

COVER SHEET

ORIGINAL COPY

PART 1 - GENERAL INFORMATION

Organization Name	Crescent Terrace, Inc.	Tax ID Number	94-2910860
Project Name:	Crescent Terrace Rehab	DUNS ¹ Number	020369316
Contact Person:	Jeffrey Summerville		
Mailing Address:	303 Vintage Park Drive, Ste 250		
City, State, Zip Code:	Foster City, CA 94404		
Phone: 650-235-7691	Fax 650-357-9766	Email:	jsummerville@midpen-housing.org

PART 2 - LOAN REQUEST

1) Requested Amount	\$770,000.00
2) Other Funding Sources (match)	\$500,000.00
3) Total Project Cost (Line 1+ Line 2)	\$1,710,000.00
4) Percentage of City of Sunnyvale funds toward Total Project Cost (Line 1/Line 3)	75%
5) Type of funds requested. <i>(you may select more than one)</i>	
<input checked="" type="checkbox"/> CDBG <input type="checkbox"/> CDBG Program Income <input checked="" type="checkbox"/> HOME	

PART 3 - PROJECT DESCRIPTION

Please provide a **brief** description of the proposed project. The description should be no more than 5 sentences, describe the project, not the organization, the number of unduplicated persons the project will serve, and/or other measurable objectives the project will meet during the contract period.

Enter text here. **DO NOT EXCEED THE SIZE OF THE BOX.** Text will not print and your application will not be accepted. This note applies to all boxes that allow multiple lines of text in this application.

Crescent Terrace is 48-unit affordable housing project located at 130 Crescent Avenue that serves 65 seniors in the City of Sunnyvale. Built in 1986, the three-story garden apartment has immediate exterior and interior capital work to support long term maintenance and operation of the property. The project will serve all 65 residents of Crescent Terrace. Measurable objectives of the project include improved maintenance and operations of the property, energy and water savings and improved quality of life for low income seniors.

¹ The DUNS number is a unique nine-character number used by the federal government to identify your organization. If your organization does not have a DUNS number, use the Dun & Bradstreet (D&B) online registration to receive one free of charge, at: <http://fedgov.dnb.com/webform>

*City of Sunnyvale PY2015 Request for Proposals
CDBG and HOME Capital and Affordable Housing Projects*

Application Checklist

Applicant Name: Crescent Terrace, Inc.

Project Name: Crescent Terrace Rehab

The original application must include all of the information listed below. Each of the two (2) additional copies must include the information in Tabs A, B, C, and D. Proposals that do **not** contain all of the required documents will not be considered and will be ineligible for funding.

- Tab A**
- | | |
|--|--|
| <input checked="" type="checkbox"/> Cover Letter on Letterhead | <input checked="" type="checkbox"/> Program Cover Sheet* |
| <input checked="" type="checkbox"/> Application Checklist* | <input checked="" type="checkbox"/> Applicant Information* |
- Tab B**
- Section 1: Organizational Capacity and Experience
 - Section 2: Evidence of Need for Project
 - Section 3: Statement of Work/Project Scope/Readiness
 - Section 4: Budget and Financial Information
- Tab C**
- Project Budget Form
 - Pro-forma (for construction or acquisition of community facility)
- Tab D**
- | | |
|--|---|
| <input checked="" type="checkbox"/> Project Service Area Map | <input checked="" type="checkbox"/> Project Specific Organizational Chart |
| <input checked="" type="checkbox"/> Résumés of Applicant's key personnel | |

Provide Applicable Documents in Original Application Only (mark N/A if not applicable)

