm.	\$0		0		\$0		0	
		4 Bdrm.	\$0		0		\$0		0	
		5 Bdrm.	\$0		0		\$0		0	
		Beds	\$0		0		\$0		0	
		0 Bdrm.	\$0		0		\$0		0	
		1 Bdrm.	\$0		0		\$0		0	
		2 Bdrm.	\$0		0		\$0		0	
		3 Bdrm.	\$0		0		\$0		0	
		4 Bdrm.	\$0		0		\$0		0	
		5 Bdrm.	\$0		0		\$0		0	
		Beds	\$0		0		\$0		0	
		0 Bdrm.	\$0		0		\$0		0	
		1 Bdrm.	\$0		0		\$0		0	
		2 Bdrm.	\$0		0		\$0		0	
		3 Bdrm.	\$0		0		\$0		0	
		4 Bdrm.	\$0		0		\$0		0	
		5 Bdrm.	\$0		0		\$0		0	
		Beds	\$0		0		\$0		0	
		0 Bdrm.	\$0		0		\$0		0	
		1 Bdrm.	\$0		0		\$0		0	
		2 Bdrm.	\$0		0		\$0		0	
		3 Bdrm.	\$0		0		\$0		0	
		4 Bdrm.	\$0		0		\$0		0	
		5 Bdrm.	\$0		0		\$0		0	
		Beds	\$0		0		\$0		0	
		0 Bdrm.	\$0		0		\$0		0	
		1 Bdrm.	\$0		0		\$0		0	
		2 Bdrm.	\$0		0		\$0		0	
		3 Bdrm.	\$0		0		\$0		0	
		4 Bdrm.	\$0		0		\$0		0	
		5 Bdrm.	\$0		0		\$0		0	
		Beds	\$0		0		\$0		0	
		0 Bdrm.	\$0		0		\$0		0	
		1 Bdrm.	\$0		0		\$0		0	
		2 Bdrm.	\$0		0		\$0		0	
		3 Bdrm.	\$0		0		\$0		0	
		4 Bdrm.	\$0		0		\$0		0	
		5 Bdrm.	\$0		0		\$0		0	

SUBSIDY INFORMATION

	Beds	\$0		0		\$0		0		
	0 Bdrm.	\$0		0		\$0		0		
	1 Bdrm.	\$0		0		\$0		0		
	2 Bdrm.	\$0		0		\$0		0		
	3 Bdrm.	\$0		0		\$0		0		
	4 Bdrm.	\$0		0		\$0		0		
	5 Bdrm.	\$0		0		\$0		0		
Total Units Subsidized				20		Total Units Subsidized				0
Total Monthly Subsidy					\$8,740	Total Monthly Subsidy				\$0

Rent/Operating Subsidy Programs

Subsidy Program Name:	Sanctuary Rent Fund			
Subsidy Program Component:	Project Based Assistance			
Subsidy Currently in Place?	Yes			
Date Application Submitted or To be Submitted:	11/1/2021			
Date Award Expected:	11/2/21			
Contract Term (Years):	20			
Expected 1st Year Amount, if not based on contract rents:	104880			
Basis for Subsequent Amounts, if not based on contract rents:	change in AMI			

Continuum of Care Process

If one or more of the subsidy programs listed above is part of your local Continuum of Care process (i.e., Shelter Plus Care, Supportive Housing Program, Section 8 Mod Rehab SRO, etc.), please complete the following:

- Has your community completed its Continuum of Care ranking process? Yes
- If you answered yes to question number one, is your Project ranked within the fundable range? Yes
- If you answered no to question number one, when will your community complete its Continuum of Care ranking process?

Applicant Notes

The Sanctuary Rental Fund has committed to emulate Section 8 Project-Based Voucher program procedures, and will supplement the 20 NPLH tenants' restricted rent level at 30% of AMI and the expected COSR, raising the tenant's effective rents to 30% AMI, \$656, and supplementing the tenant rent and the COSR to move rents to the 50% of AMI level (\$1,093 per month, studio apartment, 2021). In general, we expect a first year COSR would supplement the expected tenant rent of \$270 per month (30% of \$900, the approximate current level of SSI/SSA). The estimated total of rent plus COSR would equal approximately \$656, and the "Sanctuary Rental Fund" will further supplement this amount by an expected \$437 per participating unit per month. The first year draw for 20 participating NPLH tenants would therefore be expected as \$437 x 12 x 20 units = \$104,880. This amount would be expected to rise approximately 3.5% per year. Any tenant utilizing tenant-based rental assistance would eliminate the need for draws of COSR and Sanctuary Rental Fund for that unit for the month of utilization.

SOURCES OF DEVELOPMENT FUNDS

Construction Period Sources of Funds

Committed?	Source Name (in lien priority order)	Lien No.	Amount	Interest Rate	Required Payment	Loan Term (months)	Tax Exempt Amount	Residential Amount	Commercial Amount
Yes	First Republic Bank	1	\$8,877,668	4.00%	Other	360		\$5,377,668	\$3,500,000
Yes	State of California	2	\$0	3.00%	Deferred	660		\$0	
Yes	Community Corrections Partnership	3	\$1,500,000	0.00%	None	360		\$1,500,000	
Yes	City of Santa Barbara	4	\$229,400	3.00%	None	360		\$229,400	
No	State of California	2	\$0	3.00%	Deferred	660		\$0	
Yes	Sanctuary Centers Equity		\$13,683,667	0.00%	None	660		\$13,683,667	\$0
Yes	Sanctuary Centers Equity		\$849,138	0.00%	None	660			\$849,138
<i>Equity Investor</i>			\$0		Type of Tax Credits			\$0	
			Construction Totals					\$0	\$4,349,138

Permanent Sources of Funds

Committed?	Source Name (in lien priority order)	Lien No.	Amount	Interest Rate		Amortiz'n Period (yrs.)	Repayment Terms		Required Residential Debt Service	Required Commercial Debt Service	Tax Exempt Amount	Residential Amount	Commercial Amount
				Rate	Type		Type	Due in (yrs)					
Yes	First Republic Bank	1	\$4,526,968	3.75%	Fixed for Term	360	FAM		\$4,756	\$16,209		\$1,026,968	\$3,500,000
Yes	State of California NPLH Non-Comp	2	\$450,000	3.00%	Fixed for Term	660	DEF		\$0	\$0		\$450,000	\$0
Yes	Community Corrections Partnership	3	\$1,500,000	0.00%	Fixed for Term	360	None		\$0	\$0		\$1,500,000	\$0
Yes	City of Santa Barbara	4	\$229,400	3.00%	Fixed for Term	360	None		\$0	\$0		\$229,400	\$0
No	State of California - NPLH Comp.	2	\$3,900,700	3.00%	Fixed for Term	660	DEF		\$0	\$0		\$3,900,700	\$0
Yes	Sanctuary Centers Equity- RES		\$13,683,667	0.00%	Fixed for Term	660	None		\$0	\$0		\$13,683,667	\$0
Yes	Sanctuary Centers Equity-COML		\$849,138	0.00%	Fixed for Term	660	None		\$0	\$0		\$0	\$849,138
No	County Gap Financing	5	\$0	0.00%	Fixed for Term	660	RR		\$0	\$0		\$0	\$0
<i>Equity Investor</i>					Type of Tax Credits	0%						\$0	
			Permanent Totals						\$4,756	\$16,209	\$0	\$20,790,735	\$4,349,138

