

Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC's project applications that were either approved and ranked, or rejected.

As the Collaborative Applicant, you are responsible for reviewing the following:

1. The FY 2021 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2021 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2021 CoC Program Competition on behalf of your CoC.

- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

Attachments

Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.

- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.

- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1A-1. CoC Name and Number: FL-500 - Sarasota, Bradenton/Manatee, Sarasota Counties CoC

1A-2. Collaborative Applicant Name: Suncoast Partnership to End Homelessness, Inc.

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Suncoast Partnership to End Homelessness, Inc.

1B. Coordination and Engagement–Inclusive Structure and Participation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.n., and VII.B.1.p.	

In the chart below for the period from May 1, 2020 to April 30, 2021:

1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC’s geographic area:

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing of CoC Board Members	Participated in CoC’s Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	Yes	Yes
2.	Agencies serving survivors of human trafficking	Yes	Yes	Yes
3.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
4.	CoC-Funded Victim Service Providers	Nonexistent	No	No
5.	CoC-Funded Youth Homeless Organizations	Nonexistent	No	No
6.	Disability Advocates	Yes	Yes	No
7.	Disability Service Organizations	Yes	Yes	No
8.	Domestic Violence Advocates	Yes	Yes	Yes
9.	EMS/Crisis Response Team(s)	Yes	No	Yes
10.	Homeless or Formerly Homeless Persons	Yes	Yes	No
11.	Hospital(s)	Yes	Yes	No
12.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
13.	Law Enforcement	Yes	Yes	Yes
14.	Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes	Yes
15.	LGBT Service Organizations	No	No	No
16.	Local Government Staff/Officials	Yes	Yes	No
17.	Local Jail(s)	No	No	Yes
18.	Mental Health Service Organizations	Yes	Yes	Yes

19.	Mental Illness Advocates	Yes	Yes	Yes
20.	Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
21.	Non-CoC-Funded Victim Service Providers	Yes	Yes	Yes
22.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	No
23.	Organizations led by and serving LGBT persons	Yes	Yes	Yes
24.	Organizations led by and serving people with disabilities	Yes	No	No
25.	Other homeless subpopulation advocates	Yes	Yes	No
26.	Public Housing Authorities	Yes	Yes	Yes
27.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
28.	Street Outreach Team(s)	Yes	Yes	Yes
29.	Substance Abuse Advocates	Yes	Yes	Yes
30.	Substance Abuse Service Organizations	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Service Providers	Yes	Yes	Yes
	Other:(limit 50 characters)			
33.				
34.				

By selecting "other" you must identify what "other" is.

1B-2.	Open Invitation for New Members.	
	NOFO Section VII.B.1.a.(2)	

Describe in the field below how your CoC:

1.	communicated the invitation process annually to solicit new members to join the CoC;
2.	ensured effective communication with individuals with disabilities, including the availability of accessible electronic formats;
3.	conducted outreach to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join your CoC; and
4.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, persons with disabilities).

(limit 2,000 characters)

1. Suncoast Partnership staff attends an array of community meetings throughout the Sarasota and Manatee County geographic region to inform and solicit new members to the Continuum of Care. The annual process occurs with a mass email blast sent to local non-profit organizations, municipalities, and other related agencies informing them of the benefits of CoC membership and offering a meet and greet with the Chief Executive Officer to discuss the roles of new members and where they fit in with the Homeless Crisis Response System. Additionally, information on becoming a new member of the CoC is available year-round on the Suncoast Partnership website.

2. To ensure effective communication with those individuals with disabilities, Suncoast Partnership provides both voice recordings and transcribed minutes on our website.

3. The lead agency continues to remain cognizant of the importance of

representation in our role facilitating community-wide collaboration and takes an active role in seeking out representation that includes those with disabilities, lived homeless experience, and any other representation identified as lacking. Staff and community members are encouraged to include clients active in the CoC to attend virtual meetings, as well as having members with lived-homeless experience filling seats on Suncoast Partnership’s Board of Directors, and a seat on the Leadership Council for lived homeless experience.

4. In the last year, FL-500 has added 3 additional seats to the Leadership Council to represent the LGBTQ+ community, disabled community, and senior community. Connections through the Leadership Council and general CoC membership are utilized at other stakeholder group meetings to assist in ensuring we have an inclusive and diversified representation among CoC members and leaders.

1B-3.	CoC’s Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section VII.B.1.a.(3)	

Describe in the field below how your CoC:

1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
2.	communicated information during public meetings or other forums your CoC uses to solicit public information; and
3.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,000 characters)

1. The CoC has 70+ organizations and advocates who meet bi-monthly to discuss services, collaboration strategies, and identify areas of need. The CoC Leadership Council (LC), the decision-making body, includes influencers from both counties who meet bi-monthly to establish community-wide objectives, review outcomes and develop a more effective homeless response system. The LC has appointed members from local governments and institutions and elected members that represent a broad spectrum of the community, including State-certified victim service provider, lived homeless experience, and elected officials. Workgroups and committees of the LC are focused on specific topics such as unaccompanied homeless youth include members of the CoC, the LC, and area stakeholders like regional staff from Department of Children and Family Services, Child Welfare, Veterans Administration, and local workforce board.

2. SP attends an array of community meetings to keep abreast of what is happening within our CoC and learn from other stakeholders working to prevent and end homelessness. We participate in open dialogues and opportunities to educate and inform participating stakeholders through presentations and time on the agendas. SP CEO attends city and county commission meetings, coordinates with State and local government on public letters for response, and utilize guest speaker opportunities in the community to gather input.

3. LC members bring information gathered in public meetings for discussion and implementation within the CoC. This body brings expertise and feedback from each system area to coalesce data and identify opportunities to create the CoC

Strategic Plan. This plan is used to meet identified community needs and close gaps in the system, thus preventing and ending homelessness.

1B-4.	Public Notification for Proposals from Organizations Not Previously Funded.	
	NOFO Section VII.B.1.a.(4)	

Describe in the field below how your CoC notified the public:	
1.	that your CoC’s local competition was open and accepting project applications;
2.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;
3.	about how project applicants must submit their project applications;
4.	about how your CoC would determine which project applications it would submit to HUD for funding; and
5.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.

(limit 2,000 characters)

1. During the last year, Suncoast Partnership has released two requests for proposals to the public and service providers. In the wake of the COVID-19 pandemic, millions of dollars were awarded to FL-500 under the CAREs Act and those dollars were awarded to agencies who applied for funding through the Request for Proposals (RFP). These RFPs were released to over 600 individual email subscribers, posted on our website, & announced during committee meetings.

2. The process applies to both new applicants and those requesting funds to be renewed. A published RFP details all the necessary information for an organization to submit a proposal. This includes scoring factors, criteria pertinent to the Review and Ranking (R&R) committee, evidence of a Housing First approach, and utilization of best practices as it relates to RRH and PSH.

3. The RFP includes information on thresholds, timeline for submissions, submission requirements, & process for appeal. The RFP is sent out electronically to our mailing lists consisting of public agencies, local non-profits organizations, and members of the CoC and Leadership Council.

4. Applications from organizations that have not previously received CoC Program funding are accepted & encouraged so long as they meet the applicant threshold & HUD priorities. The R&R committee reserves the right to select lower scoring applications if it serves a specific underserved population or geographic region to meet community needs. The RFP for the funding provided through the CAREs Act saw two new agencies funded for RRH and Diversion that had not previously been awarded in year’s prior competitions. The Lead Agency continues to cultivate relationships with new agencies to provide a comprehensive approach to preventing & ending homelessness.

5. All information on funding opportunities is made available through our website & communications can be offered in audio & visual formats to meet the needs of individuals with disabilities.

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section VII.B.1.b.	

In the chart below:

- | | |
|----|--|
| 1. | select yes or no for entities listed that are included in your CoC’s coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or |
| 2. | select Nonexistent if the organization does not exist within your CoC’s geographic area. |

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with Planning or Operations of Projects
1.	Funding Collaboratives	Yes
2.	Head Start Program	No
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBT persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

18.		
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section VII.B.1.b.	

Describe in the field below how your CoC:

- | | |
|----|--|
| 1. | consulted with ESG Program recipients in planning and allocating ESG and ESG-CV funds; |
| 2. | participated in evaluating and reporting performance of ESG Program recipients and subrecipients; |
| 3. | provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and |
| 4. | provided information to Consolidated Plan Jurisdictions within your CoC's geographic area so it could be addressed in Consolidated Plan update. |

(limit 2,000 characters)

1.As the CoC is a subrecipient of jurisdictional ESG dollars in Sarasota County and State of Florida ESG dollars for the continuum, we are in close communication with ESG program recipients in the planning and allocating of funds. Through the application process with the State and the contracting process with Sarasota County, there is detailed consideration for use of funds and establishment of community outcomes.

2.ESG program funds are monitored on a monthly basis by Suncoast Partnership, including verification of allowable expenditures and the running of system performance reports These monthly performance reports include the project's current performance on length of time homeless, increases of income, number of days between project entry, and exits to and retention of permanent housing. Upon findings of low performing projects, Suncoast Partnership provides additional project specific training regarding best practices as it relates to low performing projects. ESG recipients are notified in such instances.

3.Suncoast Partnership provides PIT and HIC data to Manatee and Sarasota County commissioners as they are presented at Leadership Council meetings which commissioners hold seats. PIT and HIC data are shared with entitlement districts as requested. PIT data from 2016 forward is also hosted on Suncoast Partnership's website.

4.System performance reports are presented to the Leadership Council quarterly and updated on our website's dashboard. Representatives from Manatee County, who is also a recipient of ESG, are on the Leadership Council. Reports on ESG project performance are always available to ESG recipients upon request. In addition to keeping information publicly available on our website, the CoC provides updates and reports as requested to the counties for the consolidated plan.

1C-3.	Ensuring Families are not Separated.	
	NOFO Section VII.B.1.c.	

Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported gender:

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	Yes
5.	Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers.	Yes
6.	Other. (limit 150 characters)	

1C-4.	CoC Collaboration Related to Children and Youth—SEAs, LEAs, Local Liaisons & State Coordinators.	
	NOFO Section VII.B.1.d.	

Describe in the field below:

1.	how your CoC collaborates with youth education providers;
2.	your CoC's formal partnerships with youth education providers;
3.	how your CoC collaborates with State Education Agency (SEA) and Local Education Agency (LEA);
4.	your CoC's formal partnerships with SEAs and LEAs;
5.	how your CoC collaborates with school districts; and
6.	your CoC's formal partnerships with school districts.

(limit 2,000 characters)

1. Our CoC Leadership Council has representatives in youth education from our two counties. The Director of Federal Programs, overseeing the McKinney-Vento/homeless school liaison program for Manatee County Schools (Project Heart) occupies one seat. The program director for Sarasota County schools McKinney-Vento/homeless school liaison program (Schoolhouse Link) has historically occupied another seat, but recently termed off. Suncoast Partnership also participates in a bi-monthly community alliance meeting that include representation from schools and the Early Learning Coalition. The Early Learning Coalition offers immediate access to homeless children who are referred by an authorized CoC partner.
2. No MOUs are in place currently. A new MOU must be signed with Safe Children Coalition.
3. The two Local Education Agencies in the CoC geographic area participate in CoC meeting and planning events; Manatee County's Project Heart and Sarasota County's Schoolhouse Link Program. Both programs have a team of 3-5 homeless liaisons who provide direct services to homeless families and unaccompanied youth. Staff from these programs participate in bi-weekly CoC family and youth case conferencing. Suncoast Partnership (SP) highlights the needs of homeless youth and families at various times throughout the year. SP also updates members on the LEA's Homeless Education Program's contact and service information.
4. No MOUs are in place currently. A new MOU must be signed with Safe Children Coalition.
5. The CoC Leadership Council has seats designated for the two school districts represented within the CoC. These two seats on the Leadership Council act as

a formal partnership with the CoC as these seats are voted on by the general CoC members and those applying must complete an application, agreeing to uphold the values and standards of the CoC's Written Standards.

1C-4a.	CoC Collaboration Related to Children and Youth–Educational Services–Informing Individuals and Families Experiencing Homelessness about Eligibility.	
	NOFO Section VII.B.1.d.	

Describe in the field below written policies and procedures your CoC adopted to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,000 characters)

The CoC written standards reinforce the critical importance of providing supportive educational services to school-aged children. This minimizes the trauma of homelessness and assures uninterrupted schooling whenever possible. All members of the CoC providing services to families with school aged children or unaccompanied youth ensure that a direct referral is made to the designated homeless school liaison agencies in Sarasota and Manatee Counties. As the McKinney-Vento definition for homelessness is broader, eligibility for services is determined by school liaisons. Designated school liaison agencies are responsible for ensuring individuals and families are aware of available services and understand their rights. Close coordination of services between the CoC and homeless school liaison agencies is required.

To inform individuals and families who become homeless of their eligibility for educational services, we share information on our website connecting families to schoolhouseconnection.org and accreditedschoolsonline.org to ensure no child is without education while experiencing homelessness.

Additionally, the YOUth Center, a drop-in center in Sarasota, provides information and opportunities for UHY clients to receive ongoing educational services and employment resources. Services such as GED preparation, resume building, counseling, and workshops covering a variety of educational topics.

1C-4b.	CoC Collaboration Related to Children and Youth–Educational Services–Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section VII.B.1.d.	

Select yes or no in the chart below to indicate whether your CoC has written formal agreements or partnerships with the listed providers of early childhood services:

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	No	No
2.	Child Care and Development Fund	No	No
3.	Early Childhood Providers	No	No
4.	Early Head Start	No	No
5.	Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	No

6.	Head Start	No	No
7.	Healthy Start	No	Yes
8.	Public Pre-K	No	No
9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.			

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors--Annual Training--Best Practices.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC coordinates to provide training for:

1.	Project staff that addresses safety and best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and
2.	Coordinated Entry staff that addresses safety and best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).

(limit 2,000 characters)

1.DV support providers working with survivors in our CoC are offered ongoing training to enhance sensitivity and minimize victim-blaming. Intake space is designed to be both welcoming and confidential, finding a balance between respecting the survivor's privacy and reducing any potential re-traumatization. Clients referred through Coordinated Entry may present as a couple in need of housing. Staff may conduct separate intakes to give survivors the opportunity to open up about any potential abuse. When disclosed, immediate and long-term safety plans are developed to ensure the survivor's well-being. The survivor's safety is at the forefront of housing location and the survivor knows best when deciding between housing opportunities. Service providers ensure that congregate living areas and location of dedicated units are maintained to foster a sense of privacy, protection, and safety. Follow-up assessments and questionnaires are provided to survivors after project exit to determine their performance regarding safety in the shelter. DV providers require staff to complete 16 hours of continuing education annually and an annual emergency management training.

2.Safety planning is part of Coordinated Entry policies and procedures. Suncoast Partnership shares and promotes training opportunities available to the community such as trauma informed care provided by the Department of Children and Families, Mental Health First Aid trainings through local behavioral health providers, and national trainings from USICH, HUD, CSH, and NAEH. Staff are required to complete a pre-recorded trauma informed case management training by the Florida Housing Coalition and staff working directly in Coordinated Entry are offered mental health first aid training as well. Access Point staff are trained to connect with law enforcement when appropriate and our local state certified domestic violence service providers and local organizations specializing in human trafficking for support.

1C-5a.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors--Using De-identified Aggregate Data.	
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NOFO Section VII.B.1.e.

Describe in the field below how your CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking survivors.

(limit 2,000 characters)

Annually during the Point in Time count, the CoC uses de-identified aggregate data provided by DV support providers through databases comparable to HMIS. Additionally, though DV treatment providers are prohibited from entering data into HMIS, we have allowed our local DV providers to have read-only access to HMIS in order to enhance coordination efforts without the requirement that there be a reciprocal agreement to view DV information.

1C-5b.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Coordinated Assessment–Safety, Planning, and Confidentiality Protocols.	
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NOFO Section VII.B.1.e.

Describe in the field below how your CoC’s coordinated entry system protocols incorporate trauma-informed, victim-centered approaches while maximizing client choice for housing and services that:

- | | |
|----|----------------------------------|
| 1. | prioritize safety; |
| 2. | use emergency transfer plan; and |
| 3. | ensure confidentiality. |

(limit 2,000 characters)

1.Domestic violence victims and survivors often self-identify as such when seeking services from non-providers that can provide a path to housing. To prioritize safety for each client, victims have the right to maintain anonymity within the HMIS system without impacting services available to them.

2.Our current transfer plan follows the HUD model but needs further development as a CoC-wide model. For example, if a request is made by a client for an emergency transfer, options are limited by our Continuum's lack of readily available affordable housing. Still, we are committed to providing a safe environment for program participants and do our very best to find trauma informed and person-centered solutions to each emergency situation that arises. DV providers are able to secure limited funding for hotel/motel stays when immediate long-term solutions are not available. With funding for a DV bonus project, our community will be better equipped to address the needs of this vulnerable population in a more comprehensive and coordinated manner.