- Tab E**
- | | |
|---|--|
| <input checked="" type="checkbox"/> Signature Authorization* | <input checked="" type="checkbox"/> Conflict of Interest Disclosure* |
| <input checked="" type="checkbox"/> Environmental Review Form* and Attachments | <input checked="" type="checkbox"/> Administrative Checklist* |
| <input checked="" type="checkbox"/> Accounting Systems Verification* | <input checked="" type="checkbox"/> CHDO or CDBO Verification |
| <input checked="" type="checkbox"/> Bylaws | <input checked="" type="checkbox"/> Articles of Incorporation |
| <input checked="" type="checkbox"/> 501 (c) (3) documentation from IRS | <input checked="" type="checkbox"/> Organizational Chart |
| <input checked="" type="checkbox"/> Financial Audit | <input checked="" type="checkbox"/> Letters of Commitment |
| <input type="checkbox"/> Board Resolution authorizing submittal of proposal | |
| <input checked="" type="checkbox"/> Organizational Annual Budget and/or Financial Balance Sheet | |
| <input checked="" type="checkbox"/> Director's and Officer's Liability & Errors and Omissions Insurance | |
| <input checked="" type="checkbox"/> Policies and procedures for employees including internal controls | |
| <input checked="" type="checkbox"/> Language Access Plan and (ADA) Accessibility Policy | |
- Tab F Acquisition Projects only**
- | | |
|---|--|
| <input checked="" type="checkbox"/> Appraisal of Property | <input checked="" type="checkbox"/> Environmental Review Form* |
| <input checked="" type="checkbox"/> Parcel Map | <input checked="" type="checkbox"/> Phase I: Environmental Site Assessment |
| <input checked="" type="checkbox"/> Relocation Plan (if project anticipates displacement) | <input checked="" type="checkbox"/> Property Listing |
- Tab G Construction/Rehabilitation Projects only**
- | | |
|---|--|
| <input checked="" type="checkbox"/> Construction Cost Estimate | <input checked="" type="checkbox"/> Environmental Review Form* |
| <input checked="" type="checkbox"/> Letters of Community Support | <input checked="" type="checkbox"/> Architectural Drawings/Plans |
| <input checked="" type="checkbox"/> Relocation Plan (if project requires temporary or permanent relocation) | |

*Note: Standard Forms provided in application packet.

Applicant Information

Type of Organization:

- (Check all that apply) Non-Profit Public Agency Faith Based Non-Profit
 Sunnyvale CBDO CHDO (HOME Applicants)

Name of Organization: Crescent Terrace, Inc.

Mailing Address: 303 Vintage Park Drive, Suite #250

City, State, Zip Code: Foster City, CA 94404

Physical Address of Project: 130 Crescent Avenue

City, State, Zip Code: Sunnyvale, CA 94087

Contact Person: Jeffrey Summerville

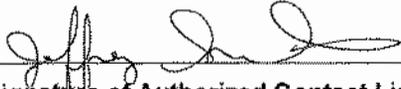
Phone: 650-235-7691 Fax: 650-357-9766 Email: jsummerville@midpen-housing.org

Provide the following information for a **program contact person**, a **financial contact person**, the **person who wrote the application**, and an **authorized contact**. Include attachments of job descriptions and resumes for key staff.

NAME, TITLE, PHONE, EMAIL

Program Contact Someone who works with the project on a daily basis and can answer questions	Jeffrey Summerville Portfolio Manager 650-235-7691 jsummerville@midpen-housing.org
Finance Contact	Jeffrey Summerville Portfolio Manager 650-235-7691 jsummerville@midpen-housing.org
Application Contact Person who wrote this application	Jeffrey Summerville Portfolio Manager 650-235-7691 jsummerville@midpen-housing.org
Authorized Contact Person authorized to make commitments on behalf of the organization	Jeffrey Summerville Portfolio Manager 650-235-7691 jsummerville@midpen-housing.org

I certify that the information contained in this application is true and correct, and that it contains no falsifications, misrepresentations, intentional omissions, or concealment of material facts. I further certify that no contracts have been awarded, funds committed, tenants displaced, or construction begun on the proposed project and that none will be done prior to issuance of a release of funds by City of Sunnyvale.


 Signature of Authorized Contact Listed Above

February 13, 2015
 Date

Jeffrey Summerville
 Print Name

Jeffrey Summerville
 Print Name

SECTION 1: ORGANIZATIONAL CAPACITY AND EXPERIENCE

Use only the space provided.

A. Provide an organizational overview of your agency, including:

- * a description of the history and purpose of the organization,
- * years in operation,
- * years of direct experience with proposed project type,
- * staff experience with proposed project type,
- * federal grant management experience,
- * financial capacity, and
- * CBDO qualifications, if applying for a CBDO activity (See CFR 570.204)
- * CHDO status, if applying for HOME funds.

Provide a project-specific organizational chart as an attachment to all copies of the proposal in Tab D and one copy only of the organizational chart for the entire agency in the original application (Tab E).

Since its inception in 1970, MidPen Housing has developed and rehabilitated more than 7,000 affordable units at over 90 properties in Northern California. Our mission is to provide safe, affordable, shelter of high quality to those in need; establish stability and opportunity in lives of residents; and foster diverse communities that allow people from all ethnic, social and economic backgrounds to live in dignity, harmony and mutual respect. (See MidPen Factsheet for more details)

B. Previous experience using federal funds:

1. Does your organization have previous experience with capital projects involving federal funds?

Yes No If no, skip to question 4.

2. If yes, how many years of previous experience do you have with federally funded projects? 45

Briefly describe your experience below.