Applicant Comments

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Hollister II PROJECT DEVELOPMENT BUDGET						
DEVELOPMENT COST	Total Project Costs	Residential Costs	Commercial Costs	N/A - No tax credits per Dev Sources	N/A - No tax credits per Dev Sources	Comments and explanation of basis changes
LAND COST/ACQUISITION						
Land Cost or Value	\$920,000	\$740,600	\$179,400			
Demolition	\$49,999	\$40,250	\$9,749			
Legal	\$0					
Land Lease Rent Prepayment	\$0					
Total Land Cost or Value	\$969,999	\$780,850	\$189,149			
Existing Improvements Cost or Value	\$2,530,000	\$2,530,000				
Off-Site Improvements	\$0					
Total Acquisition Cost	\$2,530,000	\$2,530,000	\$0		\$0	
Total Land Cost / Acquisition Cost	\$3,499,999	\$3,310,850	\$189,149			
Predevelopment Interest/Holding Cost	\$0					
Assumed, Accrued Interest on Existing Debt (Rehab/Acq)	\$0					
Excess Purchase Price Over Appraisal	\$0					
REHABILITATION						
Site Work	\$0					
Structures	\$0					
General Requirements	\$0					
Contractor Overhead	\$0					
Contractor Profit	\$0					
Prevailing Wages	\$0					
General Liability Insurance	\$0					
Other: (Specify)	\$0					
Other: (Specify)	\$0					
Other: (Specify)	\$0					
Other: (Specify)	\$0					
Total Rehabilitation Costs	\$0	\$0	\$0	\$0	\$0	
Total Relocation Expenses	\$240,000	\$240,000			\$240,000	
NEW CONSTRUCTION						
Site Work	\$250,000	\$201,250	\$48,750		\$201,250	
Structures	\$12,892,000	\$10,095,310	\$2,796,690		\$10,095,310	
General Requirements	\$1,021,440	\$822,259	\$199,181		\$822,259	
Contractor Overhead	\$468,403	\$377,064	\$91,339		\$377,064	
Contractor Profit	\$603,069	\$485,471	\$117,598		\$485,471	
Prevailing Wages	\$0					
General Liability Insurance	\$250,000	\$201,250	\$48,750		\$201,250	
Other: (Specify)	\$0					
Other: (Specify)	\$0					
Other: (Specify)	\$0					
Other: (Specify)	\$0					
Total New Construction Costs	\$15,484,912	\$12,182,604	\$3,302,308	\$0	\$12,182,604	
ARCHITECTURAL FEES						
Design	\$470,540	\$376,960	\$93,580		\$376,960	
Supervision	\$35,000	\$30,000	\$5,000		\$30,000	
Total Architectural Costs	\$505,540	\$406,960	\$98,580	\$0	\$406,960	
Total Survey & Engineering	\$316,396	\$254,699	\$61,697		\$254,699	
CONSTRUCTION INTEREST & FEES						
Construction Loan Interest	\$200,000	\$161,000	\$39,000		\$161,000	
Origination Fee	\$50,000	\$40,250	\$9,750		\$40,250	
Credit Enhancement/Application Fee	\$0					
Bond Premium	\$150,000	\$120,750	\$29,250		\$120,750	
Cost of Issuance	\$0					
Title & Recording	\$0					
Taxes	\$0					
Insurance	\$50,000	\$40,250	\$9,750		\$40,250	
Other: (Specify)	\$0					
Other: (Specify)	\$0					
Other: (Specify)	\$0					
Total Construction Interest & Fees	\$450,000	\$362,250	\$87,750	\$0	\$362,250	
PERMANENT FINANCING						
Loan Origination Fee	\$46,000	\$37,030	\$8,970			

Hollister II PROJECT DEVELOPMENT BUDGET						
DEVELOPMENT COST	Total Project Costs	Residential Costs	Commercial Costs	N/A - No tax credits per Dev Sources	N/A - No tax credits per Dev Sources	Comments and explanation of basis changes
Credit Enhancement/Application Fee	\$0					
Title & Recording	\$32,896	\$26,481	\$6,415			
Taxes	\$0					
Insurance	\$0					
Other: (Specify)	\$0					
Other: (Specify)	\$0					
Total Permanent Financing Costs	\$78,896	\$63,511	\$15,385			
Subtotals Forward	\$20,575,743	\$16,820,874	\$3,754,869	\$0	\$13,446,513	
LEGAL FEES						
Legal Paid by Applicant	\$150,000	\$120,750	\$29,250		\$120,750	
Other: (Specify)	\$0					
Total Attorney Costs	\$150,000	\$120,750	\$29,250	\$0	\$120,750	
RESERVES						
Operating Reserve	\$310,667	\$310,667				
Replacement Reserve	\$0					
Transition Reserve	\$0	\$0				
Rent Reserve	\$981,433	\$981,433				
Other: (specify)	\$0					
NPLH Cap. Op. Subsidy Reserve (COSR)	\$0					
Other: (Specify)	\$0					
Total Reserve Costs	\$1,292,100	\$1,292,100	\$0			
CONTINGENCY COSTS						
Construction Hard Cost Contingency	\$1,000,000	\$805,000	\$195,000		\$805,000	
Soft Cost Contingency	\$525,946	\$423,387	\$102,559		\$423,387	
Total Contingency Costs	\$1,525,946	\$1,228,387	\$297,559	\$0	\$1,228,387	
OTHER PROJECT COSTS						
TCAC App/Allocation/Monitoring Fees	\$0					
Environmental Audit	\$8,000	\$6,440	\$1,560		\$6,440	
Local Development Impact Fees	\$40,000	\$32,200	\$7,800		\$32,200	
Permit Processing Fees	\$238,732	\$192,179	\$46,553		\$192,179	
Capital Fees	\$0					
Marketing	\$8,000	\$6,440	\$1,560			
Furnishings	\$365,352	\$294,109	\$71,243		\$294,109	
Market Study	\$10,000	\$8,050	\$1,950		\$8,050	
Accounting/Reimbursable	\$12,000	\$9,660	\$2,340		\$9,660	
Appraisal Costs	\$12,000	\$9,660	\$2,340		\$9,660	
Other: (Specify)	\$0					
Other: (Specify)	\$0					
Other: (Specify)	\$0					
Other: (Specify)	\$0					
Other: (Specify)	\$0					
Other: (Specify)	\$0					
Total Other Costs	\$694,084	\$558,738	\$135,346	\$0	\$552,298	
SUBTOTAL PROJECT COST	\$24,237,873	\$20,020,849	\$4,217,024	\$0	\$15,347,948	
DEVELOPER COSTS						
Developer Overhead/Profit	\$424,499	\$385,499	\$39,000		\$385,499	
Consultant/Processing Agent	\$50,000	\$40,250	\$9,750		\$40,250	
Project Administration	\$144,501	\$116,322	\$28,179		\$116,322	
Broker Fees Paid to a Related Party	\$0					
Construction Oversight by Developer	\$0					
Other: Fundraising Costs	\$283,000	\$227,815	\$55,185		\$227,815	
Total Developer Costs	\$902,000	\$769,886	\$132,114	\$0	\$769,886	
TOTAL PROJECT COST	\$25,139,873	\$20,790,735	\$4,349,138	\$0	\$16,117,834	
Eligible Basis:				\$0	\$16,117,834	
Total Eligible Basis:				\$0	\$16,117,834	

	DF 2021
Total Developer Fee (equals Total Developer Costs above):	\$902,000
Total Developer Fee paid from development funding sources:	\$902,000
Deferred Developer Fee payable on a priority basis from available Cash Flow:	\$0
Deferred Developer Fee payable from allowable 50% Distribution:	\$0

Hollister II PROJECT DEVELOPMENT BUDGET						
DEVELOPMENT COST	Total Project Costs	Residential Costs	Commercial Costs	N/A - No tax credits per Dev Sources	N/A - No tax credits per Dev Sources	Comments and explanation of basis changes
Developer Fee Contributed as Capital:				\$0		

