

INCLUSIONARY HOUSING PLAN (IHP)

City of Glendale
Community Development and Housing

141 N. Glendale Ave., Suite 202, Glendale, CA 91206
(818) 548-2060

Project Type: Ownership _____ Rental _____

Project Address: _____

Assessor Parcel No(s): _____

Site Dimension and Square Footage: _____

Applicant's Name: _____ Phone: _____

Address: _____ City: _____ Zip Code: _____

Person to Contact Regarding Project: _____

Address: _____ City: _____ Zip Code: _____

Property Owners Name: _____ Phone: _____

Address: _____ City: _____ Zip Code: _____

1. INCLUSIONARY HOUSING ALTERNATIVES

A. Pursuant to City of Glendale Municipal Code Title 30, Section 30.35, select one of the following alternatives to indicate how the project will comply with the inclusionary housing requirement for projects built within the San Fernando Road Corridor Redevelopment Project Area:

- _____ On-site
- _____ Off-site and inside the San Fernando Road Corridor Redevelopment Project Area
- _____ Off-site and outside the San Fernando Road Corridor Redevelopment Project Area
- _____ Payment of in lieu fee

B. Will project include a combination of on or off-site units and in lieu fee payments?

YES _____ NO _____

2. **RESIDENTIAL PROJECT DESCRIPTION**

A. Describe project in chart:

Number of Bedrooms	Square Footage of Units	Number of Total Units	Number of Market Rate Units	Number of Inclusionary Units On-Site	Number of Very Low Income Units	Number of Low Income Units	Number of Moderate Income Units
Studio							
1							
2							
3							
4							
5							

B. Gross livable floor area of proposed project (including private balconies, decks, and patios) in square feet: _____

3. **OFF-SITE INCLUSIONARY UNITS PROJECT DESCRIPTION**

A. If inclusionary units will be provided off-site in a separate project, provide the following information about the off-site location:

Project Type: Ownership _____ Rental _____

Project Address: _____

Assessor
Parcel No(s):

Site Dimension and Square Footage: _____

B. If inclusionary units will be provided off-site in a separate development, describe the off-site project in chart below:

Number of Bedrooms	Square Footage of Units	Number of Total Units	Number of Market Rate Units	Number of Inclusionary Units	Number of Very Low Income Units	Number of Low Income Units	Number of Moderate Income Units
Studio							
1							
2							
3							
4							
5							

4. **IN LIEU FEE (DO NOT ANSWER IF SATISFYING ENTIRE INCLUSIONARY REQUIREMENT THROUGH ON OR OFF-SITE UNITS)**

A. For **ownership and rental projects**, multiply the gross livable floor area of proposed project (including private balconies, deck, and patios) in square feet (“GLFA”) by 1) the in lieu fee for very low income units and 2) the in lieu fee for moderate income units. Add together the very low and moderate income in lieu fees to determine the project’s total in lieu fee payment.

Very Low Income In Lieu Fee	GLFA:	sq. ft.	X	\$9	=	\$
Moderate Income In Lieu Fee	GLFA:	sq. ft.	X	\$8	=	\$
Total	<i>Sum of Very Low and Moderate Income In Lieu Fees</i>					\$

B. For projects electing to provide low or moderate-income inclusionary units on or off-site and pay an in lieu fee for the very low-income units, multiply the GLFA by only the very low-income in lieu fee.

For projects electing to provide very low-income inclusionary units on or off-site and pay an in lieu fee for the low and moderate-income units, multiply the GLFA by only the moderate-income in lieu fee.

OWNERS'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 owner on behalf of a corporation, partnership, business, etc., as evidenced by separate instrument attached herewith. I hereby grant to the applicant of 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
Owner's Signature _____, 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 the City of Glendale 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 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 _____