AGENDA



SPECIAL SESSION
MAYOR and COMMON COUNCIL
Of the
TOWN OF CAMP VERDE
COUNCIL CHAMBERS
473 S. Main Street #106
Friday, August 18, 2006
10:00 a.m.

- 1. Call to Order
- 2. Roll Call
- Discussion, consideration and, possible approval of Resolution 2006-703, a resolution of the Mayor and Common Council of the Town of Camp Verde, Yavapai County, Arizona, authorizing the submission of an application for State Housing Funds (which may include federal funding through the HOME Investment Partnership Program or State Housing Funds), certifying that said application meets the community's housing and community development needs and the requirements of the State Housing Programs. Committing local resources and funds and authorizing all actions necessary to implement and complete the activities outlined in said application.
- 4. Discussion, consideration, and possible approval of Resolution 2006-704, a resolution of the Mayor and Common Council of the Town of Camp Verde, Yavapai County, Arizona, supporting tourism efforts within the community and in particular supporting the submission of a grant application by the Town for a Arizona Office of Tourism (AOT) Rural Tourism Development Program Grant. (This is an unbudgeted item not to exceed \$11,750 from the CIP)
- 5. Adjournment

| 1 / | | |
|--------------------|--------------------|----------|
| Posted by: U Jones | Date/Time: 8-17-06 | 8:30 a.m |

Note: Pursuant to A.R.S. §38-431.03.A.3, the Council may vote to go into Executive Session for purposes of consultation for legal advice with the Town Attorney on any matter listed on the Agenda, or discussion of records exempt by law from public inspection associated with an agenda item.

The Town of Camp Verde Council Chambers is accessible to the handicapped. Those with special accessibility or accommodation needs, such as large typeface print, may request these at the Office of the Town Clerk.

STAFF AGENDA ITEM REPORT

Council meeting of: August 18, 2006 – Special Session

Title: Discussion, consideration, and possible approval of Resolution

2006-703, a resolution of the Mayor and Common Council of the Town of Camp Verde, Yavapai County, Arizona, authorizing the submission of an application for State Housing Funds (which may include federal funding through the HOME Investment Partnership Program or State Housing Funds), certifying that said application meets the community's housing and community development needs and the requirements of the State Housing Programs, committing local resources and funds and authorizing all actions necessary to implement and complete the activities outlined in

said application.

Budgeted item: No. Council has historically waived permit fees & offered some

staff salaries as in-kind contributions to aid in our ability to garner extra points in competitive grant cycles. There is really no actual cash impact on the budget since salaries are already budgeted and permit fees on these projects were not anticipated revenue.

Description of Item: This resolution is required for grant funding eligibility.

Staff Recommendation: None

Comments: It is my understanding that several Council members wish to

pursue this grant opportunity though Council had voted not to have me continue my work in the Housing Department. As I have explained and as you can see by the attached documents that the application is based on specific personnel and their experience.

I clearly understand that it is Council's intention to hire another person for the Housing Department, and that I *will not* be the person responsible for the administration of this grant, despite the fact that the resolution and grant application documents indicate that I am the person responsible for the administration of this

contract.

Attachments: Yes

Prepared by: D. Barber



RESOLUTION 2006-703

A RESOLUTION OF THE MAYOR AND COMMON COUNCIL
OF THE TOWN OF CAMP VERDE, YAVAPAI COUNTY, ARIZONA,
AUTHORIZING THE SUBMISSION OF AN APPLICATION FOR
STATE HOUSING FUNDS (WHICH MAY INCLUDE FEDERAL FUNDING
THROUGH THE HOME INVESTMENT PARTNERSHIP PROGRAM
OR STATE HOUSING FUNDS), CERTIFYING THAT SAID
APPLICATION MEETS THE COMMUNITY'S HOUSING AND
COMMUNITY DEVELOPMENT NEEDS AND THE REQUIREMENTS
OF THE STATE HOUSING PROGRAMS, COMMITTING LOCAL RESOURCES
AND FUNDS AND AUTHORIZING
ALL ACTIONS NECESSARY TO IMPLEMENT AND COMPLETE THE
ACTIVITIES OUTLINED IN SAID APPLICATION

