

Consistency Letter and Siting Determination Request Form

This form is used by the Seattle Office of Housing (OH) for two distinct purposes related to project proposals.

1. To assess consistency between the low-income housing proposal and the City of Seattle 2024-2028 [Consolidated Plan for Housing and Community Development](#).
2. To determine compliance with the Development Siting Policy described in OH's [Housing Funding Policies](#) Chapter X.1.

For more information about these and which you may need, see [Funding Announcements & Application](#).

Complete this form and save as "PROJECTNAME_Consistency-Siting-Request_MM.YY" where PROJECTNAME is replaced with the name of the project and MM is month and YY is the year. Email the completed form to OFH_Lending@seattle.gov at OH with the subject line: "Consistency-Siting Request – PROJECT NAME."

*Complete ALL SECTIONS of this form and submit it to OH **at least 30 days** in advance of the date when certification and/or a determination is needed.*

Please indicate which you are requesting:

1) Consistency Letter ☐

2) Siting Determination ☐

Project Sponsor Information

Applicant/Sponsor:

Project Developer:

Project Name: _____

Full Project Address: _____

Date of Submission: _____

Contact Information of Person Completing this Request Form

Name: _____

Organization: _____

Work Address: _____

Email: _____

Office Phone: _____

Cell Phone: _____

Project Description

Provide a brief description of the project in 4-5 sentences explaining how the project will preserve or increase affordable housing, including the type of project (new construction, acquisition, etc.), unit mix and populations served, the geographic area where it will be located, and any partnerships.

Complete the following chart of proposed Bedroom and AMI mix in the project.

AMI LEVELS	SEDU/SRO	Studio	1 BR	2 BR	3 BR	4 BR	5 BR
≤ 30% AMI							
≤ 50% AMI (not included above)							
≤ 60% AMI (not included above)							
≤ 80% AMI (not included above)							
Unrestricted							

Provide the following information about the other funding programs to which you are applying.

Program Name	Due Date (MM/DD/YYYY)	Approximate Amount Requesting
		\$
		\$
		\$

Do you intend to apply for funding from OH? Yes No ☐

If yes, approximately when do you think you will apply to OH? _____

For OH Staff Completion ONLY

CONSISTENCY LETTER

Consistency Certification Approval: Approved Denied N/A

Reason for denial:

Name of Certifying Jurisdiction: City of Seattle Office of Housing

Name of Certifying Official: _____

Title of Certifying Official: _____

Signature: _____

Date: _____

SITING DETERMINATION

Development Siting Policy: Compliant Not Compliant N/A

Census Block Group GEOID20 (12 characters): _____

Percent 0-30% AMI Units in Census Block Group Including Proposed Project: _____

Will an alternative condition or exception be applied? Yes (explain below) ☐ No ☐

Notes:

Name of Determining Staff: _____

Title of Determining Staff: _____

Date: _____