

2017 REALLOCATION Application
for NEW Permanent Housing and Rapid Rehousing
(Response to Rating Criteria)

IMPORTANT: Using this form, limit your response to a total of 6 pages to complete the following narrative information in Ariel 11 font. This limitation does not include the 2 pages of budget forms on the last two pages of this document. Any pages of narrative more than 6 will not be reviewed by the Raters and will not be considered in the rating process.

1. Applicant_____
2. Sub recipient (if applicable)_____
3. Name of Project_____
4. Location of Project_____
5. Primary Contact/ Telephone/E-mail _____
6. Major other Sponsors/roles_____

7. Description of the Project (PSH for CH, PSH DedicatedPlus RRH or TH-PH/RRH? Include description of the housing, type of program (rental assistance, leasing, operations, supportive services, etc.), number of units in the project, households to be served, services to be provided, population to be served, organizations involved and what they will provide, goals of the project, etc.). Indicate whether this is an expansion of an existing renewal-eligible project. Provide information so the Raters are able to understand the scope, substance and potential impact of the project.

A. Information needed for Selected Threshold Criteria

1. Applicant agrees to operate the program using a Housing First model Yes___No___
2. Applicant agrees to serve vulnerable homeless populations (see HUD CPD Notice 14-012). Yes___No___
3. Applicant agrees to operate the program as "low barrier" program Yes___No___
4. Applicant is participating (or agrees to participate) in the Coordinated Entry and Assessment System. Yes___No___

B. Rating Criteria -Up to 120 points. See the RFP Notice of Invitation Bonus Fund Scoring Criteria for full description of the criteria). Indicate your response below:

1. Prioritizing Highest Need Populations/Vulnerable Populations (0-20 Points)
2. Housing First (0-20 Points)
3. Mainstream Resources (0-20 Points)
 - a. Activities to identify and enroll participants (0-10)
 - b. Use of Medicaid-financed services (0-10)
4. Leveraging (0-5 Points No narrative required but supply letters)
5. Readiness (0-10 Points)
6. Capacity (0-10 Points)

7. Cost Effectiveness (0-5 Points - No narrative required)
 8. Soundness of the Approach (0-20 Points)
 9. Applicant from County without Current Grant (0 or 5 Points – No narrative needed)
 10. Extent to which project supports current HUD Policy Priorities (0-5 Points)
- C. Threshold requirements with required narratives
1. Projects serving persons with disabilities must provide a brief statement on how they will ensure that persons with disabilities can interact with other persons without disabilities.

2017 REALLOCATION FUNDS ESTIMATED 12 MONTH BUDGET

APPLICANT: _____ PROJECT: _____

| Proposed Activities | Dollars Grant Request | Match | Totals |
|---|-----------------------|---|---|
| 1. Leased Units | | None needed | |
| 2. Leased Structures | | None needed | |
| 3. Long-Term Rental Assistance | | | |
| 4. Housing Operations (not for Rental Assistance) | | | |
| 5. Supportive Services (including Case Management – see detail on next page). | | | |
| 6. Grant Request (Subtotal lines 1 through 4) | | Total Match (AT LEAST 25% OF SHP REQUEST) | Total Budget (Total SHP Request + Total Cash Match) |
| 7. Administrative Costs (Up to 7% of line 5) | | | |
| 8. Total SHP Request (Total lines 6 & 7) | | | |

NOTE:

- **The Grant Period is 12 months. Applicants awarded funds can expect to receive a HUD contract in early 2018.**
- **The maximum project grant request is equal to the amount of the funds reallocated from the renewal-eligible grant being reduced or phased out.**
- **The maximum budget for Administrative Costs is 10% of the Grant Request (line #6).**
- **Applicants are encouraged to develop a program scope that maximizes the number of homeless persons that can be served within available resources.**
- **Applicants awarded grants in the competition are renewable on an annual basis, along with all other existing renewing grants in the Continuum.**
- **Capital costs (acquisition, construction and rehabilitation) are not eligible activities in the 2017 competition.**

| Eligible Operations Costs | |
|----------------------------------|----------------------|
| Eligible Item | Grant Request |
| Maintenance and Repair | |
| Property Taxes and Insurance | |
| Replacement Reserve | |
| Building Security | |
| Electricity, Gas & Water | |
| Furniture | |
| Equipment (lease or buy) | |
| Total | |

| Eligible Supportive Services | |
|-------------------------------------|----------------------|
| Eligible Item | Grant Request |
| Assistance with Moving Costs | |
| Case Management | |
| Housing Search/Counseling Services | |
| Life Skills | |
| Outreach Services | |
| Transportation | |
| Utility Deposits | |
| Total | |