3.All clients coming through Coordinated Entry who identify as a victim or survivor, as well as those leading intake staff to believe there could be a safety concern, are connected with our local domestic violence service providers and/or our local open doors network agency focused on human trafficking to ensure confidentiality.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender–Anti-Discrimination Policy and Training.	
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NOFO Section VII.B.1.f.

1.	Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBT individuals and families receive supportive services, shelter, and housing free from discrimination?	Yes
2.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
3.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	No

1C-7.	Public Housing Agencies within Your CoC's Geographic Area--New Admissions--General/Limited Preference--Moving On Strategy. You Must Upload an Attachment(s) to the 4B. Attachments Screen.	
	NOFO Section VII.B.1.g.	

Enter information in the chart below for the two largest PHAs highlighted in gray on the CoC-PHA Crosswalk Report at <https://files.hudexchange.info/resources/documents/FY-2020-CoC-PHA-Crosswalk-Report.pdf> or the two PHAs your CoC has a working relationship with--if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2020 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Sarasota Housing Authority		Yes-HCV	No
Manatee Housing Authority	1%	No	No

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section VII.B.1.g.	

Describe in the field below:

1.	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference--if your CoC only has one PHA within its geographic area, you may respond for the one; or
2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

(limit 2,000 characters)

1. The Sarasota Housing Authority (SHA) is an active partner within the CoC as well as a member of the Leadership Council. Suncoast Partnership and SHA collaborated to provide 153 Mainstream vouchers for use within Coordinated Entry, to assist clients in moving on from PSH, and to provide permanent stability for those who were rapidly rehoused and stabilized but who, due to disabilities, will need lasting financial assistance to sustain that stability. SHA has a homeless preference indicated in their Administrative Plan and has allocated 60 homeless preference vouchers to the City's homeless outreach team. That team partners with the CoC to ensure those utilizing the vouchers are from the community by-name list. Suncoast Partnership, the City's homeless outreach team, and SHA staff meet bi-weekly to review and discuss the status of all clients who have been referred for a Mainstream or a homeless preference voucher. This ensures that each individual and family is progressing

in their application toward a voucher. Through continued engagement and invitations to be included in the homeless crisis response system as it relates to homeless preference vouchers, the Manatee County Housing Authority has recently joined the Leadership Council. However, the City of Bradenton Housing Authority has chosen not to add a priority for those who are homeless or nor to engage with the CoC.

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored–For Information Only	

Select yes or no in the chart below to indicate affordable housing providers in your CoC’s jurisdiction that your recipients use to move program participants to other subsidized housing:

1.	Multifamily assisted housing owners	No
2.	PHA	No
3.	Low Income Tax Credit (LIHTC) developments	No
4.	Local low-income housing programs	No
	Other (limit 150 characters)	
5.		

1C-7c.	Including PHA-Funded Units in Your CoC’s Coordinated Entry System.	
	NOFO Section VII.B.1.g.	

Does your CoC include PHA-funded units in the CoC’s coordinated entry process?	No
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1C-7c.1.	Method for Including PHA-Funded Units in Your CoC’s Coordinated Entry System.	
	NOFO Section VII.B.1.g.	

If you selected yes in question 1C-7c., describe in the field below:

1.	how your CoC includes the units in its Coordinated Entry process; and
2.	whether your CoC’s practices are formalized in written agreements with the PHA, e.g., MOUs.

(limit 2,000 characters)

N/A

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.	
	NOFO Section VII.B.1.g.	

Did your CoC coordinate with a PHA(s) to submit a joint application(s) for funding of projects serving families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other non-federal programs)?	No
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1C-7d.1.	CoC and PHA Joint Application–Experience–Benefits.	
	NOFO Section VII.B.1.g.	

If you selected yes to question 1C-7d, describe in the field below:

1.	the type of joint project applied for;
2.	whether the application was approved; and
3.	how your CoC and families experiencing homelessness benefited from the coordination.

(limit 2,000 characters)

N/A

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including American Rescue Plan Vouchers.	
	NOFO Section VII.B.1.g.	

Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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1C-7e.1.	Coordinating with PHA(s) to Administer Emergency Housing Voucher (EHV) Program–List of PHAs with MOUs.	
	Not Scored–For Information Only	

Did your CoC enter into a Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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If you select yes, you must use the list feature below to enter the name of every PHA your CoC has entered into a MOU with to administer the Emergency Housing Voucher Program.

PHA
Sarasota Housing ...

1C-7e.1. List of PHAs with MOUs

Name of PHA: Sarasota Housing Authority

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

1C-8.	Discharge Planning Coordination.	
	NOFO Section VII.B.1.h.	

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs.

1. Foster Care	No
2. Health Care	Yes
3. Mental Health Care	Yes
4. Correctional Facilities	Yes

1C-9.	Housing First–Lowering Barriers to Entry.	
	NOFO Section VII.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition.	9
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition that have adopted the Housing First approach.	9
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-coordinated entry projects the CoC has ranked in its CoC Priority Listing in the FY 2021 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1C-9a.	Housing First–Project Evaluation.	
	NOFO Section VII.B.1.i.	

Describe in the field below how your CoC regularly evaluates projects to ensure those that commit to using a Housing First approach are prioritizing rapid placement and stabilization in permanent housing and are not requiring service participation or preconditions of program participants.

(limit 2,000 characters)

The use of a Housing First approach and the demonstration of this begins in the RFP process. Proposals for PSH and RRH projects require the use of Housing First models, as well as evidence based best practices to ensure rapid placement and stabilization in permanent housing. The Review and Ranking

Committee of the Leadership Council is responsible for evaluating project proposals to ensure fidelity with these models. Proposals not including clear examples of these activities do not meet the threshold for funding and are not considered for funding availability. This includes both new projects as well as renewal projects for CoC, State, and local funding availabilities. Additionally, Suncoast Partnership staff provide annual monitoring of CoC Program and State funded housing intervention projects to ensure providers are committed to a Housing First approach.

Suncoast Partnership staff monitor and evaluate housing intervention projects quarterly and notify project administration of their performance as related to rapid placements into permanent housing. Comprehensive project monitoring is done annually for CoC and State funded projects to ensure compliance with Housing First models, rapid housing placements, and the use of other evidence based best practices to ensure homelessness is rare, brief, and one-time.

1C-9b.	Housing First–Veterans.	
	Not Scored–For Information Only	

Does your CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?	Yes
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1C-10.	Street Outreach–Scope.	
	NOFO Section VII.B.1.j.	

Describe in the field below:	
1.	your CoC’s street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;
2.	whether your CoC’s Street Outreach covers 100 percent of the CoC’s geographic area;
3.	how often your CoC conducts street outreach; and
4.	how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.

(limit 2,000 characters)

1.The CoC has significantly increased its outreach efforts by nurturing partnerships with Homeless Outreach Teams (HOT) in coordination with law enforcement in Sarasota and Manatee counties, as well as outreach providers with PATH, RHY, and VA funding, and other local outreach teams. HOT engages with those who are literally homeless and offers a bridge to services and low-barrier beds to individuals at the local emergency shelter. All partners provide outreach services in Sarasota and Manatee counties and are trained as Access Points to ensure all persons experiencing homelessness are identified in Coordinated Entry (CE) and placed on the By-Name List (BNL) for connection to services. If they are not ready to receive services, outreach will continue to check on them and build rapport to encourage next steps. Outreach teams have weekly or biweekly meetings specific to their clients and participate in By-Name Case Conferencing.

2.Outreach covers 100% of our CoC’s geographic area.

3.Outreach is performed daily.

4.Our CoC tailors outreach by partnering with agencies that are equipped to work with those least likely to ask for assistance. Safe Children’s Coalition and Harvest House’s Youth Outreach Case Workers identify and engage unaccompanied youth at risk of or experiencing homelessness. Our community’s PATH provider, as part of their other organizational services, provides supportive housing and has staff experienced in engaging those reluctant to receiving services. Centerstone specializes in behavioral and mental health, assisting with those who have such barriers. Veteran and civilian outreach is provided by JFCS. All CoC outreach staff provide information, linkage to shelter, and long-term forms of support such as counseling and case management, and work in partnership with the CoC coordinated entry system to identify permanent housing solutions.

1C-11.	Criminalization of Homelessness.	
	NOFO Section VII.B.1.k.	

Select yes or no in the chart below to indicate strategies your CoC implemented to prevent the criminalization of homelessness in your CoC’s geographic area:

1.	Engaged/educated local policymakers	Yes
2.	Engaged/educated law enforcement	Yes
3.	Engaged/educated local business leaders	Yes
4.	Implemented communitywide plans	Yes
5.	Other:(limit 500 characters)	

1C-12.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC).	
	NOFO Section VII.B.1.i.	

	2020	2021
Enter the total number of RRH beds available to serve all populations as reported in the HIC–only enter bed data for projects that have an inventory type of “Current.”	113	72

1C-13.	Mainstream Benefits and Other Assistance–Healthcare–Enrollment/Effective Utilization.	
	NOFO Section VII.B.1.m.	

Indicate in the chart below whether your CoC assists persons experiencing homelessness with enrolling in health insurance and effectively using Medicaid and other benefits.

	Type of Health Care	Assist with	Assist with
	FY2021 CoC Application	Page 19	11/10/2021

		Enrollment?	Utilization of Benefits?
1.	Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	No
2.	Private Insurers	No	No
3.	Nonprofit, Philanthropic	Yes	No
4.	Other (limit 150 characters)		
	Schedule medical appointments & arrange transportation to appointments	Yes	No

1C-13a.	Mainstream Benefits and Other Assistance—Information and Training.	
	NOFO Section VII.B.1.m	

	Describe in the field below how your CoC provides information and training to CoC Program-funded projects by:
1.	systemically providing up to date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC’s geographic area;
2.	communicating information about available mainstream resources and other assistance and how often your CoC communicates this information;
3.	working with projects to collaborate with healthcare organizations to assist program participants with enrolling in health insurance; and
4.	providing assistance with the effective use of Medicaid and other benefits.

(limit 2,000 characters)

1. Suncoast Partnership publishes updated resource information online in HMIS on a regular basis for participating agencies and staff to access directly from the home page. Suncoast Partnership also distributes a printed Resource Guide which lists mainstream resources in the Sarasota/Manatee area.
2. In addition, SP facilitates presentations at quarterly CoC meetings to inform members of the resources and services area agencies provide to help the most vulnerable. For example, the bi-monthly CoC meetings feature both an “Agency Spotlight” and a “Resource Spotlight” that highlight assistance available within the community. Most recently, Aetna presented on supports and benefits they offer clients within the continuum. Suncoast Partnership ensures that Suncoast’s SOAR Team who assist homeless and at-risk clients apply for SSI/SSDI, SNAP, and Medicaid are mentioned frequently as a resource to the community. Weekly Case Conferencing also provides opportunities for agencies to share updates and resources to help clients. Program Specialists continually inform case managers on the assistance available, discuss the referral and application process, and educate them on the criteria Social Security uses to determine eligibility.
3. SP has formed a relationship with First Step of Sarasota (FS), who provides mental health services to our underserved population. The SOAR team is able to have Medical Summary Reports submitted with SSI/SSDI applications reviewed by FS medical staff. This relationship allows SOAR clients to enroll in FS’s grant program for individuals with no income or insurance. Once enrolled, clients receive no-cost mental health evaluations and treatment.
4. Although the SOAR team primarily assists with SSI/SSDI applications, they also connect clients with resources such as Voc Rehab, food stamps and Medicaid. These services contribute to the sustainability of our clients and help in their transition to permanent housing via housing voucher programs.

1C-14.	Centralized or Coordinated Entry System—Assessment Tool. You Must Upload an Attachment to the 4B.	
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	Attachments Screen.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC's coordinated entry system:	
1.	covers 100 percent of your CoC's geographic area;
2.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;
3.	prioritizes people most in need of assistance; and
4.	ensures people most in need of assistance receive assistance in a timely manner.

(limit 2,000 characters)

1.The Oneby1 Coordinated Entry system covers 100 percent of geographic area of the CoC with Access Points throughout Sarasota and Manatee Counties, a roaming Access Point staff person from the lead agency that covers both counties, and multiple outreach workers trained as Access Points.

2.The roaming Access Point and outreach staff can reach clients "where they are" for intake and triage so that they can be entered on the Oneby1 By-Name List and have access to housing opportunities. Clients least likely to apply for homeless assistance are targeted through various reporting methods, engaged by CoC staff, and continuously offered CE intake. The Oneby1 system focuses on those persons who are least likely to achieve and maintain permanent housing without the assistance provided within the CoC.

3.The prioritization system looks at length of time homeless, acuity of need (including disabilities), and length of time they have been on the by-name list waiting for services. Those clients identified through various reporting as homeless for 3 years or more are targeted and an outreach worker sent to engage with the client continuously until the client is ready for intake. Clients remaining in shelter for 1 year or more are also continuously offered CE intake and referral to housing projects.

4.Reports are run daily to check for any new people entering the system; project manager reviews client's case and sends appropriate referrals. Clients identified in queue of a RRH or PSH referral are identified and engaged through outreach to ensure the referral from homeless to housing is efficient for the client.

1C-15.	Promoting Racial Equity in Homelessness–Assessing Racial Disparities.	
	NOFO Section VII.B.1.o.	

Did your CoC conduct an assessment of whether disparities in the provision or outcome of homeless assistance exists within the last 3 years?	Yes
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1C-15a.	Racial Disparities Assessment Results.	
	NOFO Section VII.B.1.o.	

Select yes or no in the chart below to indicate the findings from your CoC's most recent racial disparities assessment.

1.	People of different races or ethnicities are more likely to receive homeless assistance.	No
2.	People of different races or ethnicities are less likely to receive homeless assistance.	No
3.	People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	No
4.	People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	No
5.	There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	Yes
6.	The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	No

1C-15b.	Strategies to Address Racial Disparities.	
	NOFO Section VII.B.1.o.	

Select yes or no in the chart below to indicate the strategies your CoC is using to address any racial disparities.

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	No
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	No
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	No
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	No
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	No
	Other:(limit 500 characters)	
12.		

1C-15c.	Promoting Racial Equity in Homelessness Beyond Areas Identified in Racial Disparity Assessment.	
	NOFO Section VII.B.1.o.	

Describe in the field below the steps your CoC and homeless providers have taken to improve racial equity in the provision and outcomes of assistance beyond just those areas identified in the racial disparity assessment.

(limit 2,000 characters)

In using the Racial Disparities tool provided by NAEH to perform this assessment, our CoC compared the number of those experiencing homelessness vs. those placed in permanent housing and did not notice a disparity. Of those experiencing homelessness, 73% identified as white, 22% as African American, and 5% as other. Additionally, 10% identified as Hispanic, and 90% as Non-Hispanic. These percentages held true for those being placed in Transitional Housing. These numbers were comparable to those placed in Permanent Housing with 72% identified as white, 22% as African American, and 6% as other. There was a slight increase in those identifying as Hispanics being placed in Permanent Housing at 13% and a decrease among Non-Hispanics at 87%. A slight change is noticed when comparing this information to Returns to Homelessness. Of those returning to homelessness, 68% identified as white, while 24% identified as African American, and 8% as other, representing a slight increase among African Americans and those identifying as other. When comparing by ethnicity, there was a decrease for those identifying as Hispanic, with 7% of those returning to homelessness identifying as Hispanic, and 93% as Non-Hispanic. Although there are no statistically significant differences in outcomes for those entering the crisis response system within the CoC, in light of the disparity of the percentages of African Americans among the population (6%) and the percentage of those experiencing homelessness within the system (22%) we have been accumulating historical eviction data by zip code to try and identify additional racial disparities in housing location and housing security. We have also made note of disparities in court sentencing and are intentional about maintaining relationships with the judicial system to ensure these disparities are addressed.

1C-16.	Persons with Lived Experience–Active CoC Participation.	
	NOFO Section VII.B.1.p.	

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the five categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included and provide input that is incorporated in the local planning process.	3	0
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	3	0
3.	Participate on CoC committees, subcommittees, or workgroups.	3	0
4.	Included in the decisionmaking processes related to addressing homelessness.	3	0
5.	Included in the development or revision of your CoC's local competition rating factors.	3	0

1C-17.	Promoting Volunteerism and Community Service.	
	NOFO Section VII.B.1.r.	

Select yes or no in the chart below to indicate steps your CoC has taken to promote and support community engagement among people experiencing homelessness in the CoC's geographic area:

1.	The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	Yes
2.	The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry).	Yes
3.	The CoC works with organizations to create volunteer opportunities for program participants.	Yes
4.	The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	No
5.	Provider organizations within the CoC have incentives for employment and/or volunteerism.	Yes
6.	Other:(limit 500 characters)	

1D. Addressing COVID-19 in the CoC’s Geographic Area

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1D-1.	Safety Protocols Implemented to Address Immediate Needs of People Experiencing Unsheltered, Congregate Emergency Shelter, Transitional Housing Homelessness.	
	NOFO Section VII.B.1.q.	
	Describe in the field below protocols your CoC implemented during the COVID-19 pandemic to address immediate safety needs for individuals and families living in:	
1.	unsheltered situations;	
2.	congregate emergency shelters; and	
3.	transitional housing.	