Whereas, the Mayor and Common Council of the Town of Camp Verde is desirous of undertaking affordable housing development activities; and

Whereas, the State of Arizona is administering the State Housing Fund Program; and

Whereas, the State Housing Fund requires that State Housing Funds benefit low-income households; and

Whereas, the activity in the application addresses the community's low-income population housing needs; and

Whereas, a recipient of State Housing Funds is required to comply with the program guidelines, State and Federal Statutes and regulations;

NOW THEREFORE, BE IT RESOLVED THAT THE MAYOR AND COMMON COUNCIL OF THE TOWN OF CAMP VERDE authorize application to be made to the State of Arizona for funding from the State Housing Fund, and authorize the Mayor to sign to sign application and contract or grant documents for receipt and use of these funds, and authorize Deborah Barber, Town Clerk, to take all actions necessary to implement and complete the activities submitted in said application; and

That the Mayor and Common Council of the Town of Camp Verde will comply with all State Housing Fund Program Guidelines, State and Federal Statutes and regulations applicable to the State Housing Fund Program (HOME program and/or State Housing Trust Fund) and the certifications contained in the application.

PASSED AND APPROVED by majority vote of the Mayor and Common Council at their Special Session on August 18, 2006.

| Tony Gioia, Mayor | |
|----------------------------|----------------------|
| Attest: | Approved as to form: |
| Deborah Barber, Town Clerk | Town Attorney |

The State Housing Fund

Application for the Development Owner-Occupied Rehabilitation or Emergency Repair Programs

State FY 2007

Application submission deadlines:

August 31, 2006 January 31, 2007





1700 West Washington Street, Suite 210, Phoenix, Arizona 85007

Telephone (602) 771-1000 Facsimile (602) 771-1002 TTY (602) 771-1001 www.housingaz.com

The State Housing Fund (Home and Housing Trust Fund) is a program of the Arizona Department of Housing (the "Department"). For more information contact (602) 771-1000.

Title II of the Americans with Disabilities Act prohibits discrimination on the basis of disability in the programs of a public agency. Individuals with disabilities who need the information contained in this publication in an alternate format may contact the Department at (602) 771-1000 or our TTY number, (602) 771-1001 to make their needs known. Requests should be made as soon as possible to allow sufficient time to arrange for the accommodation.



APPLICATION INSTRUCTIONS

The State Housing Fund State FY 2007 Program Summary and Application Guide

Because understanding the State's Housing Program policies is key to completing a successful application, applicants must read the *State FY 2007 Program Summary and Application Guide*. The Summary and Application Guide is intended to serve as a tool for applicants applying for funding available between July 1, 2006 and June 30, 2007, and contains the information necessary to evaluate whether a proposed project can meet all aspects of the State Housing Fund programs.

Submission Deadlines

Until funding is exhausted, the following timetable will be utilized by the State in making funding available from July 1, 2005 through June 30, 2006.

| Application Deadline | Decisions Expected By |
|----------------------|-----------------------|
| August 31, 2006 | October 31, 2006 |
| January 31, 2007 | March 30, 2007 |

Applications are due (must be in the possession of the Department) no later than 4:00 p.m. on the deadline dates noted above. Applications must be mailed or hand delivered to:

Attn: State Housing Fund Arizona Department of Housing 1700 West Washington Street, Suite 210 Phoenix, Arizona 85007

Funding Decisions

The Department will make every effort to make its funding decisions by the dates listed above.

Two (2) Copies of the Completed Application (Original & Leopy)

Applicants must complete their application packages as described under Application Format, completing all required sections and required supporting documentation, submitting one original and one copy (2 copies total). Incomplete applications, applications missing documentation or applications not filed in the quantity indicated will not be accepted for review. This application and any subsequent revisions or clarifications, if approved for funding, will become part of the agreement with the Department.

Application Format

Applications must be typewritten or computer generated. **Do not to revise these forms in any way**. A copy of this application is available by US Mail, on diskette, by e-mail, or at the Housing website www.housingaz.com.

Application material must be:

- 8 ½ x 11 format
- single-sided
- inserted in a 3 ring binder
- indexed and tabbed to correspond with the application checklist

In instances where the tab documentation is not applicable to a project, the tab must still be included and a single sheet indicating "N/A" should be included in the designated space with an explanation of why the information is not applicable. The tabulation format should not be altered in any way.