USES OF FUNDS	Residential Permanent Sources of Funds										Commercial Sources					
	Total Costs (Residential & Commercial)	Total Residential Cost from Dev Budget	First Republic Bank	State of California NPLH Non-Comp	Community Corrections Partnership	City of Santa Barbara	State of California - NPLH Comp.	Sanctuary Centers Equity - RES	Sanctuary Centers Equity - COMIL	County Gap Financing	Gross Tax Credit Equity	Total Residential Sources	Commercial Costs	First Republic Bank	Sanctuary Centers Equity - COMIL	Residential Cost Difference Dev Budget vs. Sources
													Total			
LAND COST/ACQUISITION																
Land Cost or Value	\$920,000	\$740,600						\$740,600				\$740,600	\$179,400		\$179,400	\$0
Demolition	\$49,999	\$40,250	\$40,250									\$9,749	\$9,749		\$9,749	\$0
Legal	\$0	\$0										\$0	\$0		\$0	\$0
Land Lease Rent Prepayment	\$0	\$0										\$0	\$0		\$0	\$0
Total Land Cost or Value	\$969,999	\$780,850	\$40,250	\$0	\$0	\$229,400	\$0	\$740,600	\$0	\$0	\$0	\$189,850	\$179,400	\$9,749	\$179,400	\$0
Existing Improvements Cost or Value	\$2,530,000	\$2,530,000				\$229,400	\$2,300,600					\$2,530,000	\$0		\$0	\$0
Off-Site Improvements	\$0	\$0										\$0	\$0		\$0	\$0
Total Acquisition Cost	\$2,530,000	\$2,530,000	\$0	\$0	\$0	\$229,400	\$2,300,600	\$0	\$0	\$0	\$0	\$2,530,000	\$0	\$0	\$0	\$0
Total Land Cost / Acquisition Cost	\$3,499,999	\$3,310,850	\$40,250	\$0	\$0	\$229,400	\$3,041,200	\$0	\$0	\$0	\$0	\$3,310,850	\$189,149	\$9,749	\$179,400	\$0
Predevelopment Interest/Holding Cost	\$0	\$0										\$0	\$0		\$0	\$0
Assumed, Accrued Interest on Existing Debt (Rehab/Acq)	\$0	\$0										\$0	\$0		\$0	\$0
Excess Purchase Price Over Appraisal	\$0	\$0										\$0	\$0		\$0	\$0
REHABILITATION																
Site Work	\$0	\$0										\$0	\$0		\$0	\$0
Structures	\$0	\$0										\$0	\$0		\$0	\$0
General Requirements	\$0	\$0										\$0	\$0		\$0	\$0
Contractor Overhead	\$0	\$0										\$0	\$0		\$0	\$0
Contractor Profit	\$0	\$0										\$0	\$0		\$0	\$0
Prevailing Wages	\$0	\$0										\$0	\$0		\$0	\$0
General Liability Insurance	\$0	\$0										\$0	\$0		\$0	\$0
Other: (Specify)	\$0	\$0										\$0	\$0		\$0	\$0
Other: (Specify)	\$0	\$0										\$0	\$0		\$0	\$0
Other: (Specify)	\$0	\$0										\$0	\$0		\$0	\$0
Other: (Specify)	\$0	\$0										\$0	\$0		\$0	\$0
Total Rehabilitation Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Relocation Expenses	\$240,000	\$240,000		\$240,000								\$240,000	\$0		\$0	\$0
NEW CONSTRUCTION																
Site Work	\$250,000	\$201,250										\$201,250	\$48,750		\$48,750	\$0
Structures	\$12,892,000	\$10,096,310	\$536,718	\$450,000	\$1,500,000		\$4,785,186					\$2,126,952	\$669,738		\$669,738	\$0
General Requirements	\$1,021,440	\$822,259	\$200,000				\$400,000					\$199,181	\$199,181		\$199,181	\$0
Contractor Overhead	\$468,403	\$377,064	\$100,000				\$177,064					\$91,339	\$91,339		\$91,339	\$0
Contractor Profit	\$603,069	\$485,471	\$100,000				\$200,000					\$117,598	\$117,598		\$117,598	\$0
Prevailing Wages	\$0	\$0										\$0	\$0		\$0	\$0
General Liability Insurance	\$250,000	\$201,250	\$50,000				\$100,000					\$201,250	\$48,750		\$48,750	\$0
Other: (Specify)	\$0	\$0										\$0	\$0		\$0	\$0
Other: (Specify)	\$0	\$0										\$0	\$0		\$0	\$0
Other: (Specify)	\$0	\$0										\$0	\$0		\$0	\$0
Other: (Specify)	\$0	\$0										\$0	\$0		\$0	\$0
Total New Construction Costs	\$15,484,912	\$12,182,604	\$986,718	\$450,000	\$1,500,000	\$0	\$3,660,700	\$5,685,186	\$0	\$0	\$0	\$12,182,604	\$3,302,308	\$2,632,570	\$669,738	\$0
ARCHITECTURAL FEES																
Design	\$470,540	\$376,960										\$376,960	\$93,580		\$93,580	\$0
Supervision	\$35,000	\$30,000										\$30,000	\$5,000		\$5,000	\$0
Total Architectural Costs	\$505,540	\$406,960	\$0	\$0	\$0	\$0	\$0	\$406,960	\$0	\$0	\$0	\$406,960	\$98,580	\$98,580	\$0	\$0
Total Survey & Engineering	\$316,396	\$254,699						\$254,699				\$254,699	\$61,697		\$61,697	\$0
CONSTRUCTION INTEREST & FEES																
Construction Loan Interest	\$200,000	\$161,000										\$161,000	\$39,000		\$39,000	\$0
Origination Fee	\$50,000	\$40,250										\$40,250	\$9,750		\$9,750	\$0
Credit Enhancement/Application Fee	\$0	\$0										\$0	\$0		\$0	\$0
Bond Premium	\$150,000	\$120,750										\$120,750	\$29,250		\$29,250	\$0
Cost of Issuance	\$0	\$0										\$0	\$0		\$0	\$0
Title & Recording	\$0	\$0										\$0	\$0		\$0	\$0
Taxes	\$0	\$0										\$0	\$0		\$0	\$0
Insurance	\$50,000	\$40,250										\$40,250	\$9,750		\$9,750	\$0
Other: (Specify)	\$0	\$0										\$0	\$0		\$0	\$0
Other: (Specify)	\$0	\$0										\$0	\$0		\$0	\$0
Other: (Specify)	\$0	\$0										\$0	\$0		\$0	\$0
Total Construction Interest & Fees	\$450,000	\$362,250	\$0	\$0	\$0	\$0	\$362,250	\$0	\$0	\$0	\$0	\$362,250	\$87,750	\$87,750	\$0	\$0
PERMANENT FINANCING																
Loan Origination Fee	\$46,000	\$37,030										\$37,030	\$8,970		\$8,970	\$0

