

**Disclosure Pursuant to the
City of Pasadena Taxpayer Protection Act
Pasadena City Charter, Article XVII**

- I. Does the value of this application/project *have the potential* to exceed \$25,000? | Yes | No (Applicant must mark one)
- II. Is the application being made on behalf of a government entity? | Yes | No
- III. Is the application being made on behalf of a non-profit 501(c) organization? | Yes | No
If yes, please indicate the type of 501(c) organization: | 501(c)(3) | 501(c)(4) | 501(c)(6)

Applicant's name: COMMUNITY ARMS, LP Date of Application: 8/15/16

Owner's name: COMMUNITY BIBLE COMMUNITY DEVELOPMENT CORPORATION Contact phone number: (626) 996-0683 / (626) 487-2768
(for questions regarding this form) CELL (626) 399-8016

Project Address: 151-169 E. ORANGE GROVE BLVD. PASADENA, CA 91103 ACT #

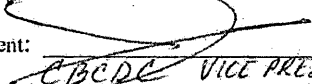
APN: 5725-010-042

Project Description: 133 UNIT MULTI-FAMILY AFFORDABLE HOUSING COMPLEX

IV. Applicant and Property Owner must disclose all joint owners, trustees, directors, partners, officers and those with more than a 10% equity, participation or revenue interest in owner and/or project. If any of these are an organization/entity, include the name of the organization/entity and the first and last names of all parties of interest of that organization/entity. (List all parties below and use additional sheets as necessary, or provide all parties on an attachment) Please print legibly.
Have any additional sheets or an attachment been provided? | Yes | No

Names of Owner(s), Trustees, Directors, Partners, Officers of Owner/Project	Names of Owner(s), Trustees, Directors, Partners, Officers of Owner/Project (continued)	Those with more than a 10% equity, participation or revenue interest in Owner and/or project
<u>ALDEN TORCH FIN'L C/O CENTERLINE LIMITED PARTNERSHIP, III LP</u>		

I hereby certify that I am the owner or designated agent and that the statements and answers contained herein, and the information attached, are in all respects true, accurate and complete to the best of my knowledge and belief.

Signature of Owner or Designated Agent:  Date: 8/15/16
CBCDC VICE PRESIDENT

For Office Use Only

Type of Application: | Variance (all types) | Adjustment Permit | Sign Exception | Temporary Use Permit | Expressive Use Permit
| Conditional Use Permit (excluding Master Plan) | Master Plan Amendment | Planned Development | Other

Assigned Planner: _____ PLN#: _____

Attached Address: _____ | No Attached Address

Appealed: | Yes | No Appeal PLN# _____ | Application Withdrawn

Final Decision: | Approved | Denied Decision Date: _____ Decision Maker: _____
(Name and Title, or Name of Commission/Committee)

Votes in favor (please print):