1. APPLICATION CHECKLIST AND INDEX – OWNER-OCCUPIED HOUSING REHABILITATION AND OWNER OCCUPIED HOUSING EMERGENCY REPAIR

| TAB | ✓ | DESCRIPTION |
|-----|---|---|
| | | Cover Letter |
| | | Checklist/Index (Table of Contents) |
| | | Application Forms |
| Α | | Applicant Eligibility. |
| В | | Project Description |
| С | | Commitments for Financing |
| D | | Owner-occupied Housing Rehabilitation Program Policies or Owner Occupied Housing Emergency Repair Program Policies. Copy of the Governing Body Resolution or Motion to adopt the Program Policies. |
| Е | | Loan Instruments |
| F | | Market Demand |

| 2. | GENERAL APPLICANT AND PRO | JECT/PROGRAM INFORMATION |
|--|---|--|
| | 2.1. Applicar | nt Information |
| Applicant: | Town of Camp Verde, a Municipal | Corporation |
| Contact Name | Deborah Barber | |
| Contact Title | Town Clerk | |
| Mailing Address Street Address (if different from mailing) | 473 S. Main Street | |
| City/State/Zip | Camp Verde, AZ 86322 | |
| Telephone | (928) 567-6631 ext. 107 | Facsimile (928) 567-9061 |
| E-mail Address | dbarber@cvaz.org | |
| | | |
| Legal Status of Appli | cant | |
| Tab A Local Gove Tribal gove Council of Public Hou | t (non-CHDO) attach IRS letter at | State Agency *Private development agencies General Partnership Limited Partnership Limited Liability Company Corporation Individual |
| organizational inform Arizona Corporation letter in Tab A. An Applicant must be application, both gove | national information, determination le Commission. Non-profits must also s e an existing legal entity authorized to | ws, partnership agreement or other relevant entity tter and Certification of Good Standing from the ubmit a copy of a recent IRS nonprofit designation conduct business in Arizona. Prior to making must adopt a resolution of their governing board |

| | | 2.2. | Location of Pro | ject | |
|---------------|------------------------------|---|----------------------|-----------------|--|
| | | | | | |
| | • | Congressional Districts | s: Complete district | 1 | me of Representative |
| Federal | U.S. Representa | ive: Rick Renzi | | Number: 1 | W-1999 |
| State: | Senator: Ken Be | nnett | | | |
| | Representative: | L. Mason & T. O'Hall | eran | Number: 1 | |
| Project Nam | e: Owner-O | ccupied Housing Rel | nab Program | | |
| Address: | eligible propertie | es within the Town lin | nits of the Town o | of Camp Verde | |
| City/Town: | Camp Verde | County: | Yavapai | Zip: | 86322 |
| 7. | | | | | 1 • • • • • • • • • • • • • • • • • • • |
| Project Desc | ription: Describe t | he project in detail usi | ing Attachment B | at Tab B. | |
| | 2.3 | Amount of | State Housing Fu | ınds Regueste | d |
| | 2.0 | . Zimomi di | oute Housing 1 | mus requeste | <u> </u> |
| | Use of | Funds 😋 🔒 🥦 | 州 沙湖美洲洲东 | Gran | it/Loan |
| I | 1 | ehabilitation (use this one | 1 ' | 0 | |
| | ccupied Housing Emergency Re | pair below. Only one per applica | \$ -0- | | |
| | | | | | |
| General A | | ds (maximum 10% of 1 | line 1 \$ 40,000 | | |
| 01 2 4000 | c) | | | | |
| | | | | | |
| | 2.4. Ty | pe of funding applica | ant is willing to a | ccept (check a | ll that apply): |
| Check all typ | es of funding you | are willing to accept, i | if funded. | | |
| | Federal Funds | \boxtimes | | Funds | \bowtie |
| | | | State. | - A WILMS | |
| | | 0.5 | T() (P | | |
| - Day | | 2.5. | Type(s) of Prope | erty | |
| Check all tha | at apply: | | | | |
| _ | e-family detached | | | Condom | inium Units |
| F3 | e-family attached, i | ncl. Townhouses | | — ⊠ Manufac | tured Housing |
| - J | , | | | M_N I,IMIUIUC | |
| | | 2.6. Rel | ocation Informati | ion: | |
| | | | | | |
| Yes No | Maybe | | | | _ |
| | \boxtimes | Will this Program i If yes or maybe, costs | | | |
| | | 1, yes or mayor, cost | a must be reflected | a ni die Frogra | m Duuget at 3.1.2. |
| | | | | | |
| | | 2.7. P | roposed Benefici | aries | |

