

CERTIFICATION  
For Implementation of  
Regulatory Reform Activities  
Required by S.H.I.P.

On behalf of City of Gainesville, I hereby certify that the following information is true and accurate as of the date of submission:

- 1) Permits as defined in s.163.3164(7) and (8)\* for affordable housing projects are expedited to a greater degree than other projects; and
- 2) There is an ongoing process for review of local policies, ordinances, regulations, and plan provisions that increase the cost of housing prior to their adoption.
- 3) The cumulative cost per newly constructed housing per housing unit, from these actions for \*\*FY 2010-2011 is estimated to be \$ -0-.
- 4) The cumulative cost per rehabilitated housing per housing unit, from these actions for \*\*FY 2010-2011 is estimated to be \$ -0-.

Neoncia L. Andrews  
Witness

Date 9/13/11

Craig Lowe  
Chief Elected Official

Craig Lowe, Mayor  
(Type) Name and Title

Kimberly Sweigard  
Witness

Date 9-12-11

Russ Blackburn  
County/City Administrator

Russ Blackburn, City Manager  
(Type) Name and Title

Or  
[Signature] Date 9/13/11  
Attest (Seal)

\* 163.3164(7) of the Florida Statutes: "Development order" means any order granting, denying, or granting with conditions an application for a development permit. 163.3164(8) of the Florida Statutes: "Development permit" includes any building permit, zoning permit, subdivision approval, rezoning, certification, special exception, variance, or any other official action of local government having the effect of permitting the development of land.

# CERTIFICATION

On behalf of City of Gainesville, I hereby certify that the information presented herein is true and accurate as of the date of submission.

Deanna L. Anderson Date 9/13/11  
Witness

Craig Lowe Date 9/13/11  
Chief Elected Official or Designee

[Signature] Date 9/13/11  
Witness

Craig Lowe, Mayor Date 9/13/11  
(Type) Name and Title

Or

\_\_\_\_\_  
Attest (Seal) Date \_\_\_\_\_

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## GENERAL INFORMATION

Name of Person to call regarding the **Annual Report** Form: Jacqueline Richardson, HCD Manager

Telephone Number: ( 352 ) 334-5026, Ext 8628 .

SHIP AR/07