## Prohousing Incentive Program (PIP)

2024 Application for Local Governments



State of California
Governor, Gavin Newsom

Tomiquia Moss, Secretary
Business, Consumer Services and Housing Agency

Gustavo Velasquez, Director

Department of Housing and Community Development

Megan Kirkeby, Deputy Director
Division of Housing Policy Development

Final Filing Date: December 31, 2024

651 Bannon Street, Suite 400 Sacramento, CA 95811

Website: https://www.hcd.ca.gov/grants-and-funding/programs-active/prohousing-incentive-program

Email: ProhousingIncentive@hcd.ca.gov

## **Prohousing Incentive Program (PIP) Application Instructions**

The applicant is applying to the Department of Housing and Community Development (Department) for a grant authorized under the provisions pursuant to Health and Safety Code Section 50470(2)(C)(i). PIP is designed to encourage cities and counties to achieve Prohousing Designation. Please refer to the PIP Guidelines and August 2024 Notice of Funding Availability (NOFA) for detailed information on eligible uses and awards. If you have questions regarding this application or the PIP Program, email ProhousingIncentive@hcd.ca.gov.

If approved for funding, the PIP application is incorporated as part of your Standard Agreement with the Department. To be considered for funding, all sections of this application, including attachments if required, must be complete and accurate.

## **Threshold Requirements**

In order to be considered for funding, all applicants must submit a complete, signed application to ProhousingIncentive@hcd.ca.gov by December 31, 2024. Pursuant to Section 202 of the PIP Guidelines, all applicants must meet the following threshold requirements to be eligible for funding:

X

An adopted housing element in substantial compliance, as determined by the Department, pursuant to Housing Element Law (Article 10.6 of Gov. Code) in accordance with Government Code section 65585, subdivision (h).

X

Housing Element Annual Progress Report submittal pursuant to Government Code Section 65400 for the current or prior year, as applicable.

Prohousing Designation: An awarded or completed Prohousing Designation Application with an authorizing resolution must be submitted prior to or in conjunction with the Applicant's PIP Application. PIP Awards cannot be made until a Prohousing Designation is awarded.

X

A complete application as determined by the Department.

An authorizing resolution authorizing submittal of the application to the Program that materially comports with the Program's requirements and is legally sufficient as determined in the Department's reasonable discretion, including an authorized representative. See Attachment B of the PIP Guidelines for required resolution format.

X Compliance with state and federal housing laws as determined by the sole discretion of HCD.

Demonstration of meeting threshold criteria shall be determined by the Department in its sole and absolute discretion. No documentation of meeting threshold requirements is required in the application unless requested by the Department.

| Applicant Information                |                                    |                        |                         |  |  |
|--------------------------------------|------------------------------------|------------------------|-------------------------|--|--|
| Applicant                            | City of Salinas                    |                        |                         |  |  |
| Applicant Agency Type                | City                               |                        |                         |  |  |
| Mailing Address                      | 65 West Alisal St, 2nd Floor       |                        |                         |  |  |
| City                                 | Salinas                            | Zip Code               | 93901                   |  |  |
| County                               | Monterey                           |                        |                         |  |  |
| Website                              | cityofsalinas.org                  |                        |                         |  |  |
| TIN                                  | 94-6000412                         |                        |                         |  |  |
| Authorized Representative Name       | René Mendez                        |                        |                         |  |  |
| Authorized Representative Title      | City Manager                       |                        |                         |  |  |
| Phone                                | 831-758-7201                       | Fax                    |                         |  |  |
| Email                                | renem@ci.salinas.ca.us             |                        |                         |  |  |
| Contact Person Name                  | Vincent Montgomery                 |                        |                         |  |  |
| Contact Person Title                 | Planning Manager                   |                        |                         |  |  |
| Phone                                | 831-758-7408                       | Fax                    |                         |  |  |
| Email                                | vincentmo@ci.salinas.ca.us         |                        |                         |  |  |
|                                      |                                    |                        |                         |  |  |
| As the official designated by the go |                                    |                        | •                       |  |  |
| certify that, if approved by HCD for |                                    |                        | -                       |  |  |
| NOFA and certifies that the informa  | tion, statements, and other conten | ts contained in this a | pplication are true and |  |  |
| correct.                             |                                    |                        |                         |  |  |
|                                      |                                    |                        |                         |  |  |