MidPen Housing Corporation and its affiliates (MidPen), have completed the acquisition, construction, and rehabilitation of over 60 federally funded projects in 10 counties in Northern California using HUD FHA insured mortgage programs, HOME, CDBG, ARRA grant funds, and HUD 202/811 loans/grants, which are subject to federal Section 3 and Davis Bacon wage requirements.

3. If you have previous experience with federal projects, was your organization ever required to pay back funds, or found to have violated regulations, etc.?

Yes No If yes, indicate the actions cited.

4. If your organization does not have experience with federally funded projects, how will you ensure adherence to federal requirements? List examples of related experience or your plan to hire additional staff/contractors.

Not applicable.

C. Previous experience with City-funded projects

1. Do you have previous experience with City-funded projects?

Yes No If yes, please describe below

In the past 5 years, MidPen has completed a number of affordable housing multifamily rehabilitations in the City of Sunnyvale using CDBG and/or HOME funds: Aster Park Apartments, a 95-unit senior and family housing project located at 1059 Reed Avenue, Garland Plaza Apartments, a 20-unit family housing project located at 662 Garland Avenue, and Homestead Park, a 211-unit senior and family housing project located at 1601 Tenaka Place. In the past 10 years, MidPen has also completed the construction of new affordable multifamily housing units using CDBG and/or HOME funds: Fair Oaks Plaza, a 124-unit senior housing project located at 690 Fair Oaks Avenue and Moulton Plaza, a 66-unit senior housing project co-located with Homestead Park at 1601 Tenaka Place.

2. Has your organization received HUD funds previously from the City of Sunnyvale?

Yes No If yes, please describe below If no, skip to question 5.

In 1985, Crescent Terrace, Inc., an affiliate of MidPen, received \$575,000 at 3% interest compounded annually from the City of Sunnyvale to fund the acquisition of the land site for the development of 48 senior housing units for frail and physically handicapped individuals at 130 Crescent Avenue in Sunnyvale, California. Since the original acquisition in 1985, MidPen has not requested additional funding from the City of Sunnyvale for this project until this funding year, which is close to 30 years from the original investment by the City of Sunnyvale.

3. If you are a prior recipient of City of Sunnyvale HUD funds, what was the date (mm/dd/yyyy) of your last City of Sunnyvale monitoring visit? Enter a date Not Applicable.

4. Were there any findings and/or concerns identified during your last monitoring visit by the City?

Yes No

If **yes**, indicate the findings and/or concerns cited, the corrective action taken, and the date the City of Sunnyvale cleared the findings and/or concerns.

Not applicable.

5. If your organization has not received funds from the City of Sunnyvale, describe your experience managing similar projects funded by other public sources (state, federal, other local government).

Not applicable.

D. Complete the table below for each current member of the applicant's Board of Directors. If your organization does not have a board of directors (e.g., governmental entity), include this page and an explanation of why this form is not applicable (NOTE: Font, margins, or table may be modified to fit information on one page, as long as information below is included.) Identify board office held as applicable.

Board Member	Sunnyvale Resident Y/N	Employer (if any)	Office Held on Board	Term ² of Office	Length of Service
Mark Battey	N	Miramar Farms, Inc.	Chairman	1999-2017	16 years
Richard Slaton	N	Zcon Builders	Director	1989-2016	26 years
Beth Bartlett	N	Bartlett Ventures	Vice-Chairperson	2006-2016	9 years
Therese A. Freeman	N	Terry Freeman and Associates, LLC	Director	1991-2015	24 years
Julia M. Baigent	N	Law Office of Julie Baigent	Director	2014-2017	1 year
Paul Staley	N	Independent Real Estate Consultant	Vice-Chairperson	2006-2017	9 years
Daniel Seubert	N	Seubert, French, Frimel & Warner LLP	Secretary	2006-2015	9 years
Monique Moyer	N	Port of San Francisco	Treasurer	2008-2015	7 years
Gina Diaz	N	Oracle USA	Director	2014-2017	1 year
Erik Doyle	N	Jones Long LaSalle	Director	2011-2015	4 years

² Beginning and Ending Years

SECTION 2: EVIDENCE OF NEED FOR PROJECT

Complete this section accurately and completely. Use only the space provided.

Part 1 - Priority Activities

Program Priorities/Goals: Identify one or more Consolidated Plan goals the proposed project will address, and explain how it will address these goals in Part 3 below.

