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| OC Housing and Community Development1501 E St. Andrew Place, Santa Ana, CA 92705 **ENVIRONMENTAL INFORMATION FORM – 2020 SUPPORTIVE HOUSING NOFA**  **NEPA (24 CFR Part 58)** |
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| **PROJECT TITLE:**  **PROGRAM ACTIVITY (IES):**  **NAME OF SUBRECIPIENT:**  **FUND TYPE (S):** HOME HSA OCHA MHSA  **CONTRACT NUMBER (S):**  **CONTRACT AMOUNT: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  |
| **PROJECT LOCATION:**  Provide precise address and include Census Tract No.. If confidential, please insert “Suppressed” and provide Census Tract No.) |
| **PROJECT ACTIVITY LEVEL DESCRIPTION:** (Please provide in detail the level of services you provide or the scope of rehabilitation and/or construction your project will involve. If needed, please use attachments.)  **(Projects involving new construction, rehabilitation or acquisition activities must complete the SUPPLEMENTAL SITE INFORMATION portion of this form)** |
|  |
| **EXISTING ENVIRONMENTAL CONDITIONS:** (Please, describe the surrounding environment around your project) |
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| **PREVIOUS GOVERNMENTAL ACTIONS/APPROVALS RECEIVED ON YOUR PROJECT**: (If applicable, please list and attach a copy of any discretionary approvals you received on your project from a City or other County Agency.) |
| **PHOTOS-PLEASE PROVIDE PHOTOS OF THE PROJECT SITE** |
|  |
| **DISCRETIONARY APPROVAL (S) NEEDED FROM CITY/COUNTY TO COMPLETE YOUR PROJECT (S):** |
|  |
| I hereby declare that the statements furnished above, including any exhibits attached hereto represent all information required for this assessment. Said statements together with any exhibits attached hereto are true and correct.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature Title Date |

ENVIRONMENTAL FORM

**Supplemental Site Information**

PLEASE PROVIDE ALL KNOWN INFORMATION AS REQUESTED – CHECK ALL BOXES THAT APPLY

**(All PF&I, Acquisition, Rehabilitation and/or New Construction Activities must include site photos and site plan)**

**Proposed Project Type:** New Construction Acquisition

Acquisition/Rehabilitation Rehabilitation

**Description of the Proposal:** Include all contemplated actions, which logically are either geographically, or functionally a composite part of the project, regardless of the source of funding. [24 CFR 58.32, 40 CFR 1508.25]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Proposed Site:** Zoning Designation: \_\_\_\_\_\_\_\_\_\_General Plan Land Use Designation: \_\_\_\_\_\_\_\_\_\_\_\_

Is project in a floodplain? FEMA Map No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (attach copy)

Existing Use(s): Vacant Residential Commercial Industrial

Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Specify)

Size of Site: \_\_\_\_\_\_\_\_ Acres \_\_\_\_\_\_\_\_ Sq. Ft. Assessor’s Parcel No: \_\_\_\_\_\_\_\_\_\_\_\_\_

Age of Existing Structures: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ years Year built:

Prior Use(s)/Development(s): Residential Industrial Commercial

Agriculture Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If residential use, number of units: Proposed Existing

Studio # of units \_\_\_\_ 1 Bdrm # of units\_\_\_\_

2 Bedroom # of units \_\_\_\_ 3 Bedroom # of units \_\_\_\_ 4+Bedroom\_\_\_\_units

Total Number of Units: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Total Number of Buildings: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Existing Conditions and Trends:** Describe the existing conditions of the project area and its surroundings. [24 CFR 58.40(a)]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is current zoning and use appropriate for the proposed site? If not, present a plan for obtaining any discretionary approvals.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Prior Analysis:**

Have there been any prior Environmental Reviews completed for the proposed site or project within the last five (5) years. *If yes, please attach copies of the Environmental Review.* Yes No

Has the site been involved in any other proposals previously submitted to this office? Yes No

Title of Prior Proposal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Eventual Result: Project Not Funded

Project Funded $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Completed Date Completed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Cancelled Date Cancelled \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Describe reasons why project was cancelled:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_