

Ocean County Homeless Prevention and Assistance Coalition

HUD Continuum of Care FY2015 Funding Competition Local Selection Process

Executive
Committee

Linda Gyimoty
United Way

**Mariel
Harrison**
National Council
on Alcoholism &
Drug
Dependency NJ

Pat Cash
Interfaith
Hospitality
Network

Nina Hagen
Ocean County Jail

Rebecca Kolas
Community
Advocate

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**Nancy
McCorry**
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Humanity

Jamie Busch
Ocean County
Department of
Human Services

**Ralph
Autorino**
Community
Advocate

In anticipation of the FY2015 Continuum of Care (CoC) federal funding competition, the Ocean County Homelessness Prevention and Assistance Coalition (HPAC) hereby invites applications for new and renewal projects from community based organizations.

New project proposals must be either permanent housing projects for 100% chronically homeless individuals and/or families, rapid re-housing projects for individuals and/or families, or supportive services only projects for coordinated assessment/ centralized intake. Eligible project types have been limited to align with HUD's project selection priorities from the FY2015 funding competition (please see the HUD FY2015 registration notice for more information).

Projects will be rated as follows:

- New projects will be rated based on a thorough narrative, clear and appropriate budget, hard-to-serve subpopulation priority, coordination with mainstream resources, adequate performance standards, success with other HUD projects, and agency reputation in the community.
- Renewal projects will be rated based on the Desk Monitoring results and relevant project information provided through the renewal application

Proposals are due no later than Friday, June 5, 2015. Submit proposals electronically, via, fax, or regular mail to:

Homelessness Prevention and Assistance Coalition (HPAC)
c/o Taiisa Kelly - Ending Homelessness Group
29 Alden Street, Suite 1B, Cranford, NJ 07016
Fax: 908-382-6323
Email: tkelly@monarchhousing.org

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Applicant Information

1. Applicant Legal Name:
2. Employer/ Taxpayer Identification number:
3. Address:
4. Name of an authorized representative and contact information:
5. Type of applicant (Nonprofit, for-profit, consortium, etc):
6. Is the applicant delinquent on any federal debt? Yes / No
7. Will this project engage any subrecipients of funds? Yes / No
8. If yes, please provide the name, address, and contact information for all subrecipients
9. 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 applicant, subrecipients, and partner organizations are the appropriate entities to receive funding. Provide concrete examples that illustrate their experience and expertise in working with and addressing the target population's identified housing and supportive service needs; developing and implementing relevant program systems, services, and/or residential property construction and rehabilitation; identifying and securing matching funds from a variety of sources; and managing basic organization operations including financial accounting systems.
10. Describe the experience of the applicant and potential subrecipients (if any) in leveraging other Federal, State, local, and private sector funds.
11. 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.
12. Are there any unresolved monitoring or audit findings for any HUD grants (including ESG) operated by the applicant or potential subrecipients (if any)?

Project Description

1. Proposed project name:
2. Type of project: Permanent Supportive Housing, Rapid Re-Housing, Coordinated Assessment, Other
3. Will Energy Star be used at one or more of the proposed properties?
4. Will this project use one or more properties that have been conveyed through the Title V process?
5. Provide a description that addresses the entire scope of the proposed project. The project description should address the entire scope of the project, including a clear picture of the target population(s) to be served, the plan for addressing the identified needs/issues of the CoC target population(s), projected outcome(s), and coordination with other source(s)/partner(s). The narrative is expected to describe the project at full operational capacity. The description should be consistent with and make reference to other parts of this application.
6. Will your project have a specific population focus? Yes / No
7. If yes, please identify the specific population(s) of focus: Chronic Homeless, Veterans, Youth under 25, families, domestic violence, substance abuse, mental illness, HIV/AIDS, other
8. Will the project follow a Housing First model? Yes / No
9. If the proposed project is a permanent housing project, will it provide permanent supportive housing or rapid re-housing?
10. If providing rental assistance, the length of assistance must be unlimited. Select sponsor-based rental assistance (SRA), project-based (PRA), or tenant-based (TRA).
11. If providing rapid re-housing, how long will assistance be provided (3, 12, 18 or 24 months)?
12. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.
13. Will the project use an existing homeless facility or incorporate activities provided by an existing project?

Supportive Services for Participants

1. Describe how participants will be assisted to obtain and remain in permanent housing. How will the applicant take into consideration the needs of the target population and the barriers that are currently preventing them from obtaining and maintaining permanent housing. The applicant should describe how those needs and barriers how those will be addressed through the case management and/or other supportive services that will be offered through the project. If 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

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- 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.
- Describe specifically how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently.
 - Are the proposed project policies and practices consistent with the laws related to providing education services to individuals and families? Only projects that do not serve families with children or unaccompanied youth should select "N/A."
 - Will the proposed project have a designated staff person to ensure that the children are enrolled in school and receive educational services, as appropriate? Only projects that do not serve families with children or unaccompanied youth should select "N/A."

5. For all supportive services available to participants, indicate who will provide them, how they will be accessed, and how often they will be provided in the following chart.

Eligible Supportive Services	Provider (Applicant/ Partner/ Non Partner)	Access (Onsite/ short walk/ public or private regional transportation)	Frequency (As needed/ Annually/ Weekly/ Daily)
Assessment of service needs			
Assistance with moving costs			
Case management			
Child care			
Education services			
Employment assistance and job training			
Food			
Housing search and counseling services			
Legal services			
Life skills training			
Mental health services			
Outpatient health services			
Outreach services			
Substance abuse treatment services			
Transportation			
Utility deposits			

6. Describe how accessible are most community amenities to project participants (schools, libraries, houses of worship, grocery stores, Laundromats, doctors, dentists, parks, recreation facilities)?