| Targeted Populations by Income Level | Units in Program | % of Units in | State-assisted Units in the | % of State- |
|--------------------------------------|-------------------------|---------------|--------------------------------|-------------|
| Households at or below 50% of AMI | 2 | 2 | 2 | 50% |
| Households at or below 60% of AMI | 1 | 25% | 1 | 25% |
| Households at or below 80% of AMI | 1 | 25% | 1 | 25% |
| Other: Hshlds at or below% of AMI | 0 | 0 | 0 | |
| Total Number of Units in Program: | 4 | 100% | 4 | 100% |

2.8. Priority Population Set-Asides

Complete only if the Program will specifically set-aside units for a priority population. Set-asides will be enforced through contract provisions. For a definition of qualifying populations, see description of priority populations under *Definitions*, in the *Program Summary and Application Guide*.

 $\begin{tabular}{ll} \begin{tabular}{ll} \beg$

| Priority Population | No. of Units. | % of Units |
|--|---------------|------------|
| Physically disabled persons (design elements must be accommodating) | 1 | 25% |
| Families with children under 18 years of age | 2 | 50% |
| Elderly (62 years of age and older) | 1 | 25% |
| Special needs populations identified in <i>Definitions</i> in <i>Program Summary and Application Guide</i> | 0 | 0 |
| Other special needs groups (must be pre-approved by the State) | 0 | 0 |
| UNITS NOT SET-ASIDE FOR PRIORITY POPULATIONS 10. 10. 10. 10. 10. 10. 10. 10. 10. 10. | 0 | 0 |
| Total Number of SHF Assisted Units in Program: | 4 | 100% |

| | 2.9. | Type of Assistance to Househole | ds: |
|-------------|---|--|---------------------------------------|
| Program | design includes (check all that a | pply. This should be reflected in your Pro | gram Policy): |
| Gran | nts (Emergency Repair Only) | Deferred, forgivable loans | Repayable loans |
| | 2.10. | Amount of Funds Invested Per U | nit |
| funding | available. See Appendix E of th | nding (State funds and any other public ne Program Summary and Application ner) to be invested in any one unit: | |
| Maxim | um amount of State Housing F | unds to be invested in any one unit: | \$ <u>\$120,000</u> |
| | 2.11. N | Method to Determine "After Rehab" | Value" |
| | how the after rehabilitation values. | lue of assisted units will be determin | ed to ensure that units do not exceed |
| on reha | bilitation of the home will be | value of the assisted units, the total a added value of the land. The value of lue estimate of the property in its 'bo | f the land will be based on the |
| | | | |
| | | | |
| | | 2.12. Recapture Period | |
| _ | ogram will include recapture pro e if property sold within 5 years | ovisions, please indicate required terr s of investment, etc.) | ns, including recapture period (i.e, |
| | apture period is 15 years. Repa to be owned and/or occupied by | yment of the entire amount is requiry the assisted family. | red in the event that the home |
| | | | |
| | 2.13. | Form of Ownership to be Assiste | ed |
| Owner- | occupied. | | |
| | | 2.14. Property Standards | |
| | | | |
| \boxtimes | Properties will meet the state and zoning ordinances at the | e's rehabilitation standards and all ap e time of project completion. | plicable local codes, ordinances, |
| | - | e rehabilitation standards and, in the n, properties will meet the following (| |
| | Uniform Building Code | (ICBO) | |
| | National Building Code | (BOCA) | |
| | Standard Building Code | (SBCCI) | |
| | | | |

