ATTACHMENT #1: SUBMISSION REQUIREMENTS CHECKLIST

Check off all items contained in Propsoal and sign and date below Please put "N/A" for any items that are not applicable to your proposal.

| RFP Section | SUBMITTAL REQUIREMENTS | Check or N/A |
|--------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| IV. C. 1. IV. C. 2. | Submittal Checklist Proposal Table of Contents | \Box |
| IV. C. 3. IV. C. 3. a. IV. C. 3. b. | APPLICANT AND TEAM INFORMATION Attachment #2 - Applicant and Team Description Form Resumes for all persons identified on Attachment #2 | \exists |
| VI. C. 4. a. VI. C. 4. b. VI. C. 4. c. VI. C. 4. e. VI. C. 4. f. VI. C. 4. h. 1. VI. C. 4. h. 1. VI. C. 4. h. 3. VI. C. 4. h. 4. VI. C. 4. h. 5. | Conceptual Site Plan and Massing Drawings | |
| VI. C. 5. a. i. VI. C. 5. a. ii. VI. C. 5. a. iii. VI. C. 5. b. VI. C. 5. c. VI. C. 5. d. | DEVELOPER EXPERIENCE AND CAPACITY Attachment #3 - Comparable Experiences Form Community Outreach Narrative Summary Statement of Experience and Strategy for Comparable Projects Attachment #4 - Other Projects Experience Form Developer's Overall Experience Narrative Attachment #5 - Developer Staffing Workload Form | |
| VI. C. 6. a VI. C. 6. b. | PROPERTY MANAGERMENT EXPERIENCE Property Management Approach Narrative Attachment #6 - Property Management Experience Form | \Box |
| VI. C. 7. a. VI. C. 7. b. | SUPPORTIVE SERVICES PROVIDER EXPERIENCE Supportive Services Approach Narrative Attachment #7 - Supportive Services Provider Experience Form | \Box |
| VI. C. 8. a. VI. C. 8. b. | RESIDENT SERVICES PROVIDER EXPERIENCE Resident Services Approach Narrative Attachment #8 - Resident Services Provider Experience Form | \Box |
| VI. C. 9. a. | MODULAR HOUSING CONSTRUCTION EXPERIENCE Modular Constrution Narrative | |

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VI. C. 10. a. Attachment #9 - Disclosure Questions VI. C. 10. b. Attachment #10 - Statement of Compliance and Certification VI. C. 10. c. i. Certification of 501(c)3 status from Internal Revenue Service VI. C. 10. c. ii. Certification of Exempt status from California Franchise Tax Board VI. C. 10. c. iii. Audited Financial Statements (latest two years) Applicant hereby certifies that all the items checked on this form are included in the submitted Proposal Signature Title Date