For additional information, see the Sunnyvale Consolidated Plan online at:
HUDPrograms.inSunnyvale.com

City of Sunnyvale Consolidated Plan

- Goal A: Affordable Housing
- Goal B: Alleviation of Homelessness
- Goal C: Other Community Development Efforts
- Goal D: Expanding Economic Opportunities
- Goal E: Sustainability

Part 2 - National Objective and Beneficiaries

A. Identify the method of determining the eligibility of your project, and **provide an explanation in the box below**. See page 2 of this RFP for definitions of these methods. For all affordable housing projects, you must select "Limited Clientele Activity".

1. Method of determining eligibility.

- Area benefit
- Limited Clientele Activity
- Job Creation

Rehabilitation of affordable housing project.

B. Number of unduplicated Sunnyvale households (or individuals) to be served by the proposed capital project:

Column A Total number of unduplicated households served	Column B Total number of unduplicated households served	Column C *Percentage of lower-income households served B/A=C
Example: 500	350	70%
65	65	100%

Part 3 - Demonstrated Need for Project

In the space below, provide a brief summary of **current** statistical data documenting the need for your proposed capital project. Include local Sunnyvale data as well as any relevant statistics collected by applicant. Provide sources for the information. Briefly explain the target population for the project, including demographics, and a typical client profile. Explain how your project's design will meet the needs you have described, and how it will achieve the Consolidated Plan goals you identified in Section 2, Part 1.

Crescent Terrace is a 48 unit senior affordable housing property which serves 65 residents in the City of Sunnyvale. Built in 1986 the property is aging and as such has physical needs and deferred maintenance. The goal of the project is to improve the operation and maintenance of the property, save energy and water and improve resident quality of life. The target population is the existing residents of Crescent Terrace. Crescent Terrace affordability set-asides include 20 units @ 50% AMI and 27 units @ 60% AMI. The proposed scope of work directly supports long term operation of existing affordable housing. The energy and water savings improvements will enhance the project's environmental sustainability.

Part 4 - Matching Funds

A. List the funding from other sources for this capital project in the following table. Add additional rows to the table if necessary.

Funding Source	Amount	Status as of Feb. 13, 2015. Approved, Pending or Denied*	Award Date
Property Replacement Reserves	\$340,000.00	Owner Funds	See Reso Date
Total	\$340,000.00		

*If you have not received an official, legally binding loan commitment or other award letter by the time you submit this application, do not enter "approved".

B. Identify commitments for ongoing operating funding *for this facility/site only* in the space provided below, and attach all **letters of commitment**.

- * All letters must be on the organization's letterhead and must include date, amount of match/leverage, and an authorized signature.
- * Letters must be dated within 30 days of the application submission date.
- * Letters must demonstrate that the funding is applicable to the project proposed in this application.
- * Do not include letters of support, only letters making a firm financial commitment to the project.
- * If the project will require formal approval of senior lienholders on the subject property, provide their letters of approval as attachments along with the letters of commitment.

Once MidPen has received a funding commitment from the City of Sunnyvale for additional CDBG and/or HOME funds, then MidPen will contact CalHFA, the senior lienholder, to approve the proposed loan amount, interest rate, and repayment terms.

SECTION 3 - STATEMENT OF WORK/PROJECT SCOPE

Part 1 - Project Location and Service Area

Provide the street address and assessor's parcel number(s) of the project location. Attach a map of the project location and the project service area (for community facility proposals only), showing zip codes and census tracts in Tab D.

130 Crescent Avenue, APN# 211-35-099, See attached map.

Part 2 - Project Readiness (Use only the space provided.)

A. Work Plan / Project Readiness

Explain your project's work plan, including the activities you will undertake to achieve the project's goal. Describe how ready you are to begin the project by July 2013 and how you can expend the CDBG or HOME funds and complete the project within 12 months. Include the following:

- * Predevelopment milestones (design, permitting, securing matching funds)
- * Client Recruitment/program marketing plan (for new/expanded facilities or housing)
- * Project evaluation plan

For Limited Clientele Facilities, describe your procedures for recruitment, a marketing plan for clients and/or volunteers, and intake and eligibility screening forms.

The window replacement work requires continuous warm, dry weather for MidPen to reasonably start and finish the work within the 12 month period allotted for the CDBG funds. The remaining interior scope of work is not weather dependent and could be completed sooner than 12 months depending on resident needs and other potential funding sources.

B. Implementation Schedule

Milestone	Target Date
1) Contract Start Date	September 2015
2) Design and Permitting	October 2015
3) Initiation of Construction/Project	November 2015
4) Completion of Construction/Project	May 2015
5) 50% of Funds Expended and Drawn	February 2016
6) 100% of Funds Expended and Drawn	May 2016
7) Project Completion and Reporting	June 2016

C. Performance Measurement System: Complete the following tables with information about the CDBG objectives and outcomes of your proposed project. If applying for HOME funds, select the Affordable Housing objective.

