



Exhibit J – City of Scotts Valley Preference Criteria Form (Buyers) Acorn Commons

The City has adopted a preference system to ensure that affordable housing units are provided to City residents and workers as a priority. The administrator will review applicants according to the adopted preference criteria, which is the criteria to be met by households in the rank order listed and defined below.

	BMR PREFERENCE CRITERIA
Note: App	licants that don't meet the preferences, may still apply.
Preference 1 Live AND Work in Scotts Valley	A household which includes at least (1) one adult whose primary work location is in the City of Scotts Valley and has been working in Scotts Valley for a minimum of six (6) months, and the household currently resides in the City of Scotts Valley and has resided in the City of Scotts Valley for a minimum of six (6) months prior to the date of application to purchase the unit.
Preference 2 Live in Scotts Valley	A household which currently resides in the City of Scotts Valley and has resided in the City of Scotts Valley for a minimum of six (6) months prior to the date of application to purchase the unit.
Preference 3 Works in Scotts Valley	A household which includes at least one (1) adult who has worked in Scotts Valley for a minimum of one (1) year prior to the date of application to purchase the unit and at least one (1) adult in the household shall be working in Scotts Valley at the time of occupancy of the unit.
Preference 4 Live AND Work in Santa Cruz County	A household which includes at least one (1) adult who currently works within the County of Santa Cruz and the household has resided in the County of Santa Cruz for a minimum of one (1) year prior to the date of application to purchase the unit.
Preference 5 Live in Santa Cruz County	A household which currently resides and has resided in the County of Santa Cruz for a minimum of six (6) months prior to the date of application to purchase the unit.
Preference 6 Work in Santa Cruz County	A household which includes at least one (1) adult that currently works in the County of Santa Cruz for a minimum of one (1) year prior to the date of application to purchase the unit and at least one (1) adult in the household shall be working in the County of Santa Cruz at the time of occupancy of the unit;
All Others	A household which does not meet any of the above listed Preference Criteria

Source: Doc 2019-0007389 on 3/25/2019

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IMPORTANT: To properly prioritize BMR applicants, HouseKeys requests documents/materials supplemental to the items listed on the BMR application Document Checklist. For the household to be considered for a City Preference you must submit the supplemental materials with the BMR application. If the documentation requested on this application is not sufficient to prove you meet one of the Preferences categories, please make sure you include additional evidence/documentation. If you don't provide clear and substantial evidence/documentation with the application along with the Preference Criteria Form when you submit your BMR Application Package you will not be eligible for the Preference you claim to meet. Additional proof or clarification cannot be submitted or accepted separately; everything must be included in the packet when you submit it for review.

I/We (the primary applicant	t or co-	applica	ints) ce	rtify th	at I/we	meet	the following preference:	
PRIMARY APPLICANT:	□ 1	□ 2	□ 3	□ 4	□ 5	□ 6	□ none	
Co- APPLICANT:	□ 1	□ 2	□ 3	□ 4	□ 5	□ 6	□ none	
Additional CO- APPLICANT:	□ 1	□ 2	□ 3	□ 4	□ 5	□ 6	□ none	
Household Member:	□ 1	□ 2	□ 3	□ 4	□ 5	□ 6	□ none	
Certifications:								
have made no misrepresentat must submit <u>clear</u> and <u>substar</u> considered. No proof - No form	ions, no <u>ntial</u> evi n - No F	or did I d dence <u>w</u> Preferen	omit anv vith the ice.	y pertin applica	ent info tion <u>and</u>	rmation <u>d</u> the pr	this form is true and complete. I/wen. I/we also understand that I/we reference criteria form in order to be	
Applicant Name:								
Co- Applicant Name:Additional Applicant Name:								
Additional Applicant Name:								
Household Member Name:						Signature		
Household Member Name:					Sign	nature_		
Household Member Name:								