USES OF FUNDS	Residential Permanent Sources of Funds											Commercial Sources				
	Total Costs (Residential & Commercial)	Total Residential Cost from Dev Budget	First Republic Bank	State of California NPLH Non-Comp	Community Corrections Partnership	City of Santa Barbara	State of California - NPLH Comp.	Sanctuary Centers Equity-RES	Sanctuary Centers Equity-COMIL	County Gap Financing	Gross Tax Credit Equity	Total Residential Sources	Commercial Costs	First Republic Bank	Sanctuary Centers Equity-COMIL	Residential Cost Difference Dev Budget vs. Sources
												Total	Total			
Credit Enhancement/Application Fee	\$0	\$0										\$0	\$0			\$0
Title & Recording	\$32,896	\$26,481					\$26,481					\$26,481	\$6,415	\$6,415		\$0
Taxes	\$0	\$0										\$0	\$0			\$0
Insurance	\$0	\$0										\$0	\$0			\$0
Other (Specify)	\$0	\$0										\$0	\$0			\$0
Other (Specify)	\$0	\$0										\$0	\$0			\$0
Total Permanent Financing Costs	\$78,896	\$63,511	\$0	\$0	\$0	\$0	\$63,511	\$0	\$0	\$0	\$0	\$15,385	\$15,385	\$15,385	\$0	\$0
Subtotals Forward	\$20,575,743	\$16,820,874	\$1,026,968	\$450,000	\$1,500,000	\$229,400	\$3,900,700	\$9,713,806	\$0	\$0	\$16,820,874	\$3,754,869	\$2,905,731	\$849,138	\$0	\$0
LEGAL FEES	\$150,000	\$120,750					\$120,750				\$120,750	\$29,250	\$29,250			\$0
Legal Paid by Applicant	\$0	\$0										\$0	\$0			\$0
Other (Specify)	\$0	\$0										\$0	\$0			\$0
Total Attorney Costs	\$150,000	\$120,750	\$0	\$0	\$0	\$0	\$120,750	\$0	\$0	\$0	\$120,750	\$29,250	\$29,250	\$0	\$0	\$0
RESERVES	\$310,667	\$310,667					\$310,667				\$310,667	\$0	\$0			\$0
Operating Reserve	\$0	\$0										\$0	\$0			\$0
Replacement Reserve	\$0	\$0										\$0	\$0			\$0
Transition Reserve	\$0	\$0										\$0	\$0			\$0
Rent Reserve	\$981,433	\$981,433					\$981,433				\$981,433	\$0	\$0			\$0
Other (Specify)	\$0	\$0									\$0	\$0	\$0			\$0
NPLH Cap. Op. Subsidy Reserve (COSR)	\$0	\$0									\$0	\$0	\$0			\$0
Other (Specify)	\$0	\$0									\$0	\$0	\$0			\$0
Total Reserve Costs	\$1,292,100	\$1,292,100	\$0	\$0	\$0	\$0	\$1,292,100	\$0	\$0	\$0	\$1,292,100	\$0	\$0	\$0	\$0	\$0
CONTINGENCY COSTS	\$1,000,000	\$805,000					\$805,000				\$805,000	\$195,000	\$195,000			\$0
Construction Hard Cost Contingency	\$525,946	\$423,387					\$423,387				\$423,387	\$102,559	\$102,559			\$0
Soft Cost Contingency	\$1,525,946	\$1,228,387					\$1,228,387				\$1,228,387	\$297,559	\$297,559			\$0
Total Contingency Costs	\$1,525,946	\$1,228,387	\$0	\$0	\$0	\$0	\$1,228,387	\$0	\$0	\$0	\$1,228,387	\$297,559	\$297,559	\$0	\$0	\$0
OTHER PROJECT COSTS	\$8,000	\$6,440					\$6,440				\$6,440	\$1,560	\$1,560			\$0
TCAC App/Allocation/Monitoring Fees	\$0	\$0									\$0	\$0	\$0			\$0
Environmental Audit	\$8,000	\$6,440					\$6,440				\$6,440	\$1,560	\$1,560			\$0
Local Development Impact Fees	\$40,000	\$32,200					\$32,200				\$32,200	\$7,800	\$7,800			\$0
Permit Processing Fees	\$238,732	\$192,179					\$192,179				\$192,179	\$46,553	\$46,553			\$0
Capital Fees	\$0	\$0									\$0	\$0	\$0			\$0
Marketing	\$8,000	\$6,440					\$6,440				\$6,440	\$1,560	\$1,560			\$0
Furnishings	\$365,352	\$294,109					\$294,109				\$294,109	\$71,243	\$71,243			\$0
Market Study	\$10,000	\$8,050					\$8,050				\$8,050	\$1,950	\$1,950			\$0
Accounting/Reimbursable	\$12,000	\$9,660					\$9,660				\$9,660	\$2,340	\$2,340			\$0
Appraisal Costs	\$12,000	\$9,660					\$9,660				\$9,660	\$2,340	\$2,340			\$0
Other (Specify)	\$0	\$0									\$0	\$0	\$0			\$0
Other (Specify)	\$0	\$0									\$0	\$0	\$0			\$0
Other (Specify)	\$0	\$0									\$0	\$0	\$0			\$0
Other (Specify)	\$0	\$0									\$0	\$0	\$0			\$0
Total Other Costs	\$694,084	\$558,738	\$0	\$0	\$0	\$0	\$558,738	\$0	\$0	\$0	\$558,738	\$135,346	\$135,346	\$0	\$0	\$0
SUBTOTAL PROJECT COST	\$24,237,873	\$20,020,849	\$1,026,968	\$450,000	\$1,500,000	\$229,400	\$3,900,700	\$12,913,781	\$0	\$0	\$20,020,849	\$4,217,024	\$3,367,866	\$849,138	\$0	\$0
DEVELOPER COSTS	\$424,499	\$385,499					\$385,499				\$385,499	\$39,000	\$39,000			\$0
Developer Overhead/Profit	\$50,000	\$40,250					\$40,250				\$40,250	\$9,750	\$9,750			\$0
Consultant/Processing Agent	\$144,501	\$116,322					\$116,322				\$116,322	\$28,179	\$28,179			\$0
Project Administration	\$0	\$0									\$0	\$0	\$0			\$0
Broker Fees Paid to a Related Party	\$0	\$0									\$0	\$0	\$0			\$0
Construction Oversight by Developer	\$0	\$0									\$0	\$0	\$0			\$0
Other: Fundraising Costs	\$283,000	\$227,815					\$227,815				\$227,815	\$55,185	\$55,185			\$0
Total Developer Costs	\$902,000	\$769,866	\$0	\$0	\$0	\$0	\$769,866	\$0	\$0	\$0	\$769,866	\$132,114	\$132,114	\$0	\$0	\$0
TOTAL PROJECT COST	\$25,139,873	\$20,790,735	\$1,026,968	\$450,000	\$1,500,000	\$229,400	\$3,900,700	\$13,683,687	\$0	\$0	\$20,790,735	\$4,349,138	\$3,500,000	\$849,138	\$0	\$0

2021 TCAC Threshold Basis Limit for HCD Developer Fee 2017 UMR §8312(c) & (b) and High Cost Test for HCD Limits on Development Costs 2017 UMR §8311(a) & (b) (revised 3/24/21)

