

**APPLICATION FOR
FEDERAL ASSISTANCE**

Version 7/03

		2. DATE SUBMITTED 6/1/06	Applicant Identifier Community Development Commission
1. TYPE OF SUBMISSION: Application <input checked="" type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	<input type="checkbox"/> Pre-application	3. DATE RECEIVED BY STATE N/A	State Application Identifier N/A
	<input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction	4. DATE RECEIVED BY FEDERAL AGENCY 6/1/06	Federal Identifier M-06-UC-06-0520
5. APPLICANT INFORMATION			
Legal Name: County of Los Angeles		Organizational Unit: Department: Community Development Commission	
Organizational DUNS: 961608163		Division: Housing Development & Preservation	
Address: Street: 2 Coral Circle City: Monterey Park County: Los Angeles State: California Zip Code: 91755 Country: United States		Name and telephone number of person to be contacted on matters involving this application (give area code) Prefix: Mr. First Name: Gregg Middle Name: Paul Last Name: Kawczynski Suffix:	
Email: gkawczn@lacdc.org		Phone Number (give area code) (323) 890-7269	
6. EMPLOYER IDENTIFICATION NUMBER (EIN): 95-3777596		Fax Number (give area code) (323) 890-9715	
8. TYPE OF APPLICATION: <input checked="" 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) B: County Other (specify)	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: TITLE (Name of Program): HOME Investment Partnership Program 14-239		9. NAME OF FEDERAL AGENCY: U.S. Department of Housing and Urban Development	
12. AREAS AFFECTED BY PROJECT (Cities, Counties, States, etc.): Los Angeles County		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: Production and preservation of affordable housing in the Los Angeles Urban County, including participating cities. Includes Community Housing Development Organization. Also, includes eligible activities under the American Dream Downpayment Assistance Initiative (ADDI). Estimated funding includes \$12,883,006 in HOME and \$157,849 in ADDI funds.	
13. PROPOSED PROJECT Start Date: 7/1/06 Ending Date: 6/30/07		14. CONGRESSIONAL DISTRICTS OF: a. Applicant 22, 25-39, 42, 46 b. Project 22, 25-39, 42, 46	
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
a. Federal	\$ 13,040,855 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 checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E. O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
c. State	\$ ⁰⁰	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?	
d. Local	\$ ⁰⁰	<input type="checkbox"/> Yes If "Yes" attach an explanation. <input checked="" type="checkbox"/> No	
e. Other	\$ ⁰⁰		
f. Program Income	\$ ⁰⁰		
g. TOTAL	\$ 13,040,855 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 Mr.	First Name Carlos	Middle Name	
Last Name Jackson			Suffix
b. Title Executive Director		c. Telephone Number (give area code) (323) 890-7400	
d. Signature of Authorized Representative		e. Date Signed	