ATTACHMENT "B" FORM 1

NOTICE OF INTENT TO TRANSFER

From:					
	("Owner")				
To:	City of Scotts V Civic Center Dri Valley, CA 9506	ive Scotts			
Re:					
	(street address) Scotts Valley, C (the "Residence				
	Owner desires to Transfer ¹ the Residence.				
	Owner desires to [check one]:				
	attempt to locate an Eligible Person or Household to purchase the Residence at Affordable Housing Cost; or				
		permit the City to exercise the City's option to purchase the Residence (the City is <u>not</u> required to exercise its option).			
Eligible				Household, the Owner hasdays to find the g (see Approval Request).	
City to				le Person or Household, does the Owner want the ouy the Residence? _Yes _No	
Signature of Owner		-	Signatu	ire of Owner	
Name	[Print or Type]	_	Name	[Print or Type]	
Day tin	ne phone numbe	_ r of Owner		Day time phone number of Owner	
Date:		-	Date:		
<u>Conser</u>	nt of City to Trans	sfer:			
Signed					
	City Manager	of City			
	(Print Name)				

¹ All capitalized terms shall have the meaning as defined in the Covenants, Restrictions and Option to Purchase for Very Low, Low and Moderate Income Persons or Families.