



Planning and Building Agency  
 Planning Division  
 20 Civic Center Plaza  
 P.O. Box 1988 (M-20)  
 Santa Ana, CA 92702  
 (714) 647-5804  
 www.santa-ana.org

## INCLUSIONARY HOUSING PLAN

### OWNER/APPLICANT INFORMATION

Legal Owner \_\_\_\_\_ ( ) \_\_\_\_\_  
 Full Name of Person, Firm or Corporation Area Code Phone Number

\_\_\_\_\_ ( ) \_\_\_\_\_  
 Mailing Address Area Code Fax Number

Applicant \_\_\_\_\_ ( ) \_\_\_\_\_  
 Full Name of Person, Firm or Corporation Area Code Phone Number

\_\_\_\_\_ ( ) \_\_\_\_\_  
 Mailing Address Area Code Fax Number

Contact Person \_\_\_\_\_  
 Full Name of Person, Firm or Corporation Email address

\_\_\_\_\_ Mailing Address

( ) \_\_\_\_\_ ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
 Area Code Phone Number Area Code Mobile Phone Number Area Code Fax Number

### PROJECT DESCRIPTION

Project Address: \_\_\_\_\_

Assessor Parcel Number(s): \_\_\_\_\_

Total Number of Units Proposed: \_\_\_\_\_

Number of Affordable Housing Units Required:

15% Inclusionary Housing Obligation for Low-Income Households (Ownership): \_\_\_\_\_

15% Inclusionary Housing Obligation for Low-Income Households (Rental): \_\_\_\_\_

10% Inclusionary Housing Obligation for Very Low-Income Households (Rental only): \_\_\_\_\_

Number of Rental Units: \_\_\_\_\_ Number of For-Sale Units: \_\_\_\_\_

Identify the Gross Habitable Area of the Proposed Project<sup>1</sup>: \_\_\_\_\_ square feet

Will the Project be Constructed in Phases? \_\_\_\_\_ Yes \_\_\_\_\_ No

Is a Density Bonus or Concessions being Requested? \_\_\_\_\_ Yes \_\_\_\_\_ No

#### CITY APPROVALS (if applicable)

APPROVE  DENY

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

INCLUSIONARY HOUSING PLAN NO. \_\_\_\_\_

<sup>1</sup> This calculation is measured from the exterior wall of residential units and does not include exterior hallways, common areas, landscape, open space or exterior stairways.

## OPTIONS TO SATISFY INCLUSIONARY REQUIREMENTS

Select the applicable option to indicate how the project will comply with the inclusionary housing requirement:

- Option # 1.** \_\_\_\_\_ On-Site Construction of Inclusionary Units (15% Low-Income)  
**Option # 2.** \_\_\_\_\_ On-Site Construction of Inclusionary Units (10% Very Low Income)  
**Option # 3.** \_\_\_\_\_ Off-Site Construction of New Inclusionary Units  
**Option # 4.** \_\_\_\_\_ Off-Site Rehabilitation of Inclusionary Units Within a Designated Target Area<sup>2</sup>  
**Option # 5.** \_\_\_\_\_ Off-Site Rehabilitation of Inclusionary Units Outside a Designated Target Area<sup>3</sup>  
**Option # 6.** \_\_\_\_\_ In-Lieu Fee Payment for Entire Obligation<sup>4</sup>  
**Option # 7.** \_\_\_\_\_ In-Lieu Fee Payment for Fractional Unit

### Fee Schedule for In-Lieu Fee Payment:

Total Number of Residential Units	Fee Per Square Footage of Habitable Space
5 units to 20 units	\$5.00 / SF
More than 20 units	\$15.00 / SF
Pipeline Projects <sup>5</sup>	\$9.35 / SF

### Estimated In Lieu Fee Calculation:

\_\_\_\_\_ SF (Total Habitable Space) X \$ \_\_\_\_\_ Fee/SF = \$ \_\_\_\_\_ Total In-Lieu Fee

### Location of the Inclusionary Units Standards:

The Housing Opportunity Ordinance provides the following standards for the Inclusionary Units location within the Project in relationship to non-Inclusionary Units. All Inclusionary Units shall be:

- (1) Reasonably dispersed throughout the Residential Project;
- (2) Proportional, in number of bedrooms, gross floor area of habitable space, and location to the market rate units;
- (3) Comparable to the market rate units included in the Residential Project in terms of design, materials, finished quality and appearance; and
- (4) Permitted the same access to project amenities and recreational facilities, as are market rate units.

