



--Amendment--

Consolidated Plan 2003-2007

Submitted by the Thurston County HOME
Consortium
July 15, 2004

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**APPLICATION FOR
FEDERAL ASSISTANCE**

Version 7/03

1. TYPE OF SUBMISSION: Application <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		2. DATE SUBMITTED	Applicant Identifier
Pre-application <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		3. DATE RECEIVED BY STATE	State Application Identifier
		4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier

5. APPLICANT INFORMATION

Legal Name:		Organizational Unit:	
Organizational DUNS:		Department:	
Address:		Name and telephone number of person to be contacted on matters involving this application (give area code)	
Street:		Prefix:	First Name:
City:		Middle Name	
County:		Last Name	
State:	Zip Code	Suffix:	
Country:		Email:	

6. EMPLOYER IDENTIFICATION NUMBER (EIN): □□-□□□□□□□□	Phone Number (give area code)	Fax Number (give area code)
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8. TYPE OF APPLICATION: <input type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) (See back of form for description of letters.) <input type="checkbox"/> <input type="checkbox"/> Other (specify)	7. TYPE OF APPLICANT: (See back of form for Application Types) Other (specify)
9. NAME OF FEDERAL AGENCY:	

10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: TITLE (Name of Program): □□-□□□□	11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:
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12. AREAS AFFECTED BY PROJECT (Cities, Counties, States, etc.):
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13. PROPOSED PROJECT	14. CONGRESSIONAL DISTRICTS OF:
Start Date: Ending Date:	a. Applicant b. Project

15. ESTIMATED FUNDING:	16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?
a. Federal \$.00	a. Yes. <input type="checkbox"/> THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE:
b. Applicant \$.00	b. No. <input type="checkbox"/> PROGRAM IS NOT COVERED BY E. O. 12372
c. State \$.00	<input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW
d. Local \$.00	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?
e. Other \$.00	<input type="checkbox"/> Yes If "Yes" attach an explanation. <input type="checkbox"/> No
f. Program Income \$.00	
g. TOTAL \$.00	

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

a. Authorized Representative		
Prefix	First Name	Middle Name
Last Name		Suffix
b. Title		c. Telephone Number (give area code)
d. Signature of Authorized Representative		e. Date Signed

INSTRUCTIONS FOR THE SF-424

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This is a standard form used by applicants as a required face sheet for pre-applications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

Item:	Entry:	Item:	Entry:																
1.	Select Type of Submission.	11.	Enter a brief descriptive title of the project. If more than one program is involved, you should append an explanation on a separate sheet. If appropriate (e.g., construction or real property projects), attach a map showing project location. For preapplications, use a separate sheet to provide a summary description of this project.																
2.	Date application submitted to Federal agency (or State if applicable) and applicant's control number (if applicable).	12.	List only the largest political entities affected (e.g., State, counties, cities).																
3.	State use only (if applicable).	13.	Enter the proposed start date and end date of the project.																
4.	Enter Date Received by Federal Agency Federal identifier number: If this application is a continuation or revision to an existing award, enter the present Federal Identifier number. If for a new project, leave blank.	14.	List the applicant's Congressional District and any District(s) affected by the program or project																
5.	Enter legal name of applicant, name of primary organizational unit (including division, if applicable), which will undertake the assistance activity, enter the organization's DUNS number (received from Dun and Bradstreet), enter the complete address of the applicant (including country), and name, telephone number, e-mail and fax of the person to contact on matters related to this application.	15.	Amount requested or to be contributed during the first funding/budget period by each contributor. Value of in kind contributions should be included on appropriate lines as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses. If both basic and supplemental amounts are included, show breakdown on an attached sheet. For multiple program funding, use totals and show breakdown using same categories as item 15.																
6.	Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service.	16.	Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process.																
7.	Select the appropriate letter in the space provided. <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">A. State</td> <td style="width: 50%;">I. State Controlled Institution of Higher Learning</td> </tr> <tr> <td>B. County</td> <td>J. Private University</td> </tr> <tr> <td>C. Municipal</td> <td>K. Indian Tribe</td> </tr> <tr> <td>D. Township</td> <td>L. Individual</td> </tr> <tr> <td>E. Interstate</td> <td>M. Profit Organization</td> </tr> <tr> <td>F. Intermunicipal</td> <td>N. Other (Specify)</td> </tr> <tr> <td>G. Special District</td> <td>O. Not for Profit Organization</td> </tr> <tr> <td>H. Independent School District</td> <td></td> </tr> </table>	A. State	I. State Controlled Institution of Higher Learning	B. County	J. Private University	C. Municipal	K. Indian Tribe	D. Township	L. Individual	E. Interstate	M. Profit Organization	F. Intermunicipal	N. Other (Specify)	G. Special District	O. Not for Profit Organization	H. Independent School District		17.	This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes.
A. State	I. State Controlled Institution of Higher Learning																		
B. County	J. Private University																		
C. Municipal	K. Indian Tribe																		
D. Township	L. Individual																		
E. Interstate	M. Profit Organization																		
F. Intermunicipal	N. Other (Specify)																		
G. Special District	O. Not for Profit Organization																		
H. Independent School District																			
8.	Select the type from the following list: <ul style="list-style-type: none"> • "New" means a new assistance award. • "Continuation" means an extension for an additional funding/budget period for a project with a projected completion date. • "Revision" means any change in the Federal Government's financial obligation or contingent liability from an existing obligation. If a revision enter the appropriate letter: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">A. Increase Award</td> <td style="width: 50%;">B. Decrease Award</td> </tr> <tr> <td>C. Increase Duration</td> <td>D. Decrease Duration</td> </tr> </table> 	A. Increase Award	B. Decrease Award	C. Increase Duration	D. Decrease Duration	18.	To be signed by the authorized representative of the applicant. A copy of the governing body's authorization for you to sign this application as official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)												
A. Increase Award	B. Decrease Award																		
C. Increase Duration	D. Decrease Duration																		
9.	Name of Federal agency from which assistance is being requested with this application.																		
10.	Use the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested.																		