Complete all yellow shaded cells; see cell comments for tips

Project Name: Hollister II		County: Santa Barbara	HCD Phase:	Origination
Unit Size	1/5/21 TCAC Threshold Basis Limits (TBL)	Number of Units		Basis x Number of Units
SRO/Studio	\$303,706	42		\$12,755,652
1 Bedroom	\$350,170	0		\$0
2 Bedrooms	\$422,400	0		\$0
3 Bedrooms	\$540,672	0		\$0
4+ Bedrooms	\$602,342	0		\$0
Number of Manager Units in Project:	0	TOTAL UNITS:	42	
TOTAL UNADJUSTED THRESHOLD BASIS LIMIT (TBL):				\$12,755,652
TBL ADJUSTMENTS §10327(c)(5)(A-F):				Yes/No
(A) Project paid in whole or part out of public funds subject to a legal requirement for the payment of state or federal prevailing wages or financed in part by a labor-affiliated organization requiring the employment of construction workers who are paid at least state or federal prevailing wages. (20%)				No
				\$0
Project certifies that (1) they are subject to a project labor agreement within the meaning of §2500(b)(1) of the Public Contract Code, or (2) they will use a skilled and trained workforce as defined by §25536.7 of the Health and Safety Code to perform all onsite work within an apprenticeable occupation in the building and construction trades. (5%)				No
				\$0
New construction project required to provide parking beneath residential units (not "tuck under" parking) or through construction of an on-site parking structure of two or more levels. (10%)				No
				\$0
Project where a day care center is part of the development. (2%)				No
				\$0
Project where 100 percent of the Low Income units are for Special Needs populations. (2%)				Yes
				\$255,113
Project where at least 95% of the project's upper floor units are serviced by an elevator. (10%)				Yes
				\$1,275,565
Project wherein at least 95% of the building(s) is constructed as Type I as defined in the California Building Code, in which case, the Type III 10% increase below is not allowed. (15%)				
				\$0
Project wherein at least 95% of the building(s) is constructed as a Type III as defined in the California Building Code, or a Type III/Type I combination, in which case, the Type I 15% increase above is not allowed. (10%)				Yes
				\$1,275,565
(B) Project applying under §10325 or §10326 of these regulations that include one or more of the features below. (up to 10%)				
				\$0
Proposed energy efficiency/resource conservation/indoor air quality items	(1) Project shall have onsite renewable generation estimated to produce 50% or more of annual tenant electricity use. If the combined available roof area of the Project structures, including carports, is insufficient for provision of 50% of annual electricity use, then the Project shall have onsite renewable generation based on at least 90% of the available solar accessible roof area. Available solar accessible area is defined as roof area less north facing roof area for sloped roofs, equipment, solar thermal hot water and required local or state fire department set-backs and access routes. A Project not availing itself of the 90% roof area exception may also receive an increase under paragraph (2) only if the renewable generation used to calculate each basis increase does not overlap. (5%)			
	(2) Project shall have onsite renewable generation estimated to produce 75% or more of annual common area electricity use. If the combined available roof area of the Project structures, including carports, is insufficient for provision of 75% of annual electricity use, then the Project shall have onsite renewable generation based on at least 90% of the available solar accessible roof area. Available solar accessible area is defined as roof area less north facing roof area for sloped roofs, equipment, solar thermal hot water and required local or state fire department set-backs and access routes. A Project not availing itself of the 90% roof area exception may also receive an increase under paragraph (1) only if the renewable generation used to calculate each basis increase does not overlap. (2%)			
	(3) Newly constructed Project buildings shall be 15% or more energy efficient than the 2016 Energy Efficiency Standards (California Code of Regulations, Part 6 of Title 24), except that if the local building department has determined that building permit applications submitted on or before December 31, 2016 are complete, then newly constructed Project buildings shall be fifteen percent (15%) or more energy efficient than the 2013 Energy Efficiency Standards (California Code of Regulations, Part 6 of Title 24). (4%)			
	(4) Rehab Project buildings shall have 80% decrease in estimated TDV energy use (or improvement in energy efficiency) post rehab as demonstrated using the appropriate performance module of CEC software. (4%)			
	(5) Irrigate only with reclaimed water, greywater, or rainwater (excepting water used for Community Gardens) or irrigate with reclaimed water, grey water, or rainwater in an amount that annually equals or exceeds 20,000 gallons or 300 gallons per unit, whichever is less. (1%)			
	(6) Community Gardens of at least 60 square feet per unit. Permanent site improvements that provide a viable growing space within the Project including solar access, fencing, watering systems, secure storage space for tools, and pedestrian access. (1%)			
	(7) Install bamboo, cork, salvaged or FSC-Certified wood, natural linoleum, natural rubber, or ceramic tile in all kitchens, living rooms, and bathrooms (where no VOC adhesives or backing is also used). (1%)			
	(8) Install bamboo, stained concrete, cork, salvaged or FSC-Certified wood, ceramic tile, or natural linoleum in all common areas. (2%)			
	(9) Meet all requirements of the U.S. Environmental Protection Agency Indoor Air Plus Program. (2%)			
(D) Project requires seismic upgrading of existing structures, and/or requires toxic or other environmental mitigation as certified by the Project architect/ engineer. (lesser of costs or 15% basis adjustment)				
If Yes, select type of work:				\$0
Enter Certified Costs of Work:				\$0
(E) Local development impact fees required to be paid to local government entities. Certification from local entities assessing fees also required. WAIVED IMPACT FEES ARE INELIGIBLE.				Yes
				\$32,200
				<i>Please Enter Amount Above:</i>
(F) Projects within a county with an unadjusted 9% threshold basis limit for a 2-bedroom unit equal or less than \$400,000 and within a census tract designated on the TCAC/HCD Opportunity Map as Highest or High Resource. (10%)				No
				\$0
County eligibility:	No	TCAC/HCD Opportunity Area Map Tract ID #:	Opportunity Map Resource level:	

HCD 2021 Developer Fee Calculator - revised 2/4/21 (complete YELLOW shaded cells)

Project Phase:	Origination	Proposed Project Type:	No Tax Credits
Project Name:	Hollister II		

Project's Developer Fee Summary	HCD Limit	Project Amt.
Maximum Total Developer Fee - 2d	\$902,000	\$902,000
Max Developer Fee payable from development funding sources - lesser of 1e & 2d	\$902,000	\$902,000
Deferred Developer Fee payable on a priority basis from available Cash Flow	\$0	\$0
Deferred Developer Fee payable exclusively from Sponsor Distributions	\$0	\$0
Total Budgeted or Actual Developer Fee	\$902,000	
Developer Fee Contributed as Capital	\$0	Deferred Developer Fee
		\$0

Section 3. UMR §8312(a) for Projects without tax credits (choose only one in the 'a', 'b' or 'c' subsections)

a. New construction and substantial rehab projects UMR §8312(a)(1)

substantial rehab = construction cost for rehab work (excluding contractor profit and overhead) in excess of \$38,000 per unit

a1. Number of units (include manager's unit)	34		
a2. First 30 units at:	\$28,000 each	\$840,000	
a3. Units in excess of 30 at:	\$11,500 each	\$46,000	
a4. Total new construction and substantial rehab (a2 + a3)		\$886,000	

b. Acquisition and rehab projects UMR §8312(a)(2)

with construction cost for rehab work (excluding contractor profit and overhead) between \$11,500 - \$38,000 per unit

b1. Number of units (include manager's unit)			
b2. First 30 units at:	\$13,000 each	\$0	
b3. Units in excess of 30 at:	\$5,500 each	\$0	
b4. Total acquisition and non-substantial rehab (b2 + b3)		\$0	

c. All other projects UMR §8312(a)(3)

c1. Number of units (include manager's unit)	8		
c2. Total other at:	\$2,000 per unit		\$16,000

d. Maximum allowable Developer Fee (a4 + b4 + c2)	\$902,000
--	------------------

Supportive Services Costs - HCD 2017 UMR Limits (for projects with HCD funding) - NPLH allow for 3.5% annual increase; others 2.5%

HCD UMR §8301(t): "Supportive Services" - social, health, educational, income support and employment services and benefits, coordination of community building and educational activities, individualized needs assessment, and individualized assistance with obtaining services and benefits.

HCD UMR §8301(u): "Supportive Services Costs" - the costs of providing tenants service coordination, case management, and direct resident and Supportive Services. It includes: (1) the cost of providing tenants with information on and referral to social, health, educational, income support and employment services and benefits, coordination of community building and educational activities, individualized needs assessment, and individualized assistance with obtaining services and benefits; (2) salaries, benefits, contracted services, telecommunication expenses, travel costs, supplies, office expenses, staff training, maintenance of on-site equipment used in services programs, such as computer labs, incidental costs related to resident events, and other similar costs approved by the Department.

A. Supportive Services Units:	Total number of units:	42	Certification Year - based on completion or update date from Universal Application ('General' worksheet cell K10):	2022	Total Units	Max PUPY Expense	Max Costs
(1) UMR §8314(e)(1): Total number of Supportive Housing (SH) units anticipated to be restricted to individuals or families experiencing chronic homelessness as defined consistent with Health and Safety Code (HSC) §50675.14.					20	\$4,798	\$95,960
(2) UMR §8314(e)(2): Total number of Supportive Housing (SH) units (other than those restricted to individuals or families experiencing chronic homelessness pursuant to HSC §50675.14), PLUS the total number of units restricted to occupancy by Special Needs Populations (SNP)* under any HCD program. (*click here for definition - §7301(s) of the MHP Regulations). Do not include units included in (1) above.					22	\$3,601	\$79,222
(3) UMR §8314(e)(3): Total number of units where the Sponsor, their affiliate, or a service provider under contract to provide Supportive Services at the Project has both: (A) qualified staff devoted exclusively to oversight and quality control of resident services in affordable housing, including the Project; and (B) a system to track and report on tenant outcomes, such as changes in employment status and income. Do not include units included in items (1) and (2) above.						\$1,236	\$0
(4) UMR §8314(e)(4): Total number of units anticipated to be offered Supportive Services provided by the Project Sponsor, a Sponsor affiliate, or contracted service provider that do not satisfy the criteria in items (1), (2) and (3) above.						\$294	\$0
(5) Maximum Supportive Services Costs					42		\$175,182