(limit 2,000 characters)

1.The CoC in coordination with both Sarasota and Manatee Counties distributed PPE and hand sanitizer to those experiencing unsheltered homelessness. The CoC also ensured that handwashing stations and portalets were stationed in areas that were frequented by our homeless population. Meal services were served outside and as “to-go” and with disposable kitchenware to minimize potential contamination and social distancing was observed. Outreach workers visited encampments to share updated information and distribute PPE as well as to identify those who may be experiencing symptoms. Unsheltered individuals who tested positive for COVID were placed in non-congregate sheltering (hotel/motel), hospital staff monitored their situation, Meals on Wheels was contracted to deliver food, and outreach workers connected with them to attempt diversion so they did not return to unsheltered homelessness. Coordinated Entry was offered virtually or via phone to those who did not want to meet physically even when in a socially distanced situation.

2.The Emergency Shelters ensured social distancing for shelter participants in both beds and emergency mats on the floor. The shelter capacity was reduced to ensure the latest safety guidance on social distancing was implemented. Shelters stationed handwashing stations in dining areas for those staying in 24hr shelter, ensured that PPE was available, masks were worn by all clients and employees, and hand sanitizer was available.

3.Transitional housing providers ensure the following: the latest safety guidance on social distancing was implemented; PPE is available; masks are worn by all clients and employees; and hand sanitizer is available. They remain in contact

with residents virtually or via phone to continue case management services and identify additional needs or those who became ill.

1D-2.	Improving Readiness for Future Public Health Emergencies.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC improved readiness for future public health emergencies.

(limit 2,000 characters)

Counties and agencies now have emergency protocols that can be implemented in any future pandemic or health emergency. Technology has been put in place to allow for virtual operations across the CoC. As the first wave of COVID started to decline, our CoC loosened restrictions for many of the direct service agencies. When the Delta variant swept through, our CoC was an area of high transmission rates, and our CoC responded by reimplementing the emergency protocols identified during the first wave as a testament to their preparedness and ability to pivot quickly and maintain services. Emergency Operation Commands in both counties have distribution lists for quick dissemination of information and are equipped for virtual operations. Agencies have virtual operation plans in place and procured technology to allow for flexible working locations as well as remote case management procedures in place for obtaining critical documents, signatures, and information from clients so that critical services and supports continue uninterrupted.

Mental health providers have established guidelines on virtual therapy and supportive services to ensure the mental wellness of the community is served and the emotional impact of future health emergencies will be minimized.

Non-congregate sheltering relationships have been established with local hotel/motels. Protocols governing the care of ill individuals as well the coordination between medical personnel, county employees, meal delivery services, and case management services are established and can be instituted quickly.

1D-3.	CoC Coordination to Distribute ESG Cares Act (ESG-CV) Funds.	
	NOFO Section VII.B.1.q	

Describe in the field below how your CoC coordinated with ESG-CV recipients to distribute funds to address:

1.	safety measures;
2.	housing assistance;
3.	eviction prevention;
4.	healthcare supplies; and
5.	sanitary supplies.

(limit 2,000 characters)

1.ESG-CV funding supported our congregant shelters to ensure proper safety

measures were in place. These funds were supplied for basic shelter needs, staff, and sanitation supplies. These funds were leveraged by the generosity of our philanthropic community and other federal funding issued to entitlement districts.

2.Housing Assistance comprised the bulk of our ESG-CV funding distribution. ESG-CV funding was distributed to 7 service providers for Rapid Rehousing projects to offer housing as healthcare for those living on our streets.

3.Manatee County distributed eviction prevention funding through the county. This was kept at a minimum to leverage ESG-CV dollars with local philanthropy. Residents of both counties have access to "Seasons of Sharing" fund that provides homelessness prevention / evection prevention funding. The level of this assistance was increased from \$1000 to \$1800 during the pandemic to ensure that households were provided enough support to remain housed for those that did not qualify for CARES/ERA funding. CARES funding through entitlement districts and ERA funding was also implemented to ensure households did not lose housing due to COVID related issues.

4.Healthcare supplies for our CoC did not require the use of ESG-CV funding. These were provided by funding through the counties, health departments, and hospitals.

5.Sanitary supplies for our CoC did not require the use of ESG-CV funding. These were provided by local business, county funding through the CARES Act, and local philanthropy.

1D-4.	CoC Coordination with Mainstream Health.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC coordinated with mainstream health (e.g., local and state health agencies, hospitals) during the COVID-19 pandemic to:

- | | |
|----|--|
| 1. | decrease the spread of COVID-19; and |
| 2. | ensure safety measures were implemented (e.g., social distancing, hand washing/sanitizing, masks). |

(limit 2,000 characters)

1.Suncoast Partnership was involved with Emergency Operation Command briefings in Manatee County which included county, city, health department, and CoC members to disseminate the latest information and safety protocols to limit the spread of COVID-19. In Sarasota, Suncoast Partnership formed a weekly debriefing meeting with county, city, health department, and CoC members to disseminate the latest information. These updates were then emailed across the CoC on an established distribution list of 120 recipients across all sectors and services. These updates included the latest testing locations, vaccination clinics, and PPE distribution sites as well.

2.During the debriefing sessions and the Emergency Operation Command meetings the latest guidance was issued and safety planning implementation was discussed regarding social distancing guidelines and numbers of people allowed within a group (gatherings of 10 people or less). This information was passed along to agencies throughout the CoC as well as resources for masks, PPE, hand washing stations and hand sanitizer. The collaboration in Manatee

County produced a website was created that identified the locations of handwashing stations, portalets and encampments throughout the county to ensure that those experiencing homelessness had ready access to sanitation options.

1D-5.	Communicating Information to Homeless Service Providers.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC communicated information to homeless service providers during the COVID-19 pandemic on:

1.	safety measures;
2.	changing local restrictions; and
3.	vaccine implementation.

(limit 2,000 characters)

1. Updated information gathered through the Emergency Operation Command briefings and weekly meetings with county, city, health department, and CoC members identifying the latest safety protocols to limit the spread of COVID-19 were emailed daily across the CoC on an established distribution list of 120 recipients representing all sectors and services. This update was given as a Word document with sections identifying new information, standing information, and service provider changes to service delivery. These updates included the latest testing locations, PPE distribution sites, and food distribution sites.

2. The same Emergency Operation Command briefings and weekly meetings with county, city, health department, and CoC members kept everyone informed on local restrictions, changing protocols, restrictions in accessing certain services, and the Florida Health Department’s latest update on slowing the spread and areas with outbreaks. This was distributed through our established distribution list that included a running log of service providers delivery interruptions or changed protocols for accessing services.

3. The information gathered through the Emergency Operation Command briefings and weekly meetings with county, city, health department, and CoC members identified vaccination protocols, pop-up clinics, and vaccine distribution sites. This was emailed utilizing our distribution list as soon as new sites were available or pop-up clinics were scheduled.

1D-6.	Identifying Eligible Persons Experiencing Homelessness for COVID-19 Vaccination.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC identified eligible individuals and families experiencing homelessness for COVID-19 vaccination based on local protocol.

(limit 2,000 characters)

Vaccination clinics across the CoC were held by the Health Department who verified eligibility based on changing local protocols and availability. The opportunities for vaccination were shared on the daily updates emailed to 120 individuals across all sectors and services to ensure that the information was

disseminated to eligible participants. Service Providers informed clients of vaccination opportunities and posters were create and distributed with vaccination clinic information. Mobile vaccination vans were also implemented to promote vaccinations across the region.

1D-7.	Addressing Possible Increases in Domestic Violence.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC addressed possible increases in domestic violence calls for assistance due to requirements to stay at home, increased unemployment, etc. during the COVID-19 pandemic.

(limit 2,000 characters)

The CoC added a text line for survivors to reach service providers “without saying a word.” The text capability was linked to the chat feature on the DV provider's website so it is seamless for the participant. DV providers set aside funding to pay for hotels rooms as they were following social distancing guidelines in the shelter. DV providers also used flexible funding for families who tested positive for COVID-19. In addition, DV providers also secured funding to buy laptops for direct service staff so they were able to continue meeting with participants via Zoom when the participant felt they were safe to do so.

1D-8.	Adjusting Centralized or Coordinated Entry System.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC adjusted its coordinated entry system to account for rapid changes related to the onset and continuation of the COVID-19 pandemic.

(limit 2,000 characters)

Our CoC was equipped to do mobile Coordinated Entry and continued to utilize this method to reach individuals experiencing homelessness. Agencies that traditionally did Coordinated Entry events in person were able to pivot and perform these actions via phone or via virtual methods (facetime, zoom, etc) as needed by clients. Outreach workers were trained and equipped to expand the mobile Coordinated Entry options and some used paper versions of the assessments to complete this in the field. We also identified those on our Coordinated Entry list who were at high risk for severe outcomes from COVID-19 due to secondary conditions identified by the Centers for Disease Control. This vulnerable population was prioritized for COVID Rapid Rehousing and Permanent Supportive Housing funding.

1E. Project Capacity, Review, and Ranking–Local Competition

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1E-1.	Announcement of 30-Day Local Competition Deadline–Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.a. and 2.g.	

1.	Enter the date your CoC published the 30-day submission deadline for project applications for your CoC's local competition.	09/15/2021
2.	Enter the date your CoC publicly posted its local scoring and rating criteria, including point values, in advance of the local review and ranking process.	09/15/2021

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. You Must Upload an Attachment to the 4B. Attachments Screen. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria listed below.	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:

1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Used data from a comparable database to score projects submitted by victim service providers.	No
5.	Used objective criteria to evaluate how projects submitted by victim service providers improved safety for the population they serve.	No
6.	Used a specific method for evaluating projects based on the CoC's analysis of rapid returns to permanent housing.	Yes

1E-2a.	Project Review and Ranking Process–Addressing Severity of Needs and Vulnerabilities.	
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NOFO Section VII.B.2.d.

Describe in the field below how your CoC reviewed, scored, and selected projects based on:

1.	the specific severity of needs and vulnerabilities your CoC considered when ranking and selecting projects; and
2.	considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

(limit 2,000 characters)

1. Our CoC Review & Ranking Committee considered community needs and gaps when ranking projects. 21% of our Coordinated Entry ByNameList is in need of PSH assistance. 68% of our list need RRH assistance. When ranking projects, the need for PSH projects was taken into consideration since our community has limited PSH service providers. These projects serve chronic homeless clients, those with no income, criminal records, active substance abuse, and active mental health conditions.

2. In light of the ByNameList percentages, the Review & Ranking Committee ranked our renewal PSH project above RRH projects having higher scores because of this acute need for PSH in our community. The committee also ranked our reallocation/PSH project the highest out of the CoC Bonus project options because the provider was willing to reallocate a smaller RRH project to fund a larger PSH project. However, it is important to note that the committee ranked the other renewal RRH projects above this CoC Bonus/Reallocation PSH project. Even though some of the RRH projects had lower scores, because RRH remains the greatest percentage of need identified on our ByNameList. Overall, PSH projects were ranked higher than RRH projects (due to community need) and ranked according to their scoring rubric. RRH projects were also ranked according to their scoring rubric.

1E-3.	Promoting Racial Equity in the Local Review and Ranking Process.	
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NOFO Section VII.B.2.e.

Describe in the field below how your CoC:

1.	obtained input and included persons of different races, particularly those over-represented in the local homelessness population, when determining the rating factors used to review project applications;
2.	included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process;
3.	rated and ranked projects based on the degree to which their program participants mirror the homeless population demographics (e.g., considers how a project promotes racial equity where individuals and families of different races are over-represented).

(limit 2,000 characters)

1. The Review and Ranking Committee includes persons of different races. This committee reviews the Request For Proposals prior to distribution to the CoC as well as the rating factors for scoring projects. We utilized the Racial Disparities tool provided by NAEH and populated the tool using custom built performance reports from HMIS. The differences we found among racial groups was identical to previous racial disparity studies. We have no statistically significant differences in racial representation within our CoC.

2. Our Review and Ranking Committee includes persons of different races and ethnicities; with our CoC Leadership Council also representing people from

multiple racial and ethnic groups. Our Review and Ranking Committee, as a subset of that larger Leadership Council, also has racial diversity within its members.

3. Due to results of our review of the Racial Disparities tool provided by NAEH, we know that providers within our area do not have significant statistical differences in racial disparity in service delivery. When comparing the number of those experiencing homelessness vs. those placed in permanent housing, there was no disparity. These percentages held true for those being placed in Transitional Housing as well. Returns to Homelessness outcomes are evidence that providers across the CoC offer racially balanced and equitable access and outcomes for services rendered. Due to this CoC-wide success, the Review and Ranking Committee did not perform racial disparity studies on a project-by-project basis.

1E-4.	Reallocation—Reviewing Performance of Existing Projects. We use the response to this question as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criterion below. NOFO Section VII.B.2.f.	
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Describe in the field below:	
1.	your CoC’s reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;
2.	whether your CoC identified any projects through this process during your local competition this year;
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year;
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable; and
5.	how your CoC communicated the reallocation process to project applicants.

(limit 2,000 characters)

1. The CoC has a written policy for reallocation, approved by the Leadership Council (LC) 4/12/18. It covers evaluation of HUD CoC projects for quality, fit with community need, compliance, expenditure history, and alignment with HUD priorities. With the RFP process, our annual open call for all proposals, the LC took a step to ensure our CoC was evaluating performance & priorities each year for all projects. The rating criteria emphasizes system performance measures, compliance with Coordinated Entry (CE), low barriers, & housing first approaches. All proposals must meet criteria as publicly published in the RFP for thresholds, compliance and scoring. The policy empowers the review & rank committee to make decisions regarding funding allocations & rankings according to parameters of the RFP and priorities of the LC. The RFP scoring meeting is open to the public. Results are approved by LC with approval to move forward with application submission.

2. No projects were identified this year.

3. The CoC did not identify any low performing projects in this competition.

4. Not applicable

5. Not applicable for this year. Notifications of reallocation determinations would be provided to the project applicants in writing via email and posted on our

website as part of the priority listing process.

1E-4a.	Reallocation Between FY 2016 and FY 2021. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.	
	NOFO Section VII.B.2.f.	

Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2016 and FY 2021?	Yes
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1E-5.	Projects Rejected/Reduced–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen if You Select Yes.	
	NOFO Section VII.B.2.g.	

1.	Did your CoC reject or reduce any project application(s)?	No
2.	If you selected yes, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.	

1E-5a.	Projects Accepted–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.g.	

Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps.	10/22/2021
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1E-6.	Web Posting of CoC-Approved Consolidated Application. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.g.	

Enter the date your CoC's Consolidated Application was posted on the CoC's website or affiliate's website—which included: 1. the CoC Application; 2. Priority Listings; and 3. all projects accepted, ranked where required, or rejected.	11/10/2021
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2A. Homeless Management Information System (HMIS) Implementation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
 - Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
 - FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
 - 24 CFR part 578

2A-1.	HMIS Vendor.	
	Not Scored—For Information Only	

Enter the name of the HMIS Vendor your CoC is currently using.	Wellsky ServicePoint
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored—For Information Only	

Select from dropdown menu your CoC's HMIS coverage area.	Single CoC
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section VII.B.3.a.	

Enter the date your CoC submitted its 2021 HIC data into HDX.	05/05/2021
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2A-4.	HMIS Implementation—Comparable Database for DV.	
	NOFO Section VII.B.3.b.	

Describe in the field below actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC:

- | | |
|----|---|
| 1. | have a comparable database that collects the same data elements required in the HUD-published 2020 HMIS Data Standards; and |
| 2. | submit de-identified aggregated system performance measures data for each project in the comparable database to your CoC and HMIS lead. |

(limit 2,000 characters)

1. The domestic violence shelter providers in our CoC use a state required comparable database software solution. For coordination in our CoC, one of our domestic providers has read only access to our HMIS system to allow them to understand the history of homelessness and services their clients may have received.

2. Our domestic violence providers provide de-identified aggregate data to the CoC and HMIS lead for the point-in-time report and the housing inventory chart. We do not currently receive data regarding system performance measures.

2A-5.	Bed Coverage Rate—Using HIC, HMIS Data—CoC Merger Bonus Points.	
	NOFO Section VII.B.3.c. and VII.B.7.	

Enter 2021 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2021 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	657	68	589	100.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	333	0	309	92.79%
4. Rapid Re-Housing (RRH) beds	72	0	72	100.00%
5. Permanent Supportive Housing	374	0	374	100.00%
6. Other Permanent Housing (OPH)	60	0	60	100.00%

2A-5a.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.	
	NOFO Section VII.B.3.c.	