Amendment to 2003-2007 Consolidated Plan for Thurston County

ADDI Program Narrative

The goal of the Thurston County HOME Consortia American Dream Downpayment Initiative (ADDI) Program is to provide down payment assistance in the form of a second mortgage for low income first time homebuyers who reside in Thurston County and to help these program participants develop financial self-sufficiency through homeownership and realize their goal of homeownership.

A revolving loan fund will be developed to provide down payment assistance through a second mortgage. This “silent second” mortgage will be repaid to the ADDI revolving loan fund upon sale, title transfer or refinance of the subject property.

This is a comprehensive program designed to prepare program participants for homeownership through intensive group and one-on-one counseling sessions, educate participants about the home buying process, provide access to the area real estate market, and provide post purchase counseling for new homeowners. This layered counseling will help ensure that program participants are successful in buying and maintaining their new home.

The HATC already operates a homeownership counseling and downpayment assistance programs. This program is regularly marketed to Housing Choice Voucher Program participants. This counseling program is available to all Thurston County community members interested in purchasing a home. The HATC will expand our marketing effort to ensure that tenants of manufactured housing are incorporated in our marketing efforts.

BARRIERS TO AFFORDABLE HOUSING

A variety of factors and conditions cause housing to become less affordable. While some of these are market driven, others are related to other factors such as the cost of land and zoning. The impact of many of these barriers can be reduced.

The County's Comprehensive Plan notes that households are becoming smaller, and people are living longer. The result is an "over-housing" phenomena which results in households having more house than they can afford on the one hand, and denying the market of housing needed for larger families on the other. Other factors are the lot size requirements for single family homes, the costs of mitigating environmental impacts and the cost of raw land. Washington State relies on the property tax as a primary source of state income. In the absence of a state income tax, property taxes are high, and the cost of these taxes is either borne directly by homeowners or indirectly passed on to renters by property owners. Energy costs have also served as barriers, having escalated sharply over the past several years. The community is pursuing several strategies and activities to lower barriers for affordable housing.

The County Comprehensive Plan outlines a number of actions that can be taken¹:

- ❑ Focus on locating housing in urban areas
- ❑ Community or housing land trusts
- ❑ Co-housing
- ❑ More government participation
- ❑ **Implement First-Time Home Buyer Program**

The HATC already operates a homeownership counseling and downpayment assistance programs. HATC will incorporate ADDI funds into this program design. This program is regularly marketed to Housing Choice Voucher Program participants. This counseling program is available to all Thurston County community members interested in purchasing a home. The HATC will expand our marketing effort to ensure that tenants of manufactured housing are incorporated in our marketing efforts.

The goal of the Thurston County HOME Consortia American Dream Downpayment Initiative (ADDI) Program is to provide down payment assistance in the form of a second mortgage for low income first time homebuyers who reside in Thurston

¹ Thurston County Comprehensive Plan, 1995 update

County and to help these program participants develop financial self-sufficiency through homeownership and realize their goal of homeownership.

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Accessory dwelling units are allowed in Urban Growth Areas, for farm housing associated with agricultural uses and for temporary family units in most rural residential zoning districts. The county also allows manufactured housing where site-built housing is permitted.

The City of Olympia is taking several actions to reduce the barriers. Among them are up-zoning to higher densities, encouraging mixed use developments and encouraging denser "urban villages".

Maintaining the existing housing stock also contributes to keeping housing affordable. The City of Olympia has developed a housing rehabilitation program aimed at the existing stock of smaller, older and more affordable homes. Many of these are located in the established neighborhoods near to the downtown core. By preserving this housing through the Home Repair Program and other investments, the City preserves an already affordable housing option and avoids costs of new development on the same location. Similarly, the Housing Authority utilizes CDBG funds to operate a housing rehabilitation program in the more rural communities.

Table 2C
Summary of Specific Housing/Community Development Objectives
(Table 2A/2B Continuation Sheet)

Obj #	Specific Objectives	Performance Measure	Expected Units	Actual Units
	Rental Housing Objectives			
H-1	Develop 75 units of new permanent affordable housing	Number of units produced	75	
H-1	Provide rental vouchers for persons at risk of homelessness	Number of units under lease	72	
H-2	Rehabilitate apartment buildings to maintain them as affordable housing	Number buildings	3	
	Owner Housing Objectives			
H-3	Rehabilitate single family homeowner housing	Homes rehabilitated	100	
H-4	Implement the Housing Authority of Thurston County's First Time Homebuyer and ADDI downpayment assistance programs	Homes purchased	2	
	Community Development Objectives			
	Infrastructure Objectives			
	Public Facilities Objectives			
	Public Services Objectives			
	Economic Development Objectives			
	Other Objectives			

