

# CoC New Project Application Detailed Instructions:

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**Fiscal Year 2017 CoC Program Competition**



U.S. Department of Housing and Urban Development  
Community Planning and Development  
Office of Special Needs Assistance Programs

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## Table of Contents

Introduction .....	1
What’s New for CoC New Projects in FY 2017 .....	1
Project Application Screens in <i>e-snaps</i> .....	3
All Projects-Part 1: HUD Forms and Certifications.....	5
Updating Project Applicant Profile Instructions .....	5
SF-424: Application for Federal Assistance; Screens 1A-1F.....	6
HUD-2880: Applicant/Recipient Disclosure/Update Report; Screen 1G .....	8
HUD-50070: Certification of a Drug Free Workplace; Screen 1H.....	10
Certification Regarding Lobbying; Screen 1I .....	10
SF-LLL: Disclosure of Lobbying Activities; Screen 1J.....	11
All Projects Part 2: Subrecipient and Recipient Information and Experience .....	11
All Projects Part 3 through Part 6: Project Types .....	12
All Projects Part 7: Attachments and Certification .....	13
All Projects Part 8: Submission Summary .....	14
Permanent Housing (PH) – Permanent Supportive Housing (PSH) New Project Applications .....	16
PH-PSH Part 3: Project Information .....	16
PH-PSH Part 4: Housing and Services.....	22
PH-PSH Part 5: Participants and Outreach .....	26
PH-PSH Part 6: Budgets .....	29
Permanent Housing (PH) – Rapid Re-housing (RRH) New Project Applications .....	38
PH-RRH Part 3: Project Information .....	38
PH-RRH Part 4: Housing and Services.....	43
PH-RRH Part 5: Participants and Outreach .....	46
PH-RRH Part 6: Budgets.....	49
Joint Transitional Housing (TH) and Permanent Housing (PH) – Rapid Re-housing (RRH) New Project Applications .....	56
Joint TH and PH-RRH Part 3: Project Information .....	56
Joint TH and PH-RRH Part 4: Housing and Services.....	59
Joint TH and PH-RRH Part 5: Participants and Outreach.....	63
Joint TH and PH-RRH Part 6: Budgets.....	66
Supportive Services (SSO) – Coordinated Entry (CE) New Project Applications .....	76
SSO-CE Part 3: Project Information .....	76
SSO-CE Part 6: Budgets .....	79
Dedicated Homeless Management Information Systems (HMIS) New Project Applications.....	83
HMIS Part 3: Project Information.....	83
HMIS Part 4: Implementation of HMIS.....	85
HMIS Part 6: Budgets .....	87

# Detailed Instructions for Completing the FY 2017 New Project Applications

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## Introduction

This document provides supplementary instructions for organizations completing the Fiscal Year (FY) 2017 Continuum of Care (CoC) new project application for funding available through the Notice of Funding Availability (NOFA) for the FY 2017 CoC Program Competition. It provides detailed information for each field within the new project application to help applicants unfamiliar with the process understand each question in the electronic grants management system called *e-snaps*. It also provides updates for longtime project applicants regarding application changes for FY 2017. For a technical walkthrough of the new project application in *e-snaps*, with screenshots, refer to the New Project Application Instructional Guide located on the HUD Exchange at: [FY 2017 Continuum of Care \(CoC\) Program Competition: Funding Availability](#) and [CoC Program Competition: e-snaps Resources](#).

**Before reading these detailed instructions**, review and have ready access to the following documents to ensure that projects are consistent with the FY 2017 CoC Program Competition:

- [FY 2017 CoC Program Competition NOFA](#);
- [The CoC Program interim rule at 24 CFR part 578](#);
- [The McKinney-Vento Act, as amended by the HEARTH Act](#); and
- Local CoC Program policy guidelines for submitting new project applications to the CoC, **or** its designated committee **or** subcommittee.

The structure of these instructions is designed to mirror the 8 parts of the new project application listed in Table 1 on the following page.

- Parts 1 and 2 are the same regardless of your project application type;
- The visibility of *e-snaps* screens and questions for Parts 3 through 6 are largely dependent on your project type and are separated for each of the five new project types: Permanent Housing-Permanent Supportive Housing (PH-PSH), Permanent Housing-Rapid Rehousing (PH-RRH), Joint Transitional Housing and Permanent Housing-Rapid Rehousing (Joint TH and PH-RRH), Supportive Services Only for Coordinated Entry (SSO-CE), and Homeless Management Information Systems (HMIS); and
- Parts 7 and 8 are the same regardless of your project application type.

For questions about your new project application and how it is affected by HUD rules, regulations, and policy, first contact your CoC **or** the CoC's Collaborative Applicant for clarification. When in doubt, submit a question to the HUD Exchange with the category selection of *e-snaps* in Ask a Question (AAQ) at [www.hudexchange.info/get-assistance/](http://www.hudexchange.info/get-assistance/) and selecting *e-snaps* in response to the field "**My question is related to.**" If another category is selected (e.g., CoC Program) the CoC Program Competition question will be rerouted to the *e-snaps* AAQ desk which will cause a delay in response from HUD. Project applicants can also find additional information regarding the CoC Program at [www.hudexchange.info/coc](http://www.hudexchange.info/coc).

## What's New for CoC New Projects in FY 2017

- **HUD Forms and Certifications:** HUD added the following forms directly into the project application: HUD-2880: Applicant/Recipient Disclosure/Update Report, HUD-50070: Certification for a Drug Free Workplace, Certification Regarding Lobbying and SF-LLL: Disclosure of Lobbying Activities. To accommodate applicants with more than one project, HUD has also built the HUD-2880 into the project applicant profile so that applicants only need to fill out most of the form's fields once.

## FY 2017 CoC Program New Projects Detailed Instructions

- **Joint TH and PH-RRH Component Project:** Per the FY 2017 CoC Program Competition, CoCs may create new “**Joint TH and PH-RRH Component**” projects. A Joint TH and PH-RRH component project includes two existing components—transitional housing and rapid re-housing—in a single project to serve individuals and families experiencing homelessness. These projects will provide low-barrier, temporary housing while individuals and families quickly move to permanent housing with a seamless program design. Eligible Joint TH and PH-RRH project cost categories include:
  1. capital costs (i.e., new construction, rehabilitation, **or** acquisition) to **provide transitional housing**;
  2. leasing of a structure **or** units, and operating costs to **provide transitional housing**;
  3. short- **or** medium-term tenant-based rental assistance to **provide the rapid re-housing portion of the project**;
  4. supportive services;
  5. operating costs to **provide transitional housing**;
  6. HMIS; and
  7. project administrative costs.

HUD requires that project applications for **Joint TH and PH-RRH** component projects demonstrate the project will have the capacity to provide both transitional housing assistance and rapid re-housing assistance as needed to each program participant. A participant may choose to receive CoC Program funds to support only the TH **or** PH-RRH portion of the project, but the recipient **or** subrecipient must demonstrate that it is able to make both types of assistance available to the participant. Review Section III.A.3.h. of the FY 2017 CoC Program Competition NOFA for a complete list of requirements.

- **DedicatedPLUS Project:** A DedicatedPLUS project is a permanent supportive housing (PH-PSH) project where 100 percent of the beds are dedicated to serve individuals with disabilities and families in which one adult **or** child has a disability, including unaccompanied homeless youth. Closely review pages 20-21 of this guide and FY 2017 NOFA Section III.A.3.b. and III.A.3.d.

Project applicants applying for PH-PSH projects will be required to select either “**DedicatedPLUS**” **or** “**100% Dedicated**” on Screen 3B to indicate whether they will serve persons meeting the criteria outline above **or** where 100 percent of the beds are dedicated to chronic homelessness as defined in 24 CFR 578.3.

- **New Expansion Projects:** Project applicants may apply for a new project that intend to expand an existing eligible renewal project that will increase the number of units in the project, allow the recipient to increase the number of units in the project, **or** allow the recipient to serve additional persons. Eligible component types include PH-PSH, PH-RRH, SSO-CE, and HMIS. Project applicants that intend to use a new expansion project to expand an eligible renewal project must provide the eligible renewal grant number on Screen 3C and clearly indicate how the new project application will expand units, beds, services, persons served, **or** in the case of HMIS projects, the current HMIS grant activities for the CoC’s geographic area. If HUD conditionally selects both the existing renewal project and the new expansion project for funding, HUD will combine both projects into one grant during the post-award grant agreement process. However, if HUD does not select the renewal project for conditional award, HUD will reject the new expansion project. Closely review Section II.B.4. of the FY 2017 CoC Program NOFA for a complete list of requirements concerning new expansion projects.

Project applicants can still apply for traditional expansion projects that expand an existing effort that is **not** currently funded by an existing eligible renewal project. To apply for a new **or** traditional expansion project, follow the instructions in this guide for the project component that matches the renewal project being expanded and answer the project expansion questions on the 3C Expansion screen.

**Note:** Because expansion grants can only expand projects that share the same component, applicants are prohibited from applying for project expansion grants to create a new Joint TH and PH-RRH component project. This means, for example, that an applicant that has an existing project may not apply for PH-RRH funds to expand an existing TH project with the intention of creating a new Joint TH

## FY 2017 CoC Program New Projects Detailed Instructions

and PH-RRH component project. In addition, existing TH projects may not apply for Joint TH and PH-RRH component projects to expand an existing TH project. Creating a Joint TH and PH-RRH component project must be done entirely through reallocation **or** the permanent housing bonus.

- **Caution for new projects created through the reallocation process.** CoCs may only reallocate eligible renewal projects that have previously been renewed under the CoC Program **or** projects funded under the Supportive Housing Program **or** Shelter Plus Care Program that are eligible for first-time renewal in the FY 2017 CoC Program Competition (see Section II.B.14. of the FY 2017 CoC Program NOFA for more information).

### Project Application Screens in *e-snaps*

In the table below all white cells marked with an “**X**” indicate the corresponding screen can be accessed depending on the responses provided in the project application. The grey cells indicate that the corresponding screens cannot be accessed by project applicants requesting funding for the associated project type.

## FY 2017 CoC Program New Projects Detailed Instructions

**Table 1: New Project Application Screens in *e-snaps***

Screen Title	New				
	PH-PSH	PH-RRH	Joint TH & PH-RRH	SSO-CE	HMIS
Before Starting	X	X	X	X	X
<b>Part 1 – SF-424</b>					
1A. Application Type	X	X	X	X	X
1B. Legal Applicant	X	X	X	X	X
1C. Application Details	X	X	X	X	X
1D. Congressional District(s)	X	X	X	X	X
1E. Compliance	X	X	X	X	X
1F. Declaration	X	X	X	X	X
1G. HUD-2880	X	X	X	X	X
1H. HUD-50070	X	X	X	X	X
1I. SF-LLL	X	X	X	X	X
<b>Part 2 – Subrecipient Information</b>					
2A. Subrecipients	X	X	X	X	X
2B. Experience	X	X	X	X	X
<b>Part 3 – Project Information</b>					
3A. Project Detail	X	X	X	X	X
3B. Description	X	X	X	X	X
3C. Expansion	X	X	X	X	X
<b>Part 4 – Housing Services and HMIS</b>					
4A. Supportive Services for Participants	X	X	X		
4A. HMIS Standards					X
4B. Housing Type and Location	X	X	X		
<b>Part 5 – Participants and Outreach</b>					
5A. Households	X	X	X		
5B. Subpopulations	X	X	X		
5C. Outreach	X	X	X		
<b>Part 6 – Budget Information</b>					
6A. Funding Request	X	X	X	X	X
6B. Acquisition/Rehabilitation/New Construction	X		X (TH portion)		
6C. Leased Units	X		X		
6D. Leased Structures	X	X	X		
6E. Rental Assistance	X	X	X		
6F. Supportive Services	X	X	X	X	
6G. Operating	X		X		
6H. HMIS	X	X	X		X
6I. Sources of Match	X	X	X	X	X
6J. Summary Budget	X	X	X	X	X
<b>Part 7 – Attachments and Certification</b>					
7A. Attachments	X	X	X	X	X
CoC Rejection Letter	X	X	X	X	X
Consolidated Plan Cert	X	X	X	X	X
7B. Certification	X	X	X	X	X
<b>Part 8 – Submission Summary</b>					
8A. Notice of Intent to Appeal	X	X	X	X	X
8B. Summary	X	X	X	X	X

## FY 2017 CoC Program New Projects Detailed Instructions

### All Projects-Part 1: HUD Forms and Certifications

HUD requires CoC Program project applicants to submit several forms in the FY 2017 CoC Program Competition in addition to the SF-424 in Part 1 of the project application. Project applicants must complete all Part 1 forms before Parts 2 through 7 will be visible. Incomplete Part 1 application screens will be highlighted on the “**8B. Submission Summary**” screen.

Most of the information in Part 1 will automatically populate from the Project Applicant Profile. The fields on Part 1 screens that require project applicant input, are identified with an asterisk (\*). All other fields, including those in white or shaded in gray, are not available for edit and are either not applicable, standard for all project applications, or populated with information from the Project Applicant Profile or from other *e-snaps* data. It is the project applicant’s responsibility to review populated information and ensure accuracy. Refer to the [Updating Project Applicant Profile Instructions](#) in the box below or [Project Applicant Profile Instructional Guide](#) available at [www.hudexchange.info/resource/2958/instructions-for-updating-the-project-applicant-profile/](http://www.hudexchange.info/resource/2958/instructions-for-updating-the-project-applicant-profile/).

**Part 1 of the project application includes the following forms:**

**SF-424: Application for Federal Assistance;** Screens 1A-1F

**HUD-2880: Applicant/Recipient Disclosure/Update Report;** Screen 1G. Project applicants will enter data for this form in Project Applicant Profile and the remaining fields will automatically populate with information from other screens within the project application. Once a HUD-2880 is completed in the Project Applicant Profile, this information will populate all the project applicant’s *e-snaps* applications, easing the burden for project applicants with multiple project applications.

**HUD-50070: Certification for a Drug Free Workplace;** Screen 1H

**Certification Regarding Lobbying;** Screen 1I; and

**SF-LLL: Disclosure of Lobbying Activities;** Screen 1J

**Project applicants must update their Project Applicant Profile, including the HUD-2880, prior to beginning Part 1 of the application(s).**

Parts 2 through 7 of the Project Application are not visible until all mandatory fields in all Part 1 screens are completed.

#### **Updating Project Applicant Profile Instructions (Link to full instructions is above.)**

- To update your Project Applicant Profile, log into *e-snaps* and click on "**Applicants**" in the left menu of the *e-snaps* main screen. If project applicants are already "**within**" a project application from the "**Submissions**" link **project applicants must first EXIT** the application by clicking on "**Back to Submissions List.**" Then use the "**Applicants**" link in the left menu as noted above.
- After "**Applicants**" is open, click on the folder  icon under "**Open.**" The primary applicant profile screen list will appear in the left menu.
- Begin by opening up the forms for editing by clicking on "**6. Submission Summary**" from the left menu and then on the "**Edit**" button toward the bottom of the screen. Once in edit mode, the entire Profile can be updated, including the new HUD-2880 screen.
- After project applicants have completed all updates and screens have been "**Saved,**" return to "**6. Submission Summary**" and click the "**Complete**" button toward the bottom of the screen.
- Next, click on "**Back to Applicants List**" in the left menu, then click on "**Submissions**" in the left menu of the *e-snaps* main screen to open a project application. The updated profile information should now appear in all Part 1 forms. If information is not showing as updated, most likely one of the steps above was not completed correctly.

## FY 2017 CoC Program New Projects Detailed Instructions

### SF-424: Application for Federal Assistance; Screens 1A-1F

#### Screen 1A. SF-424 Application Type

Only field 5b and the checkbox that follows it on Screen 1A are editable, all other fields are read-only.

1. **Type of Submission.** No action required; the field is read-only.
2. **Type of Application.** This field should indicate “**New.**” when the project applicant selected a funding opportunity before opening the application, they determined if the project application they are completing is: Renewal, New, CoC Planning, **or** UFA Costs. **If** the field does not indicate “**New,**” return to the *e-snaps* **Funding Opportunity** screen and create a project application using the funding opportunity for “**New**” project.
3. **Date Received.** No action required. This read-only field populates automatically with the current date. The date that the project applicant clicks “**Submit**” on Screen 8B will be the final date captured in *e-snaps*.
4. **Applicant Identifier.** No action required; leave this field blank.
- 5a. **Federal Entity Identifier.** No action required; leave this field blank.
- 5b. **Federal Award Identifier.** No action required; leave this field blank.
6. **Date Received by State.** No action required; leave this field blank.
7. **State Application Identifier.** No action required; leave this field blank.

#### Screen 1B. SF-424 Legal Applicant

All fields on Screen 1B populate from the *e-snaps* Project Applicant Profile and are read-only. Project applicants can exit and return to the **Project Applicant Profile** to correct errors identified while reviewing Screen 1B.

8. **Applicant.** Ensure the accuracy of the organization’s legal name, address, and contact person. The legal name must match the name on the organization’s articles of incorporation or other legal governing authority. Surrogate names, abbreviations, or acronyms should not be listed.

**Note:** HUD will contact the person listed in field “**F**” regarding curable deficiencies **or** other matters concerning the project application using the information in the “**Alternate Contact**” included in the **Project Applicant Profile**. It is a best practice that the designated contact person be the person most knowledgeable about the application. This might be, for example, the program manager, financial analyst, **or** grant writer. This may **or** may not be the organization’s authorized representative; however, HUD recommends organizations provide a second contact person so that multiple contacts are available.

#### Screen 1C. SF-424 Application Details

All items on Screen 1C populate from the Project Applicant Profile or with a set value and screen is read-only. To make changes update the Project Applicant Profile.

9. **Type of Applicant.** No action required. This field will identify how the project applicant is legally organized and populates from the organization type selected in the *e-snaps* Project Applicant Profile. **Only eligible project applicants will be considered for funding consideration which include, nonprofits, state and local governments, and instrumentalities of state or local government.**
10. **Name of Federal Agency.** No action required.
11. **Catalog of Federal Domestic Assistance (CFDA) Title.** No action required. The CFDA title refers to the specific HUD program under which assistance is requested. The CoC Program, CFDA Number is 14.267.
12. **Funding Opportunity Number.** No action required.
  - **Funding Opportunity Title.** No action required.

## FY 2017 CoC Program New Projects Detailed Instructions

**13. Competition Identification Number.** Not applicable.

- **Competition Identification Title.** Not applicable.

### Screen 1D. SF-424 Congressional Districts

Some of the items on Screen 1D are required, some are optional, and others are populated and read-only.

- 14. Area(s) affected by the project (State(s) only).** Indicate the state(s) in which the proposed project will operate and serve homeless persons. **Note:** The state(s) selected will determine the geographic areas available on Screen 4B. Housing Type and Location, for PH, TH, and SH projects.
- 15. Descriptive Title of Applicant's Project.** No action required. This field populates with the name entered when the project applicant created the project from the “**Projects**” form in *e-snaps*. To change the name, leave the application, go back to the “**Projects**” form, identify the correct project on the list of projects, open the project and edit the name. Once the application is reopened from the “**Submissions**” form, the new project name will appear.
- 16. Congressional District(s).** Indicate the congressional district(s) in which the proposed project is operating. HUD uses the district(s) selected here to report certain project data and award amounts to members of Congress. The following website can assist with locating the correct congressional districts: [www.nationalatlas.gov/printable/congress.html](http://www.nationalatlas.gov/printable/congress.html).
- 16a. Applicant.** No action required and this field cannot be edited. The congressional district(s) in which the project applicant operates populates on this screen from the **Project Applicant Profile**.
- 16b. Project.** Identify the congressional district(s) in which the project is operating. For new project applications, identify the district(s) in which the proposed project is expected to operate.
- 17. Proposed project.** Provide the expected operating start and end dates for the proposed project period using the calendar fields provided. If a project application is conditionally awarded, the official operating dates will be recorded in HUD's electronic Line of Credit Control System (*eLOCCS*) and will be set to the first day of the month according to the month of the first project expense.
- 18. Estimate funding .** No action required. The requested funding amounts must be identified in Part 6 of the application.

### Screen 1E. SF-424 Compliance

Project applicants must complete the fields on Screen 1E.

- 19. Executive Order 12372.** Project applications submitted in the CoC Program Competition are subject to the provisions of Executive Order (EO) 12372, which allows states the option to review applications for projects operating within their states and requesting assistance under certain federal programs. For a list of states that have chosen to review applications, along with State Points of Contact (SPOC) visit [http://www.whitehouse.gov/omb/grants\\_spoc](http://www.whitehouse.gov/omb/grants_spoc).

For projects proposing to serve persons in more than one state, the project applicant should contact the SPOC of each affected state as early as possible to alert them to the application and receive any necessary instructions on the State process used under this EO. Project applicants should allow time for the state's review process to occur prior to submitting their funding application. In cases where the SPOC has not reviewed an application prior to the application submission deadline, project applicants should submit the application to meet the application deadline.

On Screen 1E, select “**a**” or “**b**” to indicate whether the application has been selected for review by the state(s) in which the project operates (or will operate). If “**a**,” indicate the date on which the application was made available to the state(s). Option “**c**” on SF-424 is not an appropriate selection for applications submitted under the CoC Program Competition.

- 20. Delinquent debt.** On Screen 1E, select “**Yes**” or “**No**” to indicate whether the project applicant owes debt to any federal agency. It is HUD's policy, consistent with 31 U.S.C. 3720B and 28 U.S.C. 3201(e), that project applicants with an outstanding federal debt will not be eligible to receive

## FY 2017 CoC Program New Projects Detailed Instructions

HUD funds, unless: (1) a negotiated repayment schedule is established and the repayment schedule is not delinquent, or (2) other arrangements satisfactory to HUD are made prior to the award of funds by HUD. The explanation of any debt owed and the repayment arrangements must be provided on Screen 1E. If arrangements satisfactory to HUD cannot be completed within 90 days of notification of the conditional award, HUD will rescind the conditional award with a project applicant.

### Screen 1F. SF-424 Declaration

Screen 1F must identify the person authorized to act for the project applicant organization and to assume the obligations imposed by the federal laws, program regulations, NOFA requirements, and conditions for a grant or grant application, including the applicable federal regulations. All fields are read-only and populate from the **Authorized Representative** listed in the **Project Applicant Profile**. However, project applicants may update the Project Applicant Profile at any time to correct errors.

**On Screen 1F, project applicants must click the checkbox next to the “I agree” statement.** By checking the box, the project applicant agrees to be bound by all terms and conditions associated with the funding request, and certifies that data and content in the application (including all attachments) are true and correct.

### HUD-2880: Applicant/Recipient Disclosure/Update Report; Screen 1G

All project applicants applying for HUD competitive assistance must submit a HUD-2880. The HUD-2880 resides in the Project Applicant Profile and as a “**read-only copy**” within each project application on Screen 1G. Project applicants can update inaccurate information appearing on Screen 1G in the Project Applicant Profile, then update each portion of your Profile as needed.

**Note:** If project applicants are seeing inaccurate information in the form on Screen 1G be sure to follow the brief “**Updating Project Applicant Profile Instructions**” above or the [Project Applicant Profile Instructional Guide](http://www.hudexchange.info/resource/2958/instructions-for-updating-the-project-applicant-profile/) available at [www.hudexchange.info/resource/2958/instructions-for-updating-the-project-applicant-profile/](http://www.hudexchange.info/resource/2958/instructions-for-updating-the-project-applicant-profile/).

### Applicant/Recipient Disclosure/Update Report form HUD-2880 for CoC Program project applicants

- 1. Applicant/Recipient Name, Address, and Phone.** No action required. This information populates from the “**Authorized Representative**” screen of the Project Applicant Profile. Update the “**Authorized Representative**” screen in the Project Applicant Profile to correct this information, as needed.
- 2. Employer ID Number (EIN).** No action required. This information populates from the “**Authorized Representative**” Screen of the Project Applicant Profile. Update the “**Authorized Representative**” screen in the Project Applicant Profile to correct this information, as needed.
- 3. HUD Program.** No action required. This information populates with “**Continuum of Care Program**” and cannot be edited.
- 4. Amount of HUD Assistance Requested/Received.** No action required. This field remains blank at the Project Applicant Profile level and populates within the application with the total requested amount from the application’s “**Summary Budget**” Screen for each individual application. Once the Summary Budget total is accurate upon submission, this amount will also be accurate.
- 5. State the name and location (street address, City and State) of the project or activity.** No action required. This field populates with the following message; “**Refer to project name, addresses and grant number entered into the attached project application.**” The information this message refers to is located on the project application screen 1B. SF-424 Legal Applicant, 3A. Project Detail, and 4B. Housing Type and Location.

**Part I. Threshold Determinations–Project Applicants Only.** Part I provides information to help the project applicants determine whether the remainder of the form must be completed.

## FY 2017 CoC Program New Projects Detailed Instructions

1. **Are you applying for assistance for a specific project or activity?** No action required. This information Populates with “Yes.”
2. **Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9. Within the Project Applicant Profile, select “Yes” if the combined total amount of all your agencies annual CoC Program project applications are more than \$200,000. Select “No” if the combined total amount of all your agencies annual CoC project applications are \$200,000 or less. If the answer is “No,” Part II and Part III of the form will not appear and the form can be submitted after the “I agree” checkbox is selected. If “Yes” is selected Part II and Part III of the form will appear and must be completed. The form can then be submitted after the applicant selects the “I agree” checkbox. This field will be read-only within each project application.**

### Certification

The “I agree” certification will appear at the bottom of the screen within the Project Applicant Profile and within the HUD-2880 form of each project application. Project applicants must certify in both locations that the information provided is true and complete.

Parts II and III can only be completed in the **Project Applicant Profile** and will populate as read only text in each project application. The following are the HUD standard instructions for completing Parts II and III.

### Part II. Other Government Assistance and Expected Sources and Uses of Funds.

- A. **Other Government Assistance.** This Part is to be completed by both applicants and recipients for assistance. Project applicants and recipients must report any other government assistance involved in the project (grant). “Other Government Assistance” is defined to include any loan, grant, guarantee, insurance, payment, rebate, subsidy, credit, tax benefit, or any other form of direct or indirect assistance from the federal government (other than that requested from HUD in the CoC Program project application), a state, or a unit of general local government, or any agency or instrumentality thereof, that is, or is expected to be made, available with respect to the project (grant) for which the assistance is sought. For purposes of this definition, other government assistance is expected to be made available if, based on an assessment of all the circumstances involved, there are reasonable grounds to anticipate that the assistance will be forthcoming.

Both applicant and recipient disclosures must include all other government assistance involved with the HUD assistance, as well as any other government assistance that was made available before the request, but that has continuing vitality at the time of the request. Examples of this latter category include tax credits that provide for a number of years of tax benefits, and grant assistance that continues to benefit the project at the time of the assistance request.

- B. **Non-Government Assistance.** Note that the applicant and recipient disclosure report must specify all expected sources and uses of funds—both from HUD and any other source—that have been or are to be, made available for the project (grant). Non-government sources of funds typically include (but are not limited to) foundations and private contributors.

The following information must be provided in the *e-snaps* columns provided. If additional rows are needed, use the “**Other Attachments**” screen of the project applicant profile to attach additional documentation.

1. **Department/Local Agency Name and Address.** Enter the name and address, city, state, and zip code of the government agency making the assistance available.
2. **Type of Assistance:** (e.g., loan, grant, loan insurance, tax credits).
3. **Amount Requested/Provided:** Enter the dollar amount of the other government assistance that is, or is expected to be, made available with respect to the project or activities for which the HUD assistance is sought (applicants) or has been provided (recipients).

## FY 2017 CoC Program New Projects Detailed Instructions

4. **Expected Uses of the Funds:** Each reportable use of funds must clearly identify the purpose to which they are to be put. Reasonable aggregations may be used, such as "**total structure**" to include a number of structural costs, such as roof, elevators, exterior masonry, etc.

### Part III. Interested Parties.

This Part is to be completed by both project applicants and recipients filing update reports. Project applicants must provide information on:

1. all developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity; and
2. any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

**Note:** A financial interest means any financial involvement in the project or activity including, but not limited to, situations in which an individual or entity has an equity interest in the project or activity, shares in any profit on resale or any distribution of surplus cash or other assets of the project or activity, or receives compensation for any goods or services provided in connection with the project or activity. Residency of an individual in housing for which assistance is being sought is not, by itself, considered a covered financial interest.

The information required below must be provided:

1. Enter the full names and addresses. If the person is an entity, the listing must include the full name and address of the entity as well as the CEO. List all names alphabetically.
2. Entry of the Social Security Number (SSN) or Employee Identification Number (EIN), as appropriate, for each person listed is optional.
3. Enter the type of participation in the project or activity for each person listed, i.e., the person's specific role in the project (e.g., contractor, consultant, planner, investor).
4. Enter the financial interest in the project or activity for each person listed. The interest must be expressed both as a dollar amount and as a percentage of the amount of the HUD assistance involved.

**Note:** If any of the source/use information required by this report has been provided elsewhere in this application package, the applicant need not repeat the information, but need only refer to the form and location to incorporate it into this report. It is likely that some of the information required by this report has been provided on SF-424A, and on various budget forms accompanying the application. If this report requires information beyond that provided elsewhere in the application package, the applicant must include in this report all the additional information required. Recipients must submit an update report for any change in previously disclosed sources and uses of funds as provided in I.D.5., above.

### HUD-50070: Certification of a Drug Free Workplace; Screen 1H

The HUD-50070 populates with organization information from the Project Applicant Profile and relevant data from the FY 2017 project application. **Project applicants must read and certify by checking the box toward the bottom of the screen.** Be sure that the Authorized Representative information is accurate. If any information on this form needs to be updated see "**Updating Project Applicant Profile Instructions**" above. For further clarification or questions concerning the HUD-50070 review the full form instructions: <https://portal.hud.gov/hudportal/documents/huddoc?id=50070.pdf>

### Certification Regarding Lobbying; Screen 1I

New for the CoC Program Competition in FY 2017, all federal agencies are required by 2 CFR part 200 to require project applicants to submit the Certification Regarding Lobbying form. This form populates with organization information from the Project Applicant Profile and relevant data from the FY 2017 project application. The form helps to clarify which agencies must answer "**Yes**" on the SF-LLL: Disclosure of Lobbying Activities form. **Project applicants must read and certify by checking the box toward the bottom**

## FY 2017 CoC Program New Projects Detailed Instructions

**of the screen.** Be sure that the “**Authorized Representative**” information is accurate. If any information on this form needs to be updated see “**Updating Project Applicant Profile Instructions**” above.

### SF-LLL: Disclosure of Lobbying Activities; Screen 1J

The SF-LLL populates with organization information from the Project Applicant Profile and relevant data from the FY 2017 project application. The requirement related to lobbying as explained in the SF-LLL instructions states:

“The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action.”

For further clarification or questions on the SF-LLL see the full form instructions available at:

[www.hudexchange.info/resource/308/hud-form-sflll/](http://www.hudexchange.info/resource/308/hud-form-sflll/)

**Does the recipient or subrecipient of this CoC grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program?** Answer “**No**” if your agency and subrecipient(s) are **not engaged** in lobbying associated with the CoC Program. Answer “**Yes**” if your agency or subrecipient(s) **is engaged** in lobbying and answer the questions as they appear on the screen. Project applicants must read, certify and sign by checking the box toward the bottom of the screen (the check box will not appear until project applicants answer the question above). Be sure the “**Authorized Representative**” information is accurate. If any information on this form needs to be updated see “**Updating Project Applicant Profile Instructions**” above.

**Parts 2 through 7 of the application will remain hidden in *e-snaps* until all the required information in Part 1 is completed and saved. In addition, all checkboxes certifying signed forms must be selected or the project applicant will not be able to proceed with the remainder of the application.**

### All Projects Part 2: Subrecipient and Recipient Information and Experience

To ensure that CoC Program funds are being used in an efficient and effective manner, HUD must confirm that the organizations responsible for implementing awarded projects have the adequate experience and past performance. Part 2 requires project applicants to enter general information concerning the organization(s) it plans to designate as subrecipients and to describe the experience of the project applicant and its subrecipients. Project applicants are not required to fill out this screen if there are no subrecipients.

#### Screen 2A. Subrecipient(s)

Screen 2A allows project applicants to list the subrecipient(s) they propose to carry out certain project functions and must be completed for each subrecipient. For more information on the use of subrecipients and the difference between a subrecipient and a contractor, review the definition at 24 CFR 578.3, recipient responsibilities at 24 CFR 578.23(c)(4)-(11), and the following document at:

<http://www.hudexchange.info/resources/documents/SNAPS-Shots-Using-Contractors-in-ESG-and-CoC-Programs.pdf>.

One general requirement of a subrecipient is to designate a contact person who has the authority to act on its behalf as it relates to carrying out the actions contracted by the project applicant. This information must be completed for all application submissions, and Screen 2A must capture all subrecipient organizations and their designated contact persons. Project applicants are not required fill out this screen if there are no subrecipients.

Click the add  icon to begin entering subrecipient information on the “**Subrecipient Detailed**” screen(s). The primary “**Subrecipient**” screen will compile a list of all subrecipients entered into the detail screen(s) and automatically aggregate the total expected sub-award. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

## FY 2017 CoC Program New Projects Detailed Instructions

**Note:** Project applicants must attach nonprofit documentation on Screen 7A for all private nonprofit subrecipients included on this screen.

### Screen 2B. Experience of Applicant, Subrecipient(s) and Other Partners

Project applicants must describe their capacity and experience, including that of their subrecipients, developers, and contractors, on Screen 2B. Both project applicants and potential subrecipients must show satisfactory capacity, funds draw down history, and performance for existing grant(s), as applicable and evidenced by timely reimbursement of subrecipients, regular drawdowns, and timely resolution of monitoring findings

- 1. Describe the experience of the applicant and potential subrecipients (if any), in effectively utilizing federal funds and performing the activities proposed in the application, given funding and time limitations.** Describe why the project applicant, subrecipients, and partner organizations (e.g., developers, key contractors, subcontractors, service providers) are the appropriate entities to receive funding. Provide concrete examples that illustrate their experience and expertise in the following: (1) working with and addressing the target population(s) identified housing and supportive service needs; (2) developing and implementing relevant program systems, services, and/or residential property construction and rehabilitation; (3) identifying and securing matching funds from a variety of sources; and (4) managing basic organization operations including financial accounting systems.
- 2. Describe the experience of the applicant and potential subrecipients (if any) in leveraging other Federal, State, local and private sector funds.** Include experience with leveraging all federal, state, local and private sector funds. **If the project applicant and subrecipient have no experience leveraging other funds, include the phrase “No experience leveraging other federal, state, local, or private sector funds.”**
- 3. Describe the basic organization and management structure of the applicant and subrecipients (if any).** Include evidence of internal and external coordination and an adequate financial accounting system. Include the organization and management structure of the project applicant and all subrecipients; be sure to include a description of internal and external coordination and the financial accounting system that will be used to administer the grant.
- 4a. Are there any unresolved monitoring or audit findings for any HUD grants (including ESG) operated by the applicant or potential subrecipients (if any)?** Select “Yes” if there are any unresolved HUD Monitoring or OIG Audit findings, regardless of the funding year of the project for which they were originally identified. Select “No” if there are no unresolved HUD Monitoring or OIG Audit findings.
- 4b. Describe the unresolved monitoring or audit findings.** If “Yes” for 4a. above, provide a brief explanation for why the monitoring or audit finding remains unresolved.