1. CDBG OBJECTIVE (select one)	2. COBG OUTCOME (select one)
<input type="checkbox"/> Creating a Suitable Living Environment	<input checked="" type="checkbox"/> Availability/Accessibility
<input checked="" type="checkbox"/> Providing Decent Affordable Housing	<input checked="" type="checkbox"/> Affordability
<input type="checkbox"/> Creating Economic Opportunities	<input checked="" type="checkbox"/> Sustainability

3. Client Data. Identify the number of households your project will serve, in the following categories:			
Type of Household	Residing in Sunnyvale	Residing outside of Sunnyvale	Total
Low Income (50%-80% AMI)	20		20
Very Low Income (<50% AMI)	27		27
Disabled Persons			
Female-Headed Households			
Elderly	47		47
Youth			
Homeless Persons			
Other Special Needs:			

Part 3 - Construction Project Description

A. Does your project involve:

- New construction? Yes No
Major rehabilitation?* Yes No
Minor rehabilitation? Yes No

*Major rehabilitation is defined as rehabilitation work that costs more than 25 percent of the value of the building before rehabilitation. The value of the building means the monetary value assigned to a building by a recent appraisal and/or property tax assessment, or replacement cost.

B. Do you have site control, including any right-of-way, easements, or encroachment permits needed for the project?

- Yes No If **yes**, provide date site control acquired: August 9, 1985

If **no**, explain *how* you intend to secure site control prior to the start of this project. Include the anticipated acquisition date(s).

C. **Operating Funds:**

For construction, expansion or acquisition of a community facility, will you have sufficient funds available for the operations of the facility?

- Yes No

Provide a pro-forma with detailed information about operating funds available for the facility for at least 15 years and include as an attachment in Tab C.

D. Will your project involve temporary (less than 1 year) or permanent (more than 1 year) relocation of tenants from your proposed project site (residential or commercial tenants)?

- Yes: Temporary Yes: Permanent No Relocation needed

If you answered yes to either type of relocation, please attach a URA-compliant relocation plan in Tab F or G as applicable.

E. Provide the following property information:

- * Property Description, including amenities and features
- * Property Condition/Inspection Results
- * Appraisal: Provide most recent appraised value.
- * Unit Inspection Summary (for rehabilitation/expansion projects)
- * List of Property Improvements

Crescent Terrace provides affordable rental housing for seniors nestled in a residential neighborhood with single-family homes. Residents of Crescent Terrace enjoy attractively landscaped common areas and walkways. Each apartment has a private balcony or patio. Other amenities include air conditioning, a secure entry system, a community room with an adjoining kitchen, a computer center, laundry facilities and a residents' garden. MidPen Resident Services is on-hand at Crescent Terrace to provide assistance to residents. Programs and services include weekly food programs, computer training, and financial literacy courses. Residents are also connected with community resources in Santa Clara county.

F. Attach the following items as attachments to this application:

- * Property Survey or Assessor's Parcel Map
- * Proposed Site Plan and/or Architectural Elevations
- * Infrastructure Plans, if needed
- * Environmental Review (see form in Standard Forms)
- * Phase I Environmental Assessment (Acquisition only)

G. Community Involvement

For new construction or facility/housing expansion projects, include evidence of community support for the proposed project. Describe the measures your organization has taken to garner community support in the space below. Provide evidence of contact with local neighborhood association(s) or proof of public hearing. **Include letters of support as attachments to this application.**

Not applicable.

SECTION 4: PROJECT BUDGET AND FINANCIAL INFORMATION

Part 1 - Budget Information

Provide a narrative explaining the total project budget, including major budget line items in the order in which they are listed on the budget form. List the sources of funding.

The total project budget is \$1,710,000 and includes major capital improvements to both the exterior and unit interiors.

Exterior Rehab: \$643,700
Unit Interior Rehab: \$622,967
Design, Drawings, Permits: \$63,333
General Contractor Overhead: \$177,333
Contingency: \$126,667
Construction Management Fee: \$76,000

The sources of funds include the requested CDBG and HOME and the owner match of 25%.

Part 2 - Financial Information

A. Describe the organization's financial management practices, including:

- * financial reporting,
- * record keeping,
- * accounting systems,
- * payment procedures,
- * audit history, and
- * compliance with OMB Circulars and GAAP

MidPen Housing Corporation (MidPen) and its affiliates including Crescent Terrace, Inc. complete annual financial audits (see attached 2013 audit for both MidPen and Crescent Terrace, Inc.) MidPen maintains a professionally managed accounting and payment systems with proper controls and procedures that are in compliance with GAAP practices that are reviewed and audited each year by a third-party for financial reporting purposes to lenders, investors, and other stakeholders.