HCD Reserve Requirements (all reserve withdrawals will require prior HCD approval)

Project Name:	Hollister II	Number of Project Units:	42	5/10/19
Replacement Reserve Calculator UMR §8309				
(a)	0.6% of new construction costs (structures excluding contractor profit, overhead, and general requirements and insurance):		\$13,142,000	\$78,852
(b)	\$500 per unit:		\$500	\$21,000
(c)	If a third-party physical needs assessment (PNA) was performed for this Project, must attach PNA:	PNA per unit amount:		\$0
(d)	Replacement Reserve amount = <i>New construction: lesser of (a), (b) and (c) above; Rehab: lesser of (b) and (c)</i>			\$21,000
	HCD Required Replacement Reserve Amount - must be included in 'Operating' budget			\$21,000
Operating Reserve Calculator UMR §8308				
1	Total Operating Expenses (including Property Taxes and excluding Service Coordinator salary):			\$556,011
2	Replacement Reserve amount (from above):			\$21,000
3	Mandatory Permanent Debt Service (enter lender name below):			
(a)	1st Mortgage			\$253,343
(b)	2nd Mortgage			\$0
(c)	3rd Mortgage Debt Service			\$0
(d)	Misc. Financial Expenses:			\$0
	Total Annual Mandatory Debt Service:			\$253,343
4a	HCD Required Operating Reserve Amount (Tax Credit Project - 3 months) - must be included in 'Dev Budget' for tax credit projects			\$207,588
4b	HCD Required Operating Reserve Amount (Non-Tax Credit Project - 4 months) - must be included in 'Dev Budget' if no tax credits			\$276,785
If Reserve amounts are different than the required amount, enter reserve amounts and how they are calculated below:				

ANNUAL INCOME AND EXPENSES

EMPLOYEE INFORMATION					Comments
No.	FTE	Employee Job Title	Salary/Wages	Value of Free Rent	
1	1.00	On-Site Manager(s)	\$45,144	\$0	There is 24 hour (non-resident) staff on premises.
1	1.00	On-Site Assistant Manager(s)	\$41,040	\$0	
		Supportive Services Staff Supervisor(s)	\$0		
		Supportive Services Coordinator, On-Site	\$0		
2	2.00	Other Supportive Services Staff (inc. Case Manager)	\$82,080		
		On-Site Maintenance Employee(s)	\$0	\$0	
		On-Site Leasing Agent/Administrative Employee(s)	\$0	\$0	
		On-Site Security Employee(s)	\$0	\$0	
			\$0	\$0	
			\$0	\$0	
Total Salaries and Value of Free Rent Units			\$168,264	\$0	
	6711	Payroll Taxes	\$16,237		Show free rent as an expense?
	6722	Workers Compensation	\$13,461		
	6723	Employee Benefits	\$48,000	Yes	
Employee(s) Payroll Taxes, Workers Comp. & Benefits			\$77,699		
Total Employee(s) Expenses			\$245,963		

Employee Units			
Income Limit	Job Title(s) of Employee(s) Living On-Site	Unit Type (No. of bdrms.)	Square Footage
		0	0
		0	0
		0	0
Total Square Footage		0	0

Annual Operating Budget

Acct. No.	REVENUE - INCOME	Residential	Commercial	Comments
5120/5140	Rent Revenue - Gross Potential		\$272,554	
	Restricted Unit Rents	\$503,808		
	Unrestricted Unit Rents	\$0		
5121	Tenant Assistance Payments	\$104,880		
	Sanctuary Fund	\$0		
	Operating Subsidies	\$0		
	Other: (specify)	\$0	\$0	
5910	Laundry and Vending Revenue	\$8,736		
5170	Garage and Parking Spaces	\$0	\$0	
5990	Miscellaneous Rent Revenue	\$0	\$0	
Gross Potential Income (GPI)		\$617,424	\$272,554	
	Vacancy Rate: Restricted Units	5.0%		
	Vacancy Rate: Unrestricted Units	5.0%		
	Vacancy Rate: Tenant Assistance Payments	5.0%		
	Vacancy Rate: Other: (specify)	5.0%		
	Vacancy Rate: Laundry & Vending & Other Income	5.0%		
	Vacancy Rate: Commercial Income		5.0%	
5220/5240	Vacancy Loss(es)	\$30,871	\$13,628	
Effective Gross Income (EGI)		\$586,553	\$258,927	
Acct. No.	EXPENSES	Residential	Commercial	Comments
ADMINISTRATIVE EXPENSES: 6200/6300				
6203	Conventions and Meetings	\$0	\$0	
6210	Advertising and Marketing	\$50	\$0	
6250	Other Renting Expenses	\$150	\$0	
6310	Office/Administrative Salaries -- from above	\$0	\$0	
6311	Office Expenses	\$2,400	\$0	
6312	Office or Model Apartment Rent	\$0	\$0	
6320	Management Fee	\$45,000	\$0	
6330	Site/Resident Manager(s) Salaries -- from above	\$86,184	\$0	
6331	Administrative Free Rent Unit -- from above	\$0	\$0	
6340	Legal Expense -- Project	\$12,000	\$0	
6350	Audit Expense	\$8,000	\$0	
6351	Bookkeeping Fees/Accounting Services	\$6,000	\$0	
6390	Miscellaneous Administrative Expenses	\$2,400	\$0	
6263T	TOTAL ADMINISTRATIVE EXPENSES	\$162,184	\$0	
Acct. No.	EXPENSES (continued)	Residential	Commercial	Comments
UTILITIES EXPENSES: 6400				
6450	Electricity	\$30,240	\$0	
6451	Water	\$20,160	\$0	

