



INDIVIDUALLY REQUESTED STATE DENSITY BONUS PROGRAM

SUPPLEMENTAL APPLICATION

SUBMITTAL REQUIREMENTS

The Individually Requested State Density Bonus program offers a path for developers requesting a density bonus pursuant to Section 65915 et seq. of the California Government Code who do not qualify for bonuses under the HOME-SF or Analyzed State Density Bonus Programs. This program requires the submittal of two sets of plans:

- 1) a fully code-compliant base project; and
- 2) a bonus project - including details regarding any incentives, concessions or waivers requested.

The Individually Requested State Density Bonus Program is available in all zoning districts that allow residential uses, except for RH-1 and RH-2 (unless the project is located on a site or sites in those districts that permits the construction of 5 or more units).

Please review the Individually Requested State Density Bonus Informational Packet prior to filling out this application. Please answer all questions fully. Please type or print in ink and attach pages if necessary.

WHAT TO SUBMIT:

1. One (1) completed original of this application signed by owner or agent.
2. One (1) completed original(s) of any other entitlement applications and required attachments.
3. Two (2) hard copy sets of reduced sized (11"x17") plans, including but not limited to plans showing adjacent structures, existing and proposed floor plans, elevations and sections. One set should show a fully code-compliant base project and the other should show a bonus project, including any concessions, incentives or waivers requested. Once your project is assigned, your planner may request a full-size (24"x36") set of plans. Please see the Department's Plan Submittal guidelines (http://sf-planning.org/sites/default/files/FileCenter/Documents/8676-Plan_Submittal_Guidelines-042315.pdf) for more information.
4. A digital copy of all documents submitted (may be provided via CD or USB drive), containing the application, project drawings and any other submittal materials that are available electronically.
5. A draft copy of the regulatory agreement. For a sample of a regulatory agreement, please request one by emailing cpc.homesf@sfgov.org.

HOW TO SUBMIT:

To file an Individually Requested State Density Bonus application, please bring the application and all accompanying materials with you at the time of your intake appointment for the project.

To schedule an appointment, please send an email request along with the intake appointment request form to: CPC.Intake@sfgov.org.

Intake request forms are available here: <http://sf-planning.org/permit-forms-applications-and-fees>.

Español: Si desea ayuda sobre cómo llenar esta solicitud en español, por favor llame al 415-575-9010. Tenga en cuenta que el Departamento de Planificación requerirá al menos un día hábil para responder

中文: 如果您希望獲得使用中文填寫這份申請表的幫助，請致電415-575-9010。請注意，規劃部門需要至少一個工作日來回應。

Tagalog: Kung gusto mo ng tulong sa pagkumpleto ng application na ito sa Filipino, paki tawagan ang 415-575-9121. Paki tandaan na mangangailangan ang Planning Department ng hindi kukulangin sa isang araw na pantrabaho para makasagot.



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Property Information

Project Address: _____

Block/Lot(s): _____

Related Applications

Preliminary Project Application and/or Environmental Evaluation Applications No(s): _____

Building Permit Applications No(s): _____

Project Description:

Please list out the proposed number of units for the following:

Proposed number of units in base project: _____

Proposed number of restricted affordable units for Very Low Income Households (up to 50% AMI) _____

Proposed number of restricted affordable units for Low Income Households (51% - 80% AMI) _____

Proposed number of restricted affordable units for Moderate Income Households (81% - 120% AMI) _____

Proposed number of bonus units: _____

Total number of units in proposed project: _____

Residential Tenure:

Indicate whether the project proposes rental or ownership units

Rental Units Ownership Units

Density Bonus Calculator:

Please calculate the density bonus the project is seeking pursuant to Section 206.6(c).

Bonus Calculator								
A	B	C	D	E	F	G	H	I
Affordability Level	Restricted Affordable Units Provided in Project	% of Base Project	Minimum Percentage to Qualify for Bonus	Bonus Granted for Minimum	Percentage of Units Above Minimum Provided (Column C - Column D)	Additional Bonus for Each 1% Increase in Restricted Units	Additional Bonus Granted (Column F x Column G)	Bonus Units Granted (Column E + Column H)
Very Low Income (up to 50% AMI)			5%	20%		2.5%		
Low Income (51 - 80% AMI)			10%	20%		1.5%		
Moderate Income (81 - 120% AMI)			10%	5%		1%		
Senior Housing			100%	50%		-	-	-

Concessions/Incentives Calculator:

Please calculate the number of concessions or incentives for which the project is eligible.

Concessions/Incentives Calculator								
Affordability Level	Restricted Affordable Units Provided in Project	% of Base Project	Threshold for one (1) Incentive or Concession Granted		Threshold for two (2) Incentives or Concessions Granted		Threshold for three (3) Incentives or Concessions Granted	
Very Low Income (up to 50% AMI)			5%		10%		15%	
Low Income (51 - 80% AMI)			10%		20%		30%	
Moderate Income (81 - 120% AMI)			10%		20%		30%	

Concessions and Incentives:

Please list the concessions and incentives (up to three, see above) the project is seeking, and describe how each requested concession or incentive would result in cost reductions for the project. See Attachment.

Waivers:

Please list the waivers the project is seeking, and describe how each requested waiver would allow the proposed project to accommodate any additional permitted density. See Attachment.

Removal of rent-controlled units for the Individually Requested State Density Bonus Program:

Does the project remove any residential units? Yes No

Have there been any residential uses removed from the property within the last five years? Yes No

Are any of the units subject to the San Francisco Rent Stabilization and Arbitration Ordinance (Administrative Code Section 37)? Yes No

Are any of the units occupied by households of low or very low income, consistent with the requirements of the California Government Code Section 65915(c)(3)? Yes No

If you have responded yes to any of the questions above, please provide additional information on the type and size of the existing unit(s), as well as the incomes of persons or families occupying the unit(s).

APPLICANT'S AFFIDAVIT

Under penalty of perjury the following declarations are made:

- a) The undersigned is the owner or authorized agent of the owner of this property.
- b) The information presented is true and correct to the best of my knowledge.
- c) Other information or applications may be required.

Signature

Date

Name (Printed)

Relationship to Project
(i.e. Owner, Architect, etc.)

Phone

Email

For Department Use Only

Application received by Planning Department:

By: _____

Date: _____