Permanent Housing Projects: Housing Type and Location

- Housing type: scattered sites, single family home(s), apartments, etc.
- Indicate the maximum number of units and beds available for project participants at the selected housing site
- How many of the total beds will be dedicated to the chronically homeless?
- How many of the total beds will not be dedicated solely to the chronically homeless but will still be used to assist the chronically homeless?
- If known, indicate the address(es) of the housing that will be provided through this project.

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Projected Number of Project Participants

	Households with at least one adult and one child	Adult households with no children	Households of only children	Total
Total maximum to be served				
Disabled adults over age 24				
Non disabled adults over age 24				
Disabled adults 18-24				
Non disabled adults 18-24				
Accompanied disabled children under age 18				
Accompanied non disabled children under age 18				
Unaccompanied disabled children under age 18				
Unaccompanied non disabled children under age 18				

Projected Number of Project Participants by Subpopulations

CH= Chronically Homeless S/a = Substance Abuse MI = Mentally Ill
 DV = Domestic Violence DD = Developmentally Disabled

Of households with at least one adult and one child,	CH, non Vets	CH Vets	Non-CH Vets	Chronic S/a	HIV/AIDS	Severely MI	DV	Physical Disability	DD	Other/None
Disabled adults over age 24										
Non disabled adults over age 24										
Disabled adults 18-24										
Non disabled adults 18-24										
Disabled children under age 18										
Non disabled children under age 18										

Of households without children	CH, non Vets	CH Vets	Non-CH Vets	Chronic S/a	HIV/AIDS	Severely MI	DV	Physical Disability	DD	Other/None
Disabled adults over age 24										
Non disabled adults over age 24										
Disabled adults 18-24										
Non disabled adults 18-24										

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Of households with only children	CH, non Vets	CH Vets	Non-CH Vets	Chronic S/a	HIV/AIDS	Severely MI	DV	Physical Disability	DD	Other/None
Accompanied Disabled children under age 18										
Accompanied Non disabled children under age 18										
Unaccompanied Disabled children under age 18										
Unaccompanied Non disabled children under age 18										

Outreach to Participants

1. Enter the anticipated percentage of project participants that will be coming from each of the following locations. Must total 100%.

- _____ Directly from the street or other locations not meant for human habitation
- _____ Directly from emergency shelters
- _____ Directly from safe havens
- _____ From transitional housing and previously resided in a place not meant for human habitation or emergency shelters, or 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
- _____ Homeless persons as defined under other federal statutes
- _____ Persons fleeing domestic violence

Standard Performance Measures

1. Enter the target (number of applicable clients who are expected to achieve this measure) and the universe (number of persons about whom the measure is expected to be reported) for the following standard performance measures:

- _____ of _____ Persons will remain in permanent housing as of the end of the operating year, or exit to permanent housing during the operating year
- _____ of _____ Persons aged 18 or older will maintain or increase their total income from all sources as of the end of the operating year or at exit
- _____ of _____ Persons age 18 through 61 will maintain or increase their earned income as of the end of the operating year or at exit

2. Indicate any additional performance measures that will be tracked for the proposed project, along with the target number and percentage of applicable clients who are expected to achieve each measure.

Funding Request

1. Do any of the properties in this project have an active restrictive covenant?
2. Does this project propose to allocate funds according to an indirect cost rate?
3. Select a grant term (maximum of 5 years):
4. Select the cost categories for which funding is being requested (Acquisition/ Rehabilitation/ New Construction, Leased units, Leased structures, Long term rental assistance, Supportive services, Operations, HMIS):

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Leased or Rental Assistance Units Budget (if applicable)

Size of Units	# of Units	FY15 Fair Market Rent (FMR)	Annual Request (# units x FMR x 12 months)	Total Request (Annual request x grant term)
SRO/ 0 bedroom		\$936		
1 Bedroom		\$1,106		
2 Bedrooms		\$1,373		
3 Bedrooms		\$1,903		
4 Bedrooms		\$2,239		
Total				

Supportive Services Budget (if applicable)

Eligible Supportive Services	quantity and description	annual request
Assessment of service needs		
Assistance with moving costs		
Case management		
Child care		
Education services		
Employment assistance and job training		
Food		
Housing search and counseling services		
Legal services		
Life skills training		
Mental health services		
Outpatient health services		
Outreach services		
Substance abuse treatment services		
Transportation		
Utility deposits		
Total annual assistance requested		
Total assistance requested (total annual x grant term)		

Operating Budget (if applicable)

Eligible Operating Costs	quantity and description	annual request
maintenance/ repair		
property taxes and insurance		
replacement reserve		
building security		
electricity, gas, water		
furniture		
equipment		
Total annual assistance requested		
Total assistance requested (total annual x grant term)		

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Sources of Match and Leverage

	Match	Leverage
Total value of cash commitments		
Total value of in-kind commitments		
Total value of all commitments		

Match or Leverage	Cash or In-kind	Source	Contributor	Date of Commitment	Value of Commitment

Summary Budget

	Annual Assistance Requested	Grant Term	Total Assistance Requested for Grant Term
Acquisition			
Rehabilitation			
New Construction			
Leased units			
Leased structures			
Short or medium term assistance			
Long term rental assistance			
Supportive services			
Operating			
HMIS			
Subtotal			
Admin (up to 10%)			
Total Funding Request			
Cash match			
In kind match			
Total budget			