Community & Economic Development Department
Planning Division

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# UNIVERSITY AVENUE DENSITY TRANSFER PILOT PROGRAM
# REQUEST TO TRANSFER UNITS

On April 21, 2026, the City of Riverside adopted Resolution 31364, creating the University Avenue Density Transfer Pilot Program. This program allows eligible properties in the University Avenue Specific Plan Area to transfer units between each other, either through deposits/withdrawals from a bank or direct transfers, without needing a General Plan or Specific Plan Amendment. Use this form to request the transfer of units to or from your propert(ies) through the program. For additional information on the program, consult the University Avenue Density Transfer Pilot Program policy and factsheet documents.

## ELIGIBILITY CRITERIA (STAFF USE ONLY)

***"YES" must be selected for all questions, unless not applicable for the request.***

- Are all properties in the University Avenue Specific Plan area? ☐ YES ☐ NO

### Donor Sites

- Are the propert(ies) zoned or designated residential or mixed-use? ☐ YES ☐ NO ☐ N/A
- Are the propert(ies) not yet developed to their maximum residential capacity? ☐ YES ☐ NO ☐ N/A
- (For privately owned sites that are Sixth Cycle Housing Element sites): Were the propert(ies) approved for nonresidential development or residential development below maximum residential capacity after the Sixth Cycle Housing Element was adopted? ☐ YES ☐ NO ☐ N/A

### Receiver Sites

- Are the propert(ies) city-owned and/or Housing Element sites? YES ☐ NO ☐ N/A ☐

## REQUEST INFORMATION

This transfer is:

- ☐ For a new development project. Case #:_____
  - ☐ Developing ***below*** maximum residential capacity (a condition of approval for such development)
  - ☐ Developing ***above*** maximum residential capacity
- ☐ Not for a new development project (transferring the right to develop units only-no construction planned)

This transfer will:

- ☐ Deposit units into the development bank. Proposed # of units to be deposited: _____
- ☐ Withdraw units from the development bank. Proposed # of units to be withdrawn: _____
- ☐ Directly transfer units from one property to another. Proposed # of units to be transferred: _____

### Property-Specific Information:

Site Address 1:_____ Site APN _____

Contact Address_____ Contact Email _____ Phone Number:_____

FOR STAFF USE ONLY:

Zoning Designation_____ Land Use Designation_____ Current Land Use_____

Current # of Units_____ Proposed # of Units_____ Unit Capacity_____

☐ Donor Site ☐ Receiver Site (Receiver Sites Only): ☐ City-owned surplus site ☐ Housing Element site

Site Address 2:_____ Site APN _____

Contact Address_____ Contact Email _____ Phone Number:_____

FOR STAFF USE ONLY:

Zoning Designation_____ Land Use Designation_____ Current Land Use_____

Current # of Units_____ Proposed # of Units_____ Unit Capacity_____

☐Donor Site ☐Receiver Site (Receiver Sites Only): ☐ City-owned surplus site ☐Housing Element site

*[Attach additional sheets if necessary if there are other sites involved]*

## ADDITIONAL INFORMATION & SUBMITTAL REQUIREMENTS (RECEIVER SITES ONLY)

### Additional Information (if in conjunction with a development project):

- Does the project include any affordable units? ☐ YES ☐ NO
  - IF YES: # of units: _____ Affordability category of units, if not market-rate*:_____

* *Affordability categories (by % AMI):*
*Acutely Low:0-15%; Extremely Low:15.01-30%; Very Low: 30.01-50%; Low: 50.01-80%; Moderate: 80.01-120%*

Will this project use any density bonuses, concessions, or incentives available under RMC Chapter 19.545 (Density Bonus) or the California Government Code? ☐ YES ☐ NO

Type of bonus/concession/incentive:_____

Type of bonus/concession/incentive:_____

Type of bonus/concession/incentive:_____

*[If there are additional bonuses/concessions/incentives, add information on separate sheet]*

Total % density bonus requested:_____

### Submittal Requirements (if in conjunction with a development project):

☐ Preliminary site plan, drawn to scale, including building footprints, driveways, and parking layout

☐ Vicinity map

☐ Affordable housing agreement (if applicable)

☐ Developer agreement, any other materials required by the Successor Agency (if receiver sites are city-owned sites)

## ACKNOWLEDGEMENTS

***By providing your initials, you acknowledge that you have read and understand the following statements pertaining to your project.***

### For Donor Sites:

_____ (If donating to the bank as part of a development project): I understand that the transfer and surrender of my unbuilt units to the development bank is a condition of approval of development below the site(s) maximum residential capacity.

_____All donor sites: I understand that following approval of this request, the propert(ies) will be subject to deed restrictions, to run with the land, documenting the transfer and surrender of residential development rights.

### For Receiver Sites (if using bank method):

_____I understand that bank withdrawals are first-come, first-serve, and that if there are not enough units in the bank at the time of my application, my request may not be approved, or may not be approved for as many units as requested.

_____I understand that, if there are multiple, concurrent requests to withdraw from the bank, city-owned sites will have priority in withdrawing units over non-City-owned sites.

### For Donor and Receiver Sites (if using direct transfer method):

_____I understand that following approval of this request, the donor and receiver sites will be subject to a density transfer agreement, including a deed restriction, to run with the land, documenting the transfer and surrender of residential development rights for donor sites.

## APPLICANT INFORMATION

Firm/Company Name: _____

Contact Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Daytime Phone: _____ Mobile: _____

Email: _____

## BUSINESS/PROPERTY OWNER INFORMATION

Legal Property Owner Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Daytime Phone: _____ Mobile: _____

Email: _____

_____ _____

Property Owner Signature Date

## FOR STAFF USE ONLY

Planner's Initials _____ Submittal Date _____

Case Number* _____ Approve/Deny ☐ Approve, of units _____
☐ Approve Modified, # of units _____
☐ Deny, # of units _____

*If part of a development project