For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:

1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,000 characters)

N/A

2A-5b.	Bed Coverage Rate in Comparable Databases.	
	NOFO Section VII.B.3.c.	

Enter the percentage of beds covered in comparable databases in your CoC’s geographic area.	100.00%
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2A-5b.1.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Question 2A-5b.	
	NOFO Section VII.B.3.c.	

	If the bed coverage rate entered in question 2A-5b. is 84.99 percent or less, describe in the field below:
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent; and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,000 characters)

N/A

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section VII.B.3.d.	

Did your CoC submit LSA data to HUD in HDX 2.0 by January 15, 2021, 8 p.m. EST?	No
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2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

2B-1.	Sheltered and Unsheltered PIT Count—Commitment for Calendar Year 2022	
	NOFO Section VII.B.4.b.	

Does your CoC commit to conducting a sheltered and unsheltered PIT count in Calendar Year 2022?	Yes
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2B-2.	Unsheltered Youth PIT Count—Commitment for Calendar Year 2022.	
	NOFO Section VII.B.4.b.	

Does your CoC commit to implementing an unsheltered youth PIT count in Calendar Year 2022 that includes consultation and participation from youth serving organizations and youth with lived experience?	Yes
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2C. System Performance

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

2C-1.	Reduction in the Number of First Time Homeless—Risk Factors.	
	NOFO Section VII.B.5.b.	

	Describe in the field below:
1.	how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time;
2.	how your CoC addresses individuals and families at risk of becoming homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time or to end homelessness for individuals and families.

(limit 2,000 characters)

1.The CoC uses evidence-based risk factors that have been found to increase the overall vulnerability and likelihood of people experiencing homelessness for the first time. These risk factors include disabilities, income, age, race, victimization, and household composition which are recorded in client entry assessments. Additionally, HMIS records and reports identify at-risk clients who have been utilizing resources in the homeless crisis response system.

2.Our CoC has numerous diversion and outreach resources tailored to individual and families. These specialists assist those who are at-risk of homelessness or newly homeless to identify supports, resources and/or utilize conflict resolution and mediation strategies to assist in resolving the crisis.

3.Internally, SP employs a team of diversion specialists who engage in problem-solving conversations with families and individuals attempting to access the system. Our family diversion specialists is the single point of entry into family shelters, with families provided a referral to shelters only after a diversion conversation is had and emergency shelter is the families only option. This strategy greatly reduces the inflow of families into shelters when other resources are available. The CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time is a collaborative effort with each agency in the CoC responsible for having a diversion conversation. SP continues to fund projects for diversion and utilizing a triage process for issuing financial assistance as part of early intervention (EI) efforts; the lead agency is currently mapping out a strategy for incorporating D&EI system-wide.

2C-2.	Length of Time Homeless–Strategy to Reduce.	
	NOFO Section VII.B.5.c.	
	Describe in the field below:	
1.	your CoC’s strategy to reduce the length of time individuals and persons in families remain homeless;	
2.	how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the length of time individuals and families remain homeless.	

(limit 2,000 characters)

1.Our CoC’s Coordinated Entry process triages those in need by length of time homeless, how long they have been identified and waiting for services based on the severity of vulnerabilities and needs. To reduce the length of time homeless, our CoC has improved the diversion at the front-end of the system to end homelessness before it begins & increased the outreach efforts to connect clients efficiently to housing interventions on the back-end of the system.

2.The CoC identifies individuals & families with the longest lengths of homelessness through the client intake process; this information is recorded on the By-Name List (BNL) & HMIS. Suncoast Partnership has a Coordinated Entry Project Manager that reviews each CE intake, screens eligibility, & sends the referrals to the appropriate agency or resource. The CoC has agreed that agencies receiving referrals will accept or deny within 48 hours. Agencies within the CoC have biweekly case conferencing to discuss client barriers & share resources. This includes connecting clients to wraparound services, ensuring success in client’s housing plan. When a housing resource is available, a referral is made through by Suncoast Partnership’s (SP) coordinated entry project manager for the next eligible person on the list. For housing voucher clients, SP has a housing project manager on staff who works with clients and a case manager to locate housing and ensure a smooth paperwork process at the housing authority. Other housing projects employ housing coordinators as part of their case management teams to assist with housing location and placement. On the front end of the system we are utilizing D&EI throughout our CoC to assist those who are able to quickly resolve their crisis through family or community supports.

3.The Lead Agency’s CE Project Manager is responsible for overseeing the CoC’s reduction in the length of time families and individuals remain homeless.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing.	
	NOFO Section VII.B.5.d.	
	Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:	
1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and	
2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.	

(limit 2,000 characters)

1.Through Coordinated Entry and our Homeless Crisis Response System the CoC systematically and strategically focuses on exits to permanent destinations through targeted bridge shelter beds for prioritized individuals which are coupled with RRH funding; focusing on assessing clients for CE and connecting

them to long term case management. Case managers use strategies such as conflict resolution, mediation and family reunification to reconnect people with families; connect people to mainstream benefits and employment/training through SOAR trained teams; look for opportunities to increase income; have problem solving conversations with clients to help identify other relationships and resources that may be available to them; create case plans and budgets to help people self-resolve who will not prioritize for housing assistance; providing bridge beds for those who need a safe place to stay while they are building income and/or working on a housing plan.

2.Those in TH and RRH having intensive case management services coupled with community funding and targeted supportive services (MH, SA, etc.) to enhance long term stability and progressive engagement in housing placement. For those in RRH, the CoC promotes best practices including progressive engagement strategies, connections to other supports and employment, regular follow-up to monitor progress; connecting rental sharing opportunities through case conferencing; ensuring wrap around supports through case conferencing teams and collaboration; moving those in RRH that will be unable to financially sustain on to available housing vouchers; promote system wide follow-up with clients at regular intervals in order to identify potential problems with retention early and intervention.

2C-4.	Returns to Homelessness–CoC’s Strategy to Reduce Rate.	
	NOFO Section VII.B.5.e.	

Describe in the field below:	
1.	how your CoC identifies individuals and families who return to homelessness;
2.	your CoC’s strategy to reduce the rate of additional returns to homelessness; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the rate individuals and persons in families return to homelessness.

(limit 2,000 characters)

1.The CoC utilizes its CE system & case conferencing, led by the Suncoast Partnership (SP) to help identify returns & those at risk of return to help reduce our rates. With a centralized CES and the maintenance of a by-name list for two years now, we are readily able to identify individuals & households returning to homelessness & quickly try to intervene. This intervention could be connection to appropriate services, reunification with family, rehousing, or job connection.

2.The open collaboration fostered through the CES has created an environment where case managers are forth coming when they are encountering challenges with stability of clients and wanting ideas for solutions. A way we have been able to work together to reduce returns to homelessness is through the voucher allocation with the housing authority. Vouchers have been used for clients who were stabilized through RRH but will not be able to maintain their housing due to financial restraints and/or disabilities. The CoC has adopted an emphasis on best practices in housing-based case management as outlined by USICH and NAEH. Mandatory trainings by the Florida Housing Coalition have provided in-depth knowledge to our service providers on these best practices. All funds sub-contracted through the SP are monitored monthly which includes review of case notes, budgets, and client stability plans. SP staff are able to identify signs of instability and make contact with case managers to discuss/strategize the case. Cases are brought to the case conferencing collaborative for input on strategies

and ideas for resources to help ensure client stability.
 3.The Leadership Council has adopted new priorities this year in the strategic plan to focus on the evaluation of data, including information from other systems, so we can get a more collective look at our community response system and identify areas of collaboration and improvement to have a community where homelessness is rare, brief and one-time.

2C-5.	Increasing Employment Cash Income-Strategy.	
	NOFO Section VII.B.5.f.	

Describe in the field below:

1.	your CoC’s strategy to increase employment income;
2.	how your CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
3.	provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase income from employment.

(limit 2,000 characters)

1.Increasing income is a performance measure the LC of the CoC has adopted as priority & is seeking to address through various strategies. One strategy is emphasis on this performance measure by giving points through our RFP processes to agency’s who achieve it with 5 points for increasing above 30%, 4 for 25-30% increase, 2 for 16-24%, 1 for 10-15%, and 0 for agencies that fall below 10%. Suncoast Partnership (SP) has implemented several changes to support the LC emphasis on increasing income. One of the issues we identified was that case managers were not following up & asking the questions & recording the changes properly in HMIS. SP added emphasis to HMIS training in order to increase capturing of this data. For all projects monitored through the SP, staff is now regularly monitoring this field. The measurement is included in monthly performance reports provided to agency leadership & program directors and reported to the LC on a quarterly basis. SP maintains a performance dashboard on its website, updated quarterly, that reports on our community’s achievement.

2.We have actively engaged the local workforce board agency, Career Source in case conferencing to update case managers on programs and opportunities & for youth, they maintain regular hours at the drop-in center to assist with resume writing, job applications, and to connect them to available opportunities. The SP coordinated entry project manager sends out a bi-weekly eblast of available job openings provided from Career Source to case managers and partner service providers. They did a presentation about programs & services at the general CoC meeting in June.

3.We maintain a working relationship with Goodwill and their job connections staff member, Antonia Quiros is an active participant in the strategic planning committee. They have locations easily accessible by public transportation & work with outreach staff & case managers to assist clients who may be having difficulty getting to them.

2C-5a.	Increasing Employment Cash Income–Workforce Development–Education–Training.	
	NOFO Section VII.B.5.f.	

Describe in the field below how your CoC:

1.	promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and
2.	is working with public and private organizations to provide meaningful education and training, on-the-job training, internships, and employment opportunities for program participants.

(limit 2,000 characters)

1. Goodwill Manasota and CareerSource Suncoast, the leading non-profit employment agencies in the area, are both members of the CoC. Because of these partnerships, SP regularly receives timely notifications of job fairs, internship opportunities, and employment opportunities in the area. SP then forwards this information via email to all agencies in CoC so they can in turn help their clients. Local resources are also presented at quarterly CoC meetings such as The Mental Health Community Center, who presented their Supported Employment program to help employ clients with mental health issues. SP also keeps CoC members apprised of job openings within SP and the CoC through Constant Contact emails.

2. Outreach and homeless programs case managers in the CoC work closely with Goodwill Job Connection and CareerSource to connect their clients to employment, resume assistance, OJT and Vocational Rehabilitation programs. As a part of the disability process, the SOAR team at SP refers clients to Voc Rehab which provides further evaluation of a client's ability to work and assists them with finding employment. Case managers from agencies in the CoC also refer disabled clients to Voc Rehab in an effort to help them become sustainable. Day labor agencies work with some CoC agencies that operate transitional homes to assist clients in getting temporary jobs that can lead to permanent placement.

2C-5b.	Increasing Non-employment Cash Income.	
	NOFO Section VII.B.5.f.	

Describe in the field below:	
1.	your CoC's strategy to increase non-employment cash income;
2.	your CoC's strategy to increase access to non-employment cash sources; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.

(limit 2,000 characters)

1. Understanding non-employment cash income is a bridge to sustainability, non-employment cash income is included in the Leadership Council priorities along with employment income. Strategies implemented to increase this area are found in the RFP process by including additional points to projects that display a clear strategy to achieve this in their projects. Additionally, the CoC performs regular monitoring and training of case managers to educate them on how to assist clients securing non-employment income.

2. Suncoast Partnership implemented for non-employment income is the ongoing work of the three-person SOAR Team who focus on connecting eligible clients to SSI and SSDI benefits. As other needs are identified throughout the disability application process, the SOAR team also connect clients with other non-employment benefits, such as assisting with food stamp applications and helping recover unreceived stimulus checks from IRS. Program specialists also screen individuals coming through coordinated entry to identify any unmet needs and connect them with non-employment benefits which includes

assisting with Medicaid and food stamp applications.

3. The task of increasing non-employment cash income is a responsibility of each case manager for their clients long-term stability, program managers for monitoring these increases within projects, the lead agency to educate the CoC on new resources, and the Leadership Council to monitor the CoC's performance on this measure.

3A. Coordination with Housing and Healthcare Bonus Points

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

3A-1.	New PH-PSH/PH-RRH Project—Leveraging Housing Resources.	
	NOFO Section VII.B.6.a.	

Is your CoC applying for a new PSH or RRH project(s) that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	No
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3A-1a.	New PH-PSH/PH-RRH Project—Leveraging Housing Commitment. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.6.a.	

Select yes or no in the chart below to indicate the organization(s) that provided the subsidies or subsidized housing units for the proposed new PH-PSH or PH-RRH project(s).

1.	Private organizations	No
2.	State or local government	No
3.	Public Housing Agencies, including use of a set aside or limited preference	No
4.	Faith-based organizations	No
5.	Federal programs other than the CoC or ESG Programs	No

3A-2.	New PSH/RRH Project—Leveraging Healthcare Resources.	
	NOFO Section VII.B.6.b.	

Is your CoC applying for a new PSH or RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
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3A-2a.	Formal Written Agreements–Value of Commitment–Project Restrictions. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.6.b.	

1.	Did your CoC obtain a formal written agreement that includes: (a) the project name; (b) value of the commitment; and (c) specific dates that healthcare resources will be provided (e.g., 1-year, term of grant, etc.)?	No
2.	Is project eligibility for program participants in the new PH-PSH or PH-RRH project based on CoC Program fair housing requirements and not restricted by the health care service provider?	Yes

3A-3.	Leveraging Housing Resources–Leveraging Healthcare Resources–List of Projects.	
	NOFO Sections VII.B.6.a. and VII.B.6.b.	

If you selected yes to question 3A-1. or 3A-2., use the list feature icon to enter information on each project you intend for HUD to evaluate to determine if they meet the bonus points criteria.

Project Name	Project Type	Rank Number	Leverage Type
FY21 PSH Rental A...	PSH	9	Healthcare
PSH Plus 2021	PSH	8	Healthcare

3A-3. List of Projects.

1. What is the name of the new project? FY21 PSH Rental Assistance Manatee and Sarasota Counties

2. Select the new project type: PSH

3. Enter the rank number of the project on your CoC's Priority Listing: 9

4. Select the type of leverage: Healthcare

3A-3. List of Projects.

1. What is the name of the new project? PSH Plus 2021

2. Select the new project type: PSH

3. Enter the rank number of the project on your CoC's Priority Listing: 8

4. Select the type of leverage: Healthcare

3B. New Projects With Rehabilitation/New Construction Costs

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

3B-1.	Rehabilitation/New Construction Costs—New Projects.	
	NOFO Section VII.B.1.r.	

Is your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	No
--	----

3B-2.	Rehabilitation/New Construction Costs—New Projects.	
	NOFO Section VII.B.1.s.	

If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:

- | | |
|----|---|
| 1. | Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and |
| 2. | HUD’s implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons. |

(limit 2,000 characters)

N/A

3C. Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section VII.C.	

Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
--	----

3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.C.	

If you answered yes to question 3C-1, describe in the field below:

- | | |
|----|---|
| 1. | how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and |
| 2. | how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act. |

(limit 2,000 characters)

N/A

4A. DV Bonus Application

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

4A-1.	New DV Bonus Project Applications.	
	NOFO Section II.B.11.e.	

Did your CoC submit one or more new project applications for DV Bonus Funding?	Yes
--	-----

4A-1a.	DV Bonus Project Types.	
	NOFO Section II.B.11.	

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2021 Priority Listing.

	Project Type	
1.	SSO Coordinated Entry	No
2.	PH-RRH or Joint TH/RRH Component	Yes

You must click “Save” after selecting Yes for element 1 SSO Coordinated Entry to view questions 4A-3 and 4A-3a.

4A-2.	Number of Domestic Violence Survivors in Your CoC's Geographic Area.	
	NOFO Section II.B.11.	

1.	Enter the number of survivors that need housing or services:	204
2.	Enter the number of survivors your CoC is currently serving:	94
3.	Unmet Need:	110

4A-2a.	Calculating Local Need for New DV Projects.	
	NOFO Section II.B.11.	

Describe in the field below:

1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and
2.	the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects); or
3.	if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.

(limit 2,000 characters)

1. Suncoast Partnership received this data directly from the DV providers.
2. Comparable database used by DV providers.
3. The availability of affordable housing is one of the greatest barriers our DV survivors face. This is compounded by the fact that the majority of survivors have experienced financial abuse, and have not had access to the family finances, have been prohibited from working, or have had their credit scores destroyed by their abuser. Many survivors are facing a need to find housing as a newly single parent (single income household), and they are navigating the many barriers of finding/establishing housing with no financial savings and a limited support system.

4A-4.	New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information.	
	NOFO Section II.B.11.	

Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects—only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.

Applicant Name
Catholic Charitie...

Project Applicants Applying for New PH-RRH and Joint TH and PH-RRH DV Bonus Projects

4A-4.	New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information–Rate of Housing Placement and Rate of Housing Retention–Project Applicant Experience.	
	NOFO Section II.B.11.	