René Mendez

Date

Title

City Manager

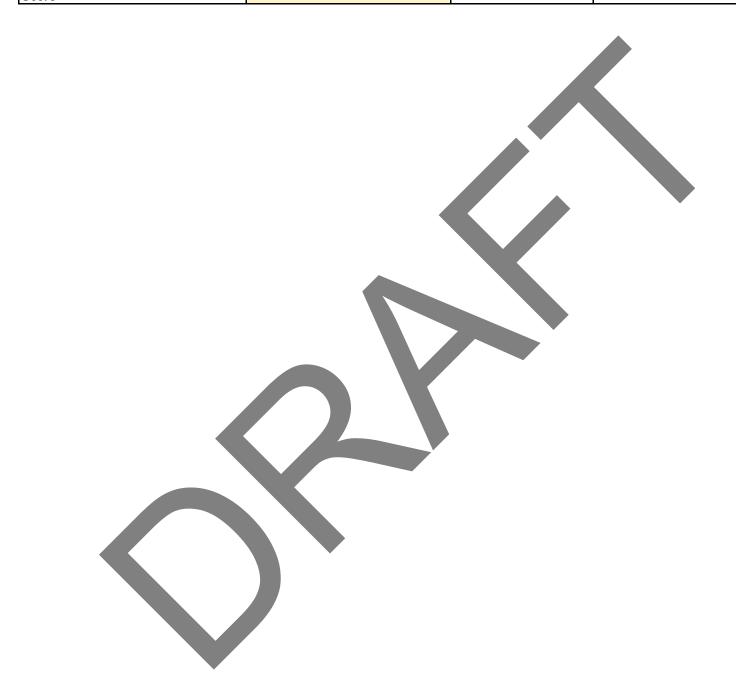
Signature

Name

## **Award Amount**

Click the dropdown menu to choose a jurisdiction. The geographic category and base award will auto-populate. If the jurisdiction has obtained Prohousing Designation at the time of PIP application submittal, enter in the Prohousing Designation applicant score. Population projections are based on the Department of Finance E-1 January 1, 2024 estimates. https://dof.ca.gov/Forecasting/Demographics/estimates-e1/

| Jurisdiction Name                        | Salinas       | Eligible Base Award | \$<br>750,000   |
|--|---------------|---------------------|-----------------|
| Geographic Category                      | Central Coast | Bonus Award Amount: | \$<br>500,000   |
| Prohousing Designation Application Score | 58            | Total Award         | \$<br>1,250,000 |



|   | Eligible Uses   |  |  |  |  |  |
|---|---|--|--|--|--|--|
|   | oplicants must use award funds towards any planning or implementation activities related to housing and community development including, but not limited to, any eligible uses pursuant to Health and Safety Code section 50470(b)(2)(D), as below. Please indicate which of the following the applicant will use award funds toward: |  |  |  |  |  |
|   | (i) The predevelopment, development, acquisition, rehabilitation, and preservation of multifamily, residential live-work, rental housing that is affordable to extremely low, very low, low-, and moderate-income households, including necessary operating subsidies.  |  |  |  |  |  |
| Х | (ii) Affordable rental and ownership housing that meets the needs of a growing workforce earning up to 120 percent of area median income, or 150 percent of area median income in high-cost areas.  |  |  |  |  |  |
|   | (iii) Matching portions of funds placed into local or regional housing trust funds.   |  |  |  |  |  |
|   | (iv) Matching portions of funds available through the Low and Moderate Income Housing Asset Fund pursuant to subdivision (d) of Section 34176 of the Health and Safety Code.  |  |  |  |  |  |
|   | (v) Capitalized reserves for services connected to the creation of new permanent supportive housing, including, but not limited to, developments funded through the Veterans Housing and Homelessness Prevention Bond Act of 2014.  |  |  |  |  |  |
| Х | (vi) Assisting persons who are experiencing or at risk of homelessness, including providing rapid rehousing, rental assistance, navigation centers, emergency shelters, and the new construction, rehabilitation, and preservation of permanent and transitional housing.   |  |  |  |  |  |
|   | (vii) Accessibility modifications.  |  |  |  |  |  |
|   | (viii) Efforts to acquire and rehabilitate foreclosed or vacant homes.  |  |  |  |  |  |
|   | (ix) Homeownership opportunities, including, but not limited to, downpayment assistance.  |  |  |  |  |  |
|   | (x) Fiscal incentives or matching funds to local agencies that approve new housing for extremely low, very low, low-, and moderate-income households.   |  |  |  |  |  |

| Summary of Proposed Activities  |                   |             |          |           |                          |   |          |
|---|-------------------|-------------|----------|-----------|--------------------------|---|----------|
| Objective   | Responsible Party | Est. Cost   | Begin    | End       | Eligible Use<br>Category | Statement of Work Plan  | Notes    |
| Assisting people who are experiencing or are at risk of homelessness.   | City of Salinas   |             | 5/1/2025 | 6/30/2027 | VI                       |   |          |
| Subtask 1: Administration expenses  | City of Salinas   | \$62,500    | 5/1/2025 | 6/30/2027 | II and VI                | City will provide staff timecards, expense reports, invoices, and copies of executed documents and agreements applicable to administration of the program.  | Option 1 |
| Subtask 2: Preservation of<br>permanent housing   | City of Salinas   | \$1,187,500 | 5/1/2025 | 6/30/2027 | II and VI                | Providing funds to a resident-owned cooperative of a mobile homepark to prevent the risk of homlessness and/or rehabilitation of a transitional housing project for indiviudals experiencing homlessness. | Option 1 |
| Subtask 3: Operational Expenses for<br>Emergency Shelter and rehabilitation<br>activities for transitional housing<br>projects  | City of Salinas   | TBD         | TBD      | TBD       | VI                       | Support operation needs of emergency shelters or navigation centers for individuals who are experiencing homlessness.   | Option 2 |
| Affordable rental and ownership housing that meets the needs of a growing workforce earning up to 120 percent of area median income, or 150 percent of area median income in high cost areas. | City of Salinas   | TBD         | TBD      | TBD       | II                       |   |          |
| Subtask 1: Administration expenses  | City of Salinas   | TBD         | TBD      | TBD       | II                       | City will provide staff timecards, expense reports, invoices and copies of executed documents and agreements applicable to administration of the program.   | Option 3 |
| Subtask 2: Financing for Affordable<br>Housing Developments   | City of Salinas   | TBD         | TBD      | TBD       | II                       | Execute one or more Affordable Housing Loan Agreement(s), Promissory Note(s,) and Deed(s) of Trust.   | Option 3 |