# Section 6. Individual Project Descriptions

**(Please fill out and submit Section 6 individually for each project listed in Section 4)**

Please provide information for the list of projects/activities provided in Section 4. The project number and name in Section 4 should match the project number and name below. Estimated costs and timelines should match the information in the budget and timeline attachment in Section 5.

|  |  |
| --- | --- |
| Project Number:  Click or tap here to enter text.  (*from Section 4 of application*): | Project Name: Click or tap here to enter text. *(from Section 4 of application)* |

|  |  |
| --- | --- |
| Estimated cost | $Click or tap here to enter text. |
| Expected start date | Click or tap to enter a date. |
| Expected end date | Click or tap to enter a date. |
| Does this project require the procurement of at least one consultant? | No  Yes  \_Click or tap here to enter text.\_ total number of consultant firms expected for projects |
| Agency expected to procure consultant | Subregional partner  SCAG  Other, please specify: Click or tap here to enter text. |
| Agency expected to administer or implement project or activity\* | Subregional partner  Other, please specify: Click or tap here to enter text.  \*The implementing agency cannot have any unresolved audit findings from prior government contracts and cannot be party to pending land use, housing, or environmental litigation which could impact the proposed activities. |
| Which agency will be directly paying consultant invoices? | Subregional partner (SCAG will reimburse the subregional partner)  Other, please specify: Click or tap here to enter text. |
| Does this project require adoption or approval by a local decision-making body for implementation? | No  Yes  If yes, please specify the expected adoption/approval date: \_Click or tap to enter a date. |
| **Project Maps**  *Guidance for creating and saving the map depicting how each project meets the infill definition, and for mapping Priority Growth Areas and Priority Populations using the SCAG Mapping Tool is available on the REAP 2.0 website:* [*https://scag.ca.gov/reap2021*](https://scag.ca.gov/reap2021) | |
| **Infill Area Map.** Is the project entirely located within an area(s) meeting the definition of infill? | Yes, please create and download a map of your project area that identifies how all activities will meet the definition of infill. Please submit this map with the application.  No, please revise the project so that all activities are within areas meeting the infill definition. REAP 2.0 funding cannot be used for projects outside of infill areas. |
| **Priority Growth Area (PGA) Map.** Identify the Priority Growth Areas in and near the project area. | Please use SCAG’s mapping tool to create and save a map of the Priority Growth Areas in and near your project area. This map can be used to support your responses in Section 7. Please submit this map with the application. |
| **Priority Population Map.** Identify the priority populations that will be supported by the project. | Please use SCAG’s mapping tool to create and save a map of the Priority Populations that will be supported by the project. This map can be provided for each project separately. If the list of projects will all support the same priority populations, then one map can be provided for all. This map can be used to support your responses in Section 7. Please submit this map with the application.  Priority Populations include: |
|  | |
| *OPTIONAL* - Does the project satisfy a requirement for pro-housing designation? | Yes, the following jurisdiction(s) is planning to apply for designation:   Click or tap here to enter text.  Not sure - we would like more information on the state pro-housing designation program, including benefits of achieving pro-housing status    ☐Not at this time |

**PROJECT DESCRIPTION**

For each project included in the list in Section 4, please provide the following information. Your response should align with the information included in the Budget, Timeline, Scope and Measurable Outcomes Attachment:

* Brief project summary
* Housing element program being addressed (with jurisdiction name(s))
* Expected outcome(s) (i.e., plans for adoption or implementation)
* Related tasks that will be funded from other funding sources and amount(s)

[500-word limit]

Click or tap here to enter text.