### All Projects Part 3 through Part 6: Project Types

Detailed instructions for Part 3 through Part 6 are separated by project type (PH-PSH, PH-RRH, Joint TH and PH-RRH, SSO-CE, and HMIS) and presented individually later in this guide.

Be sure to confirm the project type and whether the project applicant is applying for **Permanent Housing Bonus funding or Reallocation** from eligible renewal projects with the CoC’s Collaborative Applicant **before completing** these parts of the application even though project applicants will not indicate whether this is a project created from reallocated funds or a Permanent Housing Bonus project until Screen 6A. The project type and funding stream (Permanent Housing Bonus or Reallocation) being requested determine how the proposed project is assessed by HUD. Review 24 CFR 578.37 for more information on the basics of project types and the FY 2017 CoC Program Competition NOFA Sections II.B.2.-3. for information regarding eligible project types and the two different funding streams available for new projects in this year’s competition (Permanent Housing Bonus or Reallocation).

HUD expects project applicants to demonstrate compliance in the application with the requirements for whichever project type is identified. Project applicants will be responsible for submitting a project under the

## FY 2017 CoC Program New Projects Detailed Instructions

appropriate project type and funding stream according to the FY 2017 CoC Program Competition NOFA and 24 CFR part 578.

In the project application, HUD uses the terms coordinated entry and coordinated entry process instead of centralized **or** coordinated assessment system to help avoid the implication that CoCs must centralize the assessment process, and is the general term used by other organizations and programs across the country. For requirements concerning coordinate entry refer to [CPD-17-01: Notice Establishing Additional Requirements for a Continuum of Care Centralized \*\*or\*\* Coordinated Assessment System](#)

Click the following links to review the detailed instructions for the appropriate project type:

- [PH-PSH: Permanent Supportive Housing](#)
- [PH-RRH: Rapid Rehousing](#)
- [Joint TH and PH-RRH: Rapid Rehousing](#)
- [SSO-CE: Coordinated Entry](#)
- [HMIS: Homeless Management Information Systems](#)

### All Projects Part 7: Attachments and Certification

Part 7 is available in all project applications and allows project applicants to upload attachments. The types of attachments visible to project applicants will be the same for all project types, however additional attachment screen will be visible for project applicants that are appealing a CoC's decision to reject the project as indicated on question 3 Screen 3A, or submitting the application with “**No CoC**” selected on question 2a on Screen 3A.

#### Screen 7A. Attachments

Screen 7A includes three links that allow project applicants to upload and attach supplementary information to the project application. Uploading an attachment to this screen is optional, and *e-snaps* will allow the applicant to submit the project application without attaching supplementary documentation. However, some applicants must attach documentation based on their unique project details in order to be considered for funding.

The first link is designated specifically for applicants to upload Subrecipient Nonprofit Documentation. Project applicants must attach appropriate documentation for each private nonprofit subrecipient organization identified on Screen 2A by the organization types “**M. Nonprofit with 501(c)(3)**” or “**N. Nonprofit without 501(c)(3)**.” Project applicants are not required to upload documentation if the project does not include private nonprofit organizations as subrecipients.

Private nonprofit status is documented by submitting either: (1) a copy of the Internal Revenue Service (IRS) ruling providing tax-exempt status under Section 501(c)(3) of the IRS Code (preferred); or (2) a certification from a licensed CPA that the organization meets each component of the definition of a private nonprofit organization as defined by 24 CFR 578.3.

The second and third links on Screen 7A labeled “**Other Attachment(s)**” are available for any additional supporting documentation.

**Note:** If applications include third-party In-Kind match on Screen 6D a separate 7A attachment screen will appear that should be used to attach MOU(s) documentation that confirms the in-kind match commitment. If the MOU documentation is not available at application submission, it will be a condition for grant execution, if HUD conditionally awards the project.

#### CoC Rejection Letter

For project applicants submitting a **Solo Applicant** appeal, the **CoC Rejection Letter** is an additional attachment screen that allows project applicants to upload the rejection letter (also called the notification of rejection) that they received from the CoC indicating that their project would not be submitted to HUD for funding consideration. This field is visible and required only for project applicants who select “**Appeal**” on Screen 3A—meaning an eligible project applicant that believes they were denied the opportunity to participate in

## FY 2017 CoC Program New Projects Detailed Instructions

the local CoC planning process in a reasonable manner and were rejected or reallocated by the CoC may appeal the rejection directly to HUD by submitting a Solo Applicant project application prior to the application deadline of 8:00 p.m. eastern time on September 28, 2017. If the project applicant has not received a rejection letter from the CoC, the project applicant should submit a document affirming that no such letter was received. For more information concerning the rejection letter and the project application appeals process, review Sections II.B.9, VI.C.4., and X. of the FY 2017 CoC Program Competition NOFA and 24 CFR 578.35.

### “No CoC” Consolidated Plan Certification

This screen is visible and required only for project applicants who select “No CoC” on Screen 3A. This additional attachment screen allows project applicants with “No CoC” to upload a Certification of Consistency with the Consolidated Plan (HUD-2991) obtained from the state or local official with jurisdiction over the geographical area in which the proposed project will be located.

### Screen 7B. Certification

Screen 7B is populated with the project applicant organization and the information for its authorized representative. A date must be selected to complete the certification. If the project applicant is a Public Housing Authority (PHA), the PHA number must also be provided here. By completing the certification, the “Authorized Representative” agrees to the terms and conditions provided on the screen, on behalf of the project applicant organization. Project applicants must complete the certification in order to submit the project application.

## All Projects Part 8: Submission Summary

Part 8 includes two screens, Screen 8A “Notice of Intent to Appeal,” and Screen 8B “Submission Summary.” Screen 8A will only be visible if the project applicant applies as a Solo Applicant. Screen 8B provides a summary of the project application and is visible to all project applicants.

### Screen 8A. Notice of Intent to Appeal

Screen 8A will only be visible if the project applicant selects “Appeal” on Screen 3A to apply as a Solo Applicant—meaning, an eligible project applicant that believes it was denied the opportunity to participate in the local CoC planning process in a reasonable manner and was rejected or reallocated by the CoC. Solo Applicants may appeal directly to HUD by submitting a “Notice of Intent to Appeal” and a project application—prior to the application deadline of 8:00 p.m. eastern time on September 28, 2017.

Selecting “Appeal” on Screen 3A provides a Solo Applicant with the ability to submit the Notice of Intent to Appeal directly to HUD in *e-snaps* with their project application. A copy of the Notice of Intent to Appeal must also be provided to the CoC. For more information concerning the project application appeals process, review Sections II.B.9, VI.C.4., and X. of the FY 2017 CoC Program Competition NOFA and 24 CFR 578.35.

If a Solo Applicant is appealing the rejection of a project application **that was originally submitted by the applicant to the CoC in *e-snaps***, the Solo Applicant must recreate the project application in *e-snaps* and select “Appeal” on Screen 3A to see Screen 8A. “Notice of Intent to Appeal.”

To expedite the review process, HUD encourages project applicants to attach all relevant documentation to Screen 7A (Attachments)—including a letter **demonstrating** they were denied the opportunity to participate in the local CoC planning process in a reasonable manner. Additionally, the project applicant should attach a letter from the CoC to the project applicant notifying them of the rejection. If the project applicant did not receive a rejection letter, the project applicant should attach a letter from the project applicant’s organization affirming that no such letter was received.

1. **Check the following box to certify this form as your Notice of Intent to Appeal:** By checking this box, the project applicant is affirming this screen serves as their formal Notice of Intent to submit a Solo Applicant Appeal to HUD.
2. **Was this project application first rejected by the CoC and then submitted or submitted completely independently of the CoC’s process?** Select “Rejected” if your application was submitted

## FY 2017 CoC Program New Projects Detailed Instructions

in *e-snaps* to the CoC and then rejected—question 4a below will appear. Select “**Independent**” if the CoC rejected your application outside of the *e-snaps* process and this is your first submission in *e-snaps*—question 4b below will appear). HUD encourages all project applicants to first submit applications to the CoC in *e-snaps*.

3. **Was the project application submitted within the CoC’s established submission deadline?** Select “**Yes**” to indicate the project application was submitted to the CoC before the CoC’s local submission deadline and “**No**” to indicate a submission after the local submission deadline.
- 4a. **Describe the reason(s) provided by the CoC explaining their rejection of the project:** Project applicants appealing a rejected project must use this text box to describe the reason provided by the CoC for the rejection of the application, **or**
- 4b. **Describe the reason(s) why the application was not submitted in *e-snaps* with the CoC’s consolidated application:** Use this text box to explain why the application was first submitted as an appeal in *e-snaps* and not first as a standard submission to the CoC through *e-snaps*.
5. **Describe how the CoC has not permitted reasonable participation in its process:** Use this text box to describe how the CoC prevented reasonable participation in its planning process from the perspective of the project applicant. Provide explanations and time lines as necessary.

Once completed, this screen will serve as the HUD recognized Notice of Intent to Appeal required by 24 CFR part 578.

### Screen 8B. Submission Summary

Screen 8B provides a summary of the complete and incomplete Project Application screens, as well as screens project applicants are not required to complete to submit the project application. The “**Last Updated**” column provides the status of each screen listed, and the date the screen was completed. After the Project Applicant Profile is completed, all project application screens are completed, and all appropriate attachments are uploaded into *e-snaps*, the project application can be submitted in *e-snaps*. All submitted project applications are routed to the CoC identified on Screen 3A. If “**No CoC**” is selected on Screen 3A, the project will be routed directly to HUD for consideration.

- **Any date (MM/DD/YYYY).** If a date is listed in the “**Last Updated**” column, the *e-snaps* screen identified in the “**Page**” column indicates the date the project applicant completed or revised the screen.
- **No Input Requested.** If “**No Input Requested**” is listed in the “**Last Updated**” column, there are no mandatory fields on the screen identified in the same row in the “**Page**” column.
- **Please Complete.** If “**Please Complete**” is listed in the “**Last Updated**” column, then the screen identified in the same row in the “**Page**” column has not been completed and there are remaining requirements or errors that must be addressed. Navigate back to that screen and complete the necessary fields. Any field with an asterisk (\*) must be completed before the project application can be submitted. Look for notes and warning messages at the bottom of the “**Submission Summary**” screen for details about relevant fields needing updates.
- **Mandatory.** If “**Yes**” is listed in the “**Mandatory**” column, the project applicant must complete the screen identified in the same row in the “**Page**” to submit the project application in *e-snaps*. If “**No**” is listed in the “**Mandatory**” column—it means *e-snaps* does not mandate items on that screen to submit the project application. However, this does not necessarily mean that the project application is complete. It is important for project applicants to read all instructions carefully to ensure all information required in a project application is complete.

After the application is submitted, use the “**export to PDF**” link to save the application as a PDF or to print a hard copy of the application. The PDF version of the application serves as a record of submission.

For more information concerning the FY 2017 CoC Program Competition, visit [FY 2017 Continuum of Care \(CoC\) Program Competition: Funding Availability](#) and [CoC Program Competition: e-snaps Resources](#).

# Permanent Housing (PH) – Permanent Supportive Housing (PSH) New Project Applications

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[\[RETURN to “All Projects Part 3 through Part 6: Component Types”\]](#)

The following instructions and screens apply to new Permanent Housing (PH)–Permanent Supportive Housing (PSH) projects only, and cover PH-PSH projects funded through both the reallocation process and the permanent housing bonus. Before completing this part of the application, carefully review the eligibility requirements for new PH-PSH projects in the FY 2017 CoC Program Competition NOFA.

**Note:** Applicants applying for new “**Expansion Projects**” should use at least a portion of the existing renewal project name when naming the expansion project, and add the word “**Expansion**” at the end of the name.

## PH-PSH Part 3: Project Information

Based on the component type selected on Screen 3A, in this case “**PH**,” HUD expects project applicants to provide a full description of the project scope on Screen 3B, including the selection of “**PSH**,” in accordance with **PH-PSH** requirements at 24 CFR 578.37.

### PH-PSH Screen 3A. Project Detail

All fields on Screen 3A must be completed for submission of this application.

- 1a. CoC Number and Name:** Select the CoC number and name from the dropdown menu to which the applicant intends to submit this project application. **Selecting the correct CoC is critical.** The dropdown menu contains all CoCs that successfully registered in the FY 2017 CoC Program Registration process and is listed according to the CoC Number (e.g., NE-502) and CoC Name (e.g., Lincoln County CoC). Based on the selection made in this field, *e-snaps* will send this project application to the CoC selected—once it is complete and submitted—for their review and to go through the local CoC selection process.

**Note:** Project applicants should only use the “**No CoC**” option in rare instances where a project is located in a geographic area not currently served by a CoC. If project applicants select “**No CoC**,” their project applications will not be connected to a CoC Application for this competition and this may affect HUD’s ability to award funds for a project application.

- 1b. CoC Collaborative Applicant Name:** Select the name of the CoC Collaborative Applicant for the CoC to which the project applicant intends to submit the project application. The dropdown menu for this field are based on the CoC Number and Name selected above. This list is populated with the CoC’s designated Collaborative Applicant name that registered during the FY 2017 CoC Program Registration process.
- 2. Project Name:** No action required. This field populates from the *e-snaps* “**Project**” screens. Project applicants cannot modify the populated name in this field; however, project applicants can modify the project name by exiting the project application screens and opening the *e-snaps* “**Project**” screens by selecting “**Projects**” from the left menu.
- 3. Project Status:** This field defaults to the “**Standard**” option and project applicants should only change it to “**Appeal**” if they are appealing a CoC’s decision to reject the project application in the local CoC competition; meaning, an eligible project applicant believes they were denied the opportunity to participate in the local CoC planning process in a reasonable manner. All other project applicants should leave the field with the option “Standard.” If the project applicant selects “**Appeal**,” Screen 8A “**Notice of Intent to Appeal**” will appear on the left menu. For further information about appeals see instructions for Screen 8A above.
- 4. Component Type:** For **PH-PSH** projects, project applicants must select “**PH**.”

## FY 2017 CoC Program New Projects Detailed Instructions

- Title V:** Title V of the McKinney-Vento Act allows unutilized, underutilized, excess, **or** surplus federal properties to be used by homeless services providers for assisting persons experiencing homelessness. Select “**Yes**” or “**No**” to indicate whether the project will include one **or** more properties that have been **or** will be conveyed through the Title V process.

### PH-PSH Screen 3B. Description

All fields on Screen 3B are required and provide HUD with a detailed description of the project.

- 1. Provide a description that addresses the entire scope of the proposed project:** Provide a clear and concise description of the scope of the project. The description should describe the community needs, target population(s) to be served, project plan for addressing the identified housing and supportive service needs, projected project outcome(s), coordination with other sources **or** partners, and the reason CoC Program support is required. The information provided in this narrative must not conflict with information provided in other parts of the project application.
- 2. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work:** Demonstrate how full capacity will be achieved over the term requested in this application. **Note:** To expend funds within statutorily required deadlines, project applicants must be able to begin assistance within 12 months of conditional award. The one exception is for applicants who are conditionally awarded sponsor-based and project-based rental assistance. These conditional award recipients will have 24 months to execute a grant agreement; however, HUD encourages all recipients conditionally awarded funds to begin assistance within 12 months. The estimated schedule should reflect these statutorily required deadlines.
- 3. Will your project participate in a CoC Coordinated Entry Process?** Participation in a CoC coordinated entry process is a requirement of 24 CFR part 578 for all recipients of CoC Program funds. New project applicants should Select “**Yes**” if they will participate in a CoC coordinated entry process (known as centralized **or** coordinated assessment system in 24 CFR part 578; Notice: CPD-17-01, [Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System](#); and the FY 2017 CoC Program NOFA) as soon as the project begins operations. **If** the CoC does not yet have a coordinated entry process, **or** if the project will not participate, select “**No**.” **Note:** Coordinated entry is a process designed to coordinate program participant intake, assessment, and provision of referrals. A coordinated entry process covers the CoC’s geographic area, is easily accessed by individuals and families seeking housing **or** services, is well advertised, and includes a comprehensive and standardized assessment tool and process. Unless you plan to participate in a process that is coordinated by the CoC across all providers in the community, select “**No**.”
  - 3a. If “No;” Please explain why your project does not participate in a CoC Coordinated Entry Process.** Provide an explanation for why you do not expect the project to participate in a community’s coordinated entry process during the requested grant term.
- 4. Please identify the specific population focus. (Select ALL that apply)** If a subpopulation focus for your organization is not listed, check the box next to “**Other**” and then enter in the subpopulation in the text box provided.
- 5. Housing First.** Housing First is a model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions (such as sobriety or a minimum income threshold). It is an approach to quickly connect individuals and families experiencing homelessness to permanent housing without barriers to entry (e.g., sobriety, treatment or service participation requirements) and without preconditions that might lead to the program participant’s termination from the project (e.g., supportive service participation requirements or rules beyond normal tenancy rules). Supportive services are voluntary, but are offered to maximize housing stability and prevent returns to homelessness. Review Sections II.A.4., II.B.17.c., III.A.3.g., and VII.A.1.g. of the FY 2017 CoC Program Competition NOFA and the Housing First in PSH brief at [www.hudexchange.info/resource/3892/housing-first-in-permanent-supportive-housing-](http://www.hudexchange.info/resource/3892/housing-first-in-permanent-supportive-housing-)

## FY 2017 CoC Program New Projects Detailed Instructions

[brief/](#) for more information. The questions in this section help identify whether your project operates consistent with a Housing First approach.

- a. **Does the project quickly move participants into permanent housing?** Select “Yes” to this question if your project will quickly move program participants into permanent housing without requiring additional steps (e.g., required stay in transitional housing before moving to permanent housing) when program participants determine that they want assistance moving into permanent housing. If this is a domestic violence (DV) project application, project applicants should select “Yes” if the project will quickly move program participants into permanent housing after immediate safety needs identified by the program participant are addressed (e.g., survivors believe they are still in danger from violent situations and choose to wait until the dangerous situations are addressed before moving into permanent housing, but must be assisted in quickly moving to permanent housing as soon as they believes it is safe). Select “No” if the project does not work to move program participants quickly into permanent housing. The questions in this section helps identify whether your project operates consistent with a Housing First approach.
  - b. **Does the project ensure that participants are not screened out based on the following items? (Select ALL that apply):** Check the box next to each item to confirm that your project does not have the following barriers at the time of completing this application: (1) having too little or little income; (2) active or history of substance use; (3) having a criminal record with exceptions for state-mandated restrictions; and (4) History having a history of victimization (e.g., domestic violence, sexual assault, childhood abuse). If all of these barriers still exist at the time of completing this application, select “None of the above.”
  - c. **Does the project ensure that participants are not terminated from the program for the following reasons? (Select all that apply).** Check the box next to each item to confirm that your project does not terminate participants for the following reasons: (1) failure to participate in supportive services—not including case management that is for the purposes of engagement only; (2) failure to make progress on a service plan; (3) loss of income or failure to improve income; and (4) any other activity not covered in a lease agreement typically found in the project’s geographic area. If a program participant can be terminated for any of these reasons at the time of application, select “None of the above.”
  - d. **Does the project follow a Housing First approach?** *e-snaps* automatically populates this read-only field based on the responses above. This field will only indicate “Yes” if the project applicant selected “Yes” for 3a **and** checked all the boxes for 3b and 3c, to confirm a Housing First approach. Otherwise, this field will indicate “No” to confirm that the project will not follow a Housing First approach. Any project application submitted as using a Housing First approach must continue operating as such.
6. **If applicable, describe the proposed development activities and the responsibilities that the applicant and potential subrecipients (if any) will have in developing, operating, and maintaining the property?** This question is only applicable if a new project is requesting property development capital costs (acquisition, new construction, and **or** rehabilitation). **If** this question is not applicable; place N/A in the textbox. **If** this question is applicable, provide a narrative that specifically describes the property development activities. Project applicants are not required to repeat the entire project plan and schedule described in question 2.
  7. **Will the PH project provide PSH or RRH?** PH-PSH projects must Select “PSH.” This selection will affect the budget screens that appear later in the application. Project applicants who Select “PSH” will be able to select Rental Assistance, Leased Units, Leased Structures, Operating, **or** Acquisition/ Rehabilitation/New Construction as eligible housing activities in Part 6 of the application. **PH-PSH** project applicants may also select **Leased Structures** to provide supportive services.
  8. **Will participants be required to live in a particular structure, unit, or locality, at some point during the period of participation?** Select “Yes” or “No” to indicate whether program participants will be required to live in a specific place determined by the project applicant at any point. Select “Yes”

## FY 2017 CoC Program New Projects Detailed Instructions

if any portion of their project will be site-based. **Note:** If the **PH-PSH** project will be requesting tenant-based rental assistance (TRA), recipients may only require program participants to live in a specific area and in a specific structure (for the first year of their participation) **only** where it is necessary to facilitate the coordination of supportive services.

- 8a. If yes, explain how and why the project will implement this requirement.** Describe why the project applicant has chosen to implement this program design for your project program participants. For example, if a project applicant owns a building that it will be using to provide PSH for program participants. For project applicants requesting TRA, it is particularly important to explain why implementing this requirement is necessary for facilitating the provision of supportive services.
- 9. Will more than 16 persons live in one structure?** Select “**Yes**” or “**No**” to indicate whether more than 16 persons will reside in any one of the structures assisted with funds requested through this application. **If yes**, two additional questions will appear.
- 9a. Describe the local market conditions that necessitate a project of this size.** If there are more than 16 people, use the text box to explain how local market conditions necessitate this size.
- 9b. Describe how the project will be integrated into the neighborhood.** If there are more than 16 people, use the text box to explain how neighborhood integration can be achieved for program participants.
- 10.** Since PSH is selected in question 7, question 10 will appear. **Indicate whether the project is “100% Dedicated,” or “DedicatedPLUS,” according to the information provided.** All new **PH-PSH** projects must select from the following:
- Select “**DedicatedPLUS**” to serve those individuals and families meeting the criteria listed in the DedicatedPLUS definition below and in the FY 2017 NOFA Section III.A.3.d. Projects that select “**DedicatedPLUS**” will be required to fill all vacancies with persons meeting these criteria and should only select “**DedicatedPLUS**” if the project applicant intends to use all **or** some of their beds to serve individuals and families that meet the broadened criteria.
  - Select “**100% Dedicated**” to serve only those individuals and families meeting criteria listed in the beds dedicated to chronically homeless individuals and families’ described below and in the FY 2017 NOFA Section III.A.3.b. Projects that select “**100% Dedicated**” will be required to fill all vacancies with persons meeting the beds dedicated to chronically homeless individuals and families’ criteria.

Regardless of your choice above, the project applicant will still be able to dedicate beds to individuals and families experiencing chronic homelessness on Screen 4B, and those beds dedicated to chronic homelessness must continue to operate in accordance with Section III.A.3.b.

### Definitions:

“**100% Dedicated**” is a project defined in the FY 2017 NOFA Section III.A.3.b. as:

**Beds Dedicated to Chronically Homeless Individuals and Families.** A permanent supportive housing bed that is dedicated specifically for use by chronically homeless individuals and families within a CoC’s geographic area, as reported in the CoC’s Housing Inventory Count (HIC) and the FY 2016 permanent housing project applications. When a program participant exits the project, the bed must be filled by another chronically homeless participant unless there are no chronically homeless persons located within the CoC’s geographic area. This concept only applies to permanent supportive housing projects. **Note:** This definition refers to past and current projects; however, as a new application the meanings apply as “...will be reported in the CoC’s HIC” and applicable to “FY 2017 applications.”

“**100% DedicatedPLUS**” is a project defined in the FY 2017 NOFA Section III.A.3.d. as:

## FY 2017 CoC Program New Projects Detailed Instructions

**DedicatedPLUS project.** A permanent supportive housing project where 100 percent of the beds serve individuals and families, including unaccompanied youth, that meet one of the following criteria:

- (1) experiencing chronic homelessness as defined in 24 CFR 578.3;
- (2) residing in a transitional housing project that will be eliminated and meets the definition of chronically homeless in effect at the time in which the individual **or** family entered the transitional housing project;
- (3) residing in a place not meant for human habitation, emergency shelter, **or** safe haven; but the individuals **or** families experiencing chronic homelessness as defined at 24 CFR 578.3 had been admitted and enrolled in a permanent housing project within the last year and were unable to maintain a housing placement;
- (4) residing in transitional housing funded by a joint TH and PH-RRH component project and who were experiencing chronic homelessness as defined at 24 CFR 578.3 prior to entering the project;
- (5) residing and has resided in a place not meant for human habitation, a safe haven, **or** emergency shelter for at least 12 months in the last three years, but has not done so on four separate occasions; **or**
- (6) receiving assistance through a Department of Veterans Affairs(VA)-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.

### PH-PSH Screen 3C. Project Expansion Information

Project applicants must complete Screen 3C **only** if requesting to support a project that is currently operating and has the same component as the expansion grant is requesting. Project applicants may choose to expand the capacity of a project that is eligible for renewal in the FY 2017 CoC Program Competition **or** a project that is funded through any other mechanism. Eligible expansion reasons for PH-PSH include:

- **Increasing the number of homeless persons served;**
- **Providing additional supportive services to homeless persons;**
- **Bringing existing facilities up to state/local government health and safety standards;**
- **Replacing the loss of nonrenewable funding (private, federal, other excluding state/local government);**

Project applicants cannot use an expansion project to provide existing program participants with the **same** housing and services funded by the CoC Program that they are currently receiving; rather, the project must serve new program participants **or** provide existing program participants with an expanded variety of services **or** the same activities that are CoC Program-eligible but were previously paid for by a different non-renewable source. Project applicants should carefully consider the design of the new project to ensure it meets all conditions set forth in the McKinney Vento Act as amended, 24 CFR part 578, and the FY 2017 CoC Program Competition NOFA. **Note:** CoC Program funds **cannot** be used to replace state **or** local funds previously used, **or** designated for use, to assist homeless persons (see 24 CFR 578.87(a) for more information).

1. **Will the project use an existing homeless facility or incorporate activities provided by an existing project?** Select “Yes” or “No.” If “Yes” to this question, the following question will appear. If “No,” no additional questions will appear and you can move to the next screen.
2. **Is this new project application requesting a “Project Expansion” of an eligible CoC Program renewal project of the same component type?** Select “Yes” or “No.” If “Yes,” enter the **PIN number** (first 6 characters of the renewal grant number, e.g., AL0101) and **Project Name** of the renewal project that will be expanded as a result of this project application. Additional expansion questions will appear and are summarized in the paragraphs below. **If “No”** is selected for this question,

## FY 2017 CoC Program New Projects Detailed Instructions

PIN Number and Project Name will be hidden, but the rest of the expansion screen questions will appear.

**Note:** This question pertains to new “**Expansion Project**” grants referenced in the FY 2017 CoC Program NOFA Section II.B.4. Selecting “**Yes**” means the project applicant intends to submit this project as a new Expansion Project for an eligible CoC program renewal project. **If** the renewal project application is not conditionally selected for funding, the expansion project application will not be selected.

If “**Yes,**” to question 1 and either “**Yes**” or “**No**” to question 2, additional questions will appear. Select and “**Add**” one **or** more of the expansion activities described below. This expansion activity screen field will appear below question #2. Once an activity is added, save the screen to reveal additional questions that allow you to describe the specific expansion activities. All selections added must be described in as much detail as possible in the subsequent narratives provided, even if details were also included in the project description on Screen 3B.

3. **Select one or multiple activities listed below that describe the expansion project, and click on the “Save” button at the bottom of the screen.** Additional questions will appear to provide additional details. The five expansion activity explanations include:

- **Increasing the number of homeless persons served.** If selected, the following questions will appear: **Indicate how the project is proposing to “increase the number of homeless persons served.”**
  - Current level of effort? (Current Grant Agreement Numbers)**
    - # of persons served at a point-in-time?
    - # of units?
    - # of beds?
  - New effort? (Proposed Increase to Current Grant Agreement Numbers)**
    - # of additional persons served at a point in time that this project will provide?
    - # of additional units this project will provide?
    - # of additional beds this project will provide?
- **Providing additional supportive services to homeless persons.** If selected, the following questions will appear: **Indicate how the project is proposing to “provide additional supportive services to the homeless persons served?”** “Add” one or both explanations listed.
  - **Increase number of and/or expand variety of supportive services provided**
  - **Increase frequency and or intensity of supportive services**
  - **Coordinated entry: (Only for SSO-CE projects)**

After any of the above selections are added, answer the questions that appear.

- **Describe the reason for the supportive service increase indicated above.** Response should explain why Supportive Services are being increased from the current grant agreement.
- **Bringing existing facilities up to state/local government health and safety standards;**

In the text box; **describe how the project is proposing to “bring the existing facility(ies) up to state/local government health and safety standards.”**
- **Replacing the loss of nonrenewable funding (private, federal, other excluding state/local government).** Answer the following questions:
  - What is the source of non-renewable funding (should indicate that funds are not controlled by the state **or** local government)?
  - Why are the project funds non-renewable?
  - On what date will the non-renewable funds expire?
  - What steps were taken to obtain other funding sources?
  - Why are CoC Program funds necessary to continue operating the project?

## FY 2017 CoC Program New Projects Detailed Instructions

### PH-PSH Part 4: Housing and Services

In Part 4 of the Project Application, HUD expects project applicants to provide detail regarding the housing and services that will be provided.

#### PH-PSH Screen 4A. Supportive Services for Participants

All fields on Screen 4A are required and provide HUD with detailed understanding of the supportive services provided to program participants.

- 1a. Are the proposed project policies and practices consistent with the laws related to providing education services to individuals and families?** Select “Yes” or “No” based on the answer to the following information. Any project applicant requesting funds to provide housing **or** services to children and youth, with **or** without families, must indicate whether the project has established policies and practices that are consistent with, and do not restrict the exercise of rights provided by subtitle B of title VII of the McKinney-Vento Act (42 U.S.C. 11431, *et seq.*), and other laws (e.g., Head Start, part C of the Individuals with Disabilities Education Act) relating to the provision of educational and related services to individuals and families experiencing homelessness. Project applicants should only Select “**Not applicable**” if the project will not serve children **or** youth under 25.
- 1b. Will the proposed project have a designated staff person to ensure that the children are enrolled in school and receive educational services, as appropriate?** Any project applicant requesting funds to provide housing **or** services to children and youth, with **or** without families must indicate whether a staff person has been designated to ensure that children are enrolled in school and connected to the appropriate services within the community, including early childhood programs such as Head Start, Part C of the Individuals with Disabilities Education Act, and McKinney-Vento education services. Project applicants should only select “**Not applicable**” if the project will not serve children **or** youth under 25.
- 1c. Describe the manner in which the project applicant will take into account the educational needs of children when youth and families are placed in housing:** This question is visible and required only if “**No**” is selected in response to question 1a **or** 1b. Project applicants not in compliance with federal education assurances must provide an adequate description of the reason(s) for noncompliance and a corrective action plan. Failure to comply with federal education assurances may result in Federal sanctions, and significantly reduce the likelihood of receiving funding through the CoC Program Competition.
- 2. Describe how participants will be assisted to obtain and remain in permanent housing:** Describe plans to move program participants quickly into PH-PSH, **and** plans to ensure that program participants stabilize in PH-PSH. An acceptable response will acknowledge the needs of the target population and include plans to address those needs through current and proposed case management activities and the availability and accessibility of supportive services such as—housing search, primary health services, mental health services, educational services, employment services, life skills, child care services, etc. Good strategies should be specifically tailored—as related to this application—for individuals, older adults, youth, families, etc. **Example:** A project specializing in serving young parents might provide a specific service array including parenting classes, education programing and other child care services.

If program participants will be housed in units not owned by the project applicant, the narrative must also indicate how appropriate units will be identified and how the project applicant **or** subrecipient will ensure that rents are reasonable. Established arrangements and coordination with landlords and other homeless services providers should be detailed in the narrative. Landlord engagement is a critical piece of the strategy and will be explained in a good response.
- 3. Describe specifically how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently:** Address the needs of the target population, the required supportive services, the availability and accessibility of those supportive services, and any coordination with other homeless services providers and mainstream systems. Describe how service delivery directly leads to program participant employment; how service delivery

## FY 2017 CoC Program New Projects Detailed Instructions

leads directly to program participants accessing SSI, SSDI, **or** other mainstream services; and how the requested funds contribute to program participants becoming more independent.

**Note:** Education plays an important role in the personal development of program participants and should be considered a strategy to maximize their ability to live independently. In addition, HUD encourages project applicants to explain how education will address the encampment and unsheltered homelessness and survivors of DV.

4. **For all supportive services available to participants, indicate who will provide them and how often they will be provided:** This list identifies **all** supportive services provided to program participants in the project by the project applicant, subrecipient, partner organization, or Non-Partner organization. The project applicant should complete each row of the dropdown menus for all supportive services the project will provide to program participants, regardless of funding source. Do not limit this selection to just the supportive services that may be requested in your project application—also include supportive services other organizations or grants will provide. If more than one “**Provider**” or “**Frequency**” is relevant for a single service, select the provider and frequency that is used most. If more than one provider offers the service equally as often, choose the provider according to the following order: (1) Applicant, (2) Subrecipient, (3) Partner, and (4) Non-Partner.

- **Provider:** select one of the following:

“**Applicant**” to indicate that the project applicant will provide the service;

“**Subrecipient**” to indicate that a subrecipient, as indicated on from Screen 2A. Project Subrecipients, will provide the service;

“**Partner**” to indicate that an organization that is not a subrecipient of project funds but with whom a formal agreement or memorandum of understanding (MOU) has been signed will provide the service; or

“**Non-Partner**” to indicate that a specific organization with whom no formal agreement has been established regularly provides the service to program participants.