Provide the most recent Board-approved financial audit as an **attachment** to the original application in Tab E.

Attach:

- * Project Budget Form
- * Pro-forma (for construction or acquisition or community facility)

Project Budget Form

a + b + c = d

ITEM	CDBG/HOME FUNDS REQUESTED (\$)	MATCHING FUNDS (OTHER \$)	MATCHING IN-KIND SERVICES OR MATERIALS ^{3,4}	TOTAL PROJECT COST
I. Capital Costs				
Permits and Fees		\$31,667.00		
Design (Architectural & Engineering)		\$31,666.00		
Acquisition Costs (escrow fees, etc.)				
Other Soft Costs (e.g. Davis Bacon Monitoring (if applicable), Surveying, etc.)				
Rehabilitation/Construction Costs (labor, materials)	\$1,266,667.00			
Contingency (Construction)	\$3,333.00	\$123,334.00		
Environmental Compliance (CEQA/NEPA/Phase I, lead testing as applicable)				
Construction Management (if outside firm)				
Other: General Contractor Overhead		\$177,333.00		
Other:				
II. Project Management/Administration		\$76,000.00		
III. In-Kind Services				
Applicant's staff services for project management)*				
Other in-kind services/goods (describe):				
Volunteer/Pro-bono services				
TOTAL PROGRAM BUDGET	\$1,270,000.00	\$440,000.00		

³ Provide your basis for estimating the dollar value of in-kind services in the space below. For applicant's staff services, use applicant's actual cost (hourly rates). For volunteer services, use \$10/hour, and for pro-bono professional services (architectural, etc), use firm's established hourly rates as charged to typical clients.

⁴ Please identify the source and commitment status (e.g. funds received, committed, or otherwise guaranteed, with proof) of other non-City funding and in-kind contributions committed specifically to the project for which CDBG and/or HOME funding is requested. Do not list matching funds or in-kind match that has not yet been formally committed.

City of Sunnyvale PY2015 Request for Proposals
CDBG and HOME Capital and Affordable Housing Projects
Crescent Terrace

Pro-forma

NOT APPLICABLE

City of Sunnyvale PY2015 Request for Proposals
CDBG and HOME Capital and Affordable Housing Projects
Crescent Terrace

Project Service Area Map

NOT APPLICABLE

Environmental Review Form - NEPA only (City will complete CEQA as part of permit review)

IMPORTANT NOTE:

Complete this form and provide the requested attachments.

Type of funding requested: CDBG HOME CDBG Program Income

Amount of Request: \$1,270,000.00

Total Project Cost \$1,710,000.00

Organization Name: Crescent Terrace, Inc.

Project Name: Crescent Terrace Rehab

Contact Person: Jeffrey Summerville

Mailing Address: 303 Vintage Park Drive, Ste 250, Foster City, CA 94404

Phone: 650-235-7691

Fax: 650-357-9766

Email: jsummerville@midpen-housing.org

Property Address: 130 Crescent Avenue, Sunnyvale, CA

Property Owner: Crescent Terrace, Inc.

Mailing Address: 303 Vintage Park Drive, Suite #250, Foster City, CA 94404

Legal Description & APN of Project Site: APN# 211-35-099

Appraised Value: \$4,156,000.00

1) If project involves the acquisition, rehabilitation, renovation, or conversion of a physical structure, provide the year when the structure was initially constructed: 1985

2) Is property/project in the 100-year floodplain? Yes No

If **yes**, please attach copy of flood insurance policy.

If property has **not** been acquired, provide estimate of flood insurance cost. (Proof of insurance will be required at closing.)

3) Is property/project site within 1,000 feet of a highway, freeway or major arterial?

Yes No

If **yes**, indicate which highway, freeway or major arterial: _____

4) Is property/project site within 500 feet of a railroad? Yes No

5) Is property/project site in Runway Clear Zone / Clear Zone? (Areas immediately beyond the ends of a runway of a civil or military airport)

Yes No

If **yes**, provide documentation.

6) Is the property/project site in an Accident Potential Zone? (Areas at military airfields which are beyond the Clear Zone; does not apply to civil airports)

Yes No

If **yes**, provide documentation.

Required Attachments

- * Minimum of five (5) current color photographs from various angles of the property/project site and minimum of two (2) current color photographs of adjacent properties - at least 3" x 5" and no larger than 8" x 10". Attach or print photos on 8½" x 11" sheets of paper.
- * Assessor's Parcel
- * Copy of Key Map outlining property boundaries.