ANNUAL INCOME AND EXPENSES

6452	Gas	\$6,048	\$0	
6453	Sewer	\$20,000	\$0	
	Other Utilities: (internet hi-speed)	\$4,800	\$0	
6400T	TOTAL UTILITIES EXPENSES	\$81,248	\$0	
	OPERATING AND MAINTENANCE EXPENSES: 6500			Comments
6510	Payroll -- from above	\$0	\$0	
6515	Supplies	\$15,000	\$0	
6520	Contracts	\$15,000	\$0	
6521	Operating & Maintenance Free Rent Unit -- from above	\$0	\$0	
6525	Garbage and Trash Removal	\$3,600	\$0	
6530	Security Contract	\$0	\$0	
6531	Security Free Rent Unit -- from above	\$0	\$0	
6546	Heating/Cooling Repairs and Maintenance	\$3,600	\$0	
6548	Snow Removal	\$0	\$0	
6570	Vehicle & Maintenance Equipment Operation/Reports	\$0	\$0	
6590	Miscellaneous Operating and Maintenance Expenses	\$4,000	\$0	
6500T	TOTAL OPERATING & MAINTENANCE EXPENSES	\$41,200	\$0	
	TAXES AND INSURANCE: 6700			Comments
6710	Real Estate Taxes	\$2,000	\$0	
6711	Payroll Taxes (Project's Share) -- from above	\$16,237	\$0	
6720	Property and Liability Insurance (Hazard)	\$16,800	\$0	
6729	Other Insurance (e.g. Earthquake)	\$8,000	\$0	
6721	Fidelity Bond Insurance	\$400	\$0	
6722	Worker's Compensation -- from above	\$13,461	\$0	
6723	Health Insurance/Other Employee Benefits--from above	\$48,000	\$0	
6790	Miscellaneous Taxes, Licenses, Permits & Insurance	\$400	\$0	
6700T	TOTAL TAXES AND INSURANCE	\$105,299	\$0	
	SUPPORTIVE SERVICES COSTS: 6900			Comments
6990	Staff Supervisor(s) Salaries - from above	\$0	\$0	
6990	Services Coordinator Salaries, On-Site - from above	\$0	\$0	
6990	Other Supportive Services Staff Salaries - from above	\$82,080	\$0	
6990	Supportive Services Admin Overhead	\$0	\$0	
6990	Other Supportive Services Costs: (specify)	\$84,000	\$0	
6990	Other Supportive Services Costs: (specify)	\$0	\$0	
6900T	TOTAL SUPPORTIVE SERVICES COSTS	\$166,080	\$0	
	TOTAL OPERATING EXPENSES	\$556,011	\$0	Comments
	FUNDED RESERVES: 7200	Residential	Commercial	
7210	Required Replacement Reserve Deposits	\$21,000	\$0	
7220	Other Reserves: (specify)	\$0	\$0	
7230	Other Reserves: (specify)	\$0	\$0	
7240	Other Reserves: (specify)	\$0	\$0	
	TOTAL RESERVES	\$21,000	\$0	
	GROUND LEASE	Residential	Commercial	
	Ground Lease	\$0	\$0	
	TOTAL GROUND LEASE	\$0	\$0	
	NET OPERATING INCOME	\$9,542	\$258,927	
	FINANCIAL EXPENSES: 6800			Comments
6820	1st Mortgage Debt Service	\$58,835	\$194,509	
6830	2nd Mortgage Debt Service	\$0	\$0	
6840	3rd Mortgage Debt Service	\$0	\$0	
6890	Miscellaneous Financial Expenses: (specify)	\$0	\$0	
6890	Miscellaneous Financial Expenses: (specify)	\$0	\$0	
6890	Miscellaneous Financial Expenses: (specify)	\$0	\$0	
6890	Miscellaneous Financial Expenses: (specify)	\$0	\$0	
6800T	TOTAL FINANCIAL EXPENSES	\$58,835	\$194,509	
	CASH FLOW	(\$49,293)	\$64,418	
7190	Asset Management/Similar Fees	\$0	\$0	
	Total Operating Expenses Per Unit	<u>Per Year</u>	<u>Per Month</u>	
	Without any Adjustments	\$13,238	\$1,103	
	With the Value of Rent-Free Units Included	\$13,238	\$1,103	
	Without RE Taxes, Social Services Coordinator or Social Services/Social Programs and With the Value of Rent Fee Units Included	\$9,236	\$770	
			<i>UA Version 9/15/2021</i>	

Hollister II

CASH FLOW ANALYSIS

UA Version 9/15/2021

Is Income from Restricted Units based on Restricted or Proposed Rents?

Restricted Rents

Table with columns for Year 1 through Year 20 and rows for Income From Housing Units, Tenant Assistance Payments, Other Income, Gross Potential Income, Operating Expenses & Reserve Deposits, Debt Service, Debt Service Coverage Ratio, and COSR Analysis.

Flow for COSR

COSR per NPLH Assist. Unit	\$193,991
COSR PU Total \$209(e)(b)	\$3,879,820
COSR CF Total \$209(d)	\$2,546,330
COSR (lesser of PU or CF)	\$2,546,330
COSR 5% Max \$209(f)(1)	\$127,316

Project Amount	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15	Year 16	Year 17	Year 18
Rentals	157,440	161,376	165,410	169,546	173,784	178,129	182,582	187,147	191,825	196,621	201,537	206,575	211,739	217,033	222,459	228,020	233,721	239,564
February Fund	49,943	51,191	52,471	53,783	55,128	56,506	57,918	59,366	60,851	62,372	63,931	65,529	67,168	68,847	70,568	72,332	74,140	75,994
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
GROSS POTENTIAL INCOME - HOUSING	207,383	212,567	217,882	223,329	228,912	234,635	240,501	246,513	252,676	258,993	265,468	272,104	278,907	285,880	293,027	300,352	307,861	315,558

Project Amount	Proration	Initiation
8,736	47.6%	2.5%
0	47.6%	2.5%
GROSS POTENTIAL INCOME - OTHER		
GROSS POTENTIAL INCOME - TOTAL		

Project Amount	Proration	Initiation
5.0%	5.0%	5.0%
7,872	8.069	8.271
2,497	2,560	2,624
0	0	0
208	213	219
	11,113	11,390
TOTAL VACANCY LOSS	10,577	10,842
EFFECTIVE GROSS INCOME	200,966	205,990

Project Amount	Proration	Initiation
387,931	47.6%	3.5%
2,000	47.6%	2.0%
166,080	47.6%	2.0%
21,000	47.6%	0.0%
0	47.6%	0.0%
NPLH NET OPERATING INCOME	274,767	282,833
NPLH CASH FLOW after NPLH monitoring fee	(73,801)	(76,843)
15,557	15,557	15,557
(89,358)	(92,400)	(95,575)

Project Amount	Proration	Initiation
104,484	52.4%	3.5%
0	47.6%	3.5%
0	47.6%	3.5%
104,484	52.4%	3.5%
0	47.6%	3.5%
104,484	52.4%	3.5%
(89,358)	(92,400)	(95,575)

Project Amount	Proration	Initiation
89,358	52.4%	3.5%
89,358	52.4%	3.5%
0	47.6%	3.5%
0	47.6%	3.5%
0	47.6%	3.5%
0	47.6%	3.5%
(89,358)	(92,400)	(95,575)

Project Amount	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15	Year 16	Year 17	Year 18
5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%
7,872	8,069	8,271	8,477	8,689	8,906	9,129	9,357	9,591	9,831	10,077	10,329	10,587	10,852	11,123	11,401	11,686	11,978	
2,497	2,560	2,624	2,689	2,756	2,825	2,896	2,968	3,043	3,119	3,197	3,276	3,358	3,442	3,528	3,617	3,707	3,800	
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
208	213	219	224	230	235	241	247	253	260	266	273	280	287	294	301	309	316	
	10,842	11,113	11,390	11,675	11,967	12,266	12,573	12,887	13,209	13,540	13,878	14,225	14,581	14,945	15,319	15,702	16,094	
200,966	211,140	216,418	221,829	227,374	233,059	238,885	244,857	250,979	257,253	263,684	270,277	277,033	283,959	291,058	298,335	305,793		
184,729	191,194	197,886	204,812	211,981	219,400	227,079	235,027	243,253	251,766	260,578	269,689	279,138	288,908	299,020	309,485	320,317	331,528	
952	971	991	1,011	1,031	1,052	1,073	1,094	1,116	1,138	1,161	1,184	1,208	1,232	1,257	1,282	1,307	1,334	
79,086	80,667	82,281	83,926	85,605	87,317	89,063	90,845	92,662	94,515	96,405	98,333	100,300	102,306	104,352	106,439	108,568	110,739	
10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
274,767	282,833	291,158	299,749	308,616	317,768	327,215	336,965	347,030	357,419	368,144	379,216	390,646	402,446	414,628	427,206	440,192	453,601	
(73,801)	(76,843)	(80,018)	(83,331)	(86,788)	(90,394)	(94,156)	(98,080)	(102,173)	(106,441)	(110,891)	(115,531)	(120,369)	(125,412)	(130,669)	(136,148)	(141,858)	(147,808)	
15,557	15,557	15,557	15,557	15,557	15,557	15,557	15,557	15,557	15,557	15,557	15,557	15,557	15,557	15,557	15,557	15,557	15,557	
(89,358)	(92,400)	(95,575)	(98,888)	(102,345)	(105,951)	(109,713)	(113,637)	(117,730)	(121,998)	(126,448)	(131,089)	(135,926)	(140,969)	(146,226)	(151,705)	(157,415)	(163,365)	
104,484	111,724	119,082	126,560	134,158	141,877	149,716	157,676	165,758	173,962	182,287	190,734	199,303	207,993	216,804	225,735	234,786	243,956	
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
104,484	111,724	119,082	126,560	134,158	141,877	149,716	157,676	165,758	173,962	182,287	190,734	199,303	207,993	216,804	225,735	234,786	243,956	
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
104,484	111,724	119,082	126,560	134,158	141,877	149,716	157,676	165,758	173,962	182,287	190,734	199,303	207,993	216,804	225,735	234,786	243,956	
(89,358)	(92,400)	(95,575)	(98,888)	(102,345)	(105,951)	(109,713)	(113,637)	(117,730)	(121,998)	(126,448)	(131,089)	(135,926)	(140,969)	(146,226)	(151,705)	(157,415)	(163,365)	
89,358	92,400	95,575	98,888	102,345	105,951	109,713	113,637	117,730	121,998	126,448	131,089	135,926	140,969	146,226	151,705	157,415	163,365	
89,358	181,759	277,334	376,222	478,567	584,519	694,232	807,869	925,599	1,047,597	1,174,045	1,301,362	1,428,678	1,555,995	1,683,311	1,810,628	1,937,944	2,065,261	
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
(89,358)	(92,400)	(95,575)	(98,888)	(102,345)	(105,951)	(109,713)	(113,637)	(117,730)	(121,998)	(126,448)	(131,089)	(135,926)	(140,969)	(146,226)	(151,705)	(157,415)	(163,365)	