- **Frequency:** Select how often the service is provided to program participants. If two frequencies are equally common, select the interval that is most frequent, e.g., both weekly and monthly are equally common—select weekly.

**Note:** The list is exclusive and exhaustive per 24 CFR 578.53. Project applicants must complete the dropdown menus for at least one service/row.

5. **Please identify whether the project includes the following activities:**

- 5a **Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs?** Select “**Yes**” if the project provides regular **or** as needed transportation assistance to mainstream and community resources, including appointments, employment training, educational programs, **or** jobs. Transportation assistance may include bus passes, rail/subway cards, vehicle owned by the organization, taxi fare, etc. Select “**No**” if transportation will not be regularly provided **or** cannot be provided consistently as requested.

- 5b **Use of a single application form for four or more mainstream programs?** Select “**Yes**” if the project will use a single application form that allows program participants to take and use to sign up for four **or** more mainstream programs without having to complete another document. Select “**No**” if application forms will cover three **or** fewer mainstream programs.

- 5c **Regular follow-ups with participants to ensure mainstream benefits are received and renewed?** Select “**Yes**” if the project will regularly follow-up with program participants, at least annually, to ensure that they have applied for and are receiving their mainstream benefits and renew benefits when required. Select “**No**” if there will be no **or** irregular follow-up concerning mainstream benefits.

6. **Will project participants have access to SSI/SSDI technical assistance provided by the applicant, a subrecipient, or partner agency?** Select “**Yes**” if program participants will have access to SSI/SSDI

## FY 2017 CoC Program New Projects Detailed Instructions

technical assistance. The assistance can be provided by the project applicant, a subrecipient, **or** a partner agency—through a formal **or** informal relationship. Select “**No**” if there will be no **or** significantly limited access to SSI/SSDI technical assistance.

- 6a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months?** This question will only appear if “**Yes**” is selected to the previous question. Select “**Yes**” to indicate that the project applicant, subrecipient **or** partner agency staff person who will be providing the SSI/SSDI technical assistance has completed SOAR training, online **or** in person, in the past 24 months. **If** more than one person will provide technical assistance, select “**Yes**” only if all persons have completed the training. Otherwise, Select “**No**.”

### PH-PSH Screen 4B. Housing Type and Location

Screen 4B, Housing Type and Location, applies to all PH-PSH projects and provides a summary of the units and beds included in the project according to the following categories:

- **Total Units.** Includes all of the units in the project, regardless of size.
- **Total Beds.** Includes all of the beds in the project, regardless of unit configuration.
- **Total Dedicated CH Beds.** Includes all beds dedicated for chronically homeless individuals and families only.

The summary fields are compiled from all the individual housing locations listed below the totals. These fields will populate and update automatically when new housing type and location details are added to the list.

To add new housing type and location detail screen(s), click the add  icon and complete the mandatory fields. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

The project applicant must use Screen 4B to report each housing type and location that will be supported using requested CoC Program funds. The numbers reported must reflect the total units, total beds and total dedicated CH beds directly supported by CoC Program-awarded funds **at the project’s full capacity on a single day**. Generally, the reported number of beds should match the number of persons served and households, as listed on Screens 5A and 5B although there are understandable exceptions (e.g., a two-parent household where the parents share a bed).

All PH-PSH projects awarded in the FY 2017 CoC Program Competition NOFA must either serve individuals and families that meet the criteria established under the definition of DedicatedPLUS in Section III.A.3.d. of the FY 2017 CoC Program NOFA **or** be 100 percent dedicated to households experiencing chronic homelessness. Project applicants made this selection on Screen 3B of their project application. For project applicants that selected “**100% Dedicated**,” the number listed in the “**Total Dedicated CH beds**” must match the number in “**Total Beds**.” Project applicants that selected “**DedicatedPLUS**” may choose to dedicate some of their beds to persons experiencing chronic homelessness and should indicate the number of beds they will dedicate in “**Total Dedicated CH Beds**.” HUD will hold projects to the number of beds indicated in this screen to the standards outlined in Section III.A.3.b. of the FY 2017 NOFA—Beds Dedicated to Chronically Homeless Individuals and Families.

- 1. Housing type:** Report the type of housing structures where program participants under this project will be housed. Each housing type must be listed individually according to the following options:
  - **Barracks:** Individuals **or** families sleep in a large room with multiple beds. **This type is not appropriate for the PSH projects.**
  - **Dormitory, shared or private rooms:** Individuals **or** families share sleeping rooms **or** have private rooms; persons share a common kitchen, common bathrooms, **or** both.
  - **Shared housing:** Shared housing is defined as an arrangement in which two **or** more unrelated people share a house **or** an apartment. Each unit must contain private space for each assisted family, plus common space for shared use by the residents of the unit. Common space must be

## FY 2017 CoC Program New Projects Detailed Instructions

appropriate for shared use by the residents and private space must contain at least one bedroom for each two persons in the family. A zero **or** one-bedroom unit may not be used for shared housing.

- **Single Room Occupancy (SRO) units:** Each individual has private sleeping **or** living room which may contain a private kitchen and bath, **or** shared, dormitory style facilities.
  - **Clustered apartments:** Each individual **or** family has a self-contained housing unit located within a building **or** complex that houses both (1) persons with special needs—e.g., homeless **or** formerly homeless persons, persons with substance abuse problems, persons with mental illness, **or** persons with AIDS/HIV—and (2) persons without any special needs.
  - **Scattered-site apartments (including efficiencies):** Each individual **or** family has a self-contained apartment. Apartments are scattered throughout the community.
  - **Single family homes/townhouses/duplexes:** Each individual **or** family has a self-contained, single family home, townhouse, **or** duplex that is dispersed throughout the community.
2. **Indicate the maximum number of Units and Beds available for project participants at the selected housing site:** Enter the number of units, beds, and CH beds that will be available at a point in time and used for housing program participants in this project.
- **Units:** Enter the total number of units that will be available at a point in time in the selected housing type and location used for housing program participants.
  - **Beds:** Enter the total number of beds that will be available at a point in time in the selected housing type and used for housing program participants.

**Note:** A zero bedroom **or** efficiency must be indicated as 1 unit, 1 bedroom, and 1 bed. In addition, the number of units and beds listed on Screen 4B must be equal to **or** greater than the total number of units and beds requested in the budget, Part 6 of this guide, and **should correlate** to the number and characteristics of persons that the project is expected to serve recorded on Screens 5A and 5B.

3. **How many of the total beds entered in “2b. Beds” are dedicated to the chronically homeless? In this field, enter the total number of beds that will be dedicated to chronically homeless (CH) program participants.** A dedicated bed is a bed that must be filled by a person who is chronically experiencing homelessness unless there are no such persons located within the geographic area who qualify. These beds are also reported as “**CH Beds**” on a CoC’s Housing Inventory Count (HIC). **If** a project has dedicated beds to serve CH families, all beds serving the household should be included in this number.

For further information on CH review the [HUD Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing](#). The notice provides detailed information concerning beds that must serve persons experiencing chronic homelessness as defined in 24 CFR 578.3, in accordance with 24 CFR 578.103.

4. **Address:** Project applicants must enter an address for all proposed and existing properties. **If** the location is not yet known, enter the expected location of the housing units. For Scattered-site and Single family home housing, **or** for projects that have units at multiple locations, project applicants should enter the address where the majority of beds will be located **or** where the majority of beds are located as of the application submission date. **If** the project uses tenant-based rental assistance, **or** if the address for scattered-site **or** single family homes cannot be identified at the time of application submission, enter the address for the project’s administration office. Projects serving victims of domestic violence, including human trafficking, must use a PO Box **or** other anonymous address to ensure the safety of program participants.
5. **Select the geographic area associated with this address:** Report the geographic area in which the housing type, units, and beds will be located. The list of geographic areas is limited by the state(s) selected on Screen 1D of the application. Multiple areas can be selected if units are located in more than one county **or** city. Hold down the “**Ctrl**” key to make multiple selections.

## FY 2017 CoC Program New Projects Detailed Instructions

### PH-PSH Part 5: Participants and Outreach

In Part 5 of the application, HUD expects project applicants to provide detail regarding the program participants who will be served, including basic household and subpopulation data, as well as outreach data.

#### PH-PSH Screen 5A. Project Participants - Households

The numbers on Screen 5A are intended to reflect the households and persons **proposed to be served on a given night when the project is at full operational capacity**. The screen must include at least one household and at least one person.

Screen 5A is separated into two sections: (1) Household(s) served in row one; and, (2) Person(s) served in rows 2 through 13. For both sections there are three editable columns that capture a specific type of household.

- **Households with at least One Adult and One Child:** For the proposed numbers under this column and household type, there must be at least one person at or above the age of 18, and at least one person under the age of 18.
- **Adult Households without Children:** For the proposed numbers under this column and household type, there must be at least one person at or above the age of 18, and no person(s) under the age of 18.
- **Households with Only Children:** For the proposed numbers under this column and household type, there may not be any person(s) at or above the age of 18; only person(s) under the age of 18.

The fourth column on the far left, “**Persons**,” read-only field automatically populates with four standard reporting categories determined by HUD.

- **Adult over age 24:** A subset of the category of “**Adults**” to disaggregate “**Youth**” from over age 24 adults.
- **Adults ages 18-24:** A category implemented to account for transition age youth. Youth previously captured under the category “**Adult**” should now be captured under the category “**Adults between the ages of 18 and 24.**”
- **Accompanied Children under age 18:** Includes all children and “**youth**” who are under the age of 18. “**Accompanied**” is defined as “**in the company of parent or legal guardian regardless of the age of the parent or legal guardian.**”
- **Unaccompanied Children under age 18:** Includes all children and youth who are under the age of 18. “**Unaccompanied**” is defined as “**without a parent or legal guardian,**” and can include persons under 18 who themselves have dependents, siblings, or other household members.

The tables are populated with white, dark grey and light grey fields. In each white field, list the number of households or type of person(s) served for the given household type. The dark grey cells are not applicable to the given type of persons, and the light grey cells, will total automatically once the screen is saved. The screen is designed to prevent project applicants from entering more households than persons for any given column, and at least one person must be entered for every column that has one or more households. The number and characteristics of persons that the project is expected to serve is recorded on this screen and should match the total number of units and beds requested on Screen 4B. HUD has removed the distinction between “**disabled**” and “**non-disabled**” on screen 5A as this information is adequately covered on screen 5B.

**Note:** Households served in PSH projects must have at least one household member with a qualifying disability as defined by 42 U.S.C 423(d) and 42 U.S.C 11382(2). However, for a household to be served in a unit dedicated for the chronically homeless individuals and families, the head of household must have a qualifying disability and meet all of the criteria required as defined in 24 CFR 578.3.

#### PH-PSH Screen 5B. Project Participants - Subpopulations

Screen 5B represents a detailed subpopulation breakdown of the persons reported in the three housing types on Screen 5A, including the number of chronically homeless program participants. Project applicants that selected “**100% Dedicated**” on Screen 3B must include 100 percent of participants under the appropriate “**Chronically**

## FY 2017 CoC Program New Projects Detailed Instructions

**Homeless**” columns. In addition, the total number of chronically homeless program participants must equal the number of beds dedicated to the chronically homeless in question “**2b. Beds**” on Screen 4B.

As with Screen 5A, the numbers here are intended to reflect the households and persons **proposed to be served when the project is at full operational capacity**. The screen is collectively exhaustive and must account for each person identified on Screen 5A. The screen will prevent submission until all persons are accounted for.

Screen 5B is separated into three tables corresponding to the three household types on Screen 5A. See 5A above for a description of the three household types. There are nine editable columns for all three tables that captures a competition priority subpopulation. One additional column accounts for persons who are not represented by the priority subpopulations.

**Table 5. Subpopulation Columns**

<b>Mutually Exclusive</b>
<ul style="list-style-type: none"> <li>• <b>Chronically Homeless Non-Veterans:</b> To fall under this column, persons <b>must be</b> chronically homeless per 24 CFR 578.3, <b>but not</b> veterans*.</li> <li>• <b>Chronically Homeless Veterans:</b> To fall under this column, persons <b>must be</b> chronically homeless per 24 CFR 578.3, <b>and</b> veterans*.</li> <li>• <b>Non-Chronically Homeless Veterans:</b> To fall under this column, persons <b>must not be</b> chronically homeless, <b>but must be</b> veterans*. * “Veterans” include all persons who served in the military, regardless of discharge status.</li> </ul>
<b>May Contain Duplicate Entries</b>
<ul style="list-style-type: none"> <li>• <b>Chronic Substance Abuse:</b> Persons identified as chronic substance abusers.</li> <li>• <b>Persons with HIV/AIDS:</b> Persons living with HIV/AIDS.</li> <li>• <b>Severely Mentally Ill:</b> Persons diagnosed as severely mentally ill.</li> <li>• <b>Victims of Domestic Violence:</b> Persons identified as meeting the criteria of Category 4 of the homeless definition.</li> <li>• <b>Developmental Disability:</b> Persons diagnosed with a developmental disability.</li> <li>• <b>Physical Disability:</b> Persons diagnosed with a physical disability.</li> </ul>
<b>Mutually Exclusive to All Other Columns</b>
<ul style="list-style-type: none"> <li>• <b>Persons not represented by an identified subpopulation:</b> Persons served by the organization that have not been diagnosed with or identified as falling under any of the previous subpopulation distinctions.</li> </ul>

These columns are populated with white, dark grey and light grey fields, and are dependent on the selections made in Screen 5A. If households and person(s) are added to a household type column in Screen 5A, then the corresponding table will be available for data entry in Screen 5B. If, however, no households and persons are added to a particular household type column in Screen 5A, then the corresponding table will not be available in Screen 5B. **Example:** If 3 households are entered into the “**Adults Only**” column on Screen 5A, but no households are entered into the “**Adults with Children**” or “with Children Only” columns on Screen 5A, then only the “**Adults Only**” table will be available for edit on Screen 5B.

In each white field of the available household tables, list the number of person(s) served for the given subpopulation column. Ignore the dark grey cells, which are not applicable to the given subpopulation, and ignore the light grey cells, which will total automatically after the screen is saved. If any number greater than “0” is entered into the column “**Persons not represented by an identified subpopulation,**” a mandatory textbox will appear at the bottom of the screen when the screen is saved. The project applicant must enter a description of the population being served that does not fall under any of the priority subpopulation columns.

The screen has additional controls that ensure that Screens 5A and 5B match. First, notice in Table 5 above that three columns are internally **mutually exclusive**. This means that a single person can only identify with one of the first three columns for each table (e.g., a single person cannot be a veteran while at the same time being a non-veteran). Columns 4 through 9, under “**May Contain Duplicate Entries;**” however, are not **mutually exclusive**. This means that a single person can identify with more than one column at the same time (e.g., a single person could be a veteran, suffering from a physical disability, and a victim of domestic violence). Column 10, **Persons not represented by an identified subpopulation,** is mutually exclusive to all other columns. This means that if a single person falls under column 10 the person does not identify with any of the other subpopulations.

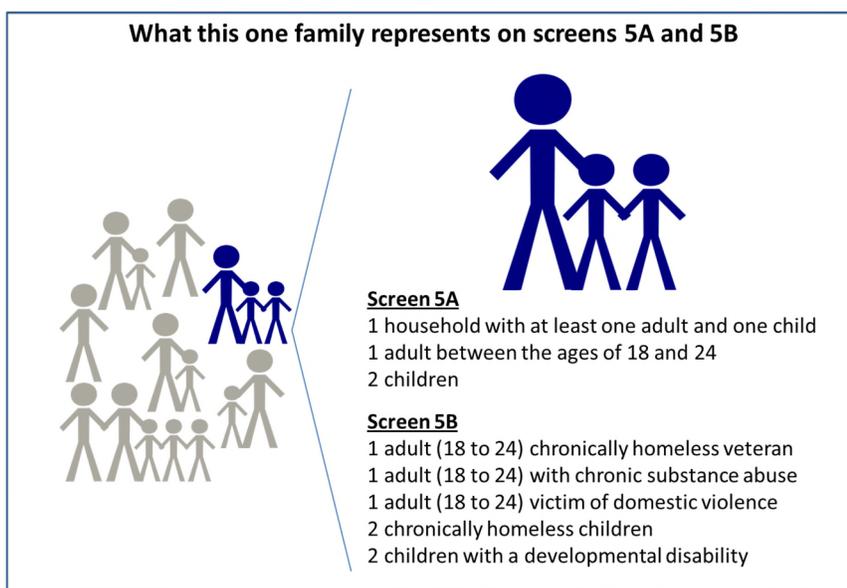
## FY 2017 CoC Program New Projects Detailed Instructions

There are several other important controls to understand. The “**Total Persons**” for each column, for example, cannot be larger than the total persons for that household category on Screen 5A. Likewise, no cell in each row can contain a number greater than the total number of persons in the corresponding age group as reported on Screen 5A. At the same time, the screen requires an entry for each person served, so at a minimum, the total number from the tables must equal the total number of persons in each corresponding household column from Screen 5A.

The **Characteristics** column (the first column) is populated with the same characteristics used on Screen 5A. They have been applied to each table based on their relevance to the tables housing type.

Total fields will calculate automatically when at least one household field and one person(s) field is entered and the screen is saved. Use them as a point of reference to ensure that all persons and households are entered correctly.

**Note:** The screen has a built-in control for PSH projects that selected “**100% Dedicated**” on Screen 3B, requiring that at least one person per household listed on Screen 5A is counted in one of the two CH columns (Chronically Homeless Non-Veterans and Chronically Homeless Veterans) on Screen 5B. If the number of persons counted in these two columns does not equal at least the number of households on Screen 5A, *e-snaps* will report an error and prevent application submission when the screen is saved.



### PH-PSH Screen 5C. Outreach for Participants

Screen 5C requires project applicants to identify where their eligible program participants will come from and must include percentages of program participants who will be served using requested funds.

It is the responsibility of the project applicant to ensure that program participants served in PSH are eligible for the project. For further guidance refer to 24 CFR part 578, particularly to the definition of homeless and chronically homeless in the FY 2017 CoC Program NOFA Section III.A.3.b. or DedicatedPLUS in Section III.A.3.d.

Individuals coming from an institution where they have resided for 90 days or less **and** have entered the institution from the streets, emergency shelter, or safe haven, maintain their homeless status during that time. Include these program participants in the percentages for streets, places not meant for human habitation, emergency shelters, and safe havens accordingly.

- 1. Enter the percentage of homeless person(s) who will be served by the proposed project for each of the following locations:** Indicate the estimated percentage of homeless persons who will be admitted from each of the listed locations. To submit the project application, the total estimated percentage must equal 100 percent.

## FY 2017 CoC Program New Projects Detailed Instructions

- **Directly from the street or other locations not meant for human habitation.**
  - **Directly from emergency shelters** (this includes domestic violence emergency shelters).
  - **Directly from safe havens.**
  - **Persons fleeing domestic violence** (or attempting to flee and including human trafficking, victims of sexual assault, stalking, and dating violence).
  - **Directly from transitional housing that was eliminated in the FY 2017 CoC Program Competition.** (This option will only appear if “**DedicatedPLUS**” is selected on Screen 3C)
  - **Directly from the TH Portion of a Joint TH and PH-RRH Component project.**
  - **Persons receiving services through a Department of Veterans Affairs(VA)-funded homeless assistance program.**
2. **Describe the outreach plan to bring these homeless participants into the project.** Use the textbox to provide for a brief explanation of how program participants will be identified and connected with the offered housing and services. For projects participating in a CoC’s coordinated entry process, simply explain that coordinated entry will provide outreach and access and describe the specific coordination and referral process between coordinated entry and this project.

### PH-PSH Part 6: Budgets

Part 6 of the application requests project information related to budget requests and information about required grant matching funds.

**Funding Limitations:** For FY 2017, new **PH-PSH** projects are eligible for **Permanent Housing Bonus** funds or **reallocation** funds. Within each CoC, the total available amount for new Permanent Housing Bonus projects is limited to 6 percent of the CoC’s Final Pro-Rata Need (FPRN). New **PH-PSH** projects requesting funding through the **reallocation** process are limited to the amount of funds made available by a CoC eliminating or reducing eligible renewal grants. To confirm the maximum amount available for a new **PH-PSH** project application; it is important to consult with the CoC’s Collaborative Applicant **prior** to submitting a project application.

**Note:** Pay special attention to Question 2 on Screen 6A and **accurately** identify the project as being created using the **reallocation** process or as a **Permanent Housing Bonus** project.

**Maximum Grant Terms:** The maximum grant term for projects under the CoC Program is dependent upon the costs requested in the budget and will have a significant impact on the total amount requested and will have significant implications for both project and CoC funding. Carefully review Section IV.B.2. of the FY 2017 CoC Program Competition NOFA before selecting a grant term and contact your CoC’s Collaborative Applicant to confirm your selection prior to submitting the application.

**Note:** All new project applications that are conditionally awarded must begin carrying out the activities described in the application on or before September 30, 2019 to comply with the funding obligation standards contained in the appropriations bill that authorizes the funds for this competition. HUD strongly encourages all projects with rental assistance funding to begin within 12 months of award. Refer to Section IX.B.2. of the FY 2017 CoC Program Competition NOFA for more details.

### PH-PSH Screen 6A. Funding Request

Screen 6A provides the framework through which a project applicant creates a project budget.

1. **Will it be feasible for the project to be under grant agreement by September 30, 2019?** Select “**Yes**” or “**No**” to indicate whether the project will begin operating by September 30, 2019. Unobligated funds will not be available after September 30, 2019. Project applicants will not be able to submit project applications that cannot feasibly meet the September 30, 2019 deadline.
2. **Is the project proposing to use funds reallocated from the CoC’s annual renewal demand or is the project applying for funding through the Permanent Housing Bonus?** Select “**Reallocation**” if the project is being created using the reallocation process as indicated on the Reallocation form submitted

## FY 2017 CoC Program New Projects Detailed Instructions

by the Collaborative Applicant. Select “**Permanent Housing Bonus**” if the project is being created through the Permanent Supportive Housing Bonus.

- 3. Does this project propose to allocate funds according to an indirect cost rate?** Select “**Yes**” or “**No**” to indicate whether the project has an approved indirect cost plan in place **or** will propose an indirect cost plan by the time of conditional award. For more information concerning indirect costs plans, refer to 2 CFR 200.203(c)(2) and contact your local HUD field office.

**\*If “Yes,” project applicants must respond to the following questions:**

- 3a. Please complete the indirect cost rate schedule below:** Complete at least one row using information from either your approved plan **or** your proposal.

Administering Department/Agency	Indirect Cost Rate	Direct Cost Base
	%	
	%	
	%	

- 3b. Has this rate been approved by your cognizant agency?** Select “**Yes**” if the indirect cost rate has already been approved by your cognizant agency. Select “**No**” if it has either not been submitted **or** has been submitted, but has not yet been approved by your cognizant agency.
- 3c. Do you plan to use the 10% de minimis rate?** Select “**Yes**” only if the project plans to use the 10 percent *de minimis* rate as described in 2 CFR 200.203(c)2).
- 4. Select a grant term:** Indicate the number of years for which funding is being requested—carefully review Section IV.B.2. of the FY 2017 CoC Program Competition NOFA. The selection made here will automatically calculate the total amount of funding requested on the budget screens. For example, if 1 year is selected, the budget line item(s) selected will calculate 1-year amounts. **If 2 years** is selected, the budget line item(s) selected will calculate 2 year amounts. The one exception is if a project is eligible for a 15-year grant term, the maximum amount of funding project applicants can request will only be for 5 years. **Note:** If any new project requests new construction, acquisition, **or** rehabilitation funds, the grant term must be a minimum of a 3-year grant term and may request up to a 5-year grant term.
- 5. Select the costs for which funding are being requested:** Check the box next to the eligible costs for which funding is being requested (be sure to review 24 CFR part 578, Subpart D; Program Components and Eligible Costs and Section 578.87(c)—Restriction on Combining Funds to ensure eligible use of funds). Each checked box unlocks the corresponding budget line item, screens 6B through 6H:
- **Acquisition/Rehabilitation/New Construction:** Check the box to unlock and reveal the Acquisition/Rehabilitation/New Construction budget screen. See note above on grant term selection.
  - **Leased Units:** Check the box to unlock and reveal the Leased Units budget screen.
  - **Leased Structures:** Check the box to unlock and reveal the Leased Structures budget screen. Leased structures are buildings leased by the project applicant that contain multiple units for program participants **or** serve as the structure for supportive services **or** operations.
  - **Rental Assistance:** Check the box to unlock and reveal the Rental Assistance budget screen. The lease must be between the landlord and the program participant; except for Sponsor Based Rental Assistance (SRA), where the sponsor owns **or** leases the unit and has a sublease with the program participant.
  - **Supportive Services:** Check the box to unlock and reveal the Supportive Services budget screen.
  - **Operating:** Check the box to unlock and reveal the Operating budget screen.
  - **HMIS:** Check the box to unlock and reveal the HMIS budget screen.

## FY 2017 CoC Program New Projects Detailed Instructions

### PH-PSH Screen 6B. Acquisition/Rehabilitation/New Construction Budget

Screen 6B appears if the Acquisition/Rehabilitation/New Construction budget cost is selected on Screen 6A. Complete this screen to request funds for all development activities. The primary screen on Screen 6B will aggregate the acquisition, rehabilitation, and new construction costs requested for each proposed project site to calculate the total for all costs requested. To add a site, click the add  icon to access the detail budget screen(s). These fields will populate and update automatically when new detail screen(s) are added to the list.

To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

Project applicants must enter a specific location for each site requesting capital costs. Create a name for each site that you will recognize, which will populate the list on the primary screen. Then fill out Street Address, City, State, and Zip Code. The address must be the actual site of the proposed development activities and not the administrative office of the project applicant **or** subrecipient. Projects serving victims of domestic violence, including human trafficking, must use a PO Box **or** other anonymous address to ensure the safety of program participants.

- Project applicants must then enter the amount requested for eligible development costs at the structure site. A field is available for each cost type; however, *e-snaps* is designed to restrict how development costs can be requested, and 24 CFR 578.43-47 regulates how the three development costs may be used together

If grant funds are used for new construction, the project applicant must demonstrate that the costs of new construction are substantially less than the costs of rehabilitation **or** that there is a lack of available appropriate units that could be rehabilitated at a cost less than new construction.

### PH-PSH Screen 6C. Leased Units Budget

Screen 6C appears if the “**Leased Units**” budget line item is selected on Screen 6A. Screen 6C opens with a primary screen that will aggregate the total assistance requested and total units requested for each “**Leased Units Budget Detail**” screen(s). Click the add  icon to access the “**Leased Units Budget Detail**” screen and detail the unit configuration for a given FMR area. Project applicants requesting leased unit costs are required to itemize their requests by unit size and indicate the HUD paid rent per month (at or below the Fair Market Rent (FMR) displayed for reference). The screen automatically calculates the annual rate per unit size and the total leased units request for the grant term selected on Screen 6A. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

**Metropolitan or non-metropolitan fair market rent area:** Select the appropriate FMR area where the units will be located. The list is sorted by state abbreviation, and most areas are calculated by country **or** metropolitan area. The selected FMR area will be used to populate the rents in the FMR Area column in the chart on this screen. For projects that operate in more than one geographic location, the project applicant must create a separate detail budget screen for each FMR area.

Project applicants must enter the leased units annual budget amounts according to the following:

- **Size of units:** These options are system generated. Unit size is defined by the number of distinct bedrooms and not by the number of distinct beds.
- **Number of units:** For each unit size, enter the number of units for which funding is being requested.
- **FMR:** These fields are populated with the FY 2016 FMRs based on the FMR area selected by the project applicant and are for reference only. The FMRs are available online at [www.huduser.org/portal/datasets/fmr.html](http://www.huduser.org/portal/datasets/fmr.html).
- **HUD Paid Rent:** For each unit size, enter the rent to be paid by this grant. The rent cannot exceed the FMR amount in the previous column; however, project applicants may request amounts less than the

## FY 2017 CoC Program New Projects Detailed Instructions

FMR. Once funds are awarded, recipients must document compliance with the rent reasonableness requirement set forth in 24 CFR Part 578.49(b)(2).

- **12 Months:** These fields are populated with the value 12 to calculate the annual rent request.
- **Total Request:** This column populates with the total calculated amount from each row.
- **Total Units and Annual Assistance Requested:** This row is automatically calculated as the sum of the amounts entered into each “**HUD Paid Rent**” field multiplied by 12 months, and the sum of the amounts entered into the “**number of units**” field.
- **Grant Term:** This read-only field is populated based on the grant term selected on the “**Funding Request**” screen.
- **Total Request for Grant Term:** This field will equal the total annual assistance amount calculated above multiplied by the grant term.

All gray fields will be calculated once the required fields have been completed and the screen saved.

Often, when leasing a structure(s) or unit(s) for the purpose of program participant housing or supportive services, the cost of maintenance, repair, and utilities are included as a responsibility of the landlord in the lease agreement. However, in instances where these costs are not included in the lease agreement, these costs are generally eligible under the operating budget line item and should be included if they are anticipated.

All automatic fields will be calculated after the required field has been completed and saved.

### PH-PSH Screen 6D. Leased Structures Budget

Screen 6D appears if the Leased Structures budget line item is selected on Screen 6A. Screen 6D will aggregate the total assistance requested. To add leased structures, click the add  icon to access the detail budget screen(s). The primary 6D screen will populate and update automatically when new detail screen(s) are added to the list. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

The leased structures budget detail screen(s) requires a structure name and address and the monthly HUD paid rent. This rent amount will be automatically multiplied by 12 months and then by the grant term selected on screen 6A to determine the total structure funding request. Leased structures are not confined to the project area’s FMR amounts. Grant funds can pay the actual costs of leasing a structure **or** structures; however, in order for grant funds to be used, the rent paid must be reasonable when compared to rents being charged by other owners for similar spaces and may not exceed rents currently being charged by the same owner for comparable unassisted spaces.

### PH-PSH Screen 6E. Rental Assistance Budget

Screen 6E appears if the Rental Assistance budget line item is selected on Screen 6A. Screen 6E will aggregate the total assistance requested and total units requested for each FMR area **or** rental assistance type.

To add units for a new FMR, click the add  icon to access the detail budget screen(s). The primary 6E screen will populate and update automatically when new detail screen(s) are added to the list. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

**Type of Rental Assistance:** Select the type of rental assistance (i.e., PRA, SRA, **or** TRA) from the dropdown menus on the top of each screen. The selection must be appropriate to the population, type of housing and services that the project will serve according to the detail provided throughout the rest of the application. **If** there is more than one rental assistance types for the project, the project applicant must create a separate detail budget screen for each type, even if they are in the same FMR area.

**Metropolitan or non-metropolitan fair market rent area:** Select the appropriate FMR area where the units will be located. The list is sorted by state abbreviation, and most areas are calculated by country **or**

## FY 2017 CoC Program New Projects Detailed Instructions

metropolitan area. The selected FMR area will be used to populate the rents in the FMR Area column in the chart on this screen. For projects that operate in more than one geographic location, the project applicant must create a separate detail budget screen for each FMR area.

Complete the **Rental Assistance Annual Budget** chart that accounts for the size of units, the number of units being requested, the FMR for each unit size, multiplied by 12 months to account for annual rent, and then summarized by row in the “**Total Request**” column:

- **Size of units:** These options are system generated. Unit size is defined by the number of distinct bedrooms and not by the number of distinct beds.
- **Number of units:** For each unit size, enter the number of units for which funding is being requested.
- **FMR:** These fields are populated with the FY 2016 FMRs based on the FMR area selected by the project applicant. FMRs are available at [www.huduser.org/portal/datasets/fmr.html](http://www.huduser.org/portal/datasets/fmr.html).
- **12 Months:** These fields are populated with the value 12 to calculate the annual rent request.
- **Total Request:** This column populates with the total calculated amount from each row.
- **Total Units and Annual Assistance Requested:** This column is automatically calculated based on the sum of the total requests per unit size per year.
- **Grant Term:** This read-only field is populated based on the grant term selected on the “**Funding Request**” screen. This reflects “years of funding” and may not match the “**Grant Term**” selected on previous screens. The maximum “years of funding” is set at 5 years, but the maximum possible grant term is set at 15 years. See Section IV.B.2. of the FY 2017 CoC Program Competition NOFA for more information.
- **Total Request for Grant Term:** This field is automatically calculated based on the number of units, multiplied by the FMR per unit size, multiplied by 12 months, multiplied by the grant term.

All automatic fields will be calculated after the required field has been completed and saved.

### PH-PSH Screen 6F. Supportive Services Budget

Screen 6F appears if the “**Supportive Services**” budget line item is selected on Screen 6A. The supportive services listed are exhaustive based on the eligible supportive services in 24 CFR 578.53.

**Note:** The only cost category not on this screen is “**Direct provision of services.**” As 24 CFR.53(e)(17) explains, if the service is being directly delivered by the recipient **or** subrecipient, eligible costs under that service item also may include: the cost of labor **or** supplies, and materials incurred by the recipient **or** subrecipient in directly providing supportive services to program participants; and the salary and benefit packages of the recipient and subrecipient staff who directly deliver the services.

The itemized budget screen includes 17 eligible costs:

- |                                 |                                        |
|---------------------------------|----------------------------------------|
| 1. Assessment of Service Needs  | 10. Life Skills                        |
| 2. Assistance with Moving Costs | 11. Mental Health Services             |
| 3. Case Management              | 12. Outpatient Health Services         |
| 4. Child Care                   | 13. Outreach Services                  |
| 5. Education Services           | 14. Substance Abuse Treatment Services |
| 6. Employment Assistance        | 15. Transportation                     |
| 7. Food                         | 16. Utility Deposits                   |
| 8. Housing/Counseling Services  | 17. Operating Cost*                    |
| 9. Legal Services               |                                        |

\*Project applicants may only include 17. Operating Costs (maintenance, repair, building security, furniture, utilities, and equipment) in the Supportive Services budget if the costs are for a facility that is used to provide supportive services for program participants.

Enter the quantity, detail, and total budget request for each supportive services cost.

- **Eligible Costs:** *e-snaps* populates a list of eligible supportive services for which funds can be requested. The costs listed are the only costs allowed under 24 CFR 578.53. (Refer to 24 CFR 578.53 for details on eligible supportive services costs.)