Scope of Project - Provide a **brief** description of the proposed project in the space below.

The proposed project will provide needed capital investment and rehabilitation to preserve the quality and affordability of Crescent Terrace. The property is need of capital repairs and upgrades, particularly to its windows, roofs, decking and unit interiors. The proposed renovation will address exterior and interior wear resulting from aging and active use, while also improving the property's energy efficiency and sustainability. Incorporating sustainable and energy-efficient features will benefit the overall property and individual residents.

Crescent Terrace Apartments
130 Crescent Avenue, Sunnyvale, CA

Front Building Facade



Exterior Door (Front Security Directory)



Crescent Terrace Apartments
130 Crescent Avenue, Sunnyvale, CA

Exterior Door (Front Entrance)



Front Entrance Lobby



Crescent Terrace Apartments
130 Crescent Avenue, Sunnyvale, CA

Elevator



Elevator Cab Interior Upgrade



Crescent Terrace Apartments
130 Crescent Avenue, Sunnyvale, CA

Community Restrooms



Second Floor Corridor Lighting



Crescent Terrace Apartments
130 Crescent Avenue, Sunnyvale, CA

Unit 108 Exterior Door



Kitchen Cabinets



Crescent Terrace Apartments
130 Crescent Avenue, Sunnyvale, CA

Kitchen Sink



Garbage Disposal



Crescent Terrace Apartments
130 Crescent Avenue, Sunnyvale, CA

Bath/Shower Enclosure



Flat Roof over Community Space



Crescent Terrace Apartments
130 Crescent Avenue, Sunnyvale, CA

Existing Hot Water Solar Collector Room



First Floor Hallway Interior Lights (Pink Salmon)



Crescent Terrace Apartments
130 Crescent Avenue, Sunnyvale, CA

Main Laundry Room



Exterior Landscape (Back Patio)



Crescent Terrace Apartments
130 Crescent Avenue, Sunnyvale, CA

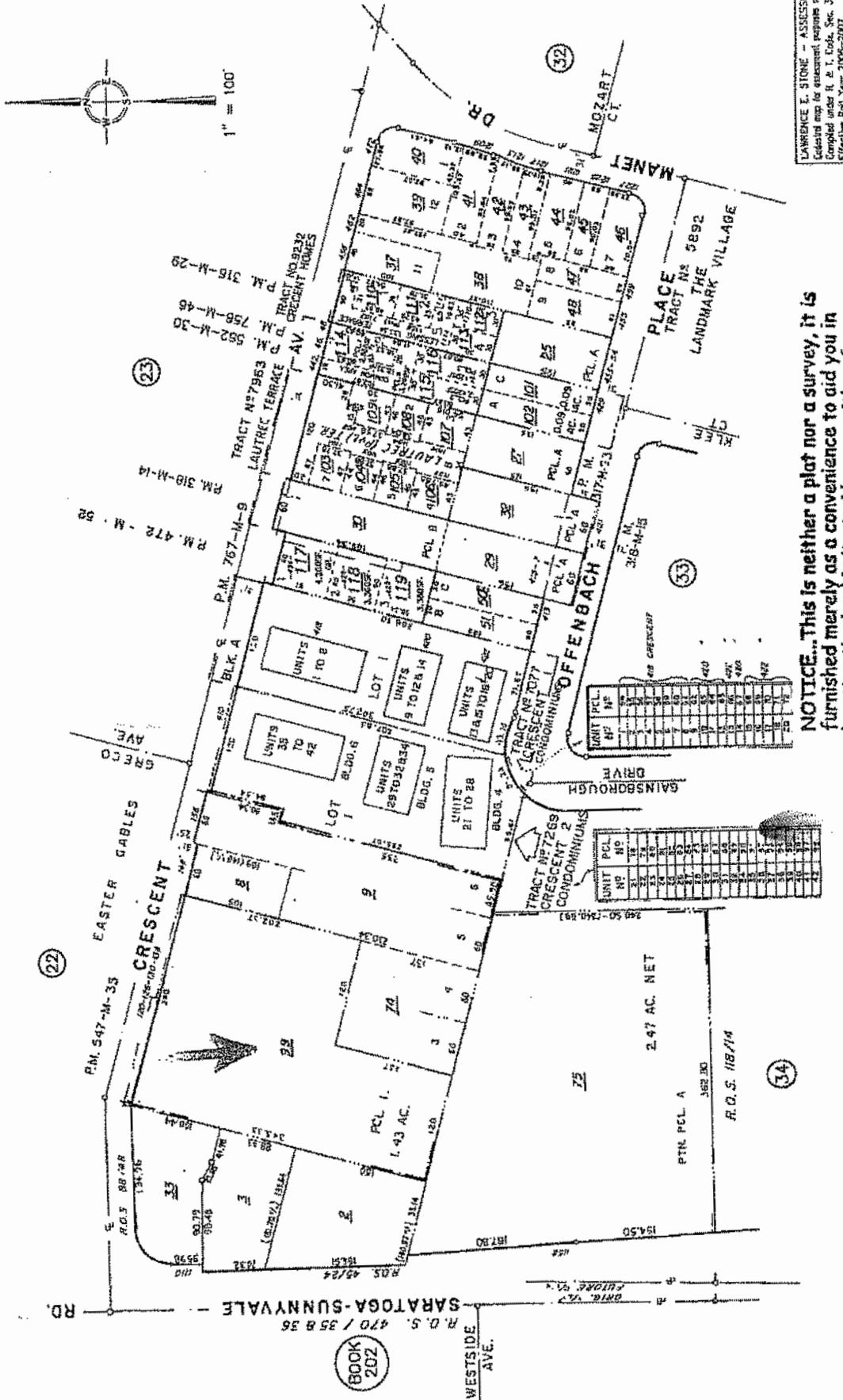
Exterior Landscaping (Rear Parking)