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC’s FY 2021 Priority Listing:

1.	Applicant Name	Catholic Charities Diocese of Venice
2.	Rate of Housing Placement of DV Survivors–Percentage	50.00%
3.	Rate of Housing Retention of DV Survivors–Percentage	50.00%

4A-4a.	Calculating the Rate of Housing Placement and the Rate of Housing Retention–Project Applicant Experience.	
	NOFO Section II.B.11.	

Describe in the field below:

1. how the project applicant calculated the rate of housing placement and rate of housing retention reported in question 4A-4; and
2. the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,000 characters)

The rate of housing placement was completed using HMIS for non-DV projects. Catholic Charities (CCDOV) has not had a DV specific housing project. With the current TH/RRH grant CCDOV has placed 50% of clients in housing (3/6), with one client leaving the program and two on the path to permanent housing.

4A-4b.	Providing Housing to DV Survivor–Project Applicant Experience.	
	NOFO Section II.B.11.	

Describe in the field below how the project applicant:

1. ensured DV survivors experiencing homelessness were assisted to quickly move into safe affordable housing;
2. prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC’s emergency transfer plan, etc.;
3. connected survivors to supportive services; and
4. moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.

(limit 2,000 characters)

1.As a new applicant, CCDOV will ensure that survivors of domestic violence are moved quickly into safe, affordable housing. CCDOV will work with the local

DV services providers; SPARCC and HOPE to receive referrals for women and families leaving DV shelters who are in need of longer term housing. Once a referral is received case managers will respond within 24 hours to meet with the client and work on securing housing. CCDOV will work closely with SPARCC and HOPE to ensure a smooth transition and hand off for case management between agencies.

2.As a new applicant, CCDOV will prioritize housing for survivors of domestic violence who are homeless. Referrals are expected to come from Suncoast CoCs coordinated entry and directly from the local shelters for women and families fleeing domestic violence; SPARCC and HOPE.

3.CCDOV will assist survivors of domestic violence by connecting them to an array of supportive services to include: Linkage to enhanced income opportunities via SOAR trained case managers to help apply for SSD/SSDI benefits; employment training and location services; childcare, transportation other needed services; medical services, through warm hand offs to low cost/sliding fee scale federally qualified health centers; Behavioral Health Services through CCDOV’s licensed mental health providers or other appropriate community services; Offer individual and group skill classes for tenant responsibilities, budgeting, parenting, nutrition, and financial counseling

4.Clients will work collaboratively with case managers to set goals and determine the appropriate approach to ensure participant success in advancing to permanent housing. All plans are reviewed monthly with the client (at participant home or agreed location) to determine ongoing need and progress towards meeting defined goals. Before leaving the program, clients complete an exit plan for self-sufficiency with case managers.

4A-4c.	Ensuring DV Survivor Safety–Project Applicant Experience.	
	NOFO Section II.B.11.	

Describe in the field below examples of how the project applicant ensured the safety of DV survivors experiencing homelessness by:	
1.	training staff on safety planning;
2.	adjusting intake space to better ensure a private conversation;
3.	conducting separate interviews/intake with each member of a couple;
4.	working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;
5.	maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant; and
6.	keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors.

(limit 5,000 characters)

1.CCDOV has extensive experience in providing housing and other services to victims of human trafficking who are sometimes also victims of domestic violence. CCDOV clients are often referred by law enforcement and take great care to understand the safety and security concerns of clients fleeing unsafe situations. Staff is trained in trauma informed care and in respecting client confidentiality and safety. CCDOV will work closely with partner agencies and domestic violence service providers SPARCC and HOPE to incorporate any additional safety planning training.

2.Client intakes are conducted in private spaces with provisions made to ensure that conversations are confidential. All CCDOV staff are trained in respecting

client confidentiality.

3.If needed, couples will have separate intakes/interviews. For the purposes of this project, housing clients who are survivors of domestic violence will be referred by domestic violence shelter providers so intakes with couples is not anticipated. If the situation arises, staff is prepared to do separate intake interviews.

4.Catholic Charities has significant experience in ensuring client safety and working with clients to understand conditions which make them feel safe. The agency has over 11 years of experience providing housing and support services to survivors of human trafficking and thus has many safety protocols in place. The project will provide housing in scattered sites and will ensure that clients feel safe in identified locations. In addition, CCDOV will work with the designated domestic violence centers HOPE and SPARCC to develop protocols that demonstrate trauma-informed, victim- centered approach.

5.The project will not be utilizing congregate living spaces. The housing will be in scattered sites.

6.The project will not be using dedicated units or congregate living spaces. The project will house survivors of domestic violence in scattered sites. Locations will be known only to staff working with the clients.

4A-4c.1.	Evaluating Ability to Ensure DV Survivor Safety–Project Applicant Experience.	
NOFO Section II.B.11.		

Describe in the field below how the project evaluated its ability to ensure the safety of DV survivors the project served.

(limit 2,000 characters)

Catholic Charities has extensive experience providing housing to underserved populations and to populations such as human trafficking survivors where safety and security is of the utmost importance. Case managers work with clients on safety planning and developing emergency supports. These programs undergo regular monitoring and evaluation from the funder; Department of Justice Office of Victims of Crime staff and external evaluators. Catholic Charities will also work closely with domestic violence providers SPARCC and HOPE to review safety protocols.

4A-4d.	Trauma-Informed, Victim-Centered Approaches–Project Applicant Experience.	
NOFO Section II.B.11.		

Describe in the field below examples of the project applicant’s experience in using trauma-informed, victim-centered approaches to meet needs of DV survivors in each of the following areas:

1.	prioritizing program participant choice and rapid placement and stabilization in permanent housing consistent with participants’ preferences;
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma;
4.	emphasizing program participants’ strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;

5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;
6.	providing opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for parenting, e.g., parenting classes, childcare.

(limit 5,000 characters)

1. Every effort will be made by the applicant to secure housing for participants in geographic areas of preference. Client access to local resources including schools, transportation, and health care will drive the unit selection process. Case managers will prioritize client choice where individuals may already have positive support networks in place (e.g., family, friends, childcare, etc.) to identify convenient and safe locations that are close to employment and have access to public transportation (if needed).
2. CCDOV's proposed Rapid Rehousing Program offers client-centered case management involving a highly collaborative and planned approach that ensures the person experiencing homelessness actively participates in identifying goals and service needs with shared accountability on results. Case managers work to empower clients and interact with an attitude of mutual respect.
3. CCDOV has a history of providing trauma informed case management in its Program aiding victims of human trafficking. In addition, CCDOV will work with the designated domestic violence centers HOPE and SPARCC to develop protocols that demonstrate trauma-informed, victim-centered approach.
4. Case managers work with clients to establish participants' strengths for a strengths-based housing-first approach which allows clients to determine and work toward goals and aspirations that they identify.
5. CCDOV's staff is highly diverse and representative of the community served. Over half of CCDOV staff are from African American or Hispanic backgrounds. Almost all case management staff is bilingual in Spanish and some staff are bilingual in Haitian Creole, Ukrainian and Russian. The agency has protocols and policies in place to ensure nondiscrimination and equal access including clients rights and client grievance policies .
6. The applicant will coordinate with local domestic violence service providers SPARCC and HOPE to connect clients to appropriate services for peer to peer counseling, groups, and mentorships.
7. CCDOV will offer either directly or through referral to another agency; individual and group skill classes which may include topics such as tenant responsibilities, budgeting, parenting, nutrition, financial counseling, or other topics requested by clients.

4A-4e.	Meeting Service Needs of DV Survivors–Project Applicant Experience.	
	NOFO Section II.B.11.	

Describe in the field below:

1.	supportive services the project applicant provided to domestic violence survivors experiencing homelessness while quickly moving them into permanent housing and addressing their safety needs; and
2.	provide examples of how the project applicant provided the supportive services to domestic violence survivors.

(limit 5,000 characters)

1. CCDOV has extensive experience providing housing to underserved populations including survivors of domestic violence. This assistance includes

emergency, transitional, and rapid re-housing while moving clients into permanent housing. Safety needs are of particular concern to CCDOV housing clients who are survivors of human trafficking. In these instances, a variety of supportive services are provided as determined by clients in conjunction with their case managers. Some services provided include; benefit application, legal assistance, food pantries, English language education, medical care, dental care, mental health/substance abuse treatment and others. Some of these supportive services are provided “in house” through other CCDOV programs, such as SNAP benefit enrollment assistance and mental health counseling, other services are referred out to partner agencies. In some instances, CCDOV maintains formal MOUs with other social service agencies to provide specific supports and in other instances referrals are more informal. CCODV seeks to provide stability for clients by ensuring that they have access to identified needs and services.

2. CCDOV has provided supportive services to clients in a variety of housing programs including survivors of domestic violence and human trafficking. While each case is assessed independently, examples of supportive services and how these will be provided to survivors of domestic violence experiencing are: Linkage to enhanced income opportunities via SOAR trained case managers to help apply for SSD/SSDI benefits; Links to employment training and location services; Childcare, transportation other needed services; Medical services, through warm hand offs to low cost/sliding fee scale federally qualified health centers such as Centerplace Health; Behavioral Health Services through CCDOV’s licensed mental health providers or other appropriate community services; Offer individual and group skill classes which may include topics such as tenant responsibilities, budgeting, parenting, nutrition, and financial counseling.

4A-4f.	Trauma-Informed, Victim-Centered Approaches–New Project Implementation.	
	NOFO Section II.B.11.	

Provide examples in the field below of how the new project will:

1.	prioritize program participant choice and rapid placement and stabilization in permanent housing consistent with participants’ preferences;
2.	establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma;
4.	place emphasis on program participants’ strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;
6.	provide opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for parenting, e.g., parenting classes, childcare.

(limit 5,000 characters)

1. Every effort will be made by the applicant to secure housing for participants in geographic areas of preference. Client access to local resources including schools, transportation, and health care will drive the unit selection process. Case managers will prioritize client choice where individuals may already have

positive support networks in place (e.g., family, friends, childcare, etc.) to identify convenient and safe locations that are close to employment and have access to public transportation (if needed).

2.CCDOV's proposed Rapid Rehousing Program offers client-centered case management involving a highly collaborative and planned approach that ensures the person experiencing homelessness actively participates in identifying goals and service needs with shared accountability on results. Case managers work to empower clients and interact with an attitude of mutual respect.

3.CCDOV has a history of providing trauma informed case management in its Program aiding victims of human trafficking. In addition, CCDOV will work with the designated domestic violence centers HOPE and SPARCC to develop protocols that demonstrate trauma-informed, victim- centered approach.

4.Case managers work with clients to establish participants' strengths for a strengths-based housing-first approach which allows clients to determine and work toward goals and aspirations that they identify.

5.CCDOV's staff is highly diverse and representative of the community served. Over half of CCDOV staff are from African American or Hispanic backgrounds. Almost all case management staff is bilingual in Spanish and some staff are bilingual in Haitian Creole, Ukrainian and Russian. The agency has protocols and policies in place to ensure nondiscrimination and equal access including clients rights and client grievance policies .

6.The applicant will coordinate with local domestic violence service providers SPARCC and HOPE to connect clients to appropriate services for peer to peer counseling, groups, and mentorships.

7.CCDOV will offer either directly or through referral to another agency; individual and group skill classes which may include topics such as tenant responsibilities, budgeting, parenting, nutrition, financial counseling, or other topics requested by clients.

4B. Attachments Screen For All Application Questions

We prefer that you use PDF files, though other file types are supported. Please only use zip files if necessary.

Attachments must match the questions they are associated with.

Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.

We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

Document Type	Required?	Document Description	Date Attached
1C-14. CE Assessment Tool	Yes	CE Assessment Too...	11/03/2021
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No		
1E-1. Local Competition Announcement	Yes	1E-1 Announcement...	11/10/2021
1E-2. Project Review and Selection Process	Yes	Project Review an...	11/04/2021
1E-5. Public Posting–Projects Rejected-Reduced	Yes	Public Posting–Pr...	11/04/2021
1E-5a. Public Posting–Projects Accepted	Yes	Public Posting–Pr...	11/04/2021
1E-6. Web Posting–CoC-Approved Consolidated Application	Yes	Web Posting–CoC-A...	11/10/2021
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: CE Assessment Tool VISPDAT

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: 1E-1 Announcement of 30-Day Local
Competition Deadline

Attachment Details

Document Description: Project Review and Selection Process

Attachment Details

Document Description: Public Posting–Projects Rejected-Reduced

Attachment Details

Document Description: Public Posting–Projects Accepted

Attachment Details

Document Description: Web Posting–CoC-Approved Consolidated Application

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

Ensure that the Project Priority List is complete prior to submitting.

Page	Last Updated
1A. CoC Identification	09/30/2021
1B. Inclusive Structure	11/08/2021
1C. Coordination	11/08/2021
1C. Coordination continued	11/08/2021
1D. Addressing COVID-19	11/08/2021
1E. Project Review/Ranking	11/08/2021
2A. HMIS Implementation	11/01/2021
2B. Point-in-Time (PIT) Count	09/30/2021
2C. System Performance	11/08/2021
3A. Housing/Healthcare Bonus Points	11/08/2021
3B. Rehabilitation/New Construction Costs	11/03/2021

FY2021 CoC Application	Page 60	11/10/2021
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3C. Serving Homeless Under Other Federal Statutes	11/03/2021
4A. DV Bonus Application	11/08/2021
4B. Attachments Screen	11/10/2021
Submission Summary	No Input Required

Assessment Print Details

Client: (349478) Test, CoC
Assessment Name: Coordinated Entry - Client Intake
Answer Data as of: 08/30/2019 12:04 PM
Printed On: 08/30/2019 12:04 PM
Provider: Suncoast Partnership to End Homelessness (3212)

Coordinated Entry - Client Intake

Client Profile - Demographics

Date of Birth

Date of Birth Type

Gender *

Primary Race *

Secondary Race

Ethnicity *

Current Living Situation

Relationship to Head of Household *

Household Type

County of Residence

Client Location *

Housing Status *

Residence Prior to Project Entry *

Length of Stay in Previous Place *

Did you stay less than 90 days?

Did you stay less than 7 nights?

On the night before did you stay on the streets, ES or

SH?

**Zip Code of Last
STABLE (90 days plus)
Address** *

Zip data quality

Medical Information

**Does the client have a
disabling condition?** *

Disabilities

Disability Type	Disability determination

Income Information

Total Monthly Income

Percentage of AMI

Income from Any Source

Monthly Income

Monthly Amount	Source of Income	Start Date *	End Date

Additional Information

Domestic violence
victim/survivor

If yes for Domestic Violence
Victim/Survivor, are you
currently fleeing?

If yes for Domestic violence
victim/survivor, when
experience occurred

Are you Pregnant?

Registered sex offender

Are you an active Substance Abuse User? -Select-

Do you currently have a Housing Voucher? -Select-

Contact Information

Client's Residence / Last Permanent Address

Client's Street Address	Client's Apartment Number	Client's City	Client's ZIP	Home Phone Number	E-Mail Address	Cell Phone#	County of Residence	Start * Date	End Date

Emergency Contacts

Contact's Name	Phone Number	Second Phone Number	Relationship to Client

Select and Complete One of the Below VI-SPAT.

If client is a Single Individual, 25 years of age or older, or the client is part of an Adult Only family (Head of Household is 25 years of age or older, and all members of the family are 18 years of age or older), use this Sub-Assessment.

VI-SPDAT v2.0

Start Date *	PRE-SURVEY	A. HISTORY OF HOUSING AND HOMELESSNESS	B. RISKS	C. SOCIALIZATION & DAILY FUNCTIONS	D. WELLNESS	GRAND TOTAL

If client is part of an Adult / Child family (Head of Household is 25 years of age or older, and at least one child under the age of 18), use this Sub-Assessment.

VI-FSPDAT v2.0

Start Date *	PRE-SURVEY	A. HISTORY OF HOUSING AND HOMELESSNESS	B. RISKS	C. SOCIALIZATION & DAILY FUNCTIONS	D. WELLNESS	E. FAMILY UNIT	GRAND TOTAL

FUNCTIONS

If client is an Unaccompanied Youth (24 years of age or under), or if household is a Parenting Youth household (household with children, Head of Household is under 18 years of age), use this Sub-Assessment.

TAY-VI-SPDAT v1.0

Start Date ★	PRE-SURVEY	A. HISTORY OF HOUSING AND HOMELESSNESS	B. RISKS	C. SOCIALIZATION & DAILY FUNCTIONS	D. WELLNESS	GRAND TOTAL
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Sub-Assessment Print Details

Client: (349478) Test, CoC
Sub-Assessment Name: VI-SPDAT v2.0
Answer Data as of: 08/30/2019 12:05 PM
Printed On: 08/30/2019 12:05 PM
Provider: Suncoast Partnership to End Homelessness (3212)

VI-SPDAT v2.0

Start Date * 08/30/2019

A. HISTORY OF HOUSING AND HOMELESSNESS

1. Where do you sleep most frequently? (choose one) Shelters

If Other, please specify

2. How long has it been since you lived in permanent stable housing?

3. In the last three years, how many times have you been homeless?

B. RISKS

4. *In the past six months, how many times have you...*

4. a) Received health care at an emergency department/room?

