Attachment I

DEVELOPMENT SUMMARY FORM MHSA Housing Program

Development Information

County Mental Heal	th Department:	Los Angeles	County	/	
Name of Developme					ing
Site Address:to b					_ _
City: Palmdale	or Lancaster	State: _	CA	_ Zip: _	TBD
Development Spons	or <u>Swarthy V</u>	Vorld Societies	, Inc		
Development Development	oper Swarthy V	Vorld Societies	, Inc.(S	WS)	_
Primary Service Pro	vider <u>SWS ar</u>	nd LA County D	MH		
New Construction					
Acquisition/Rehab	litation of an e	xisting structu	ıre		
Type of developmen	t: Shared Hous	sing			
Type of building: single family home					
	or small apa	rtment building	g hous	ing fiv	e or less tenants
Total number of unit Total cost of the dev Amount of MHSA fu Request MHSA Fun Other Rental Subsic	relopment nds requested _ ds for Capitalize	\$738,000 \$738,000 ed Operating Su			
Target Population (p Adults √ Transition-Age Yout Children Older Adults		that apply):			
County Contact					
County Contact Name and Title:	Raina Turnor	Division Chief			
Phone Number:					
Email:	rturner@dmh.la				_
		iccurry, gov			