| Abo Min | | ng Officials (CABO) one or two family code; | |
|--|---|--|--|
| | imum Property Standard | ds (MPS) in 24 CFR 200.925 or 200.926. | |
| | 2. | 15. Waiting List | |
| | | | |
| pplicant currently: Mainta | sime a maitime list of olivit | No households | |
| _ | nins a waiting list of eligi | | 24 |
| Number of households | s on waiting list 2 | Average length of wait for assistance (months) — | mos |
| Date waiting li | st April 20 | 04 | |
| commenced: | | 1.00 | |
| | | | |
| Does n | ot maintain a waiting lis | t | |
| | | | |
| | | 2.16. Basis of Loan | |
| | | | |
| Deferred Forgiveable ffordability period o ssisted unit as a pri | f no less than 15 years a mary residence or if the | ill be provided for those with no repayment abi and one month. In the event that the owner fails to e unit is sold or otherwise ceases to be owned by e entire loan is forgiven after 15 years and one mont | occupy the curr |
| Deferred Forgiveable ffordability period o ssisted unit as a pri | Loans – assistance wi f no less than 15 years a mary residence or if the | and one month. In the event that the owner fails to e unit is sold or otherwise ceases to be owned by | occupy the curr |
| Deferred Forgiveable Affordability period o Assisted unit as a prin | Loans – assistance wi f no less than 15 years a mary residence or if the | and one month. In the event that the owner fails to e unit is sold or otherwise ceases to be owned by | occupy the curr |
| Deferred Forgiveable iffordability period o issisted unit as a prio iwner, the entire loan implementation of the project of th | Loans – assistance wif f no less than 15 years a mary residence or if the is due and payable. The 2.17. | Program Team Description of the responsible party and the field after the application are subject to review. | the current. Togram it mately 3 all Barber, |

| Program Coordinator | Deborah Barber | See previous note. |
|---------------------------|---|--|
| Rehabilitation Specialist | Ray Floyd, Building Inspector/ Deborah Barber | Ray has over 30 years experience as a building inspector and plans examiner. Barber has over 13 years experience with HOME & CDBG requirements & standards. |
| Loan Servicing Specialist | Deborah Barber | Barber will perform the initial work, with a title company to handle the closing and all necessary filings of deeds and other related documents. In the event of foreclosure, Barber and the Town attorney will handle the loan servicing and payment collection. The Town currently uses Chicago Title in Prescott to service existing loan payments. |
| Fiscal Manager | Deborah Barber | See previous notes. |
| Consultants | N/A | N/A |
| Function | Responsible Party | Experience |
| Other: | General Contractor | A general contractor will be competitively procured, with emphasis on experience working with federal dollars and requirements, and working within tight timelines and budgets, producing quality results. |
| Other: | N/A | N/A |

| | 2.18. | Program Timeline: | | |
|---------------------------------|--|---------------------------|---------|--|
| Projected start date | 12-1-06 | Projected completion date | 12-1-07 | |
| (approximately 90 days after th | e date the of the application deadline | e) | | |

Applicants must provide a schedule for the Program, that lists major program activities and indicates when they will be executed. Additional information such as contractor selection, final inspection, loan closing, etc. should be included when known.

| Program Schedule | | | | | | | | | | | | |
|---|-------------|---|-------------|----------|-------------|----------|-------|------------------|--------|---|-----|--------|
| Major Program activities: | 1st quarter | | 2nd quarter | | 3rd quarter | | ter | 4th quarter | | | | |
| | | | | (eac | h box | repres | sents | one n | ionth, |) | 推论的 | 41-160 |
| Execute Contract | X | | | | | | | | | | | |
| Identification of Units | X | | | | | | | | | | | |
| ERR | X | X | X | | | | | | | | | |
| Initiate Project Set-Ups | 1 | | X | <u> </u> | <u> </u> | <u> </u> | - | | | | | |
| Rehabilitation | + | | | х | Х | X | X | Х | Х | х | X | |
| Individual Project Close out/Loan (lossings | | | | | | | | | | | | Х |

| Contract Close out | | | | | | Х |
|--------------------|--|--|--|--|--|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |

| | Prog | ram S | chedu | le | | | | | | | | |
|---------------------------|------|--------|-------|-----------------|---------|--------|-----------------|------|------|----------|-----|------|
| Major Program activities: | 5 | h quai | | 6 th | quar | ter | 7 th | quar | ter | 811 | qua | rter |
| | | 13 | | (eacl | ı box i | repres | ents l | ne m | onth | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
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| | | | | | | | | | | | | |

3. BUDGET STATEMENTS

3.1.1. Program Budget Sources

=Re50.