**Note:** “**Security Deposits**” is not listed as an eligible supportive service cost. Security deposits are incorporated into the eligible activities under the rental assistance budget line item.

- **Quantity AND Description:** Enter the quantity (i.e. numbers) and description details for each activity for which funds are being requested. **Quantity and description details should be thorough** (e.g., for staffing: position title–1 FTE @ \$45,000 including benefits or 50 hours @ \$25 per hour including benefits). Simply stating 1 FTE is **NOT** providing quantity and description details and limits HUD’s understanding of costs being requested. Failure to enter adequate quantity and description details will result in HUD placing conditions on the conditional award and will delay funding.
- **Annual Assistance Requested:** Enter the annual amount requested for each activity. The amount entered must only be the amount that is **directly** related to providing supportive services to homeless program participants.
- **Total Annual Assistance Requested:** This field is automatically calculated based on the sum of the annual assistance requests entered for each activity.
- **Grant Term:** This read-only field populates based on the grant term selected on the “**Funding Request**” screen.
- **Total Request for Grant Term:** This field automatically calculates based on the total amount requested for each eligible cost multiplied by the grant term.

All automatic fields will be calculated after the required field has been completed and saved.

### **PH-PSH Screen 6G. Operating Budget**

Screen 6G appears if the Operating budget cost is selected on Screen 6A. The operating costs listed are all inclusive and determined by the eligible operating costs described in 24 CFR 578.55. Operating costs are associated with the operations of the project. Complete the Operating budget screen to request funds for eligible operating costs for each year of the grant term.

**Note:** Per 24 CFR 578.59(a), staff overhead costs directly related to carrying out operating activities are eligible as part of those activities listed on the operating budget. The itemized budget screen includes 7 eligible costs:

- |                                 |                                |
|---------------------------------|--------------------------------|
| 1. Maintenance and Repair       | 5. Electricity, Gas, and Water |
| 2. Property Taxes and Insurance | 6. Furniture                   |
| 3. Replacement Reserve          | 7. Equipment                   |
| 4. Building Security            |                                |

Enter the quantity, detail, and total budget request for each operating cost.

- **Eligible Costs:** *e-snaps* populates a list of eligible operating costs for which funds can be requested. The costs listed are the only costs allowed under 24 CFR 578.55. Refer to the 24 CFR 578.55 for details on eligible operating costs.
- **Quantity AND Description:** Enter the quantity (i.e. numbers) and description details for each activity for which funds are being requested. **Quantity and description details should be thorough** (e.g., for staffing: use position title: 1 FTE @ \$45,000 including benefits or 50 hours @ \$25 per hour including benefits). Simply stating 1 FTE is **NOT** providing quantity and description details and limits HUD’s understanding of costs being requested. Failure to enter adequate quantity and description details will result in HUD placing conditions on the conditional award and will delay funding.
- **Annual Assistance Requested:** Enter the amount requested for each activity. The amount entered must only be the amount that is **directly** related to operating the housing **or** supportive services facility.
- **Total Annual Assistance Requested:** This field is automatically calculated based on the sum of the annual assistance requests entered for each activity.

## FY 2017 CoC Program New Projects Detailed Instructions

- **Grant Term:** This read-only field is populated based on the grant term selected on the “**Funding Request**” screen.
- **Total Request for Grant Term:** This field is automatically calculated based on the total amount requested for each eligible cost multiplied by the grant term.

Operating costs that are included in lease agreements to house program participants and for which a leased unit **or** leased structures budget line item has been requested should not be included on this screen. Instead, these costs should be considered a part of the leased units **or** leased structures budget request. Similarly, when leasing a structure used solely for the purpose of providing supportive services to program participants and these costs are not included in the lease (or where the recipient **or** subrecipient owns the building), the costs of operating that structure are eligible and **must be charged to the supportive services budget line item “17. Operating Costs”** and not the operating costs budget line item. Operating costs cannot be combined in the same unit as rental assistance costs under the CoC Program. Where a single project requests rental assistance and operating budget line items, the applicant must demonstrate that the costs are used in distinct, non-overlapping, units.

### PH-PSH Screen 6H. HMIS Budget

Screen 6H appears if the HMIS budget line item is selected on Screen 6A. The HMIS costs listed are all inclusive and determined by the eligible HMIS costs described at 24 CFR 578.57. Complete the HMIS budget screen to request funds for eligible HMIS costs.

**Note:** Per CFR 578.59(a), staff and overhead costs directly related to carrying out HMIS activities are eligible as part of those activities listed on the HMIS budget. The itemized budget screen organizes all eligible HMIS costs from 24 CFR 578.57 into the following 5 categories:

1. **Equipment**—central server(s), personal computers and printers, networking, and security;
2. **Software**—software/user licensing, software installation, support and maintenance, and supporting software tools;
3. **Service**—training by third parties, hosting/technical services, programming (customization, system interface, data conversion), security assessment setup, internet access, facilitation, and disaster recovery;
4. **Personnel**—project management/coordination, data analysis, programming, technical assistance and training, and administrative support staff; and
5. **Space & Operations**—space costs and operational costs associated with that space.

If the recipient **or** subrecipient is a victim services provider, **or** a legal services provider, it may use CoC Program funds to establish and operate a comparable database that complies with HUD’s HMIS requirements, listing costs under the comparable category on Screen 6H.

Enter the quantity, detail, and total budget request for each HMIS cost.

- **Quantity AND Description:** Enter the quantity (i.e. numbers) and description details for each activity for which funds are being requested. **Quantity and description details should be thorough** (e.g., for staffing: use position title: 1 FTE @ \$45,000 including benefits or 50 hours @ \$25 per hour including benefits). Simply stating 1 FTE is **NOT** providing quantity and description details and limits HUD’s understanding of costs being requested. Failure to enter adequate quantity and description details will result in HUD placing conditions on the conditional award and will delay funding.
- **Annual Assistance Requested:** Enter the annual amount requested for each activity.
- **Total Annual Assistance Requested:** This field automatically calculates based on the sum of the annual assistance requests entered for each activity.
- **Grant Term:** This read-only field populates based on grant term from the “**Funding Request**” screen.
- **Total Request for Grant Term:** This field automatically calculates based on the total amount requested for each eligible cost multiplied by the grant term.

## FY 2017 CoC Program New Projects Detailed Instructions

All automatic fields will be calculated after the required field has been completed and saved.

### PH-PSH Screen 6I. Sources of Match

The “**6I Sources of Match**” screen is applicable to all project applications and enables project applicants to enter the CoC Program required match, including the type of source and the value of the match commitment.

For detailed information that describes CoC Program match requirements see 24 CFR 578.73.

**Note: Policy update in CoC Program implementation.** Program income **may** be counted as match for CoC Program funds. CoC Program eligible costs paid for by program income may be considered match for grants awarded in the FY 2017 CoC Program Competition.

**New in the FY 2017 CoC Program Competition,** HUD added the following new questions on the primary “**Sources of Match**” screen concerning CoC-generated program income because project applicants that intend to use program income as match must provide an estimate of how much of the program income will be used for match.

- 1. Does this project generate program income as described in 24 CFR 578.97 that will be used as Match for this grant?** Answer “Yes” or “No.” If “No,” no further response is required. If “Yes,” the following questions and text box will appear.
  - 1a. Briefly describe the source of the program income:** Enter a description of the source of the program income. **Note:** CoC-generated program income includes occupancy charges paid to the recipient or subrecipient. These amounts are considered program income and may be used as match funds.
  - 1b. Estimate the amount of program income that will be used as Match for this project:** Enter estimated amount in the field provided.

Match funds are acquired from sources outside of this grant’s funding request. The match information entered in *e-snaps* should be based on the **current commitments at the time of project application, covering the requested grant operating period (i.e., grant term), and NOT based on projections.** HUD expects the amount(s) listed on this screen to be accurate, with a commitment letter(s) in place that includes the amount(s) listed. Match contributions can be cash, in-kind, or a combination of both. For match to be counted as cash or in-kind, amounts must be used for CoC Program eligible costs. Match must be equal to or greater than 25 percent of the total grant request for all eligible costs including Administration costs but excluding **Leasing** costs (i.e., Leased Units and Leased Structures). **Example:** If the “**Total Assistance Requested**” from the project applicant is \$100,000, and the project applicant did not request costs for Leased Units or Leased Structures, then the project applicant must secure commitments for match funds equal to or greater than \$25,000. The match amount could be all cash, all in-kind contributions, or a mixture of both, and used for any CoC Program eligible activities the project applicant chooses.

HUD strongly encourages project applicants to review the FAQs posted at [www.hudexchange.info/coc/faqs/](http://www.hudexchange.info/coc/faqs/), by searching for the keyword “**match.**”

The primary “**Sources of Match**” screen presents a summary for match that will aggregate multiple cash and in-kind commitments entered in the “**Sources of Match Detail**” screen(s) expected from each source and then calculate the totals.

To add a match commitment, click the add  icon to access a new “**Sources of Match Detail**” screen for each commitment. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

**Complete the following fields in the “Sources of Match Detail” screen for each match commitment:**

- **This commitment will be used as Match.** “Yes” is the default of this read-only field.
- **Type of Commitment:** Select Cash or In-kind (non-cash) to indicate the type of contribution that describes this match commitment.

## FY 2017 CoC Program New Projects Detailed Instructions

**Note:** If applications include third-party In-Kind match on Screen 6D a separate 7A attachment screen will appear that project applicants should use to attach MOU(s) documentation that confirms the in-kind match commitment. If the MOU documentation is not available at application submission, it will be a condition for grant execution, if HUD conditionally awards the project.

- **Type of source:** Select “**Private**” or “**Government**” to indicate the source of the contribution. Funds from HUD-VASH (VA Supportive Housing program) and other federal programs are eligible sources of match and are considered Government sources. HUD encourages project applicants to include funds from these sources when possible.
- **Name the Source of the Commitment:** Be specific and include the office or grant program as applicable. Enter the name of the entity providing the contribution. It is important that project applicants provide sufficient detail so that HUD can quickly identify and approve the commitment source.
- **Date of written commitment:** Enter the date of the written contribution.
- **Value of written commitment:** Enter the total dollar value of the contribution.

After the project applicant saves the primary “**Sources of Match**” screen, the values entered on the “**Sources of Match Detail**” screen(s) will populate the summary amounts. The Cash, In-Kind, and Total Match will also automatically populate the “**Summary Budget**” screen where the 25 percent match requirements will be calculated and applied. If the amounts on the “**Summary Budget**” screen are too low, additional match funds must be added to the “**Sources of Match Detail**” screen(s).

### PH-PSH Screen 6J. Summary Budget

Screen 6J summarizes the funding request for the total term of the project as entered in the budget Screens 6B through 6I. Use this screen to verify the information recorded on each budget detail screen(s) and return to relevant detail screen(s) that have aggregated on Screen 6J incorrectly. This screen includes only one field that can be completed before submission. Project administrative costs can be recorded as “**Admin**” on this screen. All fields are read-only with exception to the total Requested for Grant Term for Admin.

- **Admin (Up to 10%):** Enter the amount of requested administration funds. *e-snaps* will not allow project applicants to request more than 10 percent of the request listed in the field “**6. Sub-Total Costs Requested.**” If an ineligible amount is entered, *e-snaps* will report an error and prevent application submission when the screen is saved.

The summary budget will include a summary of Cash, In-Kind, and Total Match entered on Screen 6I. If an amount less than 25 percent of the total budget, including admin costs but excluding leasing costs, is indicated, *e-snaps* will report an error and prevent application submission when the screen is saved. To make adjustments, return to Screen 6I. **Note:** Cash and In-Kind Match entered on Screen 6I must qualify as eligible program expenses under the CoC Program. Compliance with eligibility requirements will be verified at grant agreement.

The total values are automatically calculated by *e-snaps* when applicants click the “**Save**” button.

[\[RETURN to “All Projects Part 3 through Part 6: Component Types”\]](#)

For more information concerning the FY 2017 CoC Program Competition, visit the HUD Exchange at: [FY 2017 Continuum of Care \(CoC\) Program Competition: Funding Availability](#) and [CoC Program Competition: e-snaps Resources](#).

# Permanent Housing (PH) – Rapid Re-housing (RRH) New Project Applications

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[\[RETURN to “All Projects Part 3 through Part 6: Component Types”\]](#)

The following instructions and screens apply to new Permanent Housing (PH)–Rapid Rehousing (RRH) projects only, and cover PH-RRH projects funded through both the Reallocation process and the Permanent Housing Bonus. Before completing this part of the application, carefully review the special eligibility requirements for new PH-RRH projects in the FY 2017 CoC Program Competition NOFA and be aware that requirements for some questions may vary depending on the type of funding stream being requested.

**Note:** Applicants applying for new “**Expansion Projects**” should use at least a portion of the existing renewal project name when naming the expansion project, and add the word “**Expansion**” at the end of the name.

## PH-RRH Part 3: Project Information

Based on the component type selected on Screen 3A, in this case “**PH**,” HUD expects project applicants to provide a full description of the project scope on Screen 3B, including the selection of “**RRH**,” in accordance with **PH-RRH** requirements at 24 CFR 578.37.

### PH-RRH Screen 3A. Project Detail

All fields on Screen 3A must be completed for submission of the application.

- 1a. CoC Number and Name:** Select the CoC number and name from the dropdown menu to which the applicant intends to submit this project application. **Selecting the correct CoC is critical.** The dropdown menu contains all CoCs that successfully registered in the FY 2017 CoC Program Registration process and is listed according to the CoC Number (e.g., NE-502) and CoC Name (e.g., Lincoln County CoC). Based on the selection made in this field, *e-snaps* will send this project application to the CoC selected—once it is complete and submitted—for their review and to go through the local CoC selection process.

**Note:** Project applicants should only use the “**No CoC**” option in rare instances where a project is located in a geographic area not currently served by a CoC. If project applicants select “**No CoC**,” their project applications will not be connected to a CoC Application for this competition and this may affect HUD’s ability to award funds for a project application.

- 1b. CoC Collaborative Applicant Name:** Select the name of the CoC Collaborative Applicant for the CoC to which the project applicant intends to submit the project application. The dropdown menu for this field are based on the CoC Number and Name selected above. This list is populated with the CoC’s designated Collaborative Applicant name that registered during the FY 2017 CoC Program Registration process.
- 2. Project Name:** No action required. This field populates from the *e-snaps* “**Project**” screens. Project applicants cannot modify the populated name in this field; however, project applicants can modify the project name by exiting the project application screens and opening the *e-snaps* “**Project**” screens by selecting “**Projects**” from the left menu.
- 3. Project Status:** This field defaults to the “**Standard**” option and project applicants should only change it to “**Appeal**” if they are appealing a CoC’s decision to reject the project application in the local CoC competition; meaning, an eligible project applicant believes they were denied the opportunity to participate in the local CoC planning process in a reasonable manner. All other project applicants should leave the field with the option “Standard.” If the project applicant selects “**Appeal**,” Screen 8A “**Notice of Intent to Appeal**” will appear on the left menu. For further information about appeals see instructions for Screen 8A above.

## FY 2017 CoC Program New Projects Detailed Instructions

- 4. Component Type:** For PH-RRH projects, project applicants must select “PH.”
- 5. Title V:** Title V of the McKinney-Vento Act allows unutilized, underutilized, excess, or surplus federal properties to be used by homeless services providers for assisting persons experiencing homelessness. Select “Yes” or “No” to indicate whether the project will include one or more properties that have been or will be conveyed through the Title V process.

### PH-RRH Screen 3B. Description

All fields on Screen 3B are required and provide HUD with a detailed description of the project.

- 1. Provide a description that addresses the entire scope of the proposed project:** Provide a clear and concise description of the scope of the project. The description should describe the community needs, target population(s) to be served, project plan for addressing the identified housing and supportive service needs, projected project outcome(s), coordination with other sources or partners, and the reason CoC Program support is required. The information provided in this narrative must not conflict with information provided in other parts of the project application.
- 2. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work:** Demonstrate how full capacity will be achieved over the term requested in this application. **Note:** To expend funds within statutorily required deadlines, project applicants must be able to begin assistance within 12 months of conditional award. The estimated schedule should reflect these statutorily required deadlines.
- 3. Will your project participate in a CoC Coordinated Entry Process?** Participation in a CoC coordinated entry process is a requirement of 24 CFR part 578 for all recipients of CoC Program funds. New project applicants should select “Yes” if they will participate in a CoC coordinated entry process (known as centralized or coordinated assessment system in 24 CFR part 578; Notice: CPD-17-01, [Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System](#); and the FY 2017 CoC Program NOFA) as soon as the project begins operations. **If** the CoC does not yet have a coordinated entry process, **or** if the project will not participate, select “No.” **Note:** coordinated entry is a process designed to coordinate program participant intake, assessment, and provision of referrals. A coordinated entry process covers the CoC’s geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool and process. Unless you plan to participate in a process that is coordinated by the CoC across all providers in the community, select “No.”
  - 3a. If “No;” Please explain why your project does not participate in a CoC Coordinated Entry Process.** Provide an explanation for why you do not expect the project to participate in a community’s coordinated entry process during the requested grant term.
- 4. Please identify the specific population focus. (Select ALL that apply)** If a subpopulation focus for your organization is not listed, check the box next to “Other” and then enter in the subpopulation in the text box provided.
- 5. Housing First.** Housing First is a model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions (such as sobriety or a minimum income threshold). It is an approach to quickly connect individuals and families experiencing homelessness to permanent housing without barriers to entry (e.g., sobriety, treatment or service participation requirements) and without preconditions that might lead to the program participant’s termination from the project (e.g., supportive service participation requirements or rules beyond normal tenancy rules). Supportive services are voluntary, but are offered to maximize housing stability and prevent returns to homelessness. Review Sections II.A.4., II.B.17.c., III.A.3.g., and VII.A.1.g. of the FY 2017 CoC Program Competition NOFA and the Housing First in PSH brief at [www.hudexchange.info/resource/3892/housing-first-in-permanent-supportive-housing-brief/](http://www.hudexchange.info/resource/3892/housing-first-in-permanent-supportive-housing-brief/) for more information. The questions in this section help identify whether your project operates consistent with a Housing First approach.

## FY 2017 CoC Program New Projects Detailed Instructions

- a. **Does the project quickly move participants into permanent housing?** Select “Yes” to this question if your project will quickly move program participants into permanent housing without requiring additional steps (e.g., required stay in transitional housing before moving to permanent housing) when program participants determine that they want assistance moving into permanent housing. If this is a domestic violence (DV) project application, project applicants should select “Yes” if the project will quickly move program participants into permanent housing after immediate safety needs identified by the program participant are addressed (e.g., survivors believe they are still in danger from violent situations and choose to wait until the dangerous situations are addressed before moving into permanent housing, but must be assisted in quickly moving to permanent housing as soon as they believes it is safe). Select “No” if the project does not work to move program participants quickly into permanent housing. The questions in this section helps identify whether your project operates consistent with a Housing First approach.
  - b. **Does the project ensure that participants are not screened out based on the following items? (Select ALL that apply):** Check the box next to each item to confirm that your project does not have the following barriers at the time of completing this application: (1) having too little or little income; (2) active or history of substance use; (3) having a criminal record with exceptions for state-mandated restrictions; and (4) History having a history of victimization (e.g., domestic violence, sexual assault, childhood abuse). If all of these barriers still exist at the time of completing this application, select “None of the above.”
  - c. **Does the project ensure that participants are not terminated from the program for the following reasons? (Select all that apply).** Check the box next to each item to confirm that your project does not terminate participants for the following reasons: (1) failure to participate in supportive services—not including case management that is for the purposes of engagement only; (2) failure to make progress on a service plan; (3) loss of income or failure to improve income; and (4) any other activity not covered in a lease agreement typically found in the project’s geographic area. If a program participant can be terminated for any of these reasons at the time of application, select “None of the above.”
  - d. **Does the project follow a Housing First approach?** *e-snaps* automatically populates this read-only field based on the responses above. This field will only indicate “Yes” if the project applicant selected “Yes” for 3a **and** checked all of the boxes for 3b and 3c, to confirm a Housing First approach. Otherwise, this field will indicate “No” to confirm that the project will not follow a Housing First approach. Any project application submitted as using a Housing First approach must continue operating as such.
6. **If applicable, describe the proposed development activities and the responsibilities that the applicant and potential subrecipients (if any) will have in developing, operating, and maintaining the property?** For PH-RRH projects; place N/A in the textbox. Property development capital costs (acquisition, new construction, and or rehabilitation) are not eligible costs for PH-RRH projects.
  7. **Will the PH project provide PSH or RRH?** PH-RRH projects must Select “RRH.” This selection will impact the budget screens that appear later in the application. PH-RRH project applicants that select “RRH” will only be able to select Rental Assistance as a housing option on Screen 6A and enter housing activities on Screen 6C. **Note:** Project applicants will select the *type* of rental assistance on the detailed budgets on Screen 6E and PH-RRH projects can *only* select tenant-based rental assistance (TRA).
  8. **Will participants be required to live in a particular structure, unit, or locality, at some point during the period of participation?** Select “Yes” or “No” to indicate whether program participants will be required to live in a specific place determined by the project applicant at any point. Select “Yes” if any portion of their project will be site-based. **Note:** Since PH-RRH projects are tenant-based rental assistance (TRA), recipients may only require program participants to live in a specific area and in a specific structure only where it is necessary to facilitate the coordination of supportive services.

## FY 2017 CoC Program New Projects Detailed Instructions

However, requiring program participants to reside in a certain structure **or** area is not consistent with the RRH model. Therefore, HUD encourages all applicants awarded RRH grants to provide as much client choice as possible in the selection of their permanent unit, keeping in mind that program participants will remain in these units after the RRH assistance ends.

**8a. If yes, explain how and why the project will implement this requirement.** Describe why the project applicant has chosen to implement this program design for their project program participants. For project applicants that are implementing this requirement for the project, it is particularly important to explain why it is necessary for facilitating the provision of supportive services and why you are choosing to implement this requirement for RRH program participants.

**9. Will more than 16 persons live in one structure?** Select “Yes” or “No” to indicate whether more than 16 persons will reside in any one of the structures assisted with funds requested through this application. If Yes, two additional questions will appear.

**9a. Describe the local market conditions that necessitate a project of this size.** If there are more than 16 people, use the text box to explain how local market conditions necessitate this size.

**9b. Describe how the project will be integrated into the neighborhood.** If there are more than 16 people, use the text box to explain how neighborhood integration can be achieved for program participants.

### PH-RRH Screen 3C. Project Expansion Information

Project applicants must complete Screen 3C **only** if requesting to support a project that is currently operating and has the same component as the expansion grant is requesting. Project applicants may choose to expand the capacity of a project that is eligible for renewal in the FY 2017 CoC Program Competition **or** a project that is funded through any other mechanism. Eligible expansion reasons for PH-RRH include:

- **Increasing the number of homeless persons served;**
- **Providing additional supportive services to homeless persons;**
- **Bringing existing facilities up to state/local government health and safety standards;**
- **Replacing the loss of nonrenewable funding (private, federal, other; however, excluding state/local government)**

Project applicants cannot use an expansion project to provide existing program participants with the **same** housing and services funded by the CoC Program that they are currently receiving; rather, the project must serve new program participants **or** provide existing program participants with an expanded variety of services **or** the same activities that are CoC Program eligible but were previously paid for by a different non-renewable source. Project applicants should carefully consider the design of the new project to ensure it meets all conditions set forth in the McKinney Vento Act as amended, 24 CFR part 578, and the FY 2017 CoC Program Competition NOFA. **Note:** CoC Program funds cannot be used to replace state **or** local funds previously used, **or** designated for use, to assist homeless persons (see 24 CFR 578.87(a) for more information).

- 1. Will the project use an existing homeless facility or incorporate activities provided by an existing project?** Select “Yes” or “No.” If “Yes” to this question, the following question will appear. If “No,” no additional questions will appear and you may move on to the next screen.
- 2. Is this new project application requesting a “Project Expansion” of an eligible CoC Program renewal project of the same component type?** Select “Yes” or “No.” If “Yes,” enter the **PIN number** (first 6 characters of the renewal grant number, e.g., AL0101) and **Project Name** of the renewal project that will be expanded as a result of this project application. Additional expansion questions will appear and are summarized in the paragraphs below. If “No” is selected for this question, PIN Number and Project Name will be hidden, but the rest of the expansion screen questions will appear.

## FY 2017 CoC Program New Projects Detailed Instructions

**Note:** This question is about the new “**Expansion**” grants referenced in the FY 2017 CoC Program NOFA Section II.B.4. Selecting “**Yes**” means the project applicant intends to submit this project as a New Expansion project for an eligible CoC program renewal project. If the renewal project application is not conditionally selected for funding, the expansion project application will not be selected.

If “**Yes**,” to question 1 and either “**Yes**” or “**No**” to question 2, additional questions will appear. **Select** and “**Add**” one **or** more of the expansion activities described below. This expansion activity screen field will appear below question #2. After an activity is added, save the screen to reveal additional questions that allow you to describe the specific expansion activities. All selections added must be described in as much detail as possible in the subsequent narratives provided, even if details were also included in the project description on Screen 3B.

**3. Select one or multiple activities listed below that describe the expansion project, and click the “Save” button at the bottom of the screen.** Additional questions will appear to provide additional details. The five expansion activity explanations include:

- **Increasing the number of homeless persons served.** If selected, the following questions will appear: **Indicate how the project is proposing to “increase the number of homeless persons served.”**

**Current level of effort? (Current Grant Agreement Numbers)**

# of persons served at a point-in-time?

# of units?

# of beds?

**New effort? (Proposed Increase to Current Grant Agreement Numbers)**

# of additional persons served at a point in time that this project will provide?

# of additional units this project will provide?

# of additional beds this project will provide?

- **Providing additional supportive services to homeless persons.** If selected, the following questions will appear: **Indicate how the project is proposing to “provide additional supportive services to the homeless persons served?”** “**Add**” one or both explanations listed.
  - **Increase number of and/or expand variety of supportive services provided**
  - **Increase frequency and or intensity of supportive services**
  - **Coordinated entry: (Only for SSO-CE projects)**

After any of the above selections are added, answer the questions that appear.

- **Describe the reason for the supportive service increase indicated above.** Response should explain why Supportive Services are being increased from the current grant agreement.

- **Bringing existing facilities up to state/local government health and safety standards;**

In the text box; **Describe how the project is proposing to “bring the existing facility(ies) up to state/local government health and safety standards.”**

- **Replacing the loss of nonrenewable funding (private, federal, other excluding state/local government).** Answer the following questions:

(a) What is the source of non-renewable funding (should indicate that funds are not controlled by the state **or** local government)?

(b) Why are the project funds non-renewable?

(c) On what date will the non-renewable funds expire?

(d) What steps were taken to obtain other funding sources?

(e) Why are CoC Program funds necessary to continue operating the project?

## FY 2017 CoC Program New Projects Detailed Instructions

### PH-RRH Part 4: Housing and Services

In Part 4 of the Project Application, HUD expects project applicants to provide detail regarding the housing and services that will be provided.

#### PH-RRH Screen 4A. Supportive Services for Participants

All fields on Screen 4A are required and provide HUD with detailed understanding of the supportive services provided to program participants.

- 1a. Are the proposed project policies and practices consistent with the laws related to providing education services to individuals and families?** Select “Yes” or “No” based on the answer to the following information. Any project applicant requesting funds to provide housing **or** services to children and youth, with **or** without families, must indicate whether the project has established policies and practices that are consistent with, and do not restrict the exercise of rights provided by subtitle B of title VII of the McKinney-Vento Act (42 U.S.C. 11431, *et seq.*), and other laws (e.g., Head Start, part C of the Individuals with Disabilities Education Act) relating to the provision of educational and related services to individuals and families experiencing homelessness. Project applicants should only Select “Not applicable” if the project will not serve children **or** youth under 25.
- 1b. Will the proposed project have a designated staff person to ensure that the children are enrolled in school and receive educational services, as appropriate?** Any project applicant requesting funds to provide housing **or** services to children and youth, with **or** without families must indicate whether a staff person has been designated to ensure that children are enrolled in school and connected to the appropriate services within the community, including early childhood programs such as Head Start, Part C of the Individuals with Disabilities Education Act, and McKinney-Vento education services. Project applicants should only Select “Not applicable” if the project will not serve children **or** youth under 25.
- 1c. Describe the manner in which the project applicant will take into account the educational needs of children when youth and families are placed in housing:** This question is visible and required only if “No” is selected in response to question 1a **or** 1b. Project applicants not in compliance with federal education assurances must provide an adequate description of the reason(s) for noncompliance and a corrective action plan. Failure to comply with federal education assurances may result in Federal sanctions, and significantly reduce the likelihood of receiving funding through the CoC Program Competition.
- 2. Describe how participants will be assisted to obtain and remain in permanent housing** Describe plans to move program participants quickly into permanent housing **and** plans to ensure that program participants stabilize in permanent housing. An acceptable response will acknowledge the needs of the target population and include plans to address those needs through current and proposed case management activities and the availability and accessibility of supportive services such as—housing search, primary health services, mental health services, educational services, employment services, life skills, child care services, etc. Good strategies should be specifically tailored—as related to this application—for individuals, older adults, youth, families, etc. **Example:** A project specializing in serving young parents might provide a specific service array including parenting classes, education programing and other child care services.

If program participants will be housed in units not owned by the project applicant, the narrative must also indicate how appropriate units will be identified and how the project applicant **or** subrecipient will ensure that rents are reasonable. Established arrangements and coordination with landlords and other homeless services providers should be detailed in the narrative. Landlord engagement is a critical piece of the strategy and will be explained in a good response.

- 3. Describe specifically how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently:** Address the needs of the target population, the required supportive services, the availability and accessibility of those supportive services, and any coordination with other homeless services providers and mainstream systems.

## FY 2017 CoC Program New Projects Detailed Instructions

Describe how service delivery directly leads to program participant employment; how service delivery leads directly to program participants accessing SSI, SSDI, **or** other mainstream services; and how the requested funds contribute to program participants becoming more independent.

**Note:** Education plays an important role in the personal development of program participants and should be considered a strategy to maximize their ability to live independently. In addition, HUD encourages project applicants to explain how education will address the encampment and unsheltered homelessness and survivors of DV.

- 4. For all supportive services available to participants, indicate who will provide them and how often they will be provided:** This list identifies **all** supportive services provided to program participants in the project by the project applicant, subrecipient, partner organization, or Non-Partner organization. The project applicant should complete each row of the dropdown menus for all supportive services the project will provide to program participants, regardless of funding source. Do not limit this selection to just the supportive services that may be requested in your project application—also include supportive services other organizations or grants will provide. If more than one “**Provider**” or “**Frequency**” is relevant for a single service, select the provider and frequency that is used most. If more than one provider offers the service equally as often, choose the provider according to the following order: (1) Applicant, (2) Subrecipient, (3) Partner, and (4) Non-Partner.

- **Provider:** select one of the following:
  - “**Applicant**” to indicate that the project applicant will provide the service;
  - “**Subrecipient**” to indicate that a subrecipient, as indicated on from Screen 2A. Project Subrecipients, will provide the service;
  - “**Partner**” to indicate that an organization that is not a subrecipient of project funds but with whom a formal agreement or memorandum of understanding (MOU) has been signed will provide the service; or
  - “**Non-Partner**” to indicate that a specific organization with whom no formal agreement has been established regularly provides the service to program participants.
- **Frequency:** Select how often the service is provided to program participants. If two frequencies are equally common, select the interval that is most frequent, e.g., both weekly and monthly are equally common—select weekly.

**Note:** The list is exclusive and exhaustive according to 24 CFR 578.53. Project applicants must complete the dropdown menus for at least one service/row.

- 5. Please identify whether the project includes the following activities:**
- 5a Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs?** Select “**Yes**” if the project provides regular **or** as needed transportation assistance to mainstream and community resources, including appointments, employment training, educational programs, **or** jobs. Transportation assistance may include bus passes, rail/subway cards, vehicle owned by the organization, taxi fare, etc. Select “**No**” if transportation will not be regularly provided **or** cannot be provided consistently as requested.
- 5b Use of a single application form for four or more mainstream programs?** Select “**Yes**” if the project will use a single application form which allows program participants to take and use to sign up for four **or** more mainstream programs without having to complete another document. Select “**No**” if application forms will cover three **or** fewer mainstream programs.
- 5c Regular follow-ups with participants to ensure mainstream benefits are received and renewed?** Select “**Yes**” if the project will regularly follow-up with program participants, at least annually, to ensure that they have applied for and are receiving their mainstream benefits and renew benefits when required. Select “**No**” if there will be no **or** irregular follow-up concerning mainstream benefits.

## FY 2017 CoC Program New Projects Detailed Instructions

6. **Will project participants have access to SSI/SSDI technical assistance provided by the applicant, a subrecipient, or partner agency?** Select “Yes” if program participants will have access to SSI/SSDI technical assistance. The assistance can be provided by the project applicant, a subrecipient, or a partner agency—through a formal or informal relationship. Select “No” if there will be no or significantly limited access to SSI/SSDI technical assistance.
- 6a. **Has the staff person providing the technical assistance completed SOAR training in the past 24 months?** This question will only appear if “Yes” is selected to the previous question. Select “Yes” to indicate that the project applicant, subrecipient or partner agency staff person who will be providing the SSI/SSDI technical assistance has completed SOAR training, online or in person, in the past 24 months. If more than one person will provide technical assistance, select “Yes” only if all persons have completed the training. Otherwise, Select “No.”

### PH-RRH Screen 4B. Housing Type and Location

Screen 4B, Housing Type and Location, applies to all PH-RRH projects and presents a summary of the units and beds included in the project according to the following categories:

- **Total Units.** Includes all of the units in the project, regardless of size.
- **Total Beds.** Includes all of the beds in the project, regardless of unit configuration.

The summary fields are compiled from all the individual housing locations listed below the totals. These fields will populate and update automatically when new housing type and location details are added to the list. To add new housing type and location detail screen(s), click the add  icon and complete the mandatory fields. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

The project applicant must use Screen 4B to report each housing type and location supported using requested CoC Program funds. The numbers reported must reflect the total units and total beds directly supported by CoC Program-awarded funds **at the project’s full capacity on a single day**. Generally, the reported number of beds should match the number of persons served and households, as listed on Screens 5A and 5B although there are understandable exceptions (e.g., a two-parent household where the parents share a bed).

