

JOINT HOUSING TASK FORCE

Grand Traverse County ■ City of Traverse City
Garfield Charter Township ■ East Bay Charter Township
Traverse City Housing Commission

In order to foster public-private-nonprofit partnerships, the following proclamation has been drafted to bring together interested parties from the public, private, and nonprofit sectors to address common housing goals:

Community-Wide Proclamation for Housing

WHEREAS, Grand Traverse County is one of the fastest growing areas in Michigan and is faced with several challenges in meeting the needs of its residents and businesses; and,

WHEREAS, the people of Grand Traverse County, particularly the urbanizing area in and around Traverse City, face limited housing options; and,

WHEREAS, the signed organizations wish to improve access to housing that meets the needs of residents in our communities; and,

WHEREAS, the signed organizations share a mutual interest in maximizing limited resources for the development of housing; and,

WHEREAS, the signed organizations have developed this proclamation for the purposes of greater collaboration, coordination, and success in the development of housing; and,

NOW IT IS HEREBY AGREED AS FOLLOWS:

The signed organizations agree to the following goals and objectives in order to meet community housing goals:

- ***Maintain lines of communication*** on housing issues and on shared housing efforts;
- ***Identify opportunities*** to work together;
- ***Partner on projects*** where there is mutual benefit;
- ***Leverage resources*** when feasible; and,
- ***Improve and coordinate processes*** that move projects forward to completion.

This proclamation is at-will and may be signed any organization interested in improving housing conditions and expanding housing options in Grand Traverse County. Nothing in this proclamation shall be construed as creating any legal relationship between the parties. This proclamation is a statement of intent to foster genuine and mutually beneficial cooperation.

POINTS OF CONTACT

For each organization, a point of contact:

Name
Title
Organization
Address
Telephone
E-mail

SIGNATORIES

For each organization:

Date
Signature
Signatory's name
Title
Organization name