Exterior Door (Rear Entrance)



OFFICE OF COUNTY ASSESSOR — SANTA CLARA COUNTY, CALIFORNIA



LAWRENCE E. STONE — ASSESSOR
 Computer map for assessment purposes only.
 Compiled under R. & T. Code, Sec. 317.
 Effective Budget Year 2006-2007

NOTICE... This is neither a plat nor a survey, it is furnished merely as a convenience to aid you in locating the land indicated hereon with reference to streets and other land. No liability is assumed by reason of any reliance hereon.

BOOK 202

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22

23

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City of Sunnyvale PY2015 Request for Proposals
CDBG and HOME Capital and Affordable Housing Projects
Crescent Terrace

Administrative Checklist

APPLICANT ADMINISTRATIVE CHECKLIST

Applicant Name: Crescent Terrace, Inc.
 Proposed Capital Project: _____

<i>Please read question and check yes or no as appropriate for applicant's organization.</i>	YES	NO
TRACKING CLIENT DATA		
Does your agency have a system for recording the type, location and results of client/resident services provided at the proposed facility or housing project?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does your agency have a system for recording information necessary to determine number of clients served/housed and to track demographic (income, racial/ethnic/age data, etc.) information of those clients?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
HUMAN RESOURCES POLICIES AND PROCEDURES		
Does your agency have a code of standards governing procurement procedures and an adopted procurement policy/procedure?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does your agency have a conflict of interest policy?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does your agency have a personnel policy?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does your agency have a policy on non-discrimination and harassment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are your existing facilities, programs, and activities readily accessible to and usable by individuals with disabilities in compliance with the ADA?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does your agency have a Language Access Plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
FINANCIAL POLICIES AND PROCEDURES		
Does your agency have a system for accurately recording and storing financial data and documents?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does your agency have a method for identifying and separately tracking federal and non-federal sources of income and expenditures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does your agency have a method for determining allowability, reasonableness and allocation of costs and for approving disbursement of funds?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does your agency have a method for comparing expenditures with budgeted amounts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does your agency have a method for identifying program income, i.e. income directly generated from the use of CDBG or HOME grant funds?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does your agency prepare an annual audit or financial report?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does your agency have any outstanding audit or monitoring findings?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Does your agency have a code of standards governing procurement procedures? (same as above?)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does your agency have a system for tracking real property or equipment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Accounting System Certification

STATEMENT OF PUBLIC ACCOUNTANT:

I am a certified or duly licensed public accountant and have been engaged to examine and report on the financial accounts of:

Crescent Terrace, Inc. and MidPen Housing Corporation

(Applicant Name)

which is a private non-profit organization (or public agency). I have reviewed the accounting system that this agency has established and, in my opinion, it includes internal controls adequate to safeguard the assets of such agency(ies), checks the accuracy and reliability of accounting data, promotes operating efficiency, and encourages compliance with the prescribed management policies of OMB Circulars A-110, A-122 and A-133.

Lindquist von Husen & Joyce LLP

NAME OF AGENCY ADDRESS

TYPED NAME OF PUBLIC ACCOUNTANT

90 New Montgomery Street, San Francisco, CA 94105

ADDRESS OF PUBLIC ACCOUNTANT

SIGNATURE OF PUBLIC ACCOUNTANT

DATE