1. **Housing type:** Report the type of housing structures in which program participants under this project will be housed. Each housing type must be listed individually according to the following options:
  - **Barracks:** Individuals or families sleep in a large room with multiple beds. **This type is not appropriate for the PH-RRH projects.**
  - **Dormitory, shared or private rooms:** Individuals or families share sleeping rooms or have private rooms; persons share a common kitchen, common bathrooms, or both. **In general, this housing type is inappropriate for PH-RRH.**
  - **Shared housing:** Shared housing is defined as an arrangement in which two or more unrelated people share a house or an apartment. Each unit must contain private space for each assisted family, plus common space for shared use by the residents of the unit. Common space must be appropriate for shared use by the residents and private space must contain at least one bedroom for each two persons in the family. A zero or one-bedroom unit may not be used for shared housing.
  - **Single Room Occupancy (SRO) units:** Each individual has private sleeping or living room which may contain a private kitchen and/or bath, or shared, dormitory style facilities.
  - **Clustered apartments:** Each individual or family has a self-contained housing unit located within a building or complex that houses both persons with special needs—e.g., homeless or formerly homeless persons, persons with substance abuse problems, persons with mental illness, or persons with AIDS/HIV—and persons without any special needs.
  - **Scattered-site apartments (including efficiencies):** Each individual or family has a self-contained apartment. Apartments are scattered throughout the community.

## FY 2017 CoC Program New Projects Detailed Instructions

- **Single family homes/townhouses/duplexes:** Each individual **or** family has a self-contained, single family home, townhouse, **or** duplex that is dispersed throughout the community.
2. **Indicate the maximum number of Units and Beds available for project participants at the selected housing site:** Enter the number of units and beds available at a point in time and used for housing program participants in this project.
- **Units:** Enter the total number of units that will be available at a point in time in the selected housing type and location used for housing program participants.
  - **Beds:** Enter the total number of beds that will be available at a point in time in the selected housing type and used for housing program participants.
- Note:** A zero bedroom **or** efficiency must be indicated as 1 unit, 1 bedroom, and 1 bed. In addition, the number of units and beds listed on Screen 4B must be equal to **or** greater than the total number of units and beds requested in the budget, Part 6 of this guide, and **should correlate** to the number and characteristics of persons that the project is expected to serve recorded on Screens 5A and 5B.
3. **Address:** Project applicants must enter an address for all proposed and existing properties. **If** the location is not yet known, enter the expected location of the housing units. For Scattered-site and Single family home housing, **or** for projects that have units at multiple locations, project applicants should enter the address where the majority of beds will be located **or** where the majority of beds are located as of the application submission. Where the project uses, tenant-based rental assistance **or** if the address for scattered-site **or** single family homes housing cannot be identified at the time of application, enter the address for the project's administration office. Projects serving victims of domestic violence, including human trafficking, must use a PO Box **or** other anonymous address to ensure the safety of program participants.
4. **Select the geographic area associated with this address:** Report the geographic area in which the housing type, units, and beds will be located. The list of geographic areas is limited by the state(s) selected on Screen 1D of the application. Multiple areas can be selected if units are located in more than one county **or** city. Hold down the "Ctrl" key to make multiple selections.

## PH-RRH Part 5: Participants and Outreach

In Part 5 of the application, HUD expects project applicants to provide detail regarding the program participants who will be served, including basic household and subpopulation data, as well as outreach data.

### PH-RRH Screen 5A. Project Participants - Households

The numbers on Screen 5A are the proposed number of households and number of persons **to be served at given night when the project is at full operational capacity**. The screen must include at least one household and at least one person.

Screen 5A is separated into two sections: (1) Household(s) served in row one; and, (2) Person(s) served in rows 2 through 13. Both sections there are three editable columns that capture a specific type of household.

- **Households with at least One Adult and One Child:** For the proposed numbers under this column and household type, there must be at least one person at or above the age of 18, and at least one person under the age of 18.
- **Adult Households without Children:** For the proposed numbers under this column and household type, there must be at least one person at or above the age of 18, and no person(s) under the age of 18.
- **Households with Only Children:** For the proposed numbers under this column and household type, there may not be any person(s) at or above the age of 18; only person(s) under the age of 18.

The fourth column on the far left, "**Persons**," is read-only automatically populated with four standard reporting categories determined by HUD.

## FY 2017 CoC Program New Projects Detailed Instructions

- **Adult over age 24:** A subset of the category of “Adults” to disaggregate “Youth” from over age 24 adults.
- **Adults ages 18-24:** A category implemented to account for transition age youth. Youth previously captured under the category “Adult” should now be captured under the category “Adults between the ages of 18 and 24.”
- **Accompanied Children under age 18:** Includes all children and “youth” who are under the age of 18. “Accompanied” is defined as “in the company of parent or legal guardian regardless of the age of the parent or legal guardian.”
- **Unaccompanied Children under age 18:** Includes all children and youth who are under the age of 18. “Unaccompanied” is defined as “without a parent or legal guardian,” and can include persons under 18 who themselves have dependents, siblings, or other household members.

The tables are populated with white, dark grey and light grey fields. In each white field, list the number of households or type of person(s) served for the given household type. The dark grey cells are not applicable to the given type of persons, and the light grey cells, will total automatically once the screen is saved. The screen is designed to prevent project applicants from entering more households than persons for any given column, and at least one person must be entered for every column that has one or more households. The number and characteristics of persons that the project is expected to serve is recorded on this screen and should match the total number of units and beds requested on Screen 4B. HUD has removed the distinction between “disabled” and “non-disabled” on screen 5A as this information is adequately covered on screen 5B.

### PH-RRH Screen 5B. Project Participants - Subpopulations

Screen 5B represents a detailed subpopulation breakdown of the persons reported in the three housing types on Screen 5A. As with Screen 5A, the numbers here are intended to reflect the households and persons **proposed to be served when the project is at full operational capacity**. The screen is collectively exhaustive and must account for each person identified on Screen 5A. The screen will prevent submission until all persons are accounted for.

Screen 5B is separated into three tables corresponding to the three household types on Screen 5A. See 5A above for a description of the three household types. There are nine editable columns for all three tables that captures a competition priority subpopulation. One additional column accounts for persons who are not represented by the priority subpopulations.

**Table 5. Subpopulation Columns**

<b>Mutually Exclusive</b>
<ul style="list-style-type: none"> <li>• <b>Chronically Homeless Non-Veterans:</b> To fall under this column, persons <b>must be</b> chronically homeless per 24 CFR 578.3, <b>but not</b> veterans*.</li> <li>• <b>Chronically Homeless Veterans:</b> To fall under this column, persons <b>must be</b> chronically homeless per 24 CFR 578.3, <b>and</b> veterans*.</li> <li>• <b>Non-Chronically Homeless Veterans:</b> To fall under this column, persons <b>must not be</b> chronically homeless, <b>but must be</b> veterans*. * “Veterans” include all persons who served in the military, regardless of discharge status.</li> </ul>
<b>May Contain Duplicate Entries</b>
<ul style="list-style-type: none"> <li>• <b>Chronic Substance Abuse:</b> Persons identified as chronic substance abusers.</li> <li>• <b>Persons with HIV/AIDS:</b> Persons living with HIV/AIDS.</li> <li>• <b>Severely Mentally Ill:</b> Persons diagnosed as severely mentally ill.</li> <li>• <b>Victims of Domestic Violence:</b> Persons identified as meeting the criteria of Category 4 of the homeless definition.</li> <li>• <b>Developmental Disability:</b> Persons diagnosed with a developmental disability.</li> <li>• <b>Physical Disability:</b> Persons diagnosed with a physical disability.</li> </ul>
<b>Mutually Exclusive to All Other Columns</b>
<ul style="list-style-type: none"> <li>• <b>Persons not represented by an identified subpopulation:</b> Persons served by the organization that have not been diagnosed with or identified as falling under any of the previous subpopulation distinctions.</li> </ul>

## FY 2017 CoC Program New Projects Detailed Instructions

These columns are populated with white, dark grey and light grey fields, and are dependent on the selections made in Screen 5A. If households and person(s) are added to a household type column in Screen 5A, then the corresponding table will be available for data entry in Screen 5B. If, however, no households and persons are added to a particular household type column in Screen 5A, then the corresponding table will not be available in Screen 5B. **Example:** If 3 households are entered into the “**Adults Only**” column on Screen 5A, but no households are entered into the “**Adults with Children**” or “**with Children Only**” columns on Screen 5A, then only the “**Adults Only**” table will be available for edit on Screen 5B.

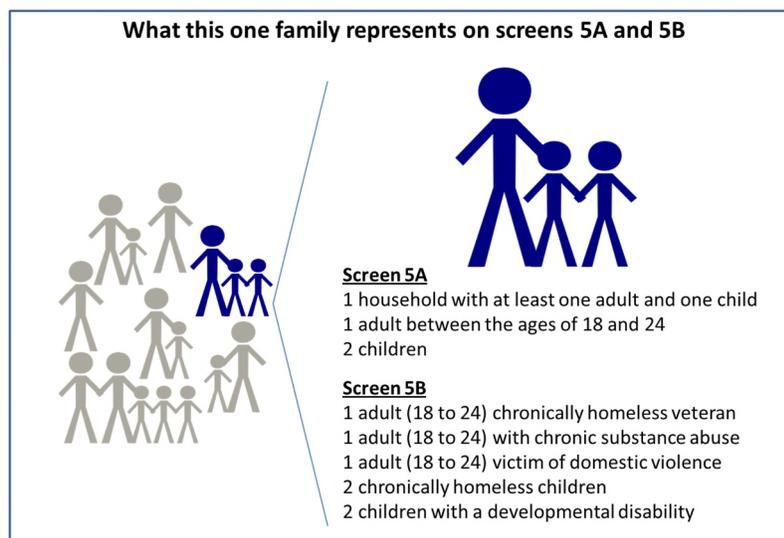
In each white field of the available household tables, list the number of person(s) served for the given subpopulation column. Ignore the dark grey cells, which are not applicable to the given subpopulation, and ignore the light grey cells, which will total automatically after the screen is saved. If any number greater than “0” is entered into the column “**Persons not represented by an identified subpopulation,**” a mandatory textbox will appear at the bottom of the screen when the screen is saved. The project applicant must enter a description of the population being served that does not fall under any of the priority subpopulation columns.

The screen has additional controls that ensure that Screens 5A and 5B match. First, notice in Table 5 above that three columns are internally **mutually exclusive**. This means that a single person can only identify with one of the first three columns for each table (e.g., a single person cannot be a veteran while at the same time being a non-veteran). Columns 4 through 9, under “**May Contain Duplicate Entries;**” however, are not **mutually exclusive**. This means that a single person can identify with more than one column at the same time (e.g., a single person could be a veteran, suffering from a physical disability, and a victim of domestic violence). Column 10, **Persons not represented by an identified subpopulation,** is mutually exclusive to all other columns. This means that if a single person falls under column 10 the person does not identify with any of the other subpopulations.

There are several other important controls to understand. The “**Total Persons**” for each column, for example, cannot be larger than the total persons for that household category on Screen 5A. Likewise, no cell in each row can contain a number greater than the total number of persons in the corresponding age group as reported on Screen 5A. At the same time, the screen requires an entry for each person served, so at a minimum, the total number from the tables must equal the total number of persons in each corresponding household column from Screen 5A.

The **Characteristics** column (the first column) is populated with the same characteristics used on Screen 5A. They have been applied to each table based on their relevance to the tables housing type.

Total fields will calculate automatically when at least one household field and one person(s) field is entered and the screen is saved. Use them as a point of reference to ensure that all persons and households are entered correctly.



## FY 2017 CoC Program New Projects Detailed Instructions

### PH-RRH Screen 5C. Outreach for Participants

Screen 5C requires project applicants to identify where their eligible program participants will come from and must include percentages of program participants who will be served using requested funds.

It is the responsibility of the project applicant to ensure that program participants served in RRH are eligible for the project. For further guidance refer to 24 CFR part 578, and the FY 2017 CoC Program Competition NOFA.

Individuals coming from an institution where they have resided for 90 days or less **and** have entered the institution from the streets, emergency shelter, or safe haven, maintain their homeless status during that time. Include these program participants in the percentages for streets, places not meant for human habitation, emergency shelters, and safe havens accordingly.

- 1. Enter the percentage of homeless person(s) who will be served by the proposed project for each of the following locations:** Indicate the estimated percentage of homeless persons who will be admitted from each of the listed locations. The total estimated percentage must equal 100 percent to submit the project application.
  - **Directly from the street or other locations not meant for human habitation.**
  - **Directly from emergency shelters** (this includes domestic violence emergency shelters).
  - **Directly from safe havens.**
  - **Persons fleeing domestic violence** (or attempting to flee and including human trafficking, victims of sexual assault, stalking, and dating violence).
  - **Directly from transitional housing that was eliminated in the FY 2017 CoC Program Competition.**
  - **Directly from the TH Portion of a Joint TH and PH-RRH Component project.**
  - **Persons receiving services through a Department of Veterans Affairs(VA)-funded homeless assistance program.**
- 2. Describe the outreach plan to bring these homeless participants into the project.** A textbox is provided for a brief explanation. Explain how program participants will be identified and connected with the offered housing and services. For projects participating in a CoC's coordinated entry process, simply explain that coordinated entry will provide outreach and access and describe the specific coordination and referral process between coordinated entry and this project.

### PH-RRH Part 6: Budgets

Part 6 of the application requests project information related to budget requests and information about required grant matching funds.

**Funding Limitations:** For FY 2017, new **PH-RRH** projects are eligible for **Permanent Housing Bonus** funds **or reallocation** funds. Within each CoC, the total available amount for new Permanent Housing Bonus projects is limited to 6 percent of the CoC's Final Pro-Rata Need (FPRN). New **PH-RRH** projects requesting funding through the **reallocation** process are limited to the amount of funds made available by a CoC eliminating **or** reducing eligible renewal grants. To confirm the maximum amount available for a new **PH-RRH** project application; it is important to consult with the CoC's Collaborative Applicant prior to submitting a project application.

**Note:** Pay special attention to Question 2 on Screen 6A and accurately identify the project as being created using the "**Reallocation**" process **or** as a "**Permanent Housing Bonus**" project.

**Maximum Grant Terms:** The maximum grant term for projects under the CoC Program is dependent upon the costs requested in the budget and will have a significant impact on the total amount requested and will have significant implications for both project and CoC funding. Carefully review Section IV.B.2. of the

## FY 2017 CoC Program New Projects Detailed Instructions

FY 2017 CoC Program Competition NOFA before selecting a grant term and contact your CoC’s Collaborative Applicant to confirm your selection prior to submitting the application.

**Note:** All new project applications that are conditionally awarded must begin carrying out the activities described in the application on or before September 30, 2019 to comply with the funding obligation standards contained in the appropriations bill that authorizes the funds for this competition. HUD strongly encourages all projects with rental assistance funding to begin within 12 months of award. Refer to Section IX.B.2. of the FY 2017 CoC Program Competition NOFA for more details.

### PH-RRH Screen 6A. Funding Request

Screen 6A provides the framework through which a project applicant creates a project budget.

1. **Will it be feasible for the project to be under grant agreement by September 30, 2019?** Select “Yes” or “No” to indicate whether the project will begin operating by September 30, 2019. Unobligated funds will not be available after September 30, 2019. Project applicants will not be able to submit project applications that cannot feasibly meet the September 30, 2019 deadline.
2. **Is the project proposing to use funds reallocated from the CoC’s annual renewal demand or is the project applying for funding through the permanent housing bonus?** Select “Reallocation” if the project is being created using the reallocation process as indicated on the Reallocation form submitted by the CoC’s Collaborative Applicant. Select “Permanent Housing Bonus” if the project is being created through the permanent housing bonus.
3. **Does this project propose to allocate funds according to an indirect cost rate?** Select “Yes” or “No” to indicate whether the project has an approved indirect cost plan in place or will propose an indirect cost plan by the time of conditional award. For more information concerning indirect costs plans, refer to 2 CFR 200.203(c)(2) and contact your local HUD field office.

\* If “Yes”, you must respond to the following questions:

- 3a. **Please complete the indirect cost rate schedule below:** Complete at least one row using information from either your approved plan or your proposal.

Administering Department/Agency	Indirect Cost Rate	Direct Cost Base
	%	
	%	
	%	

- 3b. **Has this rate been approved by your cognizant agency?** Select “Yes” if the indirect cost rate has already been approved by your cognizant agency. Select “No” if it has either not been submitted to or has been submitted, but has not yet been approved by your cognizant agency.
- 3c. **Do you plan to use the 10% de minimis rate?** Select “Yes” only if the project plans to use the 10 percent *de minimis* rate as described in 2 CFR 200.203(c)(2).
4. **Select a grant term:** Indicate the number of years for which funding is being requested (carefully review Section IV.B.2. of the FY 2017 CoC Program Competition NOFA). The selection made here will automatically calculate the total amount of funding requested on the budget screens. For example: If 1 year is selected, the budget line item(s) selected will calculate 1 year amounts. If 2 years is selected, the budget line item(s) selected will calculate 2 year amounts. The one exception is if a project is eligible for a 15-year grant term, the funding will be for 5 years.
5. **Select the costs for which funding is being requested:** Check the box next to the eligible costs for which funding is being requested (be sure to review 24 CFR part 578, Subpart D; Program Components and Eligible Costs and Section 578.87(c)–Restriction on Combining Funds to ensure eligible use of funds). Each checked box unlocks the corresponding budget line item, screens 6B through 6H:
  - **Rental Assistance:** Rental assistance is limited to Tenant-based Rental Assistance (TRA) for RRH projects. Check the box to unlock and reveal the Rental Assistance budget screen.

## FY 2017 CoC Program New Projects Detailed Instructions

- **Supportive Services:** Check the box to unlock and reveal the Supportive Services budget screen.
- **HMIS:** Check the box to unlock and reveal the HMIS budget screen.

### PH-RRH Screen 6E. Rental Assistance Budget

Screen 6E appears if the Rental Assistance budget line item is selected on Screen 6A. Screen 6E will aggregate the total assistance requested and total units requested for each FMR area **or** rental assistance type.

To add units for a new FMR, click the add  icon to access the detail budget screen(s). The primary 6E screen will populate and update automatically when new detail screen(s) are added to the list. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

**Type of Rental Assistance:** While *e-snaps* allow for the selection of any type of rental assistance, project applicants applying for PH-RRH projects **must** select “**TRA**.” Select “**TRA**” from the dropdown menu on the top of each Rental Assistance Detail Budget Screen.

**Metropolitan or non-metropolitan fair market rent area:** Select the appropriate FMR area where the units will be located. The list is sorted by state abbreviation, and most areas are calculated by country **or** metropolitan area. The selected FMR area will be used to populate the rents in the FMR Area column in the chart on this screen. For projects that operate in more than one geographic location, the project applicant must create a separate detail budget screen for each FMR area.

Complete the **Rental Assistance Annual Budget** chart that accounts for the size of units, the number of units being requested, the FMR for each unit size, multiplied by 12 months to account for annual rent, and then summarized by row in the “**Total Request**” column:

- **Size of units:** These options are system generated. Unit size is defined by the number of distinct bedrooms and not by the number of distinct beds.
- **Number of units:** For each unit size, enter the number of units for which funding is being requested.
- **FMR:** These fields are populated with the FY 2016 FMRs based on the FMR area selected by the project applicant. FMRs are available at [www.huduser.org/portal/datasets/fmr.html](http://www.huduser.org/portal/datasets/fmr.html).
- **12 Months:** These fields are populated with the value 12 to calculate the annual rent request.
- **Total Request:** This column populates with the total calculated amount from each row.
- **Total Units and Annual Assistance Requested:** This column automatically calculates based on the sum of the total requests per unit size per year.
- **Grant Term:** This read-only field is populated based on the grant term selected on the “**Funding Request**” screen. This reflects “years of funding” and may not match the “**Grant Term**” selected on previous screens. The maximum “years of funding” is set at 5 years, but the maximum possible grant term is set at 15 years. See Section IV.B.2. of the FY 2017 CoC Program Competition NOFA for more information.
- **Total Request for Grant Term:** This field is automatically calculated based on the number of units, multiplied by the FMR per unit size, multiplied by 12 months, multiplied by the grant term.

All automatic fields will be calculated after the required field has been completed and saved.

### PH-RRH Screen 6F. Supportive Services Budget

Screen 6F appears if the “**Supportive Services**” budget line item is selected on Screen 6A. The supportive services listed are exhaustive based on the eligible supportive services in 24 CFR 578.53.

**Note:** The only cost category not on this screen is “**Direct provision of services.**” As 24 CFR.53(e)(17) explains, if the service is being directly delivered by the recipient **or** subrecipient, eligible costs under that service item also may include: the cost of labor **or** supplies, and materials incurred by the recipient **or**

## FY 2017 CoC Program New Projects Detailed Instructions

subrecipient in directly providing supportive services to program participants; and the salary and benefit packages of the recipient and subrecipient staff who directly deliver the services.

The itemized budget screen includes 17 eligible costs:

- |                                 |                                        |
|---------------------------------|----------------------------------------|
| 1. Assessment of Service Needs  | 10. Life Skills                        |
| 2. Assistance with Moving Costs | 11. Mental Health Services             |
| 3. Case Management              | 12. Outpatient Health Services         |
| 4. Child Care                   | 13. Outreach Services                  |
| 5. Education Services           | 14. Substance Abuse Treatment Services |
| 6. Employment Assistance        | 15. Transportation                     |
| 7. Food                         | 16. Utility Deposits                   |
| 8. Housing/Counseling Services  | 17. Operating Costs*                   |
| 9. Legal Services               |                                        |

\* Project applicants may only include 17. Operating Costs (maintenance, repair, building security, furniture, utilities, and equipment) in the Supportive Services budget if the costs are for a facility that is used to provide supportive services for program participants.

Enter the quantity, detail and total budget request for each supportive services cost.

- **Eligible Costs:** *e-snaps* populates a list of eligible supportive services for which funds can be requested. The costs listed are the only costs allowed under 24 CFR 578.53. (Refer to 24 CFR 578.53 for details on eligible supportive services costs.)

**Note:** “Security Deposits” is not listed as an eligible supportive service cost. Security deposits are incorporated into the eligible activities under the rental assistance budget line item.

- **Quantity AND Description:** Enter the quantity (i.e. numbers) and description details for each activity for which funds are being requested. **Quantity and description details should be thorough** (e.g., for staffing: use position title: 1 FTE @ \$45,000 including benefits or 50 hours @ \$25 per hour including benefits). Simply stating 1 FTE is **NOT** providing quantity and description details and limits HUD’s understanding of costs being requested. Failure to enter adequate quantity and description details will result in HUD placing conditions on the conditional award and will delay funding.
- **Annual Assistance Requested:** Enter the annual amount requested for each activity. The amount entered must only be the amount that is **DIRECTLY** related to providing supportive services to homeless program participants.
- **Total Annual Assistance Requested:** This field is automatically calculated based on the sum of the annual assistance requests entered for each activity.
- **Grant Term:** This read-only field populates based on the grant term selected on the “**Funding Request**” screen.
- **Total Request for Grant Term:** This field automatically calculates based on the total amount requested for each eligible cost multiplied by the grant term.

All automatic fields will be calculated after the required field has been completed and saved.

### PH-RRH Screen 6H. HMIS Budget

Screen 6H appears if the HMIS budget line item is selected on Screen 6A. The HMIS costs listed are all inclusive and determined by the eligible HMIS costs described at 24 CFR 578.57. Complete the HMIS budget screen to request funds for eligible HMIS costs.

**Note:** Per CFR 578.59(a), staff and overhead costs directly related to carrying out HMIS activities are eligible as part of those activities listed on the HMIS budget. The itemized budget screen organizes all eligible HMIS costs from 24 CFR 578.57 into the following 5 categories:

## FY 2017 CoC Program New Projects Detailed Instructions

1. **Equipment**—central server(s), personal computers and printers, networking, and security;
2. **Software**—software/user licensing, software installation, support and maintenance, and supporting software tools;
3. **Service**—training by third parties, hosting/technical services, programming (customization, system interface, data conversion), security assessment setup, internet access, facilitation, and disaster recovery;
4. **Personnel**—project management/ coordination, data analysis, programming, technical assistance and training, and administrative support staff; and
5. **Space & Operations**—space costs and operational costs associated with that space].

If the recipient **or** subrecipient is a victim services provider, **or** a legal services provider, it may use CoC Program funds to establish and operate a comparable database that complies with HUD’s HMIS requirements, listing costs under the comparable category on Screen 6H.

Enter the quantity, detail, and total budget request for each HMIS cost.

- **Quantity AND Description:** Enter the quantity (i.e. numbers) and description details for each activity for which funds are being requested. **Quantity and description details should be thorough** (e.g., for staffing: use position title: 1 FTE @ \$45,000 including benefits or 50 hours @ \$25 per hour including benefits). Simply stating 1 FTE is **NOT** providing quantity and description details and limits HUD’s understanding of costs being requested. Failure to enter adequate quantity and description details will result in HUD placing conditions on the conditional award and will delay funding.
- **Annual Assistance Requested:** Enter the annual amount requested for each activity.
- **Total Annual Assistance Requested:** This field automatically calculates based on the sum of the annual assistance requests entered for each activity.
- **Grant Term:** This read-only field populates based on the grant term from the “**Funding Request**” screen.
- **Total Request for Grant Term:** This field automatically calculates based on the total amount requested for each eligible cost multiplied by the grant term.

All automatic fields will be calculated after the required field has been completed and saved.

### PH-RRH Screen 6I. Sources of Match

The “**6I Sources of Match**” screen is applicable to all project applications and enables project applicants to enter the CoC Program required match, including the type of source and the value of the match commitment.

For detailed information that describes CoC Program match requirements see 24 CFR 578.73.

**Note: Policy update in CoC Program implementation.** Program income **may** be counted as match for CoC Program funds. CoC Program eligible costs paid for by program income may be considered match for grants awarded in the FY 2017 CoC Program Competition.

**New in the FY 2017 CoC Program Competition,** HUD added the following new questions on the primary “**Sources of Match**” screen concerning CoC-generated program income because project applicants that intend to use program income as match must provide an estimate of how much of the program income will be used for match.

1. **Does this project generate program income as described in 24 CFR 578.97 that will be used as Match for this grant?** Answer “**Yes**” or “**No.**” If “**No.**” no further response is required. If “**Yes.**” the following questions and text box will appear.
  - 1a. **Briefly describe the source of the program income:** Enter a description of the source of the program income. **Note:** CoC-generated program income includes occupancy charges paid to the recipient or subrecipient. These amounts are considered program income and may be used as match funds.

## FY 2017 CoC Program New Projects Detailed Instructions

- 1b. Estimate the amount of program income that will be used as Match for this project:** Enter estimated amount in the field provided.

Match funds are acquired from sources outside of this grant's funding request. The match information entered in *e-snaps* should be based on the **current commitments at the time of project application, covering the requested grant operating period (i.e., grant term), and NOT based on projections.** HUD expects the amount(s) listed on this screen to be accurate, with a commitment letter(s) in place that includes the amount(s) listed.

Match contributions can be cash, in-kind, or a combination of both. For match to be counted as cash or in-kind, amounts must be used for CoC Program eligible costs. Match must be equal to or greater than 25 percent of the total grant request for all eligible costs including Administration costs but excluding **Leasing** costs (i.e., Leased Structures). **Example:** If the **"Total Assistance Requested"** from the project applicant is \$100,000, and the project applicant did not request costs for Leased Structures, then the project applicant must secure commitments for match funds equal to or greater than \$25,000. The match amount could be all cash, all in-kind contributions, or a mixture of both, and used for any CoC Program eligible activities the project applicant chooses.

HUD strongly encourages project applicants to review the FAQs posted at [www.hudexchange.info/coc/faqs/](http://www.hudexchange.info/coc/faqs/), by searching for the keyword **"match."**

The primary **"Sources of Match"** screen presents a summary for match that will aggregate multiple cash and in-kind commitments entered in the **"Sources of Match Detail"** screen(s) expected from each source and then calculate the totals.

To add a match commitment, click the add  icon to access a new **"Sources of Match Detail"** screen for each commitment. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

**Complete the following fields in the "Sources of Match Detail" screen for each match commitment:**

- **This commitment will be used as Match.** "Yes" is the default of this read-only field.
- **Type of Commitment:** Select Cash or In-kind (non-cash) to indicate the type of contribution that describes this match commitment.

**Note:** If applications include third-party In-Kind match on Screen 6D a separate 7A attachment screen will appear that project applicants should use to attach MOU(s) documentation that confirms the in-kind match commitment. If the MOU documentation is not available at application submission, it will be a condition for grant execution, if HUD conditionally awards the project.

- **Type of source:** Select **"Private"** or **"Government"** to indicate the source of the contribution. Funds from HUD-VASH (VA Supportive Housing program) and other federal programs are eligible sources of match and are considered Government sources. HUD encourages project applicants to include funds from these sources when possible.
- **Name the Source of the Commitment:** Be specific and include the office or grant program as applicable. Enter the name of the entity providing the contribution. It is important that project applicants provide sufficient detail so that HUD can quickly identify and approve the commitment source.
- **Date of written commitment:** Enter the date of the written contribution.
- **Value of written commitment:** Enter the total dollar value of the contribution.

After the project applicant saves the primary **"Sources of Match"** screen, the values entered on the **"Sources of Match Detail"** screen(s) will populate the summary amounts. The Cash, In-Kind, and Total Match will also automatically populate the **"Summary Budget"** screen where the 25 percent match requirements will be calculated and applied. If the amounts on the **"Summary Budget"** screen are too low, additional match funds must be added to the **"Sources of Match Detail"** screen(s).

## FY 2017 CoC Program New Projects Detailed Instructions

### PH-RRH Screen 6J. Summary Budget

Screen 6J summarizes the funding request for the total term of the project as entered in the budget Screens 6B through 6I. Use this screen to verify the information recorded on each budget detail screen(s) and return to relevant detail screen(s) that have aggregated on Screen 6J incorrectly. This screen includes only one field that can be completed before submission. Project administrative costs can be recorded as “**Admin**” on this screen. All fields are read-only with exception to the total Requested for Grant Term for Admin.

- **Admin (Up to 10%):** Enter the amount of requested administration funds. *e-snaps* will not allow project applicants to request more than 10 percent of the request listed in the field “**6. Sub-Total Costs Requested.**” If an ineligible amount is entered, *e-snaps* will report an error and prevent application submission when the screen is saved.

The summary budget will include a summary of Cash, In-Kind, and Total Match entered on Screen 6I. If an amount less than 25 percent of the total budget, including admin costs but excluding leasing costs, is indicated, *e-snaps* will report an error and prevent application submission when the screen is saved. To make adjustments, return to Screen 6I. **Note:** Cash and In-Kind Match entered on Screen 6I must qualify as eligible program expenses under the CoC Program. Compliance with eligibility requirements will be verified at grant agreement.

The total values are automatically calculated by *e-snaps* when applicants click the “**Save**” button.

[\[RETURN to “All Projects Part 3 through Part 6: Component Types”\]](#)

For more information concerning the FY 2017 CoC Program Competition, visit the HUD Exchange at: [FY 2017 Continuum of Care \(CoC\) Program Competition: Funding Availability](#) and [CoC Program Competition: e-snaps Resources](#).

# Joint Transitional Housing (TH) and Permanent Housing (PH) – Rapid Re-housing (RRH) New Project Applications

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[\[RETURN to “All Projects Part 3 through Part 6: Component Types”\]](#)

The following instructions and screens apply to new the FY 2017 program component called Joint Transitional Housing (TH) and Permanent Housing (PH) –Rapid Rehousing (RRH) Component Projects. The instructions cover Joint TH and PH-RRH projects funded through both the reallocation process and through the Permanent Housing Bonus. Before completing this part of the application, carefully review the special eligibility requirements for new Joint TH and PH-RRH projects in the FY 2017 CoC Program Competition NOFA and be aware that requirements for some questions may vary depending on the component type being requested.

**Note:** Because expansion grants can only expand projects that share the same component, applicants are prohibited from applying for project expansion grants to create a new Joint TH and PH-RRH component project. This means, for example, that an applicant that has an existing project may not apply for PH-RRH funds to expand an existing TH project with the intention of creating a new Joint TH and PH-RRH component project. In addition, existing TH projects may not apply for Joint TH and PH-RRH component projects to expand an existing TH project. Creating a Joint TH and PH-RRH component project must be done entirely through reallocation **or** the permanent housing bonus.

## Joint TH and PH-RRH Part 3: Project Information

Based on the component type selected on Screen 3A, in this case “**Joint TH and PH-RRH**,” HUD expects project applicants to provide a full description of the project scope on Screen 3B in accordance with TH and PH-RRH requirements at 24 CFR 578.37.

### Joint TH and PH-RRH Screen 3A. Project Detail

All fields on Screen 3A must be completed for submission of the application.

- 1a. CoC Number and Name:** Select the CoC number and name from the dropdown menu to which the applicant intends to submit this project application. **Selecting the correct CoC is critical.** The dropdown menu contains all CoCs that successfully registered in the FY 2017 CoC Program Registration process and is listed according to the CoC Number (e.g., NE-502) and CoC Name (e.g., Lincoln County CoC). Based on the selection made in this field, *e-snaps* will send this project application to the CoC selected—once it is complete and submitted—for their review and to go through the local CoC selection process.

**Note:** Project applicants should only use the “**No CoC**” option in rare instances where a project is located in a geographic area not currently served by a CoC. If project applicants select “**No CoC**,” their project applications will not be connected to a CoC Application for this competition and this may affect HUD’s ability to award funds for a project application.

- 1b. CoC Collaborative Applicant Name:** Select the name of the CoC Collaborative Applicant for the CoC to which the project applicant intends to submit the project application. The dropdown menu for this field are based on the CoC Number and Name selected above. This list is populated with the CoC’s designated Collaborative Applicant name that registered during the FY 2017 CoC Program Registration process.
- 2. Project Name:** No action required. This field populates from the *e-snaps* “**Project**” screens. Project applicants cannot modify the populated name in this field; however, project applicants can modify the project name by exiting the project application screens and opening the *e-snaps* “**Project**” screens by selecting “**Projects**” from the left menu.