4. b) Taken an ambulance to the hospital?

4. c) Been hospitalized as an inpatient?

4. d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines?

4. e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime, or because the police told you

that you must move along?

4. f) Stayed one or more nights in a holding cell, jail, or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offense, or anything in between?

5. Have you been attacked or beaten up since you've become homeless?

6. Have you threatened to or tried to harm yourself or anyone else in the last year?

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live?

8. Does anybody force or trick you to do things you do not want to do?

9. Do you ever do things that may be considered to be risky, like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that?

C. SOCIALIZATION & DAILY FUNCTIONING

10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS, that thinks you owe them money?

11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?

12. Do you have planned activities, other than just surviving, that make you

feel happy and fulfilled?

13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted?

D. WELLNESS

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?

16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs, or heart?

17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?

18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?

19. When you are sick or not feeling well, do you avoid getting help?

20. FOR FEMALE RESPONDENTS ONLY: Are you currently pregnant?

21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were

staying in the past?

22. Will drinking or drug use make it difficult for you to stay housed or afford your housing?

23. *Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:*

23. a) A mental health issue or concern?

23. b) A past head injury?

23. c) A learning disability, developmental disability, or other impairment?

24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?

25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?

26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?

27. YES OR NO: Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced?

PRE-SURVEY	0
A. HISTORY OF HOUSING AND HOMELESSNESS	0
B. RISKS	0
C. SOCIALIZATION & DAILY FUNCTIONS	0
D. WELLNESS	0

GRAND TOTAL

0

(0-3) Recommendation: no housing intervention



Home

About Us

Continuum of Care

CSIS (HMIS)

Resources

Training



Quick Links

Upcoming Meetings

Community Dashboard

Point in Time

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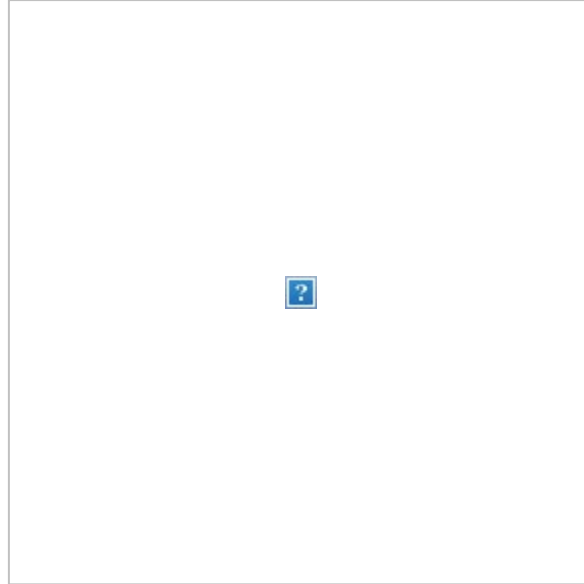
CoC Program Competition Request for Proposals Released- [Click to View](#)

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July 14th, 2021 - Continuum of Care (CoC) Announces - Open Leadership Council Seats - [Click to View](#)

From: [Suncoast Partnership to End Homelessness](#)
To: [Chris Johnson](#)
Subject: 2021 CoC Program Competition Request for Proposals
Date: Wednesday, September 15, 2021 4:01:33 PM



2021 CoC Program Competition Request For Proposals

Suncoast Partnership to End Homelessness has released a 2021 Request for Proposals (RFP) for the 2021 CoC Program Competition. Please read the introduction, instructions, and application included in the RFP, which may be viewed by clicking the link below:

[2021 CoC Program Competition Request for Proposals](#)

The application includes a timeline and a schedule for information meetings. For questions, please contact Taylor Neighbors, taylor@suncoastpartnership.org

Registration is required in advance for the RFP information sessions.

Information sessions will be Monday, September 20, 2021 at 10:00 a.m.-11:00 a.m. and 4:30 p.m.- 5:30 p.m. If there are any questions or issues with registration, please contact Lauren Davis, lauren@suncoastpartnership.org

To attend the RFP Information Sessions, please register for these sessions by completing the form below:

[Information Session Registration](#)

Deadline to submit proposals for consideration will be Tuesday, October 5, 2021 electronically before 5:00 p.m. to taylor@suncoastpartnership.org

Thank you for your continued work on behalf of those experiencing homelessness.

Suncoast Partnership to End Homelessness, Inc. | 1750 17th Street, C-1, Sarasota, FL 34234

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2021 CoC PROGRAM COMPETITION REQUEST FOR PROPOSALS

Introduction

The Suncoast Partnership to End Homelessness is requesting proposals on behalf of the Suncoast Continuum of Care (CoC) (FL-500) in response to the Continuum of Care Program Competition through the Department of Housing and Urban Development (HUD) Notice of Funding Opportunity (NOFO). Programs/services are to be provided in two system areas: Permanent Supportive Housing and Domestic Violence RRH/TH_RRH. Proposals must be from eligible organizations (see page 10-11) and selected proposals must fully operate within the Manatee/Sarasota CoC established homeless crisis response system and the Oneby1 Coordinated Entry System, use evidence-based approaches in service delivery, and meet performance standards that contribute to our community's goal of ensuring homelessness is rare, brief, and one time.

As each component of the homeless crisis response system relies on the other for success, strong collaboration within the community is essential. The CoC Leadership Council and the Suncoast Partnership encourage partnerships and collaborations that strengthen and contribute to our homeless response system in ways such as increasing access to services, strengthening culturally competent services, and improving housing outcomes. Applicant partnerships should be jointly designed and should focus on strengthening the capacity of the partners, leveraging other funding, public or private, and show commitment to collecting and using data. Applicants may find information about the system and each area in the Appendices and further definition of each area included in the Request for Proposal (RFP) in the project proposal section.

All proposals MUST be Housing First and Low Barrier and the agency adherence to these philosophies should be evident in Part A and Part B of the application. This approach allows for the person's immediate crisis of homelessness to be resolved in order to increase their stability. A customized supportive service package is then created to assist them in housing stability and prevent returns to homelessness. Housing First projects are fluid and flexible and ensure housing and service options are modified to meet the unique needs of each household requesting services, and that participants are offered the services that they identify as important to them.

As such, project proposals should have:

- Few to no programmatic prerequisites to permanent housing entry such as demonstration of sobriety, completion of treatment programs, requirements regarding household income or agreeing to comply with treatment.
- Low Barrier admission policies which are designed to "screen in" rather than screen-out participants with the greatest barriers to housing such as having no or very low income, poor rental history, or criminal histories.
- Supportive services are voluntary but should be attractive to the participant and used to persistently engage participants to ensure housing stability. Services are proactively offered to help achieve and maintain housing stability but are not a condition of tenancy. Harm reduction and motivational interviewing techniques are critical.

- Practices, policies, and strategies to prevent lease violations and evictions. Note: alcohol and drug use are not considered lease violations unless such use results in disturbances to neighbors or is associated with illegal activity.

Agencies may apply for funding in more than one system area, but each agency should submit only ONE (1) RFP proposal. Complete Part A (agency experience and capacity) once for your agency (maximum 4 pages) and then complete Parts B (program/project proposal) & C (budget, and budget narrative) for each of the program/projects you are seeking to have approved and funded (maximum 6 pages per project). Please be sure the system area you are requesting funding for is clearly identified at the top of the first page Part B.

For example, if an agency wants to offer both types of programs, they include Part A at four pages and then up to six pages for the permanent supportive housing and up to six pages for the domestic violence project, for a total of 16 pages maximum. There will be only one executive summary required and that executive summary, as well as your cover sheet, checklists, financial disclosures and other required addendums/attachments are considered additional pages and not part of the page limitations. The Suncoast Partnership, at the behest of the CoC Leadership Council and/or the Review & Ranking Committee reserves the right to cancel the RFP, reject any or all proposals, and waive minor informalities for proposers if deemed in the public interest to do so.

All proposals must include the agency's experience being in compliance with past contracts and/or directives, state any deficiencies identified in recent program audits including monitoring findings and corrective action plans as applicable, and what steps you have taken to complete recommendations.

Proposed projects should be scalable depending upon the funding available. You should be able to describe how your project would operate if less funds were available. Projects should be designed with the knowledge that federal programs require matching funds/in kind services in order to receive funding. Additionally, proposals should demonstrate how the agency is prepared to handle any gaps in funding to ensure participants needs are met and stability is maintained in the event that there is a delay in contracting, funding availability, or service requirement beyond the contract year. The CoC Leadership Council through its Review and Ranking Committee reserves the right to determine how funds will be distributed if one or more of the identified system components has less funds available. There is currently an estimated \$689,784 available through this RFP.

All of the listed eligible activities and requirements described in the project proposal section (page 4-8) and included in this RFP are subject to requirements set forth by the Federal Government and/or specified by 24 CFR 578 and any requirement set forth by the Department of Housing and Urban Development. Applicants may find specific Federal statues referenced in the Project Proposal section, included in the Attachments, and other relevant prevailing resources can be found on Suncoast Partnership's website: www.suncoastpartnership.org.

Timeline

Funding Opportunity (RFP) Released	Wednesday, September 15, 2021
Information Sessions – Virtual	Monday, September 20, 2021, – Registration required
RFP Application Deadline	Tuesday, October 5, 2021
Evaluation and Scoring Period	Wednesday, October 6, 2021 – Friday October 15, 2021
Rank and Review Committee Meeting to Score and Approve Projects	Friday, October 15, 2021
Notification of Approved Projects	Friday, October 15, 2021
Deadline for Appeal	Tuesday, October 19, 2021
Review and Rank Committee Meeting – Ranking Projects	Friday, October 22, 2021
Approved Projects Completed in EsnapS for Review	Monday, November 1, 2021
Final approved application review for submission period	Monday, November 1, 2021 – Monday, November 8, 2021
CoC Collaborative Application due to HUD	Wednesday, November 10, 2021

Complete proposals must be received by 5:00 pm, Tuesday, October 5, 2021. Submissions can be made electronically to Taylor Neighbors, Grants and Contract Manager, taylor@suncoastpartnership.org.

Due to the competitive nature of this RFP, questions about the RFP should be submitted in writing prior to the information session to be answered at the information session. During the information sessions, questions will be permitted from the attendees regarding the RFP, and all questions will be recorded in writing. Questions and answers will be provided to all of those in attendance at the information sessions and also placed on the Suncoast Partnership website, (www.suncoastpartnership.org). Submit questions to both Taylor Neighbors, taylor@suncoastpartnership.org AND Lauren Davis, lauren@suncoastpartnership.org. Registration is required in advance for the RFP information sessions; instructions are available on the Suncoast Partnership website and in the RFP release email. If there are any questions or issues with registration, please contact Lauren Davis, lauren@suncoastpartnership.org.

There will be no opportunities for questions or dialogue once the information sessions are complete, with two exceptions: (1) an instance in which a question posed at the information session requires further time for response, or (2) if a technical question that is not about the substance or clarification of the RFP is submitted in writing. In such a case, a response will be provided electronically to all of those in attendance at the information session and posted on the Suncoast Partnership website.

The evaluation and scoring session will be open to the applicants if they wish to observe. There will be no opportunity for the applicant to address the committee at this session unless a member of the evaluation and scoring committee calls on the applicant. All applicants will be notified in advance of the session with the date, time, and location.

Proposal Outline

A. Agency Experience and Capacity

This component should include information such as qualifications and accomplishments of CEO and other key staff, any goals or strategic plan initiatives that the organization is actively working on, description of fundraising plan including overall agency goals, and how the Board is engaged and adds value to the agency. If you have experience administering federal or state grants, please describe such experience in this portion of the proposal. This section must include a description of how the organization maintains services for clients in a program/project if a gap in funding flow occurs between contracting periods. There is a maximum of four (4) pages allowed for this section.

B. Program Proposal

This component must include information specific to the project proposal for which an agency is seeking funding. There is a maximum page allocation of six (6) pages for each project including the budget and budget narrative. Your project proposal should be written as a narrative that includes, but may not be limited to, responses regarding each point outlined in the relevant system area as well as requested items throughout the RFP, such as demonstrating adherence to a Housing First philosophy. The narrative should not be in a question/answer format but rather should flow, painting a clear picture to reviewers how your agency and project serves our community members at risk of or experiencing homelessness in a best practice manner, as part of a larger community system of care, to assist our CoC in meeting its goals.

Each program proposal should also include key personnel information including their experience, percentage of time that will be dedicated to the project, and how staffing will successfully meet the goals of the program. A description of quality assurance plans and how staff performance is evaluated to ensure programs are implemented as intended and in a best practice model should also be included.

All requirements and amounts available are specific to each system area and are described below:

System Area One: Permanent Supportive Housing: \$172,446 in CoC Bonus Funding

Permanent Supportive Housing (PSH) is permanent housing with indefinite leasing or rental assistance paired with supportive services to assist homeless persons with a disability achieve housing stability.

Projects proposed for this category must include a long-term residence that is available and affordable (by HUD standards) for the client and should include, among other allowable activities, one or more of the following: coordination with employment programs, connection to mainstream benefits, and supportive services. The HUD standard of affordability is 30% or less of household income for housing costs, which includes rent and basic utilities.

Projects can be scattered-site or single-site models.

Services will be provided within the established homeless crisis response system and Oneby1 Coordinated Entry System that is designed to move program participants quickly out of homelessness into permanent supportive housing through the provision of housing supports and customized service packages with the ultimate goal of housing stability.

The CoC Leadership Council and the Suncoast Partnership encourage partnerships and collaborations that strengthen and contribute to our homeless response system in ways such as increasing access to services (i.e. expanding hours, locations, etc.), strengthening culturally competent services,

connecting to employment and improving housing outcomes. Applicant partnerships should be jointly designed and should also focus on strengthening the capacity of the partners.

Partnerships should also show commitment to collecting and using data, leveraging of other funding, public or private, and demonstrate a strong commitment to a comprehensive and coordinated homeless response system.

All project proposals must clearly describe how they meet Housing First requirements and use evidence-based practices, including trauma-informed care when working with participants.

Please refer to the Substance Abuse and Mental Health (SAMSA) toolkit located on the resource page (Attachment 4) for program fidelity guidelines in PSH.

All projects must clearly address how they work to improve client's income through either earned or non-earned sources by describing strategies that are likely to increase employment income and/or non-employment income, including identifying collaborative partnerships.

PSH projects must serve one of the following:

- i. Persons who meet the definition of DedicatedPLUS (see Attachment IV) where all units by this project must be used to serve program participants who meet the qualifications for DedicatedPLUS;

-Or-

- ii. Persons experiencing chronic homelessness at the time they initially enrolled in the project.

In the proposal, be sure to include any elements outlined as required within this RFP and the following:

Describe any experience your organization has in implementing a permanent supportive housing program or incorporating similar strategies into existing programs.

Describe how your agency works within the Oneby1 Coordinated Entry System and include how this program would fit within your own agency operations and as part of the greater community system. This may include:

- Number of clients accepted from the Oneby1 for entry into a current program.
- Number of clients that were provided Access Point intake for Coordinated Entry at your organization/agency.
- Include the ways your service system has changed in order to be in better alignment with the Oneby1 Coordinated Entry system priorities.

If your agency does not currently work in the Oneby1 Coordinated Entry System, please explain why and how you would implement this project within the system.

How will you incorporate client location strategies to engage people with whom you have received a referral for your housing project?

How will you assist people in locating appropriate permanent housing that meets their needs as identified by the client?

How does your program ensure it meets Federal requirements including rent standards and habitability?

Describe how you coordinate and integrate with other mainstream health, social services, and employment programs and ensure that program participants are assisted to obtain benefits from the mainstream programs for which they may be eligible (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education).

Describe how the organization will use funds from other sources to leverage the activities proposed in this HUD project.

How does the program work closely with public and private healthcare organizations to address client healthcare needs?

Describe how this program partners with local Public Housing Authorities to utilize coordinated entry, develop housing units, and provide housing subsidies to persons experiencing homelessness.

Describe how this project will help address racial equity and racial disparities affecting individuals and families experiencing homelessness. Specifically address how the program will be able to target underserved populations based on program data.

Describe how those with lived experience are integrated in the creation of program policies and procedures.

Describe the support staff to client ratio proposed for your program and the rationale used for arriving at that ratio.

How is your agency staff trained in harm reduction and trauma informed practices? How are these implemented in your daily work?

How does your agency ensure that housing stability case plans and budgets are developed in a client-centered, strengths-based manner that includes goals the client has identified as important to them?

Describe your agencies policies and processes to ensure data is entered into CSIS accurately, in a timely fashion and that all required documents are uploaded.