Full disclosure of <u>all financing sources available</u> is required. Letters of Commitment must be attached at Tab C. If after submittal of the application, additional financing sources are obtained, these sources must be immediately reported to Housing. Additionally, Housing may require a final uses and sources review if all sources are not firm at the time of application.

| Column A | identify all sources of program financing. |
|----------|--|
| Column B | Include here only funding sources that are firmly committed at the time of application submittal. |
| Column C | Include here only funding sources that are tentative (including funding requested in this application) that is tentative at the time of application submittal. |
| Column D | Indicate whether this commitment is a <i>grant</i> or a loan that must be repaid. All commitment letters included at <i>Tab C</i> should clearly state the <i>terms of repayment</i> of any loans. |
| Column E | Include date(s) other tentative funding sources were applied for. |
| Column F | Include the date(s) of expected award notification for other tentative funding sources. |

| A | В | С | D | E | F |
|--|-----------------|------------|------------------|--------------|----------------------|
| Source | Funds Committed | Tentative | Loan or grant | Date applied | Date of notification |
| State Housing Funds (Do NOT include administrative funding). | | \$ 394,000 | | | |

| 1. Town of Camp Verde | \$13,727 | N/A | N/A | 8/18/06 | |
|---|------------|----------|----------|---------|--|
| 2. State Housing Funds (Admin Funding) | | \$40,000 | \$40,000 | 8/31/06 | |
| | | | | | |
| 3. | | } | | | |
| 4. | | | | *** | |
| | | | | | |
| Total Amount of funding | \$ 447,727 | • | 7 7 7 | | |
| (total of columns B and C) | | | | | |

3.1.2. Program Budget Uses

Column A.Column B.If a specific use of funds is not listed, indicate the type of use in "Other" box.Indicate the amount of State Housing Funds being requested for this specific use.

Column C. Indicate amount financed by all other funding sources.

Column D. Indicate the total amount of columns B and C for the specified use.

Column E. Spell out the source(s) name for sources indicated in column C (e.g., bank loan, CDBG)

| A | В | С | D | E |
|---|--|------------------------|-------------------------|---------------------|
| Activity | State Housing Funds | Other Sources | Total All Sources | Source(s) |
| Site Improvements and Den | nolition | eg i ji ji an in in | | |
| On-site | 6,000 | -0- | 6,000 | State Housing Funds |
| Landscaping | -0- | -0- | -0- | N/A |
| Demolition | 30,000 | -0- | 30,000 | State Housing Funds |
| Rehabilitation Costs | | | | |
| Direct Construction | 340,000 | -0- | 340,000 | State Housing Funds |
| Lead Paint Inspection/Clearance | -0- | -0- | -0- | N/A |
| Permits/Fees | -0- | \$6,027 | 6,027 | Town of Camp Verde |
| Other | -0- | -0- | -0- | N/A |
| Professional Fees | And the Control of | Pinh | Weight Name - A | |
| Arch. Design/Supervision | -0- | -0- | -0- | N/A |
| Environmental Review (if linked to a unit) | -0- | 500 | 500 | Town of Camp Verde |
| Legal Fees | -0- | -0- | -0- | N/A |
| Loan Financing Fees | | | \$ 4.15.7.18 . 2 | |
| Title & Recording | 6,000 | -0- | 6,000 | State Housing Funds |
| Credit Reports | -0- | 200 | 200 | Town of Camp Verde |
| Miscellaneous Soft Costs | eprincipal de la Santa de la Caraca de la Ca | Antiger State of the | 第 55条6.455的 | |
| | -0- | -0- | -0- | N/A |
| | -0- | -0- | -0- | N/A |
| Temporary Relocation | | 40 - 10 F 41 m | Bearing a securit | |
| Rent or Lodging* | 6,000 | - 0- | 6,000 | State Housing Funds |
| Meals & Misc. * | 6,000 | -0- | 6,000 | State Housing Funds |
| Project Specific Administrati | ion | Kanadara kanadaran 182 | | |
| Rehabilitation Specialist | -0- | 4,500 | 4,500 | Town of Camp Verde |
| Travel | -0- | 500 | 500 | Town of Camp Verde |
| Other: Postage, supplies, phones, office, copies, etc | -0- | 2,000 | 2,000 | Town of Camp Verde |
| Subtotal Program Project Costs | | | | |
| General Admin from 2.3. | 40,000 | -0- | 40,000 | State Housing Funds |
| Totals | \$434,000 | \$13,727 | \$447,727 | |