## FY 2017 CoC Program New Projects Detailed Instructions

- 3. Project Status:** This field defaults to the “**Standard**” option and project applicants should only change it to “**Appeal**” if they are appealing a CoC’s decision to reject the project application in the local CoC competition; meaning, an eligible project applicant believes they were denied the opportunity to participate in the local CoC planning process in a reasonable manner. All other project applicants should leave the field with the option “**Standard.**” If the project applicant selects “**Appeal,**” Screen 8A “**Notice of Intent to Appeal**” will appear on the left menu. For further information about appeals see instructions for Screen 8A above.
- 4. Component Type:** All project applicants must indicate the CoC Program component type under which the project operates. Project applicants must select “**Joint TH and PH-RRH.**”
- 5. Title V:** Title V of the McKinney-Vento Act allows unutilized, underutilized, excess, **or** surplus federal properties to be used by homeless services providers for assisting persons experiencing homelessness. Select “**Yes**” or “**No**” to indicate whether the project will include one **or** more properties that have been **or** will be conveyed through the Title V process.

### Joint TH and PH-RRH Screen 3B. Description

All fields on Screen 3B are required and provide HUD with a detailed description of the project.

- 1. Provide a description that addresses the entire scope of the proposed project.** Provide a clear and concise project description of the scope of the project. The description should describe the community needs, target population(s) to be served, project plan for addressing the identified housing and supportive service needs, projected project outcome(s), coordination with other sources, partners, and the reason CoC Program support is needed. In addition, be sure to describe how both the TH and PH-RRH portions of the project will be utilized. For example, the project will house participant in leased units for the TH portion up to X months and then will move participants to PH-RRH TRA units providing X services. The information provided in this narrative must not conflict with information provided in other parts of the project application.
- 2. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work:** Demonstrate how full capacity will be achieved over the term requested in this application. **Note:** To expend funds within statutorily required deadlines, project applicants must be able to begin assistance within 12 months of conditional award. The estimated schedule should reflect these statutorily required deadlines.
- 3. Will your project participate in a CoC Coordinated Entry Process?** Participation in a CoC coordinated entry process is a requirement of 24 CFR part 578 for all recipients of CoC Program funds. New project applicants should Select “**Yes**” if they will participate in a CoC coordinated entry process (known as centralized **or** coordinated assessment system in 24 CFR part 578; Notice: CPD-17-01, [Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System](#); and the FY 2017 CoC Program NOFA) as soon as the project begins operations. **If** the CoC does not yet have a coordinated entry process, **or** if the project will not participate, Select “**No.**” **Note:** Coordinated entry is a process designed to coordinate program participant intake, assessment, and provision of referrals. A coordinated entry process covers the CoC’s geographic area, is easily accessed by individuals and families seeking housing **or** services, is well advertised, and includes a comprehensive and standardized assessment tool and process. Unless you plan to participate in a process that is coordinated by the CoC across all providers in the community, Select “**No.**”
  - 3a. If “No;” Please explain why your project does not participate in a CoC Coordinated Entry Process.** Provide an explanation for why you do not expect the project to participate in a community’s coordinated entry process during the requested grant term.
- 4. Please identify the specific population focus. (Select ALL that apply)** If a subpopulation focus for your organization is not listed, check the box next to “**Other**” and then enter in the subpopulation in the text box provided.
- 5. Housing First.** Housing First is a model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or

## FY 2017 CoC Program New Projects Detailed Instructions

preconditions (such as sobriety or a minimum income threshold). It is an approach to quickly connect individuals and families experiencing homelessness to permanent housing without barriers to entry (e.g., sobriety, treatment or service participation requirements) and without preconditions that might lead to the program participant's termination from the project (e.g., supportive service participation requirements or rules beyond normal tenancy rules). Supportive services are voluntary, but are offered to maximize housing stability and prevent returns to homelessness. **HUD expects new Joint TH and PH-RRH Component Projects to adopt a Housing First approach.** Review Sections II.A.4., II.B.17.c., III.A.3.g., and VII.A.1.g. of the FY 2017 CoC Program Competition NOFA and the Housing First in PSH brief at [www.hudexchange.info/resource/3892/housing-first-in-permanent-supportive-housing-brief/](http://www.hudexchange.info/resource/3892/housing-first-in-permanent-supportive-housing-brief/)) for more information. The questions in this section help identify whether your project operates consistent with a Housing First approach.

- a. **Does the project quickly move participants into permanent housing?** Select “Yes” to this question if your project will quickly move program participants into permanent housing without requiring additional steps (e.g., required stay in transitional housing before moving to permanent housing) when program participants determine that they want assistance moving into permanent housing. If this is a domestic violence (DV) project application, project applicants should select “Yes” if the project will quickly move program participants into permanent housing after immediate safety needs identified by the program participant are addressed (e.g., survivors believe they are still in danger from violent situations and choose to wait until the dangerous situations are addressed before moving into permanent housing, but must be assisted in quickly moving to permanent housing as soon as they believes it is safe). Select “No” if the project does not work to move program participants quickly into permanent housing. The questions in this section helps identify whether your project operates consistent with a Housing First approach.
  - b. **Does the project ensure that participants are not screened out based on the following items? (Select ALL that apply):** Check the box next to each item to confirm that your project does not have the following barriers at the time of completing this application: (1) having too little or little income; (2) active or history of substance use; (3) having a criminal record with exceptions for state-mandated restrictions; and (4) History having a history of victimization (e.g., domestic violence, sexual assault, childhood abuse). If all of these barriers still exist at the time of completing this application, select “None of the above.”
  - c. **Does the project ensure that participants are not terminated from the program for the following reasons? (Select all that apply).** Check the box next to each item to confirm that your project does not terminate participants for the following reasons: (1) failure to participate in supportive services—not including case management that is for the purposes of engagement only; (2) failure to make progress on a service plan; (3) loss of income or failure to improve income; and (4) any other activity not covered in a lease agreement typically found in the project's geographic area. If a program participant can be terminated for any of these reasons at the time of application, select “None of the above.”
  - d. **Does the project follow a Housing First approach?** *e-snaps* automatically populates this read-only field based on the responses above. This field will only indicate “Yes” if the project applicant selected “Yes” for 3a **and** checked all of the boxes for 3b and 3c, to confirm a Housing First approach. Otherwise, this field will indicate “No” to confirm that the project will not follow a Housing First approach. Any project application submitted as using a Housing First approach must continue operating as such.
6. **If applicable, describe the proposed development activities and the responsibilities that the applicant and potential subrecipients (if any) will have in developing, operating, and maintaining the property?** This question is only applicable if a Joint TH and PH-RRH is requesting property development capital costs (acquisition, new construction, and **or** rehabilitation) for the TH portion of the project. As explained in the Part 6 Budget section, the TH portion of a project may request capital costs and other types of housing costs; however, the PH-RRH portion of the project can only involve

## FY 2017 CoC Program New Projects Detailed Instructions

tenant-based rental assistance, supportive services and HMIS costs. **If** this question is not applicable; place N/A in the textbox. **If** this question is applicable, provide a narrative that specifically describes the property development activities for the TH portion of the project. Project applicants are not required to repeat the entire project plan and schedule described in question 2.

7. **Will the PH project provide PSH or RRH?** Joint TH and PH-RRH projects must Select “RRH.” Project applicants who Select “RRH” will only be able to select Tenant-based Rental Assistance (TRA) as a housing option. Part 6 Budget section explains that the TH portion may involve other types of housing costs; however, the PH-RRH portion of the project can only involve tenant-based rental assistance, supportive services and HMIS costs.
8. **Will participants be required to live in a particular structure, unit, or locality, at some point during the period of participation?** Select “Yes” or “No” to indicate whether program participants will be required to live in a specific place determined by the project applicant at any point. Select “Yes” if any portion of their project will be site-based, including either the TH portion **or** the PH-RRH portion. **Note:** Since the PH-RRH portion of the project is tenant-based rental assistance (TRA), recipients may only require program participants to live in a specific area and in a specific structure only where it is necessary to facilitate the coordination of supportive services. However, requiring program participants to reside in a certain structure **or** area is not consistent with the RRH model. Therefore, HUD encourages all applicants awarded RRH grants to provide as much client choice as possible in the selection of their permanent unit, keeping in mind that program participants will remain in these units after the RRH assistance ends.
  - 8a. **If yes, explain how and why the project will implement this requirement.** Describe why the project applicant has chosen to implement this program design for their project program participants. For example, if a project applicant owns a building that it will be using to provide TH for program participants. **If** requiring for the RRH portion, it is particularly important to explain why it is necessary for facilitating the provision of supportive services and why you are choosing to implement this requirement for RRH program participants.
9. **Will more than 16 persons live in one structure?** Select “Yes” or “No” to indicate whether more than 16 persons will reside in any one of the structures assisted with funds requested through this application. **If** Yes, two additional questions will appear.
  - 9a. **Describe the local market conditions that necessitate a project of this size.** **If** there are more than 16 people, use the text box to explain how local market conditions necessitate this size.
  - 9b. **Describe how the project will be integrated into the neighborhood.** **If** there are more than 16 people, use the text box to explain how neighborhood integration can be achieved for program participants.

### Joint TH and PH-RRH Part 4: Housing and Services

In Part 4 of the Project Application, HUD expects project applicants to provide detail regarding the housing and services that will be provided.

#### Joint TH and PH-RRH Screen 4A. Supportive Services for Participants

All fields on Screen 4A are required and provide HUD with detailed understanding of the supportive services provided to program participants.

- 1a. **Are the proposed project policies and practices consistent with the laws related to providing education services to individuals and families?** Select “Yes” or “No” based on the answer to the following information. Any project applicant requesting funds to provide housing **or** services to children and youth, with **or** without families, must indicate whether the project has established policies and practices that are consistent with, and do not restrict the exercise of rights provided by subtitle B of title VII of the McKinney-Vento Act (42 U.S.C. 11431, *et seq.*), and other laws (e.g., HEAD Start, part C of the Individuals with Disabilities Education Act) relating to the provision of educational and related

## FY 2017 CoC Program New Projects Detailed Instructions

services to individuals and families experiencing homelessness. Project applicants should only Select “**Not applicable**” if the project will not serve children **or** youth under 25.

**1b. Will the proposed project have a designated staff person to ensure that the children are enrolled in school and receive educational services, as appropriate?** Any project applicant requesting funds to provide housing **or** services to children and youth, with **or** without families must indicate whether a staff person has been designated to ensure that children are enrolled in school and connected to the appropriate services within the community, including early childhood programs such as Head Start, Part C of the Individuals with Disabilities Education Act, and McKinney-Vento education services. Project applicants should only Select “**Not applicable**” if the project will not serve children **or** youth under 25.

**1c. Describe the manner in which the project applicant will take into account the educational needs of children when children and/or families are placed in housing.** This question is visible and required only if “**No**” is selected in response to question 1a **or** 1b. Project applicants not in compliance with federal education assurances must provide an adequate description of the reason(s) for noncompliance and a corrective action plan. Failure to comply with federal education assurances may result in Federal sanctions, and significantly reduce the likelihood of receiving funding through the CoC Program Competition.

**2. Describe how participants will be assisted to obtain and remain in permanent housing:** Describe plans to move program participants quickly into permanent housing **and** plans to ensure that program participants stabilize in permanent housing. The description should account for the special nature of the Joint component with both TH and RRH, including the types of supports that are offered to program participants in both portions of the project—the TH and the RRH portions—and how the program participants will be assisted to quickly move from the TH portion into the RRH portion. An acceptable response will acknowledge the needs of the target population and include plans to address those needs through current and proposed case management activities and the availability and accessibility of supportive services such as—housing search, primary health services, mental health services, educational services, employment services, life skills, child care services, etc. Good strategies should be specifically tailored—as related to this application—for individuals, older adults, youth, families, etc. **Example:** A project specializing in serving young parents might provide a specific service array including parenting classes, education programing and other child care services.

If program participants will be housed in units not owned by the project applicant, the narrative must also indicate how appropriate units will be identified and how the project applicant **or** subrecipient will ensure that rents are reasonable. Established arrangements and coordination with landlords and other homeless services providers should be detailed in the narrative. Landlord engagement is a critical piece of the strategy and will be explained in a good response.

**3. Describe specifically how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently:** Address the needs of the target population, the required supportive services; the availability and accessibility of those supportive services; and any coordination with other homeless services providers and mainstream systems. Describe how service delivery directly leads to program participant employment; how service delivery leads directly to program participants accessing SSI, SSDI, **or** other mainstream services; and how the requested funds contribute to program participants becoming more independent.

**Note:** Education plays an important role in the personal development of program participants and should be considered a strategy to maximize their ability to live independently. In addition, HUD encourages project applicants to explain how education will address the encampment and unsheltered homelessness and survivors of DV.

**4. For all supportive services available to participants, indicate who will provide them and how often they will be provided:** This list identifies **ALL** of the supportive services that are provided to program participants in the Joint TH and PH-RRH project by the project applicant, subrecipient, partner organization, **or** Non-Partner organization. The project applicant should complete each row of drop down menus for all supportive services that will be provided to program participants regardless of

## FY 2017 CoC Program New Projects Detailed Instructions

funding source. Do not limit this selection to just the supportive services that are being requested in your project application—include the supportive services that are being provided by other organizations and grants as well. **If more than one Provider or Frequency is relevant for a single service, select the provider and access that is used most often. If more than one provider offers the service equally often, choose the provider according to the following order: (1) Applicant, (2) Subrecipient, (3) Partner, and (4) Non-Partner.**

- **Provider:** Select one of the following:
  - **“Applicant”** to indicate that the project applicant will provide the service;
  - **“Subrecipient”** to indicate that a subrecipient, as indicated on from 2A. Project Subrecipients, will provide the service;
  - **“Partner”** to indicate that an organization that is not a subrecipient of project funds but with whom a formal agreement or memorandum of understanding (MOU) has been signed will provide the service; or
  - **“Non-Partner”** to indicate that a specific organization with whom no formal agreement has been established regularly provides the service to program participants.
- **Frequency:** Select how often the service is provided to program participants. **If two frequencies are equally common, select the interval that is most frequent, e.g., both weekly and monthly are equally common—select weekly.**

**Note:** The list is exclusive and exhaustive according to 24 CFR 578.53. Project applicants must complete the dropdown menus for at least one service/row.

### 5. Please identify whether the project includes the following activities:

- 5a Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs?** Select **“Yes”** if the project provides regular or as needed transportation assistance to mainstream and community resources, including appointments, employment training, educational programs, or jobs. Transportation assistance may include bus passes, rail/subway cards, vehicle owned by the organization, taxi fare, etc. Select **“No”** if transportation will not be regularly provided or cannot be provided consistently as requested.
- 5b Use of a single application form for four or more mainstream programs?** Select **“Yes”** if the project will use a single application form which allows program participants to take and use to sign up for four or more mainstream programs without having to complete another document. Select **“No”** if application forms will cover three or fewer mainstream programs.
- 5c Regular follow-ups with participants to ensure mainstream benefits are received and renewed?** Select **“Yes”** if the project will follow-up with program participants at least annually to ensure that they have applied for and are receiving their mainstream benefits and renew benefits when required. Select **“No”** if there will be no or irregular follow-up concerning mainstream benefits.
- 6. Do project participants have access to SSI/SSDI technical assistance provided by the applicant, a subrecipient, or partner agency?** Select **“Yes”** if program participants will have access to SSI/SSDI technical assistance. The assistance can be provided by the project applicant, a subrecipient, or a partner agency—through a formal or informal relationship. Select **“No”** if there will be no or significantly limited access to SSI/SSDI technical assistance.
- 6a. Has the staff person who will provide the technical assistance completed SOAR training in the past 24 months?** This question will only appear if **“Yes”** is selected to the previous question. Select **“Yes”** to indicate that the applicant, subrecipient or partner agency staff person who will be providing the SSI/SSDI technical assistance has completed SOAR training, online or in person, in the past 24 months. **If more than one person will provide technical assistance, select “Yes” only if all persons have completed the training. Otherwise, Select “No.”**

## FY 2017 CoC Program New Projects Detailed Instructions

### Joint TH and PH-RRH Screen 4B. Housing Type and Location

Screen 4B, Housing Type and Location, applies to all Joint TH and PH-RRH projects and presents a summary chart of the units and beds included in the project according to the following categories:

- **Total Units.** Includes all of the units in the project, regardless of size.
- **Total Beds.** Includes all of the beds in the project, regardless of unit configuration.

Additionally, there are three columns:

- **Total;**
- **TH; and**
- **PH-RRH.**

The **total** summary fields are compiled from all the individual housing locations listed below the totals. These fields will populate and update automatically when new housing types and locations are added to the list. The **TH** and **PH-RRH** columns must be completed by the project applicant to differentiate the units and beds that will be used in each part of the project. The sum of the beds and units in the **TH** and **PH-RRH** columns must not be greater than the sum of the beds and units in the **total** column.

To add new “**Housing Type and Location detail**” screen(s), click the add  icon and complete the mandatory fields. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

The project applicant must use Screen 4B to report each housing type and location supported using requested CoC Program funds. The numbers reported must reflect the total units and total beds directly supported by CoC Program-awarded funds **at the project’s full capacity on a single day**. Generally, the reported number of beds should match the number of persons served and households, as listed on Screens 5A and 5B although there are understandable exceptions (e.g., a two-parent household where the parents share a bed).

1. **Does the project have private rooms?** Select “**Yes**” if the project units include private rooms for the TH portion of the project. Select “**No**” if households do not have private rooms and must share sleeping spaces with other households.
2. **Housing type:** Report the type of housing structures in which program participants under this project will be housed for **both the TH and the PH-RRH portions of the project**. Each housing type must be listed individually according to the following options:
  - **Barracks:** Individuals **or** families sleep in a large room with multiple beds. **This type is not appropriate for the PH-RRH portion of the project.**
  - **Dormitory, shared or private rooms:** Individuals **or** families share sleeping rooms **or** have private rooms; persons share a common kitchen, common bathrooms, **or** both. **This type is not appropriate for the PH-RRH portion of the project.**
  - **Shared housing:** Shared housing is defined as an arrangement in which two **or** more unrelated people share a house **or** an apartment. Each unit must contain private space for each assisted family, plus common space for shared use by the residents of the unit. Common space must be appropriate for shared use by the residents and private space must contain at least one bedroom for each two persons in the family. A zero **or** one-bedroom unit may not be used for shared housing.
  - **Single Room Occupancy (SRO) units:** Each individual has private sleeping **or** living room which may contain a private kitchen and/or bath, **or** shared, dormitory style facilities.
  - **Clustered apartments:** Each individual **or** family has a self-contained housing unit located within a building **or** complex that houses both persons with special needs—e.g., homeless **or** formerly homeless persons, persons with substance abuse problems, persons with mental illness, **or** persons with AIDS/HIV—and persons without any special needs.

## FY 2017 CoC Program New Projects Detailed Instructions

- **Scattered-site apartments (including efficiencies):** Each individual **or** family has a self-contained apartment. Apartments are scattered throughout the community.
  - **Single family homes/townhouses/duplexes:** Each individual **or** family has a self-contained, single family home, townhouse, **or** duplex that is dispersed throughout the community.
3. **Indicate the maximum number of Units and Beds available for project participants at the selected housing site:** Enter the number of units and beds available at a point in time and used for housing program participants in this project.
- **Units:** Enter the total number of units that will be available at a point in time in the selected housing type and location used for housing program participants.
  - **Beds:** Enter the total number of beds that will be available at a point in time in the selected housing type and used for housing program participants.
- Note:** A zero bedroom **or** efficiency must be indicated as 1 unit, 1 bedroom, and 1 bed. In addition, the number of units and beds listed on Screen 4B must be equal to **or** greater than the total number of units and beds requested in the budget, Part 6 of this guide, and **should correlate** to the number and characteristics of persons that the project is expected to serve recorded on Screens 5A and 5B.
5. **Address:** Project applicants must enter an address for all proposed and existing properties. **If** the location is not yet known, enter the expected location of the housing units. For Scattered-site and Single family home housing, **or** for projects that have units at multiple locations, project applicants should enter the address where the majority of beds will be located **or** where the majority of beds are located as of the application submission. Where the project uses tenant-based rental assistance in the RRH portion, **or** if the address for scattered-site **or** single family homes housing cannot be identified at the time of application, enter the address for the project’s administration office. Projects serving victims of domestic violence, including human trafficking, must use a PO Box **or** other anonymous address to ensure the safety of participants.
6. **Select the geographic area associated with this address:** Report the geographic area in which the housing type, units, and beds will be located. The list of geographic areas is limited by the state(s) selected on Screen 1D of the application. Multiple areas can be selected if units are located in more than one county **or** city. Hold down the “Ctrl” key to make multiple selections.

### Joint TH and PH-RRH Part 5: Participants and Outreach

In Part 5 of the application, HUD expects project applicants to provide detail regarding the program participants who will be served, including basic household and subpopulation data, as well as outreach data.

#### Joint TH and PH-RRH Screen 5A. Project Participants - Households

The numbers on Screen 5A are intended to reflect the households and person proposed to be served on a given night when the project is at full operational capacity. The screen must include at least one household and at least one person.

Screen 5A is separated into two sections: (1) Household(s) served in row one; and, (2) Person(s) served in rows 2 through 13. For both sections there are three editable columns that capture a specific type of household.

- **Households with at least One Adult and One Child:** For the proposed numbers under this column and household type, there must be at least one person at or above the age of 18, and at least one person under the age of 18.
- **Adult Households without Children:** For the proposed numbers under this column and household type, there must be at least one person at or above the age of 18, and no person(s) under the age of 18.
- **Households with Only Children:** For the proposed numbers under this column and household type, there may not be any person(s) at or above the age of 18; only person(s) under the age of 18.

## FY 2017 CoC Program New Projects Detailed Instructions

The fourth column on the far left, “**Persons**,” is read-only automatically populated with four standard reporting categories determined by HUD.

- **Adult over age 24:** A subset of the category of “**Adults**” to disaggregate “**Youth**” from over age 24 adults.
- **Adults ages 18-24:** A category implemented to account for transition age youth. Youth previously captured under the category “**Adult**” should now be captured under the category “**Adults between the ages of 18 and 24.**”
- **Accompanied Children under age 18:** Includes all children and “**youth**” who are under the age of 18. “**Accompanied**” is defined as “**in the company of parent or legal guardian regardless of the age of the parent or legal guardian.**”
- **Unaccompanied Children under age 18:** Includes all children and youth who are under the age of 18. “**Unaccompanied**” is defined as “**without a parent or legal guardian,**” and can include persons under 18 who themselves have dependents, siblings, or other household members.

The tables are populated with white, dark grey and light grey fields. In each white field, list the number of households or type of person(s) served for the given household type. The dark grey cells are not applicable to the given type of persons, and the light grey cells, will total automatically once the screen is saved. The screen is designed to prevent project applicants from entering more households than persons for any given column, and at least one person must be entered for every column that has one or more households. The number and characteristics of persons that the project is expected to serve is recorded on this screen and should match the total number of units and beds requested on Screen 4B. HUD has removed the distinction between “**disabled**” and “**non-disabled**” on screen 5A as this information is adequately covered on screen 5B.

### Joint TH and PH-RRH Screen 5B. Project Participants - Subpopulations

As with Screen 5A, the numbers here are intended to reflect the households and persons **proposed to be served when the project is at full operational capacity**. The screen is collectively exhaustive and must account for each person identified on Screen 5A. The screen will prevent submission until all persons are accounted for.

Screen 5B is separated into three tables corresponding to the three household types on Screen 5A. See 5A above for a description of the three household types. There are nine editable columns for all three tables that captures a competition priority subpopulation. One additional column accounts for persons who are not represented by the priority subpopulations.

**Table 5. Subpopulation Columns**

Mutually Exclusive
<ul style="list-style-type: none"> <li>• <b>Chronically Homeless Non-Veterans:</b> to fall under this column, persons <b>must be</b> chronically homeless per 24 CFR 578.3, <b>but not also</b> veterans*.</li> <li>• <b>Chronically Homeless Veterans:</b> to fall under this column, persons <b>must be</b> chronically homeless per 24 CFR 578.3, <b>and also</b> veterans*.</li> <li>• <b>Non-Chronically Homeless Veterans:</b> to fall under this column, persons <b>must not be</b> chronically homeless, <b>but must be</b> veterans*. * “Veterans” include all persons who served in the military, regardless of discharge status.</li> </ul>
May Contain Duplicate Entries
<ul style="list-style-type: none"> <li>• <b>Chronic Substance Abuse:</b> Persons identified as chronic substance abusers.</li> <li>• <b>Persons with HIV/AIDS:</b> Persons living with HIV/AIDS.</li> <li>• <b>Severely Mentally Ill:</b> Persons diagnosed as severely mentally ill.</li> <li>• <b>Victims of Domestic Violence:</b> Persons identified as meeting the criteria of Category 4 of the homeless definition.</li> <li>• <b>Developmental Disability:</b> Persons diagnosed with a developmental disability.</li> <li>• <b>Physical Disability:</b> Persons diagnosed with a physical disability.</li> </ul>
Mutually Exclusive to All Other Columns
<ul style="list-style-type: none"> <li>• <b>Persons not represented by an identified subpopulation:</b> Persons served by the organization that have not been diagnosed with <b>or</b> identified as falling under any of the previous subpopulation distinctions.</li> </ul>

## FY 2017 CoC Program New Projects Detailed Instructions

These columns are populated with **white, dark grey and light grey fields**, and are dependent on the selections made in Screen 5A. **If** households and person(s) are added to a household type column in Screen 5A, then the corresponding table will be available for data entry in Screen 5B. **If**, however, no households and persons are added to a particular household type column in Screen 5A, then the corresponding table will not be available in Screen 5B.

**Example:** If 3 households are entered into the “**Adults Only**” column on Screen 5A, but no households are entered into the “**Adults with Children**” or “**with Children Only**” columns on Screen 5A, then only the “**Adults Only**” table will be available for edit on Screen 5B.

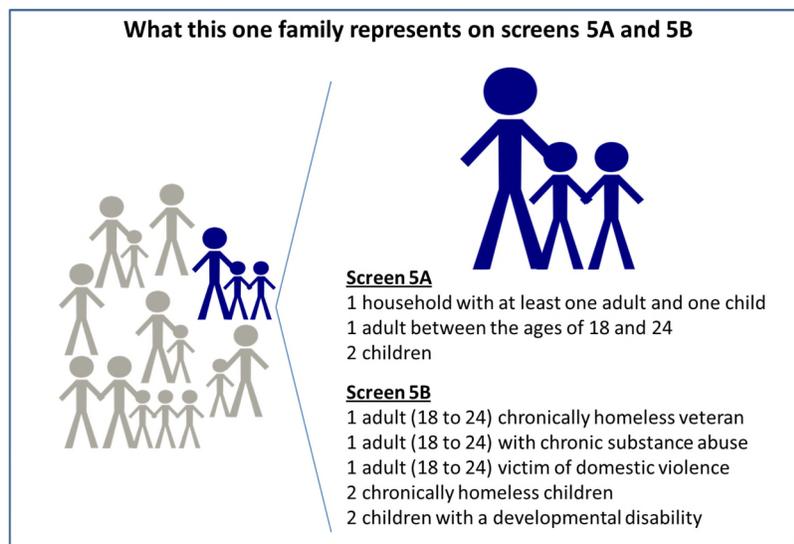
In each white field of the available household tables, list the number of person(s) served for the given subpopulation column. Ignore the dark grey cells, which are not applicable to the given subpopulation, and ignore the light grey cells, which will be totaled automatically after the screen is saved. **If** any number greater than “0” is entered into the column “**Persons not represented by an identified subpopulation,**” a mandatory textbox will appear at the bottom of the screen when the screen is saved. The project applicant must enter a description of the population being served that does not fall under any of the priority subpopulation columns.

The screen has additional controls that ensure that Screens 5A and 5B match. First, you will notice in Table 5 above that three columns are internally **mutually exclusive**. This means that a single person can only identify with one of the first three columns for each table (e.g., a single person cannot be a veteran while at the same time being a non-veteran). Columns 4 through 9, under “**May Contain Duplicate Entries;**” however, are not **mutually exclusive**. This means that a single person can identify with more than one column at the same time (e.g., a single person might be a veteran, suffering from a physical disability, and a victim of domestic violence). Column 10, **Persons not represented by an identified subpopulation,** is **mutually exclusive** to all other columns. This means that if a single person falls under column 10 the person does not identify with any of the other subpopulations.

There are several other important controls to understand. The “**Total Persons**” for each column, for example, cannot be larger than the total persons for that household category in Screen 5A. Likewise, no cell in each row can contain a number greater than the total number of persons in the corresponding age group as reported on Screen 5A. At the same time, the screen is engineered to require an entry for each person served and so, at a minimum, the total number from the tables must equal the total number of persons in each corresponding household column from Screen 5A.

The **Characteristics** column (column (1) is populated with the same characteristics used on Screen 5A. They have been applied to each table based on their relevance to the tables housing type.

Total fields will calculate automatically when at least one household field and one person(s) field is entered and the screen is saved. Use them as a point of reference to ensure that all persons and households have been entered correctly.



## FY 2017 CoC Program New Projects Detailed Instructions

### Joint TH and PH-RRH Screen 5C. Outreach for Participants

Screen 5C requires project applicants to identify where their eligible program participants will come from with respect to HUD's homeless definition and must include percentages of program participants who will be served using requested funds.

It is the responsibility of the project applicant to ensure that program participants served in Joint TH and PH-RRH are eligible for the project. For further guidance refer to 24 CFR part 578 and the FY 2017 CoC Program Competition NOFA.

- 1. Enter the percentage of homeless person(s) who will be served by the proposed project for each of the following locations:** Indicate the estimated percentage of homeless persons who will be admitted from each of the listed locations. The total estimated percentage must equal 100 percent in order to submit the project application.
  - **Directly from the street or other locations not meant for human habitation.**
  - **Directly from emergency shelters** (this includes domestic violence emergency shelters).
  - **Directly from safe havens.**
  - **Persons at imminent risk of losing their night time residence within 14 days, have no subsequent housing identified, and lack the resources to obtain other housing**
  - **Persons fleeing domestic violence** (or attempting to flee and including human trafficking, victims of sexual assault, stalking, and dating violence).
  - **Directly from transitional housing**
  - **Persons receiving services through a Department of Veterans Affairs(VA)-funded homeless assistance program.**

Individuals coming from an institution where they have resided for 90 days **or less and** have entered the institution from the streets, emergency shelter, **or** safe haven, maintain their homeless status during that time. Include these program participants in the percentages for streets and places not meant for human habitation, emergency shelters, and safe havens accordingly.

- 2. Describe the outreach plan to bring these homeless participants into the project.** A textbox is provided for a brief explanation. Explain how program participants will be identified and connected with the offered housing and services. For projects participating in a CoC's coordinated entry process, simply explain that coordinated entry will provide outreach and access and describe the specific coordination and referral process between coordinated entry and this project.

### Joint TH and PH-RRH Part 6: Budgets

Part 6 of the application requests project information related to budget requests and information about required grant matching funds.

**Funding Limitations:** For FY 2017, new **Joint TH and PH-RRH** projects are eligible for **Permanent Housing Bonus** funds **or reallocation** funds. Within each CoC, the total available amount for new Permanent Housing Bonus projects is limited to 6 percent of the CoC's Final Pro-Rata Need (FPRN). New **Joint TH and PH-RRH** projects requesting funding through the **reallocation** process are limited to the amount of funds made available by CoCs eliminating **or** reducing eligible renewal grants. To confirm the maximum amount available for a new **Joint TH and PH-RRH** project application, it is important to consult with the CoC's Collaborative Applicant prior to submitting a project application.

**Note:** Pay special attention to Question 2 on Screen 6A and **accurately** identify the project as being created using the "**Reallocation**" process **or** as a "**Permanent Housing Bonus**" project.

**Maximum Grant Terms:** The maximum grant term for projects under the CoC Program is dependent upon the costs requested in the budget and will have a significant impact on the total amount requested and will

## FY 2017 CoC Program New Projects Detailed Instructions

have significant implications for both project and CoC funding. Carefully review Section IV.B.2. of the FY 2017 CoC Program Competition NOFA before selecting a grant term and contact your CoC’s Collaborative Applicant to confirm your selection prior to submitting the application.

**Note:** All new project applications that are conditionally awarded must begin carrying out the activities described in the application on **or** before September 30, 2019 to comply with the funding obligation standards contained in the appropriations bill that authorizes the funds for this competition. HUD strongly encourages all projects with rental assistance funding to begin within 12 months of award. Refer to Section IX.B.2. of the FY 2017 CoC Program Competition NOFA for more details.

### Joint TH and PH-RRH Screen 6A. Funding Request

Screen 6A provides the framework through which a project applicant creates a project budget.

1. **Will it be feasible for the project to be under grant agreement by September 30, 2019?** Select “Yes” or “No” to indicate whether the project will begin operating by September 30, 2019. Unobligated funds will not be available after September 30, 2019. Project applicants will not be able to submit project applications that cannot feasibly meet the September 30, 2019 deadline.
2. **Is the project proposing to use funds reallocated from the CoC’s annual renewal demand or is the project applying for funding through the permanent housing bonus?** Select “Reallocation” if the project is being created using the reallocation process as indicated on the Reallocation form submitted by the CoC’s Collaborative Applicant. Select “Permanent Housing Bonus” if the project is being created through the permanent housing bonus.
3. **Does this project propose to allocate funds according to an indirect cost rate?** Select “Yes” or “No” to indicate whether the project has an approved indirect cost plan in place **or** will propose an indirect cost plan by the time of conditional award. For more information concerning indirect costs plans, refer to 2 CFR 200.203(c)(2) and contact your local HUD field office.

\* If “Yes,” you must respond to the following questions:

**3a. Please complete the indirect cost rate schedule below:** Complete at least one row using information from either you approved plan **or** your proposal.

Administering Department/Agency	Indirect Cost Rate	Direct Cost Base
	%	
	%	
	%	

**3b. Has this rate been approved by your cognizant agency?** Select “Yes” if the indirect cost rate has already been approved by your cognizant agency. Select “No” if it has either not been submitted to **or** has been submitted, but has not yet been approved by your cognizant agency.

**3c. Do you plan to use the 10% de minimis rate?** Select “Yes” only if the project plans to use the 10 percent *de minimis* rate as described in 2 CFR 200.203(c)(2).

