



DEPARTMENT OF CORRECTIONS AND REHABILITATION  
CORRECTIONS STANDARDS AUTHORITY

**2011 LOCAL JAIL CONSTRUCTION FINANCING PROGRAM  
AB 900 - PHASE II - APPLICATION FORM**

*This document is not to be reformatted.*

**SECTION 1: PROJECT INFORMATION**

A: APPLICANT INFORMATION				
COUNTY NAME Sutter		AMOUNT OF STATE FINANCING REQUESTED IN THIS APPLICATION \$ 9,741,000		
SMALL COUNTY (200,000 OR UNDER GENERAL COUNTY POPULATION) <input checked="" type="checkbox"/>	MEDIUM COUNTY (200,001 - 700,000 GENERAL COUNTY POPULATION) <input type="checkbox"/>	LARGE COUNTY (700,001 + GENERAL COUNTY POPULATION) <input type="checkbox"/>		
IS THIS COUNTY RELINQUISHING A CURRENTLY HELD AB 900 PHASE I CONDITIONAL AWARD? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		IS THIS COUNTY SUBMITTING MORE THAN ONE APPLICATION FOR PHASE II FINANCING? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
B: BRIEF PROJECT DESCRIPTION				
FACILITY NAME Sutter County Jail				
PROJECT DESCRIPTION Main Jail Expansion Project				
STREET ADDRESS 1077 Civic Center Boulevard				
CITY Yuba City		STATE CA	ZIP CODE 95993	
C. SCOPE OF WORK - INDICATE FACILITY TYPE (II, III or IV) AND CHECK ALL BOXES THAT APPLY.				
FACILITY TYPE (II, III or IV) II	<input type="checkbox"/> NEW STAND-ALONE FACILITY	<input checked="" type="checkbox"/> RENOVATION/REMODELING	<input checked="" type="checkbox"/> ADDING BEDS AT EXISTING FACILITY	
D. BEDS ADDED. Provide the number of CSA-rated beds and non-rated special use beds that will be added as a result of the project. Provide the cumulative total number of beds added as a result of the project.				
	A. MINIMUM SECURITY BEDS ADDED	B. MEDIUM SECURITY BEDS ADDED	C. MAXIMUM SECURITY BEDS ADDED	D. SPECIAL USE BEDS
Number of beds added		14	28	
TOTAL BEDS (A+B+C+D)	42			