UNIVERSAL CERTIFICATIONS AND IDENTITY OF INTEREST DISCLOSURE

UA Version 9/15/2021

**State of California
Universal Application for the Development of Affordable Rental Housing**

On behalf of the entity identified in the signature block below, I certify that:

1. The information, statements and attachments included in this application are, to the best of my knowledge and belief, true and correct.
2. I possess the legal authority to submit this application on behalf of the entity identified in the signature block
3. The following is a complete disclosure of all identities of interest -- of all persons or entities, including affiliates, that will provide goods or services to the Project either (a) in one or more capacity or (b) that qualify as a "Related Party" to any person or entity that will provide goods or services to the project. "Related Party" is defined in Section 10302 of the California Code of Regulations (CTCAC Regulations):

Sanctuary Centers of Santa Barbara, Inc. fulfills several roles in the Hollister II project as follows: Developer, collecting the TCAC-limited fee, property manager, collecting a reasonable percentage of gross income fee, supportive services contractor, collecting a reimbursement for costs plus margin, and "commercial" tenant for payment of rent attributable to the basement and first floor spaces used for supportive services (Integrated Care Clinic) and Co-Occurring Disorders program, and finally, as owner of the project premises.

In addition, I acknowledge that all information in this application and attachments is public, and may be disclosed by the State.

Signature:

Name: Barry R. Schoer

Title: President / CEO

Entity Represented: Sanctuary Centers of Santa Barbara, Inc.

Date: 12-Jan-22

LEGAL STATUS QUESTIONNAIRE

UA Version 9/15/2021

For purposes of the following questions, and with the exceptions noted below, the term "Applicant" shall include the applicant and the project sponsor, the parent of the applicant and the project sponsor, and any subsidiary of the applicant or project sponsor if the subsidiary is involved in (for example, as a guarantor) or will be benefited by the application or the Project.

In addition to each of these entities themselves, the term "Applicant" shall also include the direct and indirect holders of more than ten percent (10%) of the ownership interests in the entity, as well as the officers, directors, principals and senior executives of the entity if the entity is a corporation, the general and limited partners of the entity if the entity is a partnership, and the members or managers of the entity if the entity is a limited liability company. For projects using tax-exempt bonds, it shall also include the individual who will be executing the bond purchase agreement.

The following questions must be responded to for each entity and person qualifying as an "Applicant," as defined above. Explain all positive responses on a separate sheet and include with this questionnaire in the application.

Exceptions:

Public entity applicants without an ownership interest in the proposed Project, including but not limited to cities, counties, and joint powers authorities with 100 or more members, are not required to respond to this questionnaire.

Members of the boards of directors of non-profit corporations, including officers of the boards, are also not required to respond. However, chief executive officers (Executive Directors, Chief Executive Officers, Presidents or their equivalent) must respond, as must chief financial officers (Treasurers, Chief Financial Officers, or their equivalent).

Sanctuary Centers of Santa Barbara, Inc.

Printed Name of Applicant/Project Sponsor Entity

Civil Matters

- | | | | |
|----|--|-----|---|
| 1. | Has the Applicant filed a bankruptcy or receivership case or had a bankruptcy or receivership action commenced against it, defaulted on a loan, or been foreclosed against in the <u>past ten years</u> ? If so, please explain. | Yes | |
| | | No | X |
| 2. | Is the Applicant <u>currently</u> a party to, or been notified that it may become a party to, any civil litigation that may materially and adversely affect (a) the financial condition of the applicant's business, or (b) the Project that is the subject of the application? If yes, please explain. | Yes | |
| | | No | X |
| 3. | Have there been any administrative or civil settlements, decisions, or judgments against the Applicant within the <u>past ten years</u> that materially and adversely affected (a) the financial condition of the applicant's business, or (b) the Project that is the subject of the application? If yes, please explain and state the amount. | Yes | |
| | | No | X |
| 4. | Is the Applicant <u>currently</u> subject to, or been notified that it may become subject to, any civil or administrative proceeding, examination, or investigation by a local, state or federal licensing or accreditation agency, a local, state or federal taxing authority, or a local, state or federal regulatory or enforcement agency? If yes, please explain. | Yes | |
| | | No | X |
| 5. | In the <u>past ten years</u> , has the Applicant been subject to any civil or administrative proceeding, examination, or investigation by a local, state or federal licensing or accreditation agency, a local, state or federal taxing authority, or a local, state or federal regulatory or enforcement agency that resulted in a settlement, decision, or judgment? If yes, please explain. | Yes | |
| | | No | X |

Criminal Matters

LEGAL STATUS QUESTIONNAIRE

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| 6. | Is the Applicant <u>currently</u> a party to, or the subject of, or been notified that it may become a party to or the subject of, any criminal litigation, proceeding, charge, complaint, examination or investigation, of any kind, involving, or that could result in, <u>felony charges</u> against the applicant? If yes, please explain. | Yes | |
| | | No | X |
| 7. | Is the Applicant <u>currently</u> a party to, or the subject of, or been notified that it may become a party to or the subject of, any criminal litigation, proceeding, charge, complaint, examination or investigation, of any kind, involving, or that could result in, <u>misdemeanor charges</u> against the applicant for matters relating to the conduct of the applicant's business? If yes, please explain. | Yes | |
| | | No | X |
| 8. | Is the Applicant <u>currently</u> a party to or the subject of, or been notified that it may become a party to or the subject of, any criminal litigation, proceeding, charge, examination, investigation or complaint, of any kind, involving, or that could result in, criminal charges (whether misdemeanor or felony) against the applicant for any <u>financial or fraud related crime</u> ? If yes, please explain. | Yes | |
| | | No | X |
| 9. | Is the Applicant <u>currently</u> a party to, or the subject of, or been notified that it may become a party to or the subject of, any criminal litigation, proceeding, charge, complaint, examination or investigation, of any kind, that could <u>materially affect the financial condition of the applicant's business</u> ? If yes, please explain. | Yes | |
| | | No | X |
| 10. | Within the <u>past ten years</u> , has the Applicant been convicted of <u>any felony</u> ? If yes, please explain. | Yes | |
| | | No | X |
| 11. | Within the <u>past ten years</u> , has the Applicant been convicted of any <u>misdemeanor related to the conduct of the applicant's business</u> ? If yes, please explain. | Yes | |
| | | No | X |
| 12. | Within the <u>past ten years</u> , has the Applicant been convicted of any <u>misdemeanor for any financial or fraud related crime</u> ? If yes, please explain. | Yes | |
| | | No | X |

Sanctuary Centers of Santa Barbara, Inc.

 Printed Name of Applicant/Project Sponsor Entity

 SIGNATURE (Applicant/Project Sponsor)

 DATE

 PRINTED NAME OF SIGNATORY

 PRINTED TITLE OF SIGNATORY