<sup>2</sup> The Developer may satisfy the Inclusionary Unit requirements for the Project, in whole or in part by substantially rehabilitating existing housing units within the Designated Target Areas at a rate of 1 habitable square foot per each required habitable square foot of affordable Inclusionary Units.

<sup>3</sup> The Developer may satisfy the Inclusionary Unit requirement for the Project, in whole or in part by substantially rehabilitating existing housing units outside of the Designated Target Areas within the borders of the City of Santa Ana at a rate of 1 ½ habitable square feet per each required habitable square foot of Inclusionary Units.

<sup>4</sup> If the calculation of the number of required inclusionary housing units results in a fraction, the developer has the option to (a) provide an additional inclusionary housing unit or (b) pay an In-Lieu Fee equal to the percentage represented by the fractional inclusionary housing unit multiplied by the applicable In-Lieu Fee.

<sup>5</sup> A pipeline project is a project application that was submitted and deemed complete prior to August 4, 2015.

Please complete the following table as it applies to your project proposal, as applicable:

<b>Bedroom Size</b>	<b>Unit Size (Habitable Square Feet)</b>	<b>Number of Market Rate Units</b>	<b># of Units Affordable to Very Low-Income Households (50% AMI)</b>	<b># of Units Affordable to Low-Income Households (80% AMI)</b>	<b>Total Number of Units</b>	<b>Percent of Total Units</b>
Studio						
1						
2						
3						
4						
5						
Total						

The following are submittal requirements for your proposed Inclusionary Housing Plan:

- A.  Project Description (see Site Plan Review application). Include a description of proposed off-site construction or rehabilitation if applicable
- B.  Legal Description of the Project
- C.  Site plan of the entire project detailing the location of proposed inclusionary housing units (minimum size 11" x 17")
- D.  If applicable, a phasing plan that provides for the proportionate number of the total inclusionary housing unit requirement to be built within each phase of the project
- E.  Application Fee

**Property OWNER'S AFFIDAVIT**

I hereby certify that I am the legally authorized owner of all property involved in this application or have been empowered to sign as the property owner on behalf of a corporation, partnership, business, etc., as evidenced by separate instrument attached herewith. I hereby grant to the applicant submitting this form full power to sign all documents related to this application, including any conditions or litigation measures as may be deemed necessary.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on (Date) \_\_\_\_\_ at \_\_\_\_\_, California

Property Owner's Signature \_\_\_\_\_

Property Owner's Printed Name \_\_\_\_\_

**APPLICANT'S AFFIDAVIT**

I hereby certify that the statements furnished above and in the attached exhibits represent the data and information required for this initial evaluation and that the facts, statements and information presented are true and correct to the best of my knowledge and belief. Further, should the stated information be found false or insufficient, I agree to the return of this form for appropriate revisions, understanding that the City of Santa Ana cannot process this form until all applicable information is corrected or provided by the applicant. I hereby certify that I have been legally authorized by the property owner to present this application and to sign on behalf of all documents related to this application, including any conditions or litigation measures as may be deemed necessary.

Note: When the applicant is a corporation, partnership, business, etc., a separate document verifying the authorization to sign for such applicant is required.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on (Date) \_\_\_\_\_ at \_\_\_\_\_, California

Applicant's Signature \_\_\_\_\_

Applicant's Printed Name \_\_\_\_\_