**[Insert Resolution Number if applicable]**

**[Insert Name of Applicant]**

# **AUTHORIZING RESOLUTION**

**[All***, or***A necessary quorum and majority]**of the **[directors, supervisors, members, council members, etc.]**of **[official name of applicant entity, and type of entity: non-profit, county, municipality, etc.]**(“Applicant”) hereby consents to, adopts and ratifies the following resolution:

1. WHEREAS, the Department is authorized to provide up to $57 million under the Local Housing Trust Fund (“LHTF”) Program from the Veterans and Affordable Housing Bond Act of 2018 (Proposition 1) (as described in Health and Safety Code section 50842.2 et seq. (Chapter 365, Statutes of 2017 (SB 3)) (“Program”).
2. WHEREAS the State of California (the “State”), Department of Housing and Community Development (“Department”) issued a Notice of Funding Availability (“NOFA”) dated 04/30/2020 under the LHTF Program;
3. WHEREAS Applicant is an eligible Local or Regional Housing Trust Fund applying to the Program to administer one or more eligible activities using Program Funds.
4. WHEREAS the Department may approve funding allocations for the LHTF Program, subject to the terms and conditions of H&S Code Section 50842.2, the LHTF Program Guidelines, NOFA, Program requirements, the Standard Agreement and other related contracts between the Department and LHTF award recipients;

## NOW THEREFORE BE IT RESOLVED THAT:

1. If Applicant receives an award of LHTF funds from the Department pursuant to the above referenced LHTF NOFA, it represents and certifies that it will use all such funds on Eligible Projects in a manner consistent and in compliance with all applicable state and federal statutes, rules, regulations, and laws, including, without limitation, all rules and laws regarding the LHTF Program, as well as any and all contracts Applicant may have with the Department (“Eligible Project”).
2. NOW, THEREFORE, IT IS RESOLVED: That the [local or regional HTF] is hereby authorized to act as the [trustee/manager] in connection with the Department's funds to Eligible Projects pursuant to the above described Notice of Funding Availability in an amount not to exceed $[###] (the "LHTF Award").
3. Applicant hereby agrees to match on a dollar for dollar basis the LHTF Award pursuant to Guidelines Section 104. Applicant hereby agrees to utilize matching finds on a dollar-for-dollar basis for the same Eligible Project for which Program Funds are used, as required by HSC Section 50843.5(c).

INSTRUCTION:Provide a short summary on how you commit to use the Program Funds and Matching Funds. The summary, which shall be labeled *Attachment 1* shall include: (1) identification of the percent of the total funds requested that will be used for each activity/project, including Area Median Income (AMI) level; and (2) a list of the jurisdictions where the activities/projects will be delivered, in the case of any HTF that serves more than one jurisdiction. *Attachment 1* **MUST** be incorporated into your Resolution as an attachment before it is adopted.

1. Pursuant to Attachment 1 and the Applicant’s certification in this resolution, the LHTF funds will be expended only for Eligible Projects and consistent with all program requirements.
2. Nonprofit Housing Trust Funds and Native American Tribe Housing Trust Funds agree to use Program Funds only for Eligible Projects located in cities and counties that submitted an adopted Housing Element that was found by the Department to be in compliance and that have submitted their Housing Element Annual Progress Report (APR) for the current year or prior year by the application due date.
3. Applicant shall be subject to the terms and conditions as specified in the Standard Agreement, H&S Section 50842.2 and LHTF Program Guidelines.
4. **Insert name and title of Authorized Signor(s)]**is/are authorized to execute the LHTF Program Application, the LHTF Standard Agreement and any subsequent amendments or modifications thereto, as well as any other documents which are related to the Program or the LHTF Award to Applicant, as the Department may deem appropriate.

PASSED AND ADOPTED at a regular meeting of the *[****Insert Name of Applicant]***this

 \_\_day of \_\_\_\_,\_\_\_ by the following vote:

AYES: \_\_ ABSTENTIONS: \_\_\_NOES:\_\_ABSENT:\_\_

Signature of Approving Officer

***[Insert printed name and title of Approving Officer]***

INSTRUCTION*:*The attesting officer cannot be the person identified in the resolution as the authorized signor

## CERTIFICATE OF THE ATTESTING OFFICER

The undersigned, Officer of [***Name of Attesting Officer***] does hereby attest and certify that the [foregoing / attached] Resolution is a true, full and correct copy of a resolution duly adopted at a meeting of the [***City/County Government/Nonprofit Charitable Organization/Native American Tribe(s)***] which was duly convened and held on the date stated thereon, and that said document has not been amended, modified, repealed or rescinded since its date of adoption and is in full force and effect as of the date hereof.

ATTEST:  \_\_

Signature of Attesting Officer

***[Insert printed name and title of Attesting Officer]***