4. STATE HOUSING FUND APPLICANT AFFIDAVIT, RELEASE AND CERTIFICATION FORM

The undersigned Applicant hereby applies to the Arizona Department of Housing, its successors and assigns (the "Department"), for a commitment of State Housing Funds. The undersigned is responsible for ensuring that the program will assist only qualified low income housing as described in the application, and will satisfy all applicable State and Federal requirements in the rehabilitation or construction to receive a commitment of State Housing Funds. The Applicant represents and certifies that the application has not requested more State Housing Funds than is necessary to provide the assistance described in this application. In planning this project or program, the Applicant certifies that it has provided for and will continue to encourage the participation of citizens, particularly persons of low income who are residents of areas in which the State Housing Funds are proposed to be used.

The Applicant understands that the Department will determine the eligibility of the project or program based, at least in part, on the information in and submitted with the application by the Applicant and the readiness of the program to proceed, as presented in the application. The Applicant is responsible for the accuracy of all information submitted. Misrepresentations, mistakes or omissions may be the basis for the cancellation of an award.

The Applicant understands and agrees that should the Department commit more funds than the State of Arizona is entitled to award in any given fiscal year (whether State or Federal), and funding is not available as awarded, the Department shall be held harmless by the Applicant, the Applicant's investors and anyone else relying upon the commitment.

The Applicant acknowledges and agrees that it will at all times cooperate with regard to request(s) for submittal of additional requests for information from the Department as necessary.

The Applicant acknowledges and agrees to fully comply and cooperate with all monitoring activity of the Department after the date of commitment. The Applicant will give the State, the U.S. Department of Housing and Urban Development, and any State authorized representative access to and the right to examine all records, books, papers, or documents related to the application and any resulting funding awards.

By executing this authorization and release, the Applicant does hereby authorize the Arizona Department of Housing, its successors and assigns, to obtain and furnish and release, to all proper institutions and/or agencies, full and complete records, reports and/or information pertaining to the Applicant and its application under the State Housing Fund program.

The Applicant agrees In compliance with State and Federal laws regarding conflict of interest. No elected or appointed officer or employee of the Applicant may seek or accept any gifts, service, favor, employment, engagement, emolument or economic opportunity which would tend improperly to influence a reasonable person in that position to depart from the faithful and impartial discharge of the duties of that position. No officer or employee may use his or her position to secure or grant any unwarranted privilege, preference, exemption or advantage for himself or herself, any member of his or her household, any business entity in which he or she has a direct or indirect financial interest, or any other person. No officer or employee may participate as an agent of Applicant in the negotiation or execution of any contract between Applicant and any private business in which he or she has a direct or indirect financial interest. No officer or employee of Applicant may suppress any report or other document because it might tend to affect unfavorably his/her financial interests.

The Applicant agrees that the Arizona Department of Housing, its successors and assigns, its agents, employees, attorneys, contractors and representatives will at all times be indemnified and held harmless against all losses, costs, damages, expenses and liabilities of whatsoever nature or kind (including, but not confined to, attorneys' fees, litigation and court costs, amounts paid in settlement, and amounts paid to discharge judgments, and any loss from such judgments or assessments) directly or indirectly resulting from, arising out of, or related to acceptance, consideration and approval or disapproval of the Applicant's application for funding.

The Applicant hereby represents and certifies under penalty of A.R.S. 13-2311 and 39-161 that the information set forth herein, and all material submitted by the Applicant to the Department, are to the best of the Applicant's knowledge, true and complete and accurately describe the proposed project. The undersigned is duly authorized to execute this instrument on behalf of the Applicant and possesses the legal authority to apply for an allocation of State Housing Funds and to execute the proposed program.