Indicate your willingness to participate in the ongoing training in established best practices and review and evaluation of services, standards, and performance within our Sarasota/Manatee homeless response system and Oneby1 Coordinated Entry.

Explain how your organization has made changes or has included in this proposal efforts to better exemplify the use of “best practices” and use national standards to define performance success.

Describe your agency’s policies and processes to ensure data is entered into CSIS accurately, in a timely fashion and that all required documents are uploaded.

System Area Two: Domestic Violence: Up to \$517,338 in DV Bonus Funding

Domestic Violence (DV) project proposals for either Rapid Re-housing (RRH) and/or Joint Transitional Housing (TH) and Rapid Rehousing (TH/RRH) must be targeted to serve people fleeing domestic violence, dating violence, sexual assault, or stalking as defined in 24 CF 578.3 and/or victims of human trafficking. DV project proposals are expected to enable our community to integrate domestic violence programs into our CoC’s planning more broadly than in the past. Submit a proposal for the following types of projects:

- Rapid Re-housing (RRH) project that demonstrate trauma-informed, victim- centered approach;
- Joint Transitional Housing and Rapid Re-housing (TH/RRH) component project that demonstrate trauma-informed, victim-centered approaches.

In the proposal, be sure to include any elements outlined as required within this RFP and the

following:

Describe any experience your organization has implementing RRH, TH/RRH projects.

How will you collaborate with other organizations regarding affordable housing for DV persons who are homeless in order to strengthen our community's response and assist the community in achieving its goal of ensuring homelessness is rare, brief, and one-time. This response may include how you will work to:

- Build a community list of available housing stock.
- Best assure that the community fills known vacancies with those who are homeless regardless of the agency for which the client is enrolled.
- Improve landlord relations and bring new landlords into the system for the benefit of all.

Describe how the organization will use funds from other sources to leverage the activities proposed in this HUD project.

How does the program work closely with public and private healthcare organizations to address client healthcare needs?

Describe how this program partners with local Public Housing Authorities to utilize coordinated entry, develop housing units, and provide housing subsidies to persons experiencing homelessness.

Describe how this project will help address racial equity and racial disparities affecting individuals and families experiencing homelessness. Specifically address how the program will be able to target underserved populations based on program data.

Describe how those with lived experience are integrated in the creation of program policies and procedures.

Describe the support staff to client ratio proposed for your program and the rationale used for arriving at that ratio.

How will you incorporate client location strategies to engage people with whom you have received a referral for your housing project?

How will you assist people in locating appropriate permanent housing that meets their needs as identified by the client?

How does your program ensure it meets Federal requirements including rent standards and habitability?

Describe how you coordinate and integrate with other mainstream health, social services, and employment programs and ensure that program participants are assisted to obtain benefits from the mainstream programs for which they may be eligible (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education).

How is your agency staff trained in harm reduction and trauma informed practices? How are these implemented in your daily work?

How does your agency ensure that housing stability case plans and budgets are developed in a client-centered, strengths-based manner that includes goals the client has identified as important to them?

How will you provide supportive services and follow-up to ensure recipients of services are stable? And if they are not, what steps will you take to address the situation?

Describe your strategy for progressive engagement to most effectively use RRH dollars and keep people permanently housed.

Please be sure your proposal demonstrates an understanding of how the above steps help our community

meet its goals (listed below) and your agency's commitment to achieve these.

- 85% of households having a permanent outcome;
- Total Days from Project Entry to Move in Date being 30 to 60 days
- 85% of households remain stably housed at the one-year mark from project exit to a permanent destination
- 30% of households have an increase in income from project entry to project exit.

Indicate your willingness to participate in the ongoing training of established best practices and review and evaluation of services, standards, and performance within our Sarasota/Manatee homeless crisis response system and Oneby1 Coordinated Entry System.

Explain how your organization has made changes or has included in this proposal efforts to better exemplify the use of "best practices" and use national standards to define performance success.

Describe your agency's policies and processes to ensure data is entered into CSIS accurately, in a timely fashion and that all required documents are uploaded.

How will you incorporate other sources of funding the program receives and how will these funds be used to complement existing homeless crisis response services?

DV projects' proposals must clearly address how they work to improve client's income through either earned or non-earned sources by describing strategies that are likely to increase employment income and/or non-employment income, including identifying collaborative partnerships.

DV project proposals must demonstrate trauma-informed, victim-centered approaches to better meet the needs of people whom are survivors of domestic violence, dating violence, or stalking that are defined as homeless at 24 CFR 578.3. Safety and trauma-informed services for people participating in programs should be at the forefront.

For Joint TH-RRH projects, proposals must demonstrate that there is enough rapid rehousing assistance to ensure that, at any given time, a program participant may move from transitional housing to permanent housing. This can be demonstrated through a budget that has twice as many resources for the RRH portion of the project than the TH, by having twice as many RRH units as one time compared to TH, or by demonstrating that the budget and units included are appropriated for the population by served in the proposed project.

Proposed projects should be scalable depending upon the funding available. You should be able to describe how your project would operate if less funds or more funds were available. Projects should be designed with the knowledge that federal programs require matching funds/in kind services in order to receive funding.

While funding under the DV Bonus is available to all who meet established eligibility criteria, project applications that are not in partnership and/or collaboration with our local certified domestic violence centers (HOPE Family Services and Safe Place and Rape Crisis Center) will not be considered by the Review and Ranking Committee.

C. Cost Proposal

Proposals must include both a budget and a budget narrative. The budget should include the entire cost for the implementation of the proposed project as well as the amount being requested from HUD. A sample budget worksheet can be found in Appendix C. HUD requires a 25% match, cash or in-kind. Cost-

effectiveness and impact on our system performance are important considerations; be sure to include what other funding sources will be used to maximize the impact of the project and how you intend to sustain the proposed project beyond a year.

Complete the Fiscal Assessment in Appendix E. Please refer to the CoC Program Interim Rule:

<https://www.hudexchange.info/resource/2035/coc-program-interim-rule-formatted-version/>

for information regarding program components and eligible costs when completing your budget.

Thresholds

In addition to the items required for an application to be considered complete as listed under the proposal pieces required section (p.11-12), the following are required by HUD:

HUD will not consider a project application from an ineligible project applicant. Applicant eligibility includes having a current DUNS number, active SAM (System for Award Management) registration, and evidence of eligibility such as nonprofit documentation. More information can be found at 24 CFR 578.15.

In evaluating project applications for funding, HUD considers an applicant's past performance in managing HUD funds.

For renewal projects, projects must be in good standing with HUD and have no:

- Outstanding audit or monitoring findings;
- Outstanding obligation to HUD that is in arrears;
- Unresolved construction delays;
- History of poor financial management or drawdown issues;
- History of serving ineligible program participants, expending funds on ineligible costs, or failing to expend funds within statutorily established timeframes;
- History of low occupancy levels or lack of experience in administering project type; and
- History of late APR's.

Renewal Projects

Projects eligible for renewal in the FY21 NOFO Competition must meet the thresholds required by HUD as listed on page eight (8) of this RFP. In addition, current renewal projects will be reviewed by the Review and Ranking Committee of the Leadership Council utilizing the scoring rubric criteria (pages 23-24) as it applies to the specific renewal project (RRH or PSH) during priority listing and ranking process.

Agencies are required to provide the following for renewal projects:

- Most recent internal audit and response to any audit findings
- Document showing LOCCS drawdowns of project funds (quarterly drawdowns and remaining balance)
- Project APR for current or most recent contract period
- List of Current Board of Directors

- Copy of management letter or summary from the most recent audit
- Evidence of good standing with the State of Florida

Agencies are permitted to submit updates to the scoring rubric measurement areas they deem relevant for their renewal projects to include:

- Agency Experience and Capacity Improvements
- Project Quality Improvements
- Oneby1 Coordinated Entry

Scoring for renewals for these areas will be based on agency updates, FY19 Competition information, and current Coordinated Entry monitoring.

Agencies are not permitted to submit updates to the following scoring rubric measurement areas as these are captured directly from CSIS:

- CSIS/HMIS – System Performance Measures

Agencies are encouraged to review the RFP requirements, questions, and elements contained within the appropriate System Area for their renewal project. Additional priority areas and information needed has been identified by HUD relating to:

- Racial equity
- Public Housing Authorities
- Healthcare systems
- Involvement of those with lived experience

Updates are to be submitted in the format described on page 11 of this RFP and are limited to two (2) pages. Additional required attachments for renewal projects will not count towards the two (2) page limit.

Legal and Additional Submission Requirements

Appeals: Applicants may appeal decisions, in writing, within two (2) days of the project selection notification date. Appeals must be submitted to Chris Johnson, CEO, at chris@suncoastpartnership.org and must be received by 5:00 pm on Tuesday, October 19, 2021. The review committee shall have three (3) business days to review the appeal and an additional two (2) business days to provide a written response to the applicant. Please note: appeals may not be made based on any additional information not provided in the original application nor can they be made in objection to the amount of funding allocated.

Eligibility: Private provider organizations, who are a 501(c)3 or 501(c)4, with a presence and office space in Sarasota and Manatee Counties are eligible to submit proposals in response to this RFP. Individuals and any entity that is not a duly formed business entity are ineligible to participate. Respondents must provide proof of nonprofit status by furnishing a copy of the Internal Revenue Service (IRS) Determination Letter. Additionally:

- Must have a minimum of one (1) year demonstrated experience working within a homeless response system;
- Must have a policy demonstrating commitment to a practice of non-discrimination, as it relates

to the operation of the organization and service delivery, on the basis of race, creed, color, religion, gender, age, national origin, physical or mental health, sexual orientation or any characteristic protected by law.

- Must comply with applicable federal, state and municipal laws and regulations.
- Must actively participate in the Continuum of Care with membership in good standing, 211 with organization profile up to date, Oneby1 Coordinated Entry System, and the Community Services Information System (CSIS) or a plan to meet these requirements if proposal is selected. All these components must be in place prior to any contracting and acceptance of funds.
- Must demonstrate financial stability to be able to float a project/program on the front end or back end of a contracting period as may be required. This is to ensure that program participants are adequately supported to maintain stability and to meet any contract obligations and/or expectations for the CoC.
- Any other requirements as described and outlined by HUD in the FY21 CoC Program Competition NOFO (FR-6500-N-25)

There may, or may not be, additional eligibility requirements pursuant to respective funding sources.

Format: Proposals must be single spaced on 8-1/2 x 11-inch paper using size 12pt Times New Roman Font and 1-inch margins. No more than one page of text may be placed on one sheet of paper; i.e., you may not shrink pages to get two or more on a page. Shrunk pages, or pages where a minimized/reduced font are used, will be counted as multiple pages. All pages **must** be numbered, including attachments to ensure proper assembly of the proposal if printed. Attachments will not count toward the proposal page maximum (four (4) pages for PART A and six (6) pages for each project submitted including PARTS B & C.)

General Disclaimer: While the Review and Ranking Committee, Suncoast Partnership, and the CoC Leadership Council has made every effort to outline basic requirements such as eligibility, all selected projects will be subject to the formal funding guidelines and requirements of each individual funding source. This may include a number of items such as use of specific forms when utilizing funds, organizational policies regarding conflict of interest, strict written standards on client confidentiality, and standards for data and information security and standards. Selected applicants must be willing and able to perform as required.

The review and ranking committee reserves the right to select a lower ranked project in order to ensure adequate geographic representation for our Continuum of Care.

Proposal Pieces Required: The following list of items must be submitted for the RFP to be considered complete:

- Application Checklist signed/dated by CEO, Executive Director, or designee
- Cover Sheet
- Executive Summary-Proposals must include a high-level summary, not exceeding one (1) page
- Main Proposal – No more than four pages for PART A and six pages for each project submitted including PARTS B & C.
- Agency Fiscal Assessment
- Copy of any Memorandum of Understanding (MOU) or other formal agreements outlining relationships for the express purpose of collaboration with other organizations for this proposal.

- List of agencies that will be partners or subcontractors to assist in carrying out the proposed program description, if any. Describe their respective roles and your quality assurance plan.
- Copy of fiscal management policies
- Copy of 501(c)3 or 501(c)4 status
- Copy of management letter or summary from the most recent audit
- List of Board of Directors
- Organizational chart for the proposed project including executive level structure
- Evidence of good standing with the State of Florida
- Copy of any program policies and service delivery standards applicable to areas of service in which you are requesting funding

A logic model is optional and would be considered an attachment, not part of the page limit.

Submissions: Proposals must be submitted as described in the Timeline section. All submissions will receive a confirmation email upon receipt of the proposal by the Suncoast Partnership; please be sure to send with a read receipt request as well.

Evaluation and Scoring (See Attachments for detail):

Criteria	Percentage
Agency Experience and Capacity	15%
Quality of Proposed Project	25%
Oneby1 Coordinated Entry	25%
CSIS System Performance	35%

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Appendices & Attachments

Appendix A:	Application Checklist
Appendix B:	Cover Sheet
Appendix C:	Sample Budget Worksheet
Appendix D:	CSIS
Appendix E:	Agency Fiscal Assessment

Attachment 1:	Housing First Principles and Quick Check
Attachment 2:	Scoring Rubric – Permanent Supportive Housing
Attachment 3:	Scoring Rubric – Domestic Violence Rapid Rehousing / Transitional Housing-Rapid Rehousing
Attachment 4:	Resources
Attachment 5:	DedicatedPLUS

Appendix A

Application Checklist

- ____ Cover Sheet
- ____ Executive Summary
- ____ Agency Qualifications (PART A)
- ____ Project detail and narrative (PART B)
- ____ Budget (PART C)
- ____ Budget narrative (PART C)
- ____ Agency Fiscal Assessment
- ____ Copy of any Memorandum of Understanding (MOU) or other formal agreements outlining relationships for the express purpose of collaboration with other organizations for this proposal
- ____ List of agencies that will be partners or subcontractors to assist in carrying out the proposed program description, if any
- ____ Copy of fiscal management policies
- ____ Copy of 501(c)3 or 501(c)4 determination letter
- ____ Copy of management letter or summary from the most recent audit
- ____ List of Board of Directors
- ____ Organizational chart for the proposed project including executive level structure
- ____ Evidence of good standing with the State of Florida
- ____ Program standards, policies, procedures, and/or guidelines for which you are applying for
- ____ Logic model (optional)

Signature: _____

Date: _____

Appendix B

Manatee/Sarasota Continuum of Care Project Proposal Cover Sheet

Legal Name of Agency: _____

Project Name(s) if applicable: _____

Agency Address: _____

City, State, Zip: _____

Federal Identification Number (9- Digit #): _____

Website: _____

Total Funds Requested: _____

Number to be Served by Service/Fund: _____

Please include detail on service area, amount requested, and specify funding type where applicable:

Grant Contact Person and Title: _____

Phone Number: _____

E-mail Address: _____

Authorized Signer for the Organization: _____

Appendix C

Budget Worksheet **Sample**

CoC Agency	2021-2022
Revenue	Budget
Sarasota County	
Manatee County	
CoC	
ESG	
Contributions - General	
Special Events	
Program Service Fees	
Membership Dues	
In Kind donation(s)	
Total Revenue	
Expenses	
Compensation:	
Wages/Salaries	
Employee Benefits	
Payroll Taxes	
Total Compensation	
Non-Compensation:	
Professional Fees/Contracts	
Dues/Subscriptions	
Equipment	
Occupancy	
Insurance	
Legal Services	
Office Expenses	
Outreach/Public Relations	
Printing	
Telephone/Internet	
Local Travel	
Conferences/Meetings/Trainings	
Utilities	
In Kind donation(s)	
Expense Total	
Surplus or (Deficit)	

Appendix D

* For the CSIS system performance section, data will be pulled from CSIS (HMIS) by the Suncoast Partnership. If you have not worked within the Sarasota/Manatee CoC CSIS (HMIS) but have entered data into another Homeless Management Information System, you may provide comparable reports from that system. For assistance with this, please contact the Chief Information Officer, 941-955-8987, extension 101 or brandon@suncoastpartnership.org. If you have not previously entered information into the Suncoast Partnership Homeless Management Information System, or another Continuum of Care HMIS system, please provide alternative program performance reports or grant outcome reports to demonstrate your performance.

The maximum number of points an organization who has not previously entered data into HMIS can receive is 15 points.

For organizations applying for funding in system areas where they have no historical CSIS/HMIS data for scoring the CSIS section of the RFP, Suncoast Partnership will pull report data for project types where the outcomes are most closely aligned with the project type being applied for. For example, if an agency applying for Homeless Prevention funds does not have a Homeless Prevention project in CSIS/HMIS, another project type where permanent housing is the primary outcome goal would be substituted.

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Appendix E

AGENCY FISCAL ASSESSMENT

The Chief Financial Officer or someone of comparable responsibility should complete this assessment, and the agency's Board Chair or Board Treasurer should certify the information. Please answer each question by checking Yes or No. Each section has space to add additional comments and explain any No responses. This information will be used to determine the agency's level of sophistication with regard to financial management.

