



Levy County Board of County Commissioners Agenda Item Summary Form

1. **Name:** Gussie Boatwright
2. **Organization/Title/Telephone:** Levy County Affordable Housing Advisory Committee (AHAC)/ AHAC Chair/ 352-246-8580
3. **Meeting Date:** Tuesday, December 21, 2021
4. **Requested Motion/Action:**
Presenting Levy County Board of County Commissioners (BOCC) with the Levy County AHAC Affordable Housing Incentive Report.
5. **Agenda Presentation:** Yes No N/A
6. **Time Requested:** 10 minutes
(Request will be granted if Possible) allotted time not more than 15 minutes
7. **Is this Item Budgeted (If Applicable):** Yes No N/A
8. **If no, State Action Required:**
 - a. **Budget Action:**
 - b. **Financial Impact Summary Statement:**
 - c. **Detailed Analysis Attached**
 - d. **Budget Officer Approval:**

If approved enter date: Click or tap to enter a date.

9. **Background: (Why is the action necessary, and what action will be accomplished) (All supporting documentation must be attached if any)**

Florida Statutes, Sec 420.9072 requires municipalities receiving State Housing Initiative Partner (SHIP) Program funds create of an Affordable Housing Advisory Committee (AHAC). The AHAC comprises of citizens representing various sectors and have the responsibility of reviewing eleven incentive strategies centered on expanding the production of and preserving affordable housing. These reviews are conducted at public meetings throughout the year. At the conclusion of the review, these incentive strategies are voted on and the AHAC Incentive Report is presented to the Board of County Commissioners (BOCC). The Incentive Report acts as recommendations to the BOCC who having accepted the report will determine how they will proceed with the recommendations within.

The AHAC Incentive Report is also submitted to the State. It is one of the requirements for the County to continue receiving funding for State Housing Initiative Partner (SHIP) Program.

10. Recommended Approval

- a. **Department Director:** Yes No N/A
- b. **County Attorney:** Yes No N/A
- c. **County Coordinator:** Yes No N/A



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d. **Other:**

Yes

No

N/A