Further, the Applicant represents that its governing body has duly adopted or passed an official act of resolution, motion or similar action authorizing the filing of the application, including all understandings and assurances required, and directing and authorizing the applicant's chief executive officer and/or other designated official representative to act in connection with the application and to provide such additional information as may be required.

The Applicant understands that all representations made herein, and all documentation submitted, is subject to verification by the Department, and that any misrepresentations or inaccuracies, whether intentional or not, may subject the project to a loss of competitive scoring points or to disqualification. For the purposes of verification, the Applicant and Developer hereby authorize the Department to request information on entities and individuals closely related to this transaction from any lender, investor, or other institution or entity named in this application. Such information includes but is not limited to audits, financial statements, credit history, copies of income tax returns, and other information deemed necessary by the Department.

| | d this document to be duly executed in its name as of this , 20 | day c |
|----------------|--|-------|
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| | | |
| pplicant Name: | | |
| y: | | |
| | (Signed by the same person who signed the Resolution) | |
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STAFF REPORT

Council meeting of: We

Wednesday, August 18, 2006

Title:

Discussion and Possible Approval of Resolution

2006-704

Budgeted item:

No, Money would come from the CIP

Description of Item:

Discussion and possible approval to submit Arizona

Office of Tourism Rural Tourism Development
Program grant application in the amount of
\$47,000 to purchase two Cannons and 10 sets of
(Indian Wars Period) Military Uniforms. 25%
match required with 10% being possible in kind.

Staff Recommendation:

Approve resolution 2006-704

Comments:

No

Attachments:

Yes

Prepared by:

Michael Casebier - Grants Administrator

RESOLUTION 2006-704

A RESOLUTION OF THE MAYOR AND COMMON COUNCIL OF THE TOWN OF CAMP VERDE, YAVAPAI COUNTY, ARIZONA, SUPPORTING TOURISM EFFORTS WITHIN THE COMMUNITY AND IN PARTICULAR SUPPORTING THE SUBMISSION OF A GRANT APPLICATION BY THE TOWN FOR A ARIZONA OFFICE OF TOURISM (AOT) RURAL TOURISM DEVELOPMENT PROGRAM GRANT.

WHEREAS, the Town of Camp Verde is desirous of adding 2 Cannons as tourist attractions and historical points of interest, and purchasing 10 sets of authentic uniforms;

WHEREAS, funding is now available for tourism development, which the Town may qualify for through a state grant offered by AOT under the Rural Tourism Development Grant Program for fiscal year 2007;

WHEREAS, the total Camp Verde Cannon project cost estimate is: \$47,000 requested grant is \$35,250 with 25 percent match provided by the Town of \$11,750.

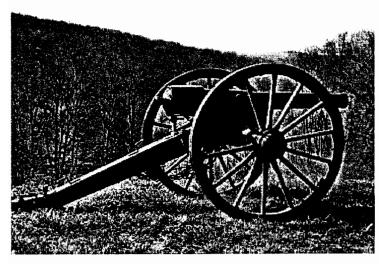
NOW THEREFORE, the Mayor and Common Council of the Town of Camp Verde approves the application for \$47,000 and agrees to provide matching funds in the amount of \$11,750 for the Town's Rural Tourism Development Grant. The Mayor and/or Town Manager are authorized to execute any documents in connection with this application.

| | y the Mayor and Common Council of the Town Arizona, thisday of, 2006. |
|-----------|---|
| Approved: | Date: |
| Attest: | _ Approved as to form: |
| | Town Attorney |

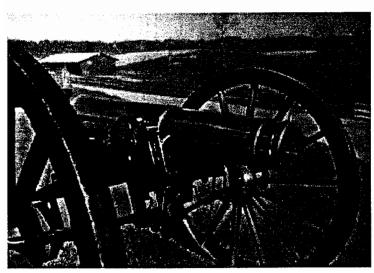
Cannons for Camp Verde

The 1861 Parrott Rifle would be set on a concrete pad above our town sign at Highway 260 and Finnie Flats Road.

The 1841 Field Howitzer would be set on a concrete pad in front of the Parks and Rec. building next to the Ft. Verde sign. This cannon was located at Fort Verde in the late 1800's.



1861 10lb. Parrott Rifle (Ductile Iron)



1841 Bronze Field Howitzer