4. **Select a grant term:** Indicate the number of years for which funding is being requested (carefully review Section IV.B.2. of the FY 2017 CoC Program Competition NOFA). The selection made here will automatically calculate the total amount of funding requested on the budget screens. **For example:** If 1 year is selected, the budget line item(s) selected will calculate 1 year amounts. **If 2 years is selected,** the budget line item(s) selected will calculate 2 year amounts. The one exception is if a project is eligible for a 15-year grant term, the funding will be for 5 years.
5. **Select the costs for which funding is being requested:** Check the box next to the eligible costs for which funding is being requested (be sure to review 24 CFR part 578, Subpart D; Program Components and Eligible Costs and Section 578.87(c)–Restriction on Combining Funds to ensure eligible use of funds). Each checked box unlocks the corresponding budget line item, screens 6B through 6H:

## FY 2017 CoC Program New Projects Detailed Instructions

- **Acquisition/Rehabilitation/New Construction:** May only be used in the TH portion of the project. Check the box to unlock and reveal the Acquisition/Rehabilitation/New Construction budget screen.
- **Leased Units:** May only be requested for the TH portion of the project. Check the box to unlock and reveal the Leased Units budget screen. The lease must be between the landlord and the recipient.
- **Leased Structures:** May only be requested for the TH portion of the project. Check the box to unlock and reveal the Leased Structures budget screen. Leased structures are buildings leased by the project applicant that contain multiple units for program participants **or** serve as the structure for supportive services **or** operating.
- **Rental Assistance:** Only eligible for the RRH portion of the project and can only be for Tenant-Based Rental Assistance (TRA). Check the box to unlock and reveal the Rental Assistance budget screen.
- **Supportive Services:** May be requested for both the TH and the PH-RRH portions of the project. Check the box to unlock and reveal the Supportive Services budget screen.
- **Operating:** May only be requested for the TH portion of the project. Check the box to unlock and reveal the Operating budget screen.
- **HMIS:** May be requested for both the TH and the PH-RRH portions of the project. Check the box to unlock and reveal the HMIS budget screen.

### Joint TH and PH-RRH Screen 6B. Acquisition/Rehabilitation/New Construction Budget

Screen 6B appears if the Acquisition/Rehabilitation/New Construction budget cost is selected on Screen 6A. Complete this screen to request funds for all development activities. The primary screen on Screen 6B will aggregate the acquisition, rehabilitation, and new construction costs requested for each proposed project site to calculate the total for all costs requested. To add a site, click the add  icon to access the detail budget screen(s). The primary screen will populate and update automatically when new detail screen(s) are added to the list. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

Project applicants must enter a specific location for each site requesting capital costs. Create a name for each site that you will recognize, which will populate the list on the primary screen. Then fill out Street Address, City, State, and Zip Code. The address must be the actual site of the proposed development activities and not the administrative office of the project applicant **or** subrecipient. Projects serving victims of domestic violence, including human trafficking, may use a PO Box **or** other anonymous address to ensure the safety of program participants.

If grant funds are used for new construction, the project applicant must demonstrate that the costs of new construction are substantially less than the costs of rehabilitation **or** that there is a lack of available appropriate units that could be rehabilitated at a cost less than new construction. Refer to 24 CFR 578.43-47 for details on eligible acquisition, rehabilitation, and new construction costs.

### Joint TH and PH-RRH Screen 6C. Leased Units Budget

Screen 6C appears if the “Leased Units” budget line item is selected on Screen 6A. **These budget costs are only eligible for the TH portion of the project.** Screen 6C opens with a primary screen that will aggregate the total assistance requested and total units requested for each “Leased Units Budget Detail” screen(s).

Click the add  icon to access the “Leased Units Budget Detail” screen and detail the unit configuration for a given FMR area. Project applicants requesting leased units costs are required to itemize their requests by unit size and indicate the HUD paid rent per month (at or below the Fair Market Rent (FMR) displayed for reference). The screen automatically calculates the annual rate per unit size and the total leased units request for

## FY 2017 CoC Program New Projects Detailed Instructions

the grant term selected on Screen 6A. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

**Metropolitan or non-metropolitan fair market rent area:** Select the appropriate FMR area where the units will be located. The list is sorted by state abbreviation, and most areas are calculated by country **or** metropolitan area. The selected FMR area will be used to populate the rents in the FMR Area column in the chart on this screen. For projects that operate in more than one geographic location, the project applicant must create a separate detail budget screen for each FMR area.

Project applicants must enter the leased units annual budget amounts according to the following:

- **Size of units:** These options are system generated. Unit size is defined by the number of distinct bedrooms and not by the number of distinct beds.
- **Number of units:** For each unit size, enter the number of units for which funding is being requested.
- **FMR:** These fields are populated with the FY 2016 FMRs based on the FMR area selected by the project applicant and are for reference only. The FMRs are available online at [www.huduser.org/portal/datasets/fmr.html](http://www.huduser.org/portal/datasets/fmr.html).
- **HUD Paid Rent:** For each unit size, enter the rent to be paid by this grant. The rent cannot exceed the FMR amount in the previous column; however, project applicants may request amounts less than the FMR. Once funds are awarded, recipients must document compliance with the rent reasonableness requirement set forth in 24 CFR Part 578.49(b)(2).
- **12 Months:** These fields are populated with the value 12 to calculate the annual rent request.
- **Total Request:** This column populates with the total calculated amount from each row.
- **Total Units and Annual Assistance Requested:** This row is automatically calculated as the sum of the amounts entered into each “HUD Paid Rent” field multiplied by 12 months, and the sum of the amounts entered into the “Number of Units” field.
- **Grant Term:** This read-only field is populated based on the grant term selected on the “Funding Request” screen.
- **Total Request for Grant Term:** This field will equal the total annual assistance amount calculated above multiplied by the grant term.

All gray fields will be calculated once the required fields have been completed and the screen saved.

Often, when leasing a structure(s) or unit(s) for the purpose of program participant housing or supportive services, the cost of maintenance, repair, and utilities are included as a responsibility of the landlord in the lease agreement. However, in instances where these costs are not included in the lease agreement, these costs are generally eligible under the operating budget line item and should be included if they are anticipated.

All automatic fields will be calculated after the required field has been completed and saved.

### Joint TH and PH-RRH Screen 6D. Leased Structures Budget

Screen 6D appears if the Leased Structures budget line item is selected on Screen 6A. **These budget costs are only eligible for the TH portion of the project.** Screen 6D will aggregate the total assistance requested.

To add leased structures, click the add  icon to access the detail budget screen(s). The primary 6D screen will populate and update automatically when new detail screen(s) are added to the list. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

The leased structures budget detail screen(s) requires a structure name and address and the monthly HUD paid rent. This rent amount will be automatically multiplied by 12 months and then by the grant term selected on

## FY 2017 CoC Program New Projects Detailed Instructions

screen 6A to determine the total structure funding request. Leased structures are not confined to the project area's FMR amounts. Grant funds can pay the actual costs of leasing a structure **or** structures; however, in order for grant funds to be used, the rent paid must be reasonable when compared to rents being charged by other owners for similar spaces and may not exceed rents currently being charged by the same owner for comparable unassisted spaces.

### Joint TH and PH-RRH Screen 6E. Rental Assistance Budget

Screen 6E appears if the Rental Assistance budget line item is selected on Screen 6A. Screen 6E will aggregate the total assistance requested and total units requested for each FMR area **or** rental assistance type.

To add units for a new FMR, click the add  icon to access the detail budget screen(s). The primary 6E screen will populate and update automatically when new detail screen(s) are added to the list. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

**Type of Rental Assistance:** All **Joint TH and PH-RRH** projects **must** Select “TRA” from a drop down on the top of each Rental Assistance Detail Budget Screen.

**Metropolitan or non-metropolitan fair market rent area:** Select the appropriate FMR area where the units will be located. The list is sorted by state abbreviation, and most areas are calculated by country **or** metropolitan area. The selected FMR area will be used to populate the rents in the FMR Area column in the chart on this screen. For projects that operate in more than one geographic location, the project applicant must create a separate detail budget screen for each FMR area.

Complete the **Rental Assistance Annual Budget** chart that accounts for the size of units, the number of units being requested, the FMR for each unit size, multiplied by 12 months to account for annual rent, and then summarized by row in the “**Total Request**” column:

- **Size of units:** These options are system generated. Unit size is defined by the number of distinct bedrooms and not by the number of distinct beds.
- **Number of units:** For each unit size, enter the number of units for which funding is being requested.
- **FMR:** These fields are populated with the FY 2016 FMRs based on the FMR area selected by the project applicant. FMRs are available at [www.huduser.org/portal/datasets/fmr.html](http://www.huduser.org/portal/datasets/fmr.html).
- **12 Months:** These fields are populated with the value 12 to calculate the annual rent request.
- **Total Request:** This column populates with the total calculated amount from each row.
- **Total Units and Annual Assistance Requested:** This column is automatically calculated based on the sum of the total requests per unit size per year.
- **Grant Term:** This read-only field is populated based on the grant term selected on the “**Funding Request**” screen. This reflects “years of funding” and may not match the “Grant Term” selected on previous screens. The maximum “years of funding” is set at 5 years, but the maximum possible grant term is set at 15 years. See Section IV.B.2. of the FY 2017 CoC Program Competition NOFA for more information.
- **Total Request for Grant Term:** This field is automatically calculated based on the number of units, multiplied by the FMR per unit size, multiplied by 12 months, multiplied by the grant term.

All automatic fields will be calculated after the required field has been completed and saved.

### Joint TH and PH-RRH Screen 6G. Operating Budget

Screen 6G appears if the Operating budget cost is selected on Screen 6A. The operating costs listed are all inclusive and determined by the eligible operating costs described in 24 CFR 578.55. For the Joint TH and PH-RRH component the Operating costs can only be associated with the operations of the TH portion of the project. Complete the Operating budget screen to request funds for eligible operating costs for each year of the grant term.

## FY 2017 CoC Program New Projects Detailed Instructions

**Note:** According to 24 CFR 578.59(a), staff overhead costs directly related to carrying out operating activities are eligible as part of those activities listed on the operating budget. The itemized budget screen includes 7 eligible costs:

1. Maintenance and Repair
2. Property Taxes and Insurance
3. Replacement Reserve
4. Building Security
5. Electricity, Gas, and Water
6. Furniture
7. Equipment

Enter the quantity, detail, and total budget request for each operating cost.

- **Eligible Costs:** *e-snaps* populates a list of eligible operating costs for which funds can be requested. The costs listed are the only costs allowed under 24 CFR 578.55. Refer to the 24 CFR 578.55 for details on eligible operating costs.
- **Quantity AND Description:** Enter the quantity (i.e. numbers) and description details for each activity for which funds are being requested. **Quantity and description details should be thorough** (e.g., for staffing: use position title: 1 FTE @ \$45,000 including benefits or 50 hours @ \$25 per hour including benefits). Simply stating 1 FTE is **NOT** providing quantity and description details and limits HUD's understanding of costs being requested. Failure to enter adequate quantity and description details will result in HUD placing conditions on the conditional award and will delay funding.
- **Annual Assistance Requested:** Enter the amount requested for each activity. The amount entered must only be the amount that is **directly** related to operating the housing **or** supportive services facility.
- **Total Annual Assistance Requested:** This field is automatically calculated based on the sum of the annual assistance requests entered for each activity.
- **Grant Term:** This read-only field is populated based on the grant term selected on the “**Funding Request**” screen.
- **Total Request for Grant Term:** This field is automatically calculated based on the total amount requested for each eligible cost multiplied by the grant term.

Operating costs that are included in lease agreements to house program participants and for which a leased unit **or** leased structures budget line item has been requested should not be included on this screen. Instead, these costs should be considered a part of the leased units **or** leased structures budget request. Similarly, when leasing a structure used solely for the purpose of providing supportive services to program participants and these costs are not included in the lease (or where the recipient **or** subrecipient owns the building), the costs of operating that structure are eligible and **must be charged to the supportive services budget line item “17. Operating Costs”** and not the operating costs budget line item. Operating costs cannot be combined in the same unit as rental assistance costs under the CoC Program. Where a single project requests rental assistance and operating budget line items, the applicant must demonstrate that the costs are used in distinct, non-overlapping, units.

### Joint TH and PH-RRH Screen 6F. Supportive Services Budget

Screen 6F appears if the “**Supportive Services**” budget line item is selected on Screen 6A. The supportive services listed are exhaustive based on the eligible supportive services in 24 CFR 578.53.

**Note:** The only cost category not on this screen is “**Direct provision of services.**” As 24 CFR.53(e)(17) explains, if the service is being directly delivered by the recipient **or** subrecipient, eligible costs under that service item also may include: the cost of labor **or** supplies, and materials incurred by the recipient **or** subrecipient in directly providing supportive services to program participants; and the salary and benefit packages of the recipient and subrecipient staff who directly deliver the services.

The itemized budget screen includes 17 eligible costs:

1. Assessment of Service Needs
2. Assistance with Moving Costs
3. Case Management
4. Child Care
5. Education Services
6. Employment Assistance

## FY 2017 CoC Program New Projects Detailed Instructions

- |                                |                                        |
|--------------------------------|----------------------------------------|
| 7. Food                        | 13. Outreach Services                  |
| 8. Housing/Counseling Services | 14. Substance Abuse Treatment Services |
| 9. Legal Services              | 15. Transportation                     |
| 10. Life Skills                | 16. Utility Deposits                   |
| 11. Mental Health Services     | 17. Operating Cost*                    |
| 12. Outpatient Health Services |                                        |

\* Project applicants may only include 17. Operating Costs (maintenance, repair, building security, furniture, utilities, and equipment) in the Supportive Services budget if the costs are for a facility that is used to provide supportive services for program participants.

- **Eligible Costs:** *e-snaps* populates a list of eligible supportive services for which funds can be requested. The costs listed are the only costs allowed under 24 CFR 578.53. (Refer to 24 CFR 578.53 for details on eligible supportive services costs.)

**Note:** “**Security Deposits**” is not listed as an eligible supportive service cost. Security deposits are incorporated into the eligible activities under the rental assistance budget line item.

- **Quantity AND Description:** Enter the quantity (i.e. numbers) and description details for each activity for which funds are being requested. **Quantity and description details should be thorough** (e.g., for staffing: use position title: 1 FTE @ \$45,000 including benefits or 50 hours @ \$25 per hour including benefits). Simply stating 1 FTE is **NOT** providing quantity and description details and limits HUD’s understanding of costs being requested. Failure to enter adequate quantity and description details will result in HUD placing conditions on the conditional award and will delay funding.
- **Annual Assistance Requested:** Enter the annual amount requested for each activity. The amount entered must only be the amount that is **DIRECTLY** related to providing supportive services to homeless program participants.
- **Total Annual Assistance Requested:** This field is automatically calculated based on the sum of the annual assistance requests entered for each activity.
- **Grant Term:** This read-only field populates based on the grant term selected on the “**Funding Request**” screen.
- **Total Request for Grant Term:** This field automatically calculates based on the total amount requested for each eligible cost multiplied by the grant term.

All automatic fields will be calculated after the required field has been completed and saved.

### Joint TH and PH-RRH Screen 6H. HMIS Budget

Screen 6H appears if the HMIS budget line item is selected on Screen 6A. The HMIS costs listed are all inclusive and determined by the eligible HMIS costs described at 24 CFR 578.57. Complete the HMIS budget screen to request funds for eligible HMIS costs.

**Note:** Per CFR 578.59(a), staff and overhead costs directly related to carrying out HMIS activities are eligible as part of those activities listed on the HMIS budget. The itemized budget screen organizes all eligible HMIS costs from 24 CFR 578.57 into the following 5 categories:

1. **Equipment**—central server(s), personal computers and printers, networking, and security;
2. **Software**—software/user licensing, software installation, support and maintenance, and supporting software tools;
3. **Service**—training by third parties, hosting/technical services, programming (customization, system interface, data conversion), security assessment setup, internet access, facilitation, and disaster recovery;
4. **Personnel**—project management/ coordination, data analysis, programming, technical assistance and training, and administrative support staff; and
5. **Space & Operations**—space costs and operational costs associated with that space.

## FY 2017 CoC Program New Projects Detailed Instructions

If the recipient **or** subrecipient is a victim services provider, **or** a legal services provider, it may use CoC Program funds to establish and operate a comparable database that complies with HUD's HMIS requirements, listing costs under the comparable category on Screen 6H.

Enter the quantity, detail, and total budget request for each HMIS cost.

- **Quantity AND Description:** Enter the quantity (i.e. numbers) and description details for each activity for which funds are being requested. **Quantity and description details should be thorough** (e.g., for staffing: use position title: 1 FTE @ \$45,000 including benefits or 50 hours @ \$25 per hour including benefits). Simply stating 1 FTE is **NOT** providing quantity and description details and limits HUD's understanding of costs being requested. Failure to enter adequate quantity and description details will result in HUD placing conditions on the conditional award and will delay funding.
- **Annual Assistance Requested:** Enter the annual amount requested for each activity.
- **Total Annual Assistance Requested:** This field automatically calculates based on the sum of the annual assistance requests entered for each activity.
- **Grant Term:** This read-only field populates based on the 1-year grant term from the “**Funding Request**” screen.
- **Total Request for Grant Term:** This field automatically calculates based on the total amount requested for each eligible cost multiplied by the grant term.

All automatic fields will be calculated after the required field has been completed and saved.

### Joint TH and PH-RRH Screen 6I. Sources of Match

The “**6I Sources of Match**” screen is applicable to all project applications and enables project applicants to enter the CoC Program required match, including the type of source and the value of the match commitment.

For detailed information that describes CoC Program match requirements see 24 CFR 578.73.

**Note: Policy update in CoC Program implementation.** Program income **may** be counted as match for CoC Program funds. CoC Program eligible costs paid for by program income may be considered match for grants awarded in the FY 2017 CoC Program Competition.

**New in the FY 2017 CoC Program Competition,** HUD added the following new questions on the primary “**Sources of Match**” screen concerning CoC-generated program income because project applicants that intend to use program income as match must provide an estimate of how much of the program income will be used for match.

- 1. Does this project generate program income as described in 24 CFR 578.97 that will be used as Match for this grant?** Answer “**Yes**” or “**No**.” If “**No**,” no further response is required. If “**Yes**,” the following questions and text box will appear.
  - 1a. Briefly describe the source of the program income:** Enter a description of the source of the program income. **Note:** CoC-generated program income includes occupancy charges paid to the recipient or subrecipient. These amounts are considered program income and may be used as match funds.
  - 1b. Estimate the amount of program income that will be used as Match for this project:** Enter estimated amount in the field provided.

Match funds are acquired from sources outside of this grant's funding request. The match information entered in *e-snaps* should be based on the **current commitments at the time of project application, covering the requested grant operating period (i.e., grant term), and NOT based on projections.** HUD expects the amount(s) listed on this screen to be accurate, with a commitment letter(s) in place that includes the amount(s) listed.

Match contributions can be cash, in-kind, or a combination of both. For match to be counted as cash or in-kind, amounts must be used for CoC Program eligible costs. Match must be equal to or greater than 25 percent of the total grant request for all eligible costs including Administration costs but excluding **Leasing** costs (i.e., Leased

## FY 2017 CoC Program New Projects Detailed Instructions

Units and Leased Structures). **Example:** If the “**Total Assistance Requested**” from the project applicant is \$100,000, and the project applicant did not request costs for Leased Units or Leased Structures, then the project applicant must secure commitments for match funds equal to or greater than \$25,000. The match amount could be all cash, all in-kind contributions, or a mixture of both, and used for any CoC Program eligible activities the project applicant chooses.

HUD strongly encourages project applicants to review the FAQs posted at [www.hudexchange.info/coc/faqs/](http://www.hudexchange.info/coc/faqs/), by searching for the keyword “**match**.”

The primary “**Sources of Match**” screen presents a summary for match that will aggregate multiple cash and in-kind commitments entered in the “**Sources of Match Detail**” screen(s) expected from each source and then calculate the totals.

To add a match commitment, click the add  icon to access a new “**Sources of Match Detail**” screen for each commitment. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

**Complete the following fields in the “Sources of Match Detail” screen for each match commitment:**

- **This commitment will be used as Match.** “Yes” is the default of this read-only field.
- **Type of Commitment:** Select Cash or In-kind (non-cash) to indicate the type of contribution that describes this match commitment.  
**Note:** If applications include third-party In-Kind match on Screen 6D a separate 7A attachment screen will appear that project applicants should use to attach MOU(s) documentation that confirms the in-kind match commitment. If the MOU documentation is not available at application submission, it will be a condition for grant execution, if HUD conditionally awards the project.
- **Type of source:** Select “**Private**” or “**Government**” to indicate the source of the contribution. Funds from HUD-VASH (VA Supportive Housing program) and other federal programs are eligible sources of match and are considered Government sources. HUD encourages project applicants to include funds from these sources when possible.
- **Name the Source of the Commitment:** Be specific and include the office or grant program as applicable. Enter the name of the entity providing the contribution. It is important that project applicants provide sufficient detail so that HUD can quickly identify and approve the commitment source.
- **Date of written commitment:** Enter the date of the written contribution.
- **Value of written commitment:** Enter the total dollar value of the contribution.

After the project applicant saves the primary “**Sources of Match**” screen, the values entered on the “**Sources of Match Detail**” screen(s) will populate the summary amounts. The Cash, In-Kind, and Total Match will also automatically populate the “**Summary Budget**” screen where the 25 percent match requirements will be calculated and applied. If the amounts on the “**Summary Budget**” screen are too low, additional match funds must be added to the “**Sources of Match Detail**” screen(s).

### Joint TH and PH-RRH Screen 6J. Summary Budget

Screen 6J summarizes the funding request for the total term of the project as entered in the budget Screens 6B through 6I. Use this screen to verify the information recorded on each budget detail screen(s) and return to relevant detail screen(s) that have aggregated on Screen 6J incorrectly. This screen includes only one field that can be completed before submission. Project administrative costs can be recorded as “**Admin**” on this screen. All fields are read-only with exception to the total Requested for Grant Term for Admin.

- **Admin (Up to 10%):** Enter the amount of requested administration funds. *e-snaps* will not allow project applicants to request more than 10 percent of the request listed in the field “**6. Sub-Total Costs Requested**.” If an ineligible amount is entered, *e-snaps* will report an error and prevent application submission when the screen is saved.

## FY 2017 CoC Program New Projects Detailed Instructions

The summary budget will include a summary of Cash, In-Kind, and Total Match entered on Screen 6I. If an amount less than 25 percent of the total budget, including admin costs but excluding leasing costs, is indicated, *e-snaps* will report an error and prevent application submission when the screen is saved. To make adjustments, return to Screen 6I. **Note:** Cash and In-Kind Match entered on Screen 6I must qualify as eligible program expenses under the CoC Program. Compliance with eligibility requirements will be verified at grant agreement.

The total values are automatically calculated by *e-snaps* when applicants click the “**Save**” button.

[\[RETURN to “All Projects Part 3 through Part 6: Component Types”\]](#)

*For more information concerning the FY 2017 CoC Program Competition, visit the HUD Exchange at: [FY 2017 Continuum of Care \(CoC\) Program Competition: Funding Availability](#) and [CoC Program Competition: e-snaps Resources](#).*

# Supportive Services (SSO) – Coordinated Entry (CE) New Project Applications

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[\[RETURN to “All Projects Part 3 through Part 6: Component Types”\]](#)

The following instructions and screens apply to Supportive Services (SSO)–Coordinated Entry (CE) projects that can only request funds through the Reallocation process. Before completing this part of the application, carefully review the special requirements for SSO-CE projects in the FY 2017 CoC Program Competition NOFA. Note: SSO-CE is the only type of eligible new SSO project in the FY 2017 CoC Program Competition, which must be used for a CoC’s Coordinated Entry process. No other types of new SSO projects are eligible for funding.

**Note:** Applicants applying for new “**Expansion Projects**” should use at least a portion of the existing renewal project name when naming the expansion project, and add the word “**Expansion**” at the end of the name.

## SSO-CE Part 3: Project Information

Based on the component type selected on Screen 3A, in this case “SSO,” HUD expects project applicants to provide a full description of the project scope on Screen 3B, including the selection of “Coordinated Entry,” in accordance with SSO-CE requirements.

### SSO-CE Screen 3A. Project Detail

All fields on Screen 3A must be completed for submission of the project application.

**1a. CoC Number and Name:** Select the CoC number and name from the dropdown menu to which the applicant intends to submit this project application. **Selecting the correct CoC is critical.** The dropdown menu contains all CoCs that successfully registered in the FY 2017 CoC Program Registration process and is listed according to the CoC Number (e.g., NE-502) and CoC Name (e.g., Lincoln County CoC). Based on the selection made in this field, *e-snaps* will send this project application to the CoC selected—once it is complete and submitted—for their review and to go through the local CoC selection process.

**Note:** Project applicants should only use the “**No CoC**” option in rare instances where a project is located in a geographic area not currently served by a CoC. If project applicants select “**No CoC**,” their project applications will not be connected to a CoC Application for this competition and this may affect HUD’s ability to award funds for a project application.

**1b. CoC Collaborative Applicant Name:** Select the name of the CoC Collaborative Applicant for the CoC to which the project applicant intends to submit the project application. The dropdown menu for this field are based on the CoC Number and Name selected above. This list is populated with the CoC’s designated Collaborative Applicant name that registered during the FY 2017 CoC Program Registration process.

**2. Project Name:** No action required. This field populates from the *e-snaps* “**Project**” screens. Project applicants cannot modify the populated name in this field; however, project applicants can modify the project name by exiting the project application screens and opening the *e-snaps* “**Project**” screens by selecting “**Projects**” from the left menu.

**3. Project Status:** This field defaults to the “**Standard**” option and project applicants should only change it to “**Appeal**” if they are appealing a CoC’s decision to reject the project application in the local CoC competition when the project applicant believes it was not permitted to participate in the CoC planning process in a reasonable manner. If the project applicant selects “**Appeal**,” Screen 8A “**Notice of Intent to Appeal**” will appear on the left menu. For further information about appeals see instructions for Screen 8A above.

**4. Component Type:** For SSO-CE projects, project applicants must select “SSO.”

## FY 2017 CoC Program New Projects Detailed Instructions

- Title V:** Title V of the McKinney-Vento Act allows unutilized, underutilized, excess, **or** surplus federal properties to be used by homeless services providers for assisting persons experiencing homelessness. Select “**Yes**” **or** “**No**” to indicate whether the project will include one **or** more properties that have been **or** will be conveyed through the Title V process.

### SSO-CE Screen 3B. Description

All fields on Screen 3B are required and provide HUD with a detailed description of the project.

- 1. Provide a description that addresses the entire scope of the proposed project.** Provide a clear and concise description of the scope of the project. The description should describe the community’s approach to coordinated entry, how outreach, access, assessment, and referrals will be **or** are conducted and the role that this grant will play in supporting the process’s development **or** implementation. The description must also include the community partners involved in coordinated entry and how other funds will be leveraged to support any CoC Program funds during implementation and operation. The information provided in this narrative must not conflict with information provided in other parts of the application.
- 2. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work:** Demonstrate how full capacity will be achieved over the term requested in this application. **Note:** To expend funds within statutorily required deadlines, project applicants must be able to begin operating within 12 months of conditional award. The estimated schedule should reflect these statutorily required deadlines.
- 3. Please identify the specific population focus. (Select ALL that apply)** Select “**Yes**,” if your SSO-CE project has special capacity in its facilities, program designs, tools, outreach, **or** methodologies for a specific subpopulation(s). This does not mean that your project exclusively serves that subpopulation(s), but rather that they are uniquely equipped to serve them.
- 4. Select the type of Supportive Services Only project for which you are requesting funding:**

Select “**Coordinated Entry**” from the dropdown menu, the only available selection.

  - 4a. Will the coordinated entry process funded in part by this grant cover the CoC’s entire geographic area?** Select “**Yes**” only if coordinated entry will cover the entire geographic area by the end of the expected grant term.
  - 4b. Will the coordinated entry process funded in part by this grant be easily accessible?** Select “**Yes**” only if coordinated entry will be easily accessible to individuals and families with the highest barriers to access and includes affirmative fair housing strategies (see 24 CFR 578.93(c)).
  - 4c. Describe the advertisement strategy for the coordinated entry process and how it is designed to reach those with the highest barriers to accessing assistance.** Use the textbox provided to detail the advertisement strategy that will ensure that coordinated entry is accessible to individuals and families with the highest barriers to accessing assistance including persons with disabilities and persons with limited English proficiency (see 24 CFR 578.93(c)). Using bullets instead of full paragraphs is appropriate.
  - 4d. Does the coordinated entry process use a comprehensive, standardized assessment process?** Select “**Yes**” if the standardized assessment process that will be included in coordinated entry by the end of the expected grant term is comprehensive according to the housing and services available in the community and standardized in structure, delivery, and evaluation across all assessments conducted using coordinated entry. Exceptions to standardization can be made for the following four populations only: (1) Individuals (2) Households with Children (3) Youth and (4) Persons Fleeing Domestic Violence. **If** your coordinated entry will be standardized within each of the subgroups and does not include variations for other subpopulations not included above, Select “**Yes**.”
  - 4e. Describe the referral process and how the coordinated entry process ensures that participants are directed to appropriate housing and/or services?** Use the textbox provided to briefly

## FY 2017 CoC Program New Projects Detailed Instructions

describe how the referral process for homelessness resources is coordinated across, at a minimum, all CoC and ESG providers. The process should include a list of all available resources, uniform decision making, program participant choice, and a process to reconcile unsuccessful **or** rejected placements. Using bullets instead of full paragraphs is appropriate.

- 4f. If the coordinated entry process includes differences in the access, entry, assessment, or referral for certain populations, are those differences limited only to the following five groups: Chronically Homeless, Individuals, Families, Youth, and Persons at Risk of Homelessness?** Select “Yes” if the CoC limits differences to the four groups only. Select “No” if the CoC includes differences for any other population.

### SSO-CE Screen 3C. Project Expansion Information

Project applicants must complete Screen 3C only if requesting to support a project that is currently operating and has the same component as the expansion grant is requesting. Project applicants may choose to expand the capacity of a project that is eligible for renewal in the FY 2017 CoC Program Competition **or** a project that is funded through any other mechanism. Eligible expansion reasons for SSO-CE include:

- **Coordinated entry: (Only for SSO-CE projects)**
  - **Replacing the loss of nonrenewable funding (private, federal, other excluding state/local government); Note:** CoC Program funds cannot be used to replace State **or** local funds previously used, **or** designated for use, to assist homeless persons (see 24 CFR 578.87(a) for more information).
1. **Will the project use an existing homeless facility (SSO-CE) or incorporate activities provided by an existing project (SSO-CE)?** Select “Yes” or “No.” If “Yes” to this question, the following question will appear. If “No,” no additional questions will appear and you may move on to the next screen.
  2. **Is this New project application requesting a “Project Expansion” of an eligible CoC Program renewal project of the same component type?** Select “Yes” or “No.” If “Yes,” enter the **PIN number** (first 6 characters of the renewal grant number) and **Project Name** for the grant that is applying for renewal in FY 2017 upon which this project proposes to expand. Additional Expansion questions will appear and are summarized in the paragraphs below. If “No” is selected for question 2, PIN Number and Project Name will be hidden, but the rest of the expansion screen questions will appear.

**Note:** Both the new project and the associated renewal project must be selected for conditional award for the new project to be conditionally awarded

If “Yes,” to question 1 and either “Yes” **or** “No” to question 2, additional questions will appear. Select and “Add” one **or** more of the two expansion activities described below. After an activity is added, save the screen to reveal additional questions that allow you to describe the specific expansion activities. All questions you “added” must be answered in as much detail as possible, even if details were also included in the project description on Screen 3B.

3. **Select one or both activities listed below that describe the expansion project, and click on the “Save” button at the bottom of the screen.** Additional questions will appear to provide additional details. Only two options are applicable to SSO-CE projects:
  - **Coordinated entry: (Only for SSO-CE projects) and**
  - **Replacing the loss of nonrenewable funding (private, federal, other excluding state/local government).** Answer the following questions:
    - (a) What is the source of non-renewable funding (should indicate that funds are not controlled by the state **or** local government)?
    - (b) Why are the project funds non-renewable?
    - (c) On what date will the non-renewable funds expire?
    - (d) What steps were taken to obtain other funding sources?

## FY 2017 CoC Program New Projects Detailed Instructions

(e) Why are CoC Program funds necessary to continue operating the project?

### SSO-CE Part 6: Budgets

Part 6 of the application requests project information related to budget requests and information about required grant matching funds.

**Funding Limitations:** For FY 2017, new SSO-CE projects are only available through the **reallocation** process. The amount is limited to funds made available by CoC’s eliminating **or** reducing eligible renewal grants. To confirm the maximum amount available for new SSO-CE project applications, it is important to consult with the CoC’s Collaborative Applicant prior to submitting a project application.

**Note:** Pay special attention to Question 2 on Screen 6A and accurately request “**Reallocation**” for new SSO-CE applications.

**Maximum Grant Terms:** New SSO-CE projects can only request a 1 year grant term.

**Note:** All new conditionally awarded project applications must begin carrying out the activities described in the application on **or** before September 30, 2019 to comply with the funding obligation requirements contained in the appropriations bill that authorizes the funds for the CoC Program Competition. Refer to Section IX.B.2. of the FY 2017 CoC Program Competition NOFA for more details.

### SSO-CE Screen 6A. Funding Request

Screen 6A provides the framework through which a project applicant creates a project budget.

1. **Will it be feasible for the project to be under grant agreement by September 30, 2019?** Select “**Yes**” or “**No**” to indicate whether the project will begin operating by September 30, 2019. Unobligated funds will not be available after September 30, 2019. Project applicants will not be able to submit project applications that cannot feasibly meet the September 30, 2019 deadline.
2. **Is the project proposing to use funds reallocated from the CoC’s annual renewal demand or is the project applying for funding through the Permanent Supportive Housing Bonus?** For SSO-CE the field has been automatically set to “**Reallocation**” and is read-only.
3. **Does this project propose to allocate funds according to an indirect cost rate?** Select “**Yes**” or “**No**” to indicate whether the project has an approved indirect cost plan in place **or** will propose an indirect cost plan by the time of conditional award. For more information concerning indirect costs plans, refer to 2 CFR 200.203(c)(2) and contact your local HUD field office.

\* If “**Yes**,” you must respond to the following questions:

3a. **Please complete the indirect cost rate schedule below:** Complete at least one row using information from either you approved plan **or** your proposal.

Administering Department/Agency	Indirect Cost Rate	Direct Cost Base
	%	
	%	
	%	

- 3b. **Has this rate been approved by your cognizant agency?** Select “**Yes**” if the indirect cost rate has already been approved by your cognizant agency. Select “**No**” if it has either not been submitted to **or** has been submitted, but has not yet been approved by your cognizant agency.
- 3c. **Do you plan to use the 10% de minimis rate?** Select “**Yes**” only if the project plans to use the 10 percent *de minimis* rate as described in 2 CFR 200.203(c)2).
4. **Select a grant term:** Project applicants must select a one-year grant term from the dropdown menu.
5. **Select the costs for which funding is being requested:** All projects must identify the eligible costs for which funding is being requested. SSO-CE projects **only** have the option of selecting the Supportive Services budget line item.

## FY 2017 CoC Program New Projects Detailed Instructions

**Supportive Services:** Check the box to unlock and reveal the Supportive Services budget screen.

### SSO-CE Screen 6F. Supportive Services Budget

Screen 6F appears after the Supportive Services budget line item is selected on Screen 6A. The supportive services listed are exhaustive based on the eligible supportive services in 24 CFR 578.53; however, project applicants for SSO-CE projects should only request funds in eligible cost categories that are directly related to carrying out the CoC's coordinated entry process (e.g., Assessment of Service Needs). Costs that are not directly related to carrying out the CoC's coordinated entry process will be reduced by HUD. Also note that the only cost category not included on this screen is "Direct provision of services." The project applicant should include those costs under one of the other applicable eligible costs when specifically, relevant for coordinated entry.

The itemized budget screen includes 17 eligible costs:

- |                                 |                                        |
|---------------------------------|----------------------------------------|
| 1. Assessment of Service Needs  | 10. Life Skills                        |
| 2. Assistance with Moving Costs | 11. Mental Health Services             |
| 3. Case Management              | 12. Outpatient Health Services         |
| 4. Child Care                   | 13. Outreach Services                  |
| 5. Education Services           | 14. Substance Abuse Treatment Services |
| 6. Employment Assistance        | 15. Transportation                     |
| 7. Food                         | 16. Utility Deposits                   |
| 8. Housing/Counseling Services  | 17. Operating Cost*                    |
| 9. Legal Services               |                                        |

\* Project applicants may only include 17. Operating Costs (maintenance, repair, building security, furniture, utilities, and equipment) in the Supportive Services budget if the costs are for the facility used to operate the coordinated entry (e.g., access points and assessment locations).

Enter the quantity, detail, and total budget request from the supportive services cost list. The request entered should be equivalent to the cost of one year of the relevant costs for coordinated entry projects.

- **Eligible Costs:** *e-snaps* populates a list of eligible supportive services for which funds can be requested. The costs listed are the only costs allowed under 24 CFR 578.53. Refer to 24 CFR 578.53 for details on eligible supportive services costs.
- **Quantity AND Description:** Enter the quantity (i.e. numbers) and description details for each activity for which funds are being requested. **Quantity and description details should be thorough** (e.g., for staffing: use position title: 1 FTE @ \$45,000 including benefits or 50 hours @ \$25 per hour including benefits). Simply stating 1 FTE is **NOT** providing quantity and description details and limits HUD's understanding of costs being requested. Failure to enter adequate quantity and description details will result in HUD placing conditions on the conditional award and will delay funding.
- **Annual Assistance Requested:** Enter the amount requested for each activity. The amount entered must only be the amount that is **DIRECTLY** related to carrying out coordinated entry activities.
- **Total Annual Assistance Requested:** This field is automatically calculated based on the sum of the annual assistance requests entered for each activity.
- **Grant Term:** This read-only field is populated based on the grant term selected on the "**Funding Request**" screen.
- **Total Request for Grant Term:** This field is automatically calculated based on the total amount requested for each eligible cost multiplied by the grant term.

All automatic fields will be calculated after the required field has been completed and saved.

### SSO-CE Screen 6I. Sources of Match

The "**6I Sources of Match**" screen is applicable to all project applications and enables project applicants to enter the CoC Program required match, including the type of source and the value of the match commitment.

## FY 2017 CoC Program New Projects Detailed Instructions

For detailed information that describes CoC Program match requirements see 24 CFR 578.73.

**Note: Policy update in CoC Program implementation.** Program income **may** be counted as match for CoC Program funds. CoC Program eligible costs paid for by program income may be considered match for grants awarded in the FY 2017 CoC Program Competition.

**New in the FY 2017 CoC Program Competition,** HUD added the following new questions on the primary “**Sources of Match**” screen concerning CoC-generated program income because project applicants that intend to use program income as match must provide an estimate of how much of the program income will be used for match.

- 1. Does this project generate program income as described in 24 CFR 578.97 that will be used as Match for this grant?** Answer “Yes” or “No.” If “No,” no further response is required. If “Yes,” the following questions and text box will appear.
  - 1a. Briefly describe the source of the program income:** Enter a description of the source of the program income. **Note:** CoC-generated program income includes occupancy charges paid to the recipient or subrecipient. These amounts are considered program income and may be used as match funds.
  - 1b. Estimate the amount of program income that will be used as Match for this project:** Enter estimated amount in the field provided.

Match funds are acquired from sources outside of this grant’s funding request. The match information entered in *e-snaps* should be based on the **current commitments at the time of project application, covering the requested grant operating period (i.e., grant term), and NOT based on projections.** HUD expects the amount(s) listed on this screen to be accurate, with a commitment letter(s) in place that includes the amount(s) listed.

Match contributions can be cash, in-kind, or a combination of both. For match to be counted as cash or in-kind, amounts must be used for CoC Program eligible costs. Match must be equal to or greater than 25 percent of the total grant request for all eligible costs including Administration costs but excluding **Leasing** costs (i.e., Leased Structures). **Example:** If the “**Total Assistance Requested**” from the project applicant is \$100,000, and the project applicant did not request SSO costs for Leased Structures, then the project applicant must secure commitments for match funds equal to or greater than \$25,000. The match amount could be all cash, all in-kind contributions, or a mixture of both, and used for any CoC Program eligible activities the project applicant chooses.

HUD strongly encourages project applicants to review the FAQs posted at [www.hudexchange.info/coc/faqs/](http://www.hudexchange.info/coc/faqs/), by searching for the keyword “**match.**”

The primary “**Sources of Match**” screen presents a summary for match that will aggregate multiple cash and in-kind commitments entered in the “**Sources of Match Detail**” screen(s) expected from each source and then calculate the totals.

To add a match commitment, click the add  icon to access a new “**Sources of Match Detail**” screen for each commitment. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

**Complete the following fields in the “Sources of Match Detail” screen for each match commitment:**

- **This commitment will be used as Match.** “Yes” is the default of this read-only field.
- **Type of Commitment:** Select Cash or In-kind (non-cash) to indicate the type of contribution that describes this match commitment.

**Note:** If applications include third-party In-Kind match on Screen 6D a separate 7A attachment screen will appear that project applicants should use to attach MOU(s) documentation that confirms the in-kind match commitment. If the MOU documentation is not available at application submission, it will be a condition for grant execution, if HUD conditionally awards the project.

## FY 2017 CoC Program New Projects Detailed Instructions

- **Type of source:** Select “**Private**” or “**Government**” to indicate the source of the contribution. Funds from HUD-VASH (VA Supportive Housing program) and other federal programs are eligible sources of match and are considered Government sources. HUD encourages project applicants to include funds from these sources when possible.
- **Name the Source of the Commitment:** Be specific and include the office or grant program as applicable. Enter the name of the entity providing the contribution. It is important that project applicants provide sufficient detail so that HUD can quickly identify and approve the commitment source.
- **Date of written commitment:** Enter the date of the written contribution.
- **Value of written commitment:** Enter the total dollar value of the contribution.

After the project applicant saves the primary “**Sources of Match**” screen, the values entered on the “**Sources of Match Detail**” screen(s) will populate the summary amounts. The Cash, In-Kind, and Total Match will also automatically populate the “**Summary Budget**” screen where the 25 percent match requirements will be calculated and applied. If the amounts on the “**Summary Budget**” screen are too low, additional match funds must be added to the “**Sources of Match Detail**” screen(s).

### SSO-CE Screen 6J. Summary Budget

Screen 6J summarizes the funding request for the total term of the project as entered in the budget Screens 6B through 6I. Use this screen to verify the information recorded on each budget detail screen(s) and return to relevant detail screen(s) that have aggregated on Screen 6J incorrectly. This screen includes only one field that can be completed before submission. Project administrative costs can be recorded as “**Admin**” on this screen. All fields are read-only with exception to the total Requested for Grant Term for Admin.

- **Admin (Up to 10%):** Enter the amount of requested administration funds. *e-snaps* will not allow project applicants to request more than 10 percent of the request listed in the field “**6. Sub-Total Costs Requested.**” If an ineligible amount is entered, *e-snaps* will report an error and prevent application submission when the screen is saved.

The summary budget will include a summary of Cash, In-Kind, and Total Match entered on Screen 6I. If an amount less than 25 percent of the total budget, including admin costs but excluding leasing costs, is indicated, *e-snaps* will report an error and prevent application submission when the screen is saved. To make adjustments, return to Screen 6I. **Note:** Cash and In-Kind Match entered on Screen 6I must qualify as eligible program expenses under the CoC Program. Compliance with eligibility requirements will be verified at grant agreement.

The total values are automatically calculated by *e-snaps* when applicants click the “**Save**” button.

[\[RETURN to “All Projects Part 3 through Part 6: Component Types”\]](#)

For more information concerning the FY 2017 CoC Program Competition, visit the HUD Exchange at: [FY 2017 Continuum of Care \(CoC\) Program Competition: Funding Availability](#) and [CoC Program Competition: e-snaps Resources](#).

# Dedicated Homeless Management Information Systems (HMIS) New Project Applications

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[\[RETURN to “All Projects Part 3 through Part 6: Component Types”\]](#)

The following instructions and screens are relevant for dedicated Homeless Management Information Systems (HMIS) projects only. Any organization can submit a new dedicated HMIS project application if designated by the CoC to do so; however, only the CoC’s designated HMIS Lead, which is the project applicant or subrecipient and listed as the HMIS Lead on the CoC Application Profile, can carry out the costs related to managing and operating the CoC’s HMIS as outlined in 24 CFR 578.57(a)(2).

**Note:** Applicants applying for new “**Expansion Projects**” should use at least a portion of the existing renewal project name when naming the expansion project, and add the word “**Expansion**” at the end of the name.

## HMIS Part 3: Project Information

Based on the component type selected on Screen 3A, in this case “**HMIS**,” HUD expects project applicants to provide a full description of the project scope on Screen 3B, including the selection of “**HMIS**,” in accordance with **HMIS** requirements at 24 CFR 578.37.

### HMIS Screen 3A. Project Detail

All fields on this screen are required and must be completed in order to submit the HMIS project application.

**1a. CoC Number and Name:** Select the CoC number and name from the dropdown menu to which the applicant intends to submit this project application. **Selecting the correct CoC is critical.** The dropdown menu contains all CoCs that successfully registered in the FY 2017 CoC Program Registration process and is listed according to the CoC Number (e.g., NE-502) and CoC Name (e.g., Lincoln County CoC). Based on the selection made in this field, *e-snaps* will send this project application to the CoC selected—once it is complete and submitted—for their review and to go through the local CoC selection process.

**Note:** Project applicants should only use the “**No CoC**” option in rare instances where a project is located in a geographic area not currently served by a CoC. If project applicants select “**No CoC**,” their project applications will not be connected to a CoC Application for this competition and this may affect HUD’s ability to award funds for a project application.

**1b. CoC Collaborative Applicant Name:** Select the name of the CoC Collaborative Applicant for the CoC to which the project applicant intends to submit the project application. The dropdown menu for this field are based on the CoC Number and Name selected above. This list is populated with the CoC’s designated Collaborative Applicant name that registered during the FY 2017 CoC Program Registration process.

**2. Project Name:** No action required. This field populates from the *e-snaps* “**Project**” screens. Project applicants cannot modify the populated name in this field; however, project applicants can modify the project name by exiting the project application screens and opening the *e-snaps* “**Project**” screens by selecting “**Projects**” from the left menu.

**3. Project Status:** This field defaults to the “**Standard**” option and project applicants should only change it to “**Appeal**” if they are appealing a CoC’s decision to reject the project application in the local CoC competition; meaning, an eligible project applicant believes they were denied the opportunity to participate in the local CoC planning process in a reasonable manner. All other project applicants should leave the field with the option “Standard.” If the project applicant selects “**Appeal**,” Screen 8A “**Notice of Intent to Appeal**” will appear on the left menu. For further information about appeals see instructions for Screen 8A above.

**4. Component Type:** For **HMIS** projects, project applicants must select “**HMIS**.”

## FY 2017 CoC Program New Projects Detailed Instructions

- Title V:** Title V of the McKinney-Vento Act allows unutilized, underutilized, excess, **or** surplus federal properties to be used by homeless services providers for assisting persons experiencing homelessness. Select “**Yes**” **or** “**No**” to indicate whether the project will include one **or** more properties that have been **or** will be conveyed through the Title V process.

### HMIS Screen 3B. Description

All fields on Screen 3B are required and provide HUD with a detailed description of the project.

- Provide a description that addresses the entire scope of the proposed project.** Provide a clear and concise project description of the scope of the project. The description should describe the community needs, the design and implementation of the HMIS system, the project plan for addressing the identified community needs, projected project outcome(s), coordination with other sources/partners, and the reason CoC Program support is required. The information provided in this narrative must not conflict with information provided in other parts of the project application.
- Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.** Demonstrate how full capacity will be achieved over the term requested in this application. **Note:** To expend funds within statutorily required deadlines, project applicants must be able to begin assistance within 12 months of conditional award. The estimated schedule should reflect these statutorily required deadlines.
- Will your project participate in a CoC Coordinated Entry Process?** Select “**Yes**” if the local HMIS will be, **or** is already, used in the implementation of a CoC coordinated entry process (known as centralized **or** coordinated assessment system in 24 CFR part 578 and the FY 2017 CoC Program NOFA). **If** the CoC does not yet have a coordinated entry process, **or** if the HMIS is not **or** will not be used to implement coordinated entry, Select “**No.**” **Note:** Coordinated entry is a process designed to coordinate program participant intake, assessment, and provision of referrals. A coordinated entry process covers the geographic area, is easily accessed by individuals and families seeking housing **or** services, is well advertised, and includes a comprehensive and standardized assessment tool and process. Unless the HMIS is used in the implementation of a process that is coordinated by the CoC across all providers in the community, Select “**No.**”
- If applicable, describe the proposed development activities and the responsibilities that the applicant and potential subrecipients (if any) will have in developing, operating, and maintaining the property.** Not applicable to HMIS projects; place N/A in textbox.

### HMIS Screen 3C. Project Expansion Information

Project applicants must complete Screen 3C only if requesting to support a project that is currently operating. Project applicants may choose to expand the capacity of a project that is eligible for renewal in the FY 2017 CoC Program Competition as a new expansion project, **or** a project that is funded through any other mechanism as a traditional expansion project. Eligible HMIS expansion reasons include:

- **Replacing the loss of nonrenewable funding (private, federal, other excluding state/local government);** **Note:** CoC Program funds cannot be used to replace State **or** local funds previously used, **or** designated for use, to assist homeless persons (see 24 CFR 578.87(a) for more information).
  - **Increase HMIS functionality**
  - **Increase geographic coverage of HMIS**
  - **Increase number of HMIS participating agencies and/or programs**
- Will the project use an existing homeless facility or incorporate activities provided by an existing project (i.e., any HMIS project expansion)?** Select “**Yes**” **or** “**No.**” **If** “**Yes**” to this question, the following question will appear. **If** “**No,**” no additional questions will appear and you may move on to the next screen.

## FY 2017 CoC Program New Projects Detailed Instructions

2. **Is this new project application requesting a “Project Expansion” of an eligible CoC Program renewal project of the same component type?** Select “Yes” or “No.” If “Yes,” enter the **PIN number** (first 6 characters of the renewal grant number) and **Project Name** for the grant that is applying for renewal in FY 2017 upon which this project proposes to expand. Additional Expansion questions will appear and are summarized in the paragraphs below. If “No” is selected for question 2, **PIN Number** and **Project Name** will be hidden, but the rest of the expansion screen questions will appear.

**Note:** Both the new project and the associated renewal project must be selected for conditional award for the new project to be conditionally awarded

If “Yes,” to question 1 and either “Yes” or “No” to question 2, additional questions will appear. **Select** and **Add** one or more of the expansion activities described below. After an activity is added, save the screen to reveal additional questions that allow you to describe the specific expansion activities. All questions you “added” must be answered in as much detail as possible, even if details were also included in the project description on Screen 3B.

3. **Select one or multiple activities listed below that describe the expansion project, and click on the “Save” button at the bottom of the screen.** Additional questions will appear to provide additional details. The five expansion activity explanations include:

- **If replacing the loss of nonrenewable funding, respond to the following:**
  - (a) **What is the source of non-renewable funding (should indicate that funds are not controlled by the state or local government)?**
  - (b) **Why are the project funds non-renewable?**
  - (c) **On what date will the non-renewable funds expire?**
  - (d) **What steps were taken to obtain other funding sources?**
- **If increasing HMIS functionality, respond to the following:**
  - (a) **Describe the increased functionality.**
- **If increasing the geographic coverage of HMIS, respond to the following:**
  - (a) **Identify the geographic codes that were added to the HMIS coverage**
- **If increasing the number of participating agencies and/or programs, respond to the following:**
  - (a) **Identify the additional participants in each of the following programs that will be added.**  
Add the number to the onscreen list for: HUD–Continuum of Care Program (CoC), HUD–Emergency Solutions Grant (ESG), HUD–Housing Opportunities for Persons with AIDS (HOPWA), HHS–Projects for Assistance in Transition from Homelessness (PATH), HHS–Runaway and Homeless Youth Programs (RHYP), VA or Other.

### HMIS Part 4: Implementation of HMIS

In Part 4 of the Project Application, HUD expects project applicants to provide detail regarding the local implementation of HMIS. Dedicated HMIS projects must demonstrate that the local HMIS is, or will be, compliant with HMIS standards and requirements.

#### HMIS Screen 4A. HMIS Standards

For more information on HMIS and the HUD data standards, go to [www.hudexchange.info/hmis/hmis-data-and-technical-standards/](http://www.hudexchange.info/hmis/hmis-data-and-technical-standards/). Note that the current data and technical standards reflect the 2017 Data Standards, but for the purposes of these questions, refer to 2014 Data Standards version 5.1 found under Older Resources at [www.hudexchange.info/resource/3824/hmis-data-dictionary/](http://www.hudexchange.info/resource/3824/hmis-data-dictionary/). For reference, Table 8 includes the 2014 version 5.1 Universal Data Standards.

## FY 2017 CoC Program New Projects Detailed Instructions

Following website and table of Universal data standards provide additional context:

[www.hudexchange.info/hmis/hmis-data-and-technical-standards/](http://www.hudexchange.info/hmis/hmis-data-and-technical-standards/).

### Universal HMIS Data Standards

- |                           |                             |                                                                  |
|---------------------------|-----------------------------|------------------------------------------------------------------|
| 1. Name                   | 8. Disabling Condition      | 15. Relationship to Head of Household                            |
| 2. Social Security Number | 9. Residence Prior to Entry | 16. Client Location Code                                         |
| 3. Date of Birth          | 10. Program Entry Date      | 17. Length of Time on Street, in Emergency Shelter or Safe Haven |
| 4. Race                   | 11. Program Exit Date       |                                                                  |
| 5. Ethnicity              | 12. Destination             |                                                                  |
| 6. Gender                 | 13. Personal ID             |                                                                  |
| 7. Veteran Status         | 14. Household ID            |                                                                  |

- 1a. **Is the HMIS currently programmed to collect all Universal Data Elements (UDEs) as set forth in the HMIS Data Standard Notice?** Select “Yes” if the HMIS is currently programmed to collect all of the HUD required UDEs, as required by the FY 2014 Data Standards version 5.1 issued September, 2016. If the HMIS is not programmed to capture all of the UDEs, Select “No.”
- 1b. **If no, explain why and the planned steps for compliance:** If the HMIS does not capture all UDEs use the space provided to explain which UDEs are not capture by HMIS, why the UDEs are not captured, and provide the specific steps the HMIS Lead will take to comply with the HMIS Data Standard Notice.
- 2a. **Is the HMIS currently able to produce all HUD-required reports and provide data as needed for HUD reporting (i.e., Annual Performance Reports, reports for System Performance Measures, data for CAPER/ESG reporting)?** Select “Yes” if the HMIS can produce all HUD-required reports and provide data as needed for HUD reporting.
- 2b. **If no, explain why and the planned steps for compliance:** If the HMIS does not have the capacity to produce all HUD-required reports or provide data for HUD reporting, use the space provided to identify the HUD-required reports that are not or cannot be produced, the reason why and provide the specific steps the HMIS Lead will take to comply with the HMIS reporting requirements.
- 3a. **Is your HMIS capable of generating all reports required by all Federal partners including HUD, VA, and HHS?** Select “Yes” if the HMIS can produce all reports required by all Federal partners.
- 3b. **If No, explain why and the planned steps for compliance.** If the HMIS does not have the capacity to produce all reports required by all federal partners, use the space provided to identify the reports that are not or cannot be produced, the reason why and provide the specific steps the HMIS Lead will take to comply with the reporting requirements federal partners.
4. **Can the HMIS currently unduplicate client records within the HMIS?** Select “Yes” if the HMIS can unduplicate client records. Select “No” if the HMIS cannot unduplicate client records, or if the HMIS will soon include this capacity but does not have the capacity as of the time of application submission.
5. **Does your HMIS implementation have a staff person responsible for insuring the implementation meets all security standards as required by HUD and the federal partners?** Select “Yes” if the HMIS Lead has a staff person responsible for security standards. Select “No” if the HMIS Lead does not a staff person responsible for security standards, or if the HMIS Lead plans on hiring/appointing a person, but does not have one on staff as of the time of application submission.
6. **Does your organization conduct a background check on all employees who access HMIS or view HMIS data?** Select “Yes” if the HMIS Lead conducts background checks on all employees who access the HMIS, both the HMIS Lead personnel and administrators and staff at all recipients and subrecipients. Select “No” if the HMIS Lead does not conduct background checks.
7. **Does the HMIS Lead conduct Security Training and follow up on security standards on a regular basis?** Select “Yes” if the HMIS Lead conducts security training and follows up with recipient and

## FY 2017 CoC Program New Projects Detailed Instructions

subrecipient organizations. Select “No” if the HMIS Lead does not conduct security training **or** follow-up with recipients **or** subrecipients.

8. **Do you have a process in place to remove community members who no longer need access to HMIS (e.g., leave their job, fired, etc.)?** Select “Yes” if there is a process in place to remove community members who no longer need access to HMIS. Select “No” if there is not a process in place to remove community members who no longer need access to HMIS.
- 8a. **How long does it take to remove access rights to former HMIS users?** HMIS must have the capacity to remove user access rights. Select the appropriate time frame from the options of “**Within 24 hours**,” “**Within 1 week**,” “**Within 2 weeks**,” “**Within 1 month**,” and “**Longer than 1 month**.” Select “**Longer than 1 month**” if the HMIS does not have this capacity.

### HMIS Screen 4B. HMIS Training

Screen 4B is designed to assess whether the HMIS has the capacity to train HMIS users to adequately use the systems supported by these CoC Program funds. Enter the date of the last, **or** next proposed, training date for each of the following categories:

- |                                         |                            |
|-----------------------------------------|----------------------------|
| 1. Basic Computer Training              | 5. Security Training       |
| 2. HMIS Software Training for Sys Admin | 6. Privacy/Ethics Training |
| 3. HMIS Software Training               | 7. HMIS PIT Count Training |
| 4. Data Quality Training                | 8. Other (must specify)    |

Enter dates in the prescribed format (mm/yyyy). **If** there has been no training, enter 00/0000. Project applicants can also specify up to 3 additional HMIS trainings that apply to the implementation of the proposed project.

### HMIS Part 6: Budgets

Part 6 of the application requests project information related to budget requests and information about required grant matching funds.

**Funding Limitations:** For FY 2017, new HMIS projects are only available through the **reallocation** process. The amount is limited to funds made available by CoCs eliminating **or** reducing eligible renewal grants. To confirm the maximum amount available for new HMIS project applications, it is important to consult with the CoC’s Collaborative Applicant **prior** to submitting a project application.

**Note:** Pay special attention to Question 2 on Screen 6A and accurately request “**Reallocation**” for new HMIS applications.

**Maximum Grant Terms:** New HMIS projects can only request a 1 year grant term.

**Note:** All new conditionally awarded project applications must begin carrying out the activities described in the application on **or** before September 30, 2019 to comply with the funding obligation requirements contained in the appropriations bill that authorizes the funds for the CoC Program Competition. Refer to Section IX.B.2. of the FY 2017 CoC Program Competition NOFA for more details.

### HMIS Screen 6A. Funding Request

Screen 6A provides the framework through which a project applicant creates a project budget.

1. **Will it be feasible for the project to be under grant agreement by September 30, 2019?** Select “Yes” or “No” to indicate whether the project will begin operating by September 30, 2019. Project applicants will not be able to submit project applications that cannot feasibly meet the September 30, 2019 deadline.
2. **Is the project proposing to use funds reallocated from the CoC’s annual renewal demand or is the project applying for funding through the Permanent Supportive Housing Bonus?** For HMIS this field has been automatically set to “**Reallocation**” and is read-only.

## FY 2017 CoC Program New Projects Detailed Instructions

- 3. Does this project propose to allocate funds according to an indirect cost rate?** Select “Yes” or “No” to indicate whether the project has an approved indirect cost plan in place **or** will propose an indirect cost plan by the time of conditional award. For more information concerning indirect costs plans, refer to 2 CFR 200.203(c)(2) and contact your local HUD field office.

\* **If “Yes,” you must respond to the following questions:**

- 3a. Please complete the indirect cost rate schedule below:** Complete at least one row using information from either you approved plan **or** your proposal.

Administering Department/Agency	Indirect Cost Rate	Direct Cost Base
	%	
	%	
	%	

- 3b. Has this rate been approved by your cognizant agency?** Select “Yes” if the indirect cost rate has already been approved by your cognizant agency. Select “No” if it has either not been submitted to **or** has been submitted, but has not yet been approved by your cognizant agency.

- 3c. Do you plan to use the 10% de minimis rate?** Select “Yes” only if the project plans to use the 10 percent *de minimis* rate as described in 2 CFR 200.203(c)(2).

- 4. Select a grant term:** Project applicants must select a 1-year grant term from the dropdown menu.
- 5. Select the costs for which funding are being requested:** All projects must identify the eligible costs for which funding is being requested. HMIS projects **only** have the option of selecting the HMIS budget line item.
- **HMIS:** Check the box to unlock and reveal the HMIS budget screen.

### HMIS Screen 6H. HMIS Budget

Screen 6H appears if the HMIS budget line item is selected on Screen 6A. The HMIS costs listed are all inclusive and determined by the eligible HMIS costs described at 24 CFR 578.57. Complete the HMIS budget screen to request funds for eligible HMIS costs.

**Note:** Per CFR 578.59(a), staff and overhead costs directly related to carrying out HMIS activities are eligible as part of those activities listed on the HMIS budget. The itemized budget screen organizes all eligible HMIS costs from 24 CFR 578.57 into the following 5 categories:

- 1. Equipment**—central server(s), personal computers and printers, networking, and security;
- 2. Software**—software/user licensing, software installation, support and maintenance, and supporting software tools;
- 3. Service**—training by third parties, hosting/technical services, programming (customization, system interface, data conversion), security assessment setup, internet access, facilitation, and disaster recovery;
- 4. Personnel**—project management/ coordination, data analysis, programming, technical assistance and training, and administrative support staff; and
- 5. Space & Operations**—space costs and operational costs associated with that space].

If the recipient **or** subrecipient is a victim services provider, **or** a legal services provider, it may use CoC Program funds to establish and operate a comparable database that complies with HUD’s HMIS requirements, listing costs under the comparable category on Screen 6H.

The request entered should be equivalent to the cost of **1 year** of the relevant HMIS activity.

- **Quantity AND Description:** Enter the quantity (i.e. numbers) and description **details** for each activity for which funds are being requested. **Quantity and description details should be thorough** (e.g., for staffing: use position title: 1 FTE @ \$45,000 including benefits or 50 hours @ \$25 per hour including benefits). Simply stating 1 FTE is **NOT** providing quantity and description details and limits HUD’s

## FY 2017 CoC Program New Projects Detailed Instructions

understanding of costs being requested. Failure to enter adequate quantity and description details will result in HUD placing conditions on the conditional award and will delay funding.

- **Annual Assistance Requested:** Enter the annual amount requested for each activity.
- **Total Annual Assistance Requested:** This field automatically calculates based on the sum of the annual assistance requests entered for each activity.
- **Grant Term:** This read-only field populates based on the 1 year grant term from the “**Funding Request**” screen.
- **Total Request for Grant Term:** This field automatically calculates based on the total amount requested for each eligible cost multiplied by the grant term.

All automatic fields will be calculated after the required field has been completed and saved.

### HMIS Screen 6I. Sources of Match

The “**6I Sources of Match**” screen is applicable to all project applications and enables project applicants to enter the CoC Program required match, including the type of source and the value of the match commitment.

For detailed information that describes CoC Program match requirements see 24 CFR 578.73.

**Note: Policy update in CoC Program implementation.** Program income **may** be counted as match for CoC Program funds. CoC Program eligible costs paid for by program income may be considered match for grants awarded in the FY 2017 CoC Program Competition.

**New in the FY 2017 CoC Program Competition**—HUD added the following new questions on the primary “**Sources of Match**” screen concerning CoC-generated program income because project applicants that intend to use program income as match must provide an estimate of how much of the program income will be used for match.

- 1. Does this project generate program income as described in 24 CFR 578.97 that will be used as Match for this grant?** Answer “**Yes**” or “**No**.” If “**No**,” no further response is required. If “**Yes**,” the following questions and text box will appear.
  - 1a. Briefly describe the source of the program income:** Enter a description of the source of the program income. **Note:** CoC-generated program income includes occupancy charges paid to the recipient or subrecipient. These amounts are considered program income and may be used as match funds.
  - 1b. Estimate the amount of program income that will be used as Match for this project:** Enter estimated amount in the field provided.

Match funds are acquired from sources outside of this grant’s funding request. The match information entered in *e-snaps* should be based on the **current commitments at the time of project application, covering the requested grant operating period (i.e., grant term), and NOT based on projections.** HUD expects the amount(s) listed on this screen to be accurate, with a commitment letter(s) in place that includes the amount(s) listed.

Match contributions can be cash, in-kind, or a combination of both. For match to be counted as cash or in-kind, amounts must be used for CoC Program eligible costs. Match must be equal to or greater than 25 percent of the total grant request for all eligible costs including Administration costs. **Example:** If the “**Total Assistance Requested**” from the project applicant is \$100,000, then the project applicant must secure commitments for match funds equal to or greater than \$25,000. The match amount could be all cash, all in-kind contributions, or a mixture of both, and used for any CoC Program eligible activities the project applicant chooses.

HUD strongly encourages project applicants to review the FAQs posted at [www.hudexchange.info/coc/faqs/](http://www.hudexchange.info/coc/faqs/), by searching for the keyword “**match**.”

The primary “**Sources of Match**” screen presents a summary for match that will aggregate multiple cash and in-kind commitments entered in the “**Sources of Match Detail**” screen(s) expected from each source and then calculate the totals.

## FY 2017 CoC Program New Projects Detailed Instructions

To add a match commitment, click the add  icon to access a new “Sources of Match Detail” screen for each commitment. To view and edit detail screen(s) click the view  icon. To delete, click the delete  icon.

**Complete the following fields in the “Sources of Match Detail” screen for each match commitment:**

- **This commitment will be used as Match.** “Yes” is the default of this read-only field.
- **Type of Commitment:** Select Cash or In-kind (non-cash) to indicate the type of contribution that describes this match commitment.  
**Note:** If applications include third-party In-Kind match on Screen 6D a separate 7A attachment screen will appear that project applicants should use to attach MOU(s) documentation that confirms the in-kind match commitment. If the MOU documentation is not available at application submission, it will be a condition for grant execution, if HUD conditionally awards the project.
- **Type of source:** Select “Private” or “Government” to indicate the source of the contribution. Funds from HUD-VASH (VA Supportive Housing program) and other federal programs are eligible sources of match and are considered Government sources. HUD encourages project applicants to include funds from these sources when possible.
- **Name the Source of the Commitment:** Be specific and include the office or grant program as applicable. Enter the name of the entity providing the contribution. It is important that project applicants provide sufficient detail so that HUD can quickly identify and approve the commitment source.
- **Date of written commitment:** Enter the date of the written contribution.
- **Value of written commitment:** Enter the total dollar value of the contribution.

After the project applicant saves the primary “Sources of Match” screen, the values entered on the “Sources of Match Detail” screen(s) will populate the summary amounts. The Cash, In-Kind, and Total Match will also automatically populate the “Summary Budget” screen where the 25 percent match requirements will be calculated and applied. If the amounts on the “Summary Budget” screen are too low, additional match funds must be added to the “Sources of Match Detail” screen(s).

### HMIS Screen 6J. Summary Budget

Screen 6J summarizes the funding request for the total term of the project as entered in the budget Screens 6B through 6I. Use this screen to verify the information recorded on each budget detail screen(s) and return to relevant detail screen(s) that have aggregated on Screen 6J incorrectly. This screen includes only one field that can be completed before submission. Project administrative costs can be recorded as “Admin” on this screen. All fields are read-only with exception to the total Requested for Grant Term for Admin.

- **Admin (Up to 10%):** Enter the amount of requested administration funds. *e-snaps* will not allow project applicants to request more than 10 percent of the request listed in the field “6. Sub-Total Costs Requested.” If an ineligible amount is entered, *e-snaps* will report an error and prevent application submission when the screen is saved.

The summary budget will include a summary of Cash, In-Kind, and Total Match entered on Screen 6I. If an amount less than 25 percent of the total budget, including admin costs but excluding leasing costs, is indicated, *e-snaps* will report an error and prevent application submission when the screen is saved. To make adjustments, return to Screen 6I. **Note:** Cash and In-Kind Match entered on Screen 6I must qualify as eligible program expenses under the CoC Program. Compliance with eligibility requirements will be verified at grant agreement.

The total values are automatically calculated by *e-snaps* when applicants click the “Save” button.

[\[RETURN to “All Projects Part 3 through Part 6: Component Types”\]](#)

For more information concerning the FY 2017 CoC Program Competition, visit the HUD Exchange at:

[FY 2017 Continuum of Care \(CoC\) Program Competition: Funding Availability](#) and [CoC Program Competition: e-snaps Resources](#).