A. BUDGETS

Yes or No

- _____ 1. Are formal budgets adopted by the governing board and recorded in the minutes?
- _____ 2. Are the budgets prepared in sufficient detail to provide a meaningful tool with which to identify and monitor subsequent performance?
- _____ 3. Are budgets routinely compared to actual revenues and expenditures and significant differences investigated?
- _____ 4. Are the results of the budget comparison (budget to actual) communicated to the Board of Directors on a regular basis?

Additional comments/explain any NO responses:

B. CASH

Yes or No

- _____ 1. Does the governing body authorize all bank accounts and check signatories?
- _____ 2. Are cash receipts entered in books of original entry by persons independent of the collection and deposit preparation functions?
- _____ 3. Are all disbursements, except petty cash disbursements, made by check?
- 4. Check Preparation:
 - _____ a. Are checks prepared by specific employees who are independent of voucher/invoice approval?
 - _____ b. Is there a clearly defined approval process and does all supporting documentation accompany checks presented for a signature?
 - _____ c. Are all supporting documents properly canceled at time of signature to prevent duplicate payment?
 - _____ d. Are all checks pre-numbered, blank stock controlled, used in numerical sequence, accounted for in numerical sequence, and reconciled to the check register?

- _____ e. Are checks required to be countersigned, or have dollar limits been established for single signature checks?
- _____ f. Are authorized check signers and the custody of checks after signature, independent of all payable, disbursement, cash receiving and general ledger functions?
- _____ 5. If check signing machines are used, are signature plates adequately safeguarded, used in the presence of the custodian, and controlled by using numbering devices?
- _____ 6. Bank Account and Statements
 - _____ a. Does a responsible individual (e.g., the Executive Director, CEO, etc.) receive the bank statements unopened from the banks?
 - _____ b. Are bank accounts reconciled within a timely specified period after the end of each month?
 - _____ c. Are reconciliations made by someone other than persons who participate in the receipt disbursement of cash?
 - _____ d. Are reconciliations reviewed by a responsible official?

Additional comments/explain any NO responses:

C. REVENUES AND EXPENDITURES

Yes or No

- _____ 1. Has an individual(s) been designated the responsible party for assuring compliance with the terms and conditions of all grants, restricted contributions, endowments, etc., received by the agency?
- _____ 2. Does an adequate system exist to allow for the allocation of costs applicable to various programs, funding sources, and other functions?
- _____ 3. Are purchases made in accordance with established requirements of the governing board and of funding sources?
- _____ 4. Is the purchasing function performed by personnel independent of receiving and shipping functions, payables and disbursing functions, and governing board members?
- _____ 5. Do purchase orders require independent approval that the expenditure is within budget of funding source restrictions?
- _____ 6. Do adequate procedures exist to ensure that goods for which payment is made have been received, and that the goods are verified by someone other than the individual approving payment?

Additional comments/explain any NO responses:

D. PAYROLL

Yes No

- _____ 1. Do employees complete and sign attendance and time records?
- _____ 2. Are persons preparing the payroll independent of other payroll duties (e.g., timekeeping, distribution of checks, etc.), and is their access to other payroll data or cash restricted?
- _____ 3. Is the payroll subject to final approval by a responsible agency official before payment is made?
- _____ 4. Are payroll checks drawn on a separate clearing account and is the account reconciled by someone independent of all payroll transaction processing activities?
- _____ 5. Are employee time records maintained in sufficient detail, and does an adequate system exist to allow for allocations of payroll costs to the proper accounts, programs, funding sources, and other functions?

Additional comments/explain any NO responses:

E. FINANCIAL REPORTING

Yes No

- _____ 1. Are the final review and approval of financial reports segregated from the responsibility for preparation of the reports?
- _____ 2. Are the principal accounting, treasury, and custody functions segregated?
- _____ 3. Are the necessary record keeping procedures in place to ensure that financial reports are accurate and filed in a timely manner?
- _____ 4. Does the accounting system provide for accumulating and recording expenditures by award or grant and by cost category as shown in the budget?
5. Audits
- _____ a. Has the agency been independently audited during the past two years?
- _____ b. If so, have reports been reviewed?
- _____ c. Was a Management Letter issued?
- _____ 6. Do procedures exist to monitor compliance with financial reporting requirements, use of funds and other conditions in accordance with grant terms, and timely billing of amounts due under grants?
- _____ 7. Is grant activity accounted for so that it can be separated from the accounting for activities funded from all other sources?

- _____ 8. Are reconciliations of the grant financial reports with supporting accounting records prepared, reviewed, and approved by a responsible agency official before filing?
- _____ 9. Are procedures in place to identify and preclude charging expenditures to programs which are disallowed by the grant?
- _____ 10. If the agency provides social services under governmental programs, does a responsible member of management review and approve the provision of services to ensure that recipients are eligible under specific program requirements?

Additional comments/explain any NO responses:

F. AGENCY RESERVES AND CAPACITY

Please describe how your agency ensures continuation of services when there may be a gap in contracting or when services may be required beyond the contract period.

Completed by: _____

Title: _____

Signature: _____

Date: _____

Certified by: _____

Title: _____

Signature: _____

Date: _____

Attachment 1

HOUSING FIRST

Housing First is a proven approach in which people experiencing homelessness are offered permanent housing with few to no treatment preconditions, behavioral contingencies, or barriers. It is based on overwhelming evidence that all people experiencing homelessness can achieve stability in permanent housing if provided with the appropriate levels of wrap-around services. Study after study has shown that Housing First yields higher housing retention rates, reduces the use of crisis services and institutions, and improves people's health and social outcomes. (www.USICH.gov)

For more on Housing First: <http://endhomelessness.org/wp-content/uploads/2016/04/housing-first-fact-sheet.pdf>

Is your project Housing First?

For your homeless response service system to work the most efficiently and effectively, individual programs must embrace a Housing First approach.

Quick Screen: Does Your Project Use Housing First Principles?

1. Are applicants allowed to enter the program without income?
2. Are applicants allowed to enter the program even if they are not “clean and sober” or “treatment compliant”?
3. Are applicants allowed to enter the program even if they have criminal justice system involvement?
4. Are service and treatment plans voluntary, such that tenants cannot be evicted for not following through?

Attachment 2

Scoring Rubric – Permanent Supportive Housing	Max Points
<p>Agency Experience and Capacity</p> <p>Applicants demonstrating extensive experience in administering federal, state and municipal funds, and providing the proposed service and/or serving the proposed population, with demonstrated fiscal stability to maintain operations, will receive up to 15 points.</p>	15
<p>Project Quality</p> <p>Each application will be scored on the overall quality of the project, and the extent to which the applicant can clearly demonstrate the following:</p> <ul style="list-style-type: none"> ▪ <u>Housing First</u>: Applicants may receive up to 5 points based on the extent to which they have followed and will follow a Housing First Model/Low Barrier approach. ▪ <u>Collaboration</u>: Projects with specific referenced collaborations that include either MOU’s or other letters of documentation demonstrating collaborative efforts will receive up to 5 points. ▪ <u>Low Barrier</u>: Projects demonstrating Low Barriers to program admission and flexible participation policies designed to retain program participants will receive 5 points. ▪ <u>Leverage Impact</u>: Projects demonstrating that they are scalable relating to amount of funds available and have matching funds or in-kind services to maximize impact and support the project proposed will receive up to 5 points. ▪ <u>Understanding</u>: Projects demonstrating a clear understanding of the community goals, intended outcomes of this service area in the community homeless crisis response system, and a commitment to best practice service delivery, in a client centered manner, that works towards a community where homelessness is rare, brief, and non-recurring may receive up to 5 points. 	25
<p>Oneby1 Coordinated Entry</p> <p>To receive maximum points, applicants must demonstrate and/or clearly show a commitment to Housing First, the Oneby1 Coordinated Entry System, and collaborating with community partners to ensure our community goal of effectively ending homelessness.</p>	25
<p>CSIS/HMIS – System Performance Measures</p> <p>Data Quality – Up to 5 points Data Consistency – Up to 5 points Data Entry Timeliness – Up to 5 points Positive outcomes either at exit or with move in dates during participation – Up to 10 points Total days from project entry to move in date being from 30 to 60 days -Up to 5 points Households with permanent housing at exit remain stably housed at the one-year mark -Up to 5 points</p>	35
TOTAL POSSIBLE POINTS for PROJECTS	100

Attachment 3

Scoring Rubric – Domestic Violence Rapid Rehousing / Transitional Housing-Rapid Rehousing	Max Points
<p>Agency Experience and Capacity</p> <p>Applicants demonstrating extensive experience in administering federal, state and municipal funds, and providing the proposed service and/or serving the proposed population, with demonstrated fiscal stability to maintain operations, will receive up to 15 points.</p>	15
<p>Project Quality</p> <p>Each application will be scored on the overall quality of the project, and the extent to which the applicant can clearly demonstrate the following:</p> <ul style="list-style-type: none"> ▪ <u>Housing First</u>: Applicants may receive up to 5 points based on the extent to which they have followed and will follow a Housing First Model/Low Barrier approach. ▪ <u>Collaboration</u>: Projects with specific referenced collaborations that include either MOU’s or other letters of documentation demonstrating collaborative efforts will receive up to 5 points. ▪ <u>Low Barrier</u>: Projects demonstrating Low Barriers to program admission and flexible participation policies designed to retain program participants will receive 5 points. ▪ <u>Leverage Impact</u>: Projects demonstrating that they are scalable relating to amount of funds available and have matching funds or in-kind services to maximize impact and support the project proposed will receive up to 5 points. ▪ <u>Understanding</u>: Projects demonstrating a clear understanding of the community goals, intended outcomes of this service area in the community homeless crisis response system, and a commitment to best practice service delivery, in a client-centered manner, that works towards a community where homelessness is rare, brief, and non-recurring may receive up to 5 points. 	25
<p>Oneby1 Coordinated Entry</p> <p>To receive maximum points, applicants must demonstrate and/or clearly show a commitment to Housing First, the Oneby1 Coordinated Entry System, and collaborating with community partners to ensure our community goal of effectively ending homelessness.</p>	25
<p>CSIS/HMIS – System Performance Measures</p> <p>Data Quality and Consistency – Up to 5 points Data Entry Timeliness – Up to 5 points Positive outcomes either at exit or with move in dates during participation – Up to 10 points Total days from project entry to move in date being from 30 to 60 days -Up to 5 points Households with permanent housing at exit remain stably housed at the one-year mark -Up to 5 points Households have an increase in income from project entry to project exit – Up to 5 points</p>	35
TOTAL POSSIBLE POINTS for PROJECTS	100

Attachment 4

The links below offer information about research, best practices, policies, and real-world examples for solutions to effectively end homelessness. They may provide you with additional insight and information in developing your proposal. It is provided as an informational service only.

Ending Homelessness – Proven Solutions

<https://endhomelessness.org/ending-homelessness/solutions/>

Ending Homelessness – Good Policy

<https://endhomelessness.org/ending-homelessness/policy/>

The Role of Emergency Shelter in Diversion

<https://endhomelessness.org/resource/role-emergency-shelter-diversion/>

Get Ready for the Shift to Low-Barrier, Housing-Focused Shelter

<https://endhomelessness.org/resource/get-board-ready-shift-low-barrier-housing-focused-shelter/>

To End Homelessness for Individual Adults, We Need Greater Investment in Targeted Rapid Rehousing

<https://endhomelessness.org/resource/end-homelessness-individual-adults-need-greater-investment-targeted-rapid-re-housing/>

Permanent Supportive Housing. A fidelity scale tool. From SAMHSA (Substance Abuse and Mental Health Services Administration) <https://store.samhsa.gov/system/files/sma10-4510-05-evaluatingyourprogram-psh.pdf>

The Center for Evidence-based Solutions to Homelessness

A new resource dedicated to synthesizing and explaining the key research insights needed to end homelessness. The National Alliance partnered with ABT Associates to build [a collection of research briefs](#) that cover key areas in the study of homelessness. It can be searched and accessed [here](#). Research briefs on the following topics are currently available or scheduled for publication in the coming months:

- [Children and families](#)
- [Chronic homelessness](#)
- [Criminal justice reentry](#)
- [Homeless services system](#)
- [Homelessness prevention](#)
- [Permanent supportive housing](#)
- [Rapid Rehousing](#)
- [Rental housing subsidies and homelessness](#)
- [Trends and patterns of homelessness](#)
- [Veterans](#)
- [Youth](#)

Housing Focused Sheltering: Thoughts from OrgCode

[Housing Focused Sheltering November 21 2017.docx \(d3n8a8pro7vhmx.cloudfront.net\)](#)

USICH: What does ending homelessness mean? And Solutions

[What Does Ending Homelessness Mean? | United States Interagency Council on Homelessness \(USICH\) Solutions | United States Interagency Council on Homelessness \(USICH\)](#)

Attachment 5

DedicatedPLUS

DedicatedPLUS Project. A permanent supportive housing project where 100 percent of the beds are dedicated to serve individuals, households with children, and unaccompanied youth (including pregnant and parenting youth) that at intake meet one of the following categories:

- (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 and had been admitted and enrolled in a permanent housing project within the last year but were unable to maintain a housing placement and met the definition of chronic homeless as defined by 24 CFR 578.3 prior to entering the project;
- (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;
- (5) residing and has resided in a place not meant for human habitation, Safe Haven, or emergency shelter for at least 12 months in the last three years, but has not done so on four separate occasions and the individual or head of household meet the definition of 'homeless individual with a disability; 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.

A renewal project where 100 percent of the beds were dedicated to chronically homeless individuals and families, under the grant that is being renewed may either become a DedicatedPLUS project or may continue to dedicate 100 percent of its beds to chronically homeless individuals and families. If a renewal project that has 100 percent of its beds dedicated to chronically homeless individuals and families elects to become a DedicatedPLUS project, the project will be required to adhere to all fair housing requirements at 24 CFR 578.93.

Projects that were awarded as DedicatedPLUS in a previous CoC Program Competition are required to include households with children to qualify as a DedicatedPLUS project in the FY 2021 CoC Program Competition.

Attachment 2

Scoring Rubric – Permanent Supportive Housing	Max Points
<p>Agency Experience and Capacity</p> <p>Applicants demonstrating extensive experience in administering federal, state and municipal funds, and providing the proposed service and/or serving the proposed population, with demonstrated fiscal stability to maintain operations, will receive up to 15 points.</p>	15
<p>Project Quality</p> <p>Each application will be scored on the overall quality of the project, and the extent to which the applicant can clearly demonstrate the following:</p> <ul style="list-style-type: none"> ▪ <u>Housing First</u>: Applicants may receive up to 5 points based on the extent to which they have followed and will follow a Housing First Model/Low Barrier approach. ▪ <u>Collaboration</u>: Projects with specific referenced collaborations that include either MOU’s or other letters of documentation demonstrating collaborative efforts will receive up to 5 points. ▪ <u>Low Barrier</u>: Projects demonstrating Low Barriers to program admission and flexible participation policies designed to retain program participants will receive 5 points. ▪ <u>Leverage Impact</u>: Projects demonstrating that they are scalable relating to amount of funds available and have matching funds or in-kind services to maximize impact and support the project proposed will receive up to 5 points. ▪ <u>Understanding</u>: Projects demonstrating a clear understanding of the community goals, intended outcomes of this service area in the community homeless crisis response system, and a commitment to best practice service delivery, in a client centered manner, that works towards a community where homelessness is rare, brief, and non-recurring may receive up to 5 points. 	25
<p>Oneby1 Coordinated Entry</p> <p>To receive maximum points, applicants must demonstrate and/or clearly show a commitment to Housing First, the Oneby1 Coordinated Entry System, and collaborating with community partners to ensure our community goal of effectively ending homelessness.</p>	25
<p>CSIS/HMIS – System Performance Measures</p> <p>Data Quality – Up to 5 points Data Consistency – Up to 5 points Data Entry Timeliness – Up to 5 points Positive outcomes either at exit or with move in dates during participation – Up to 10 points Total days from project entry to move in date being from 30 to 60 days -Up to 5 points Households with permanent housing at exit remain stably housed at the one-year mark -Up to 5 points</p>	35
TOTAL POSSIBLE POINTS for PROJECTS	100

Attachment 3

Scoring Rubric – Domestic Violence Rapid Rehousing / Transitional Housing-Rapid Rehousing	Max Points
<p>Agency Experience and Capacity</p> <p>Applicants demonstrating extensive experience in administering federal, state and municipal funds, and providing the proposed service and/or serving the proposed population, with demonstrated fiscal stability to maintain operations, will receive up to 15 points.</p>	15
<p>Project Quality</p> <p>Each application will be scored on the overall quality of the project, and the extent to which the applicant can clearly demonstrate the following:</p> <ul style="list-style-type: none"> ▪ <u>Housing First</u>: Applicants may receive up to 5 points based on the extent to which they have followed and will follow a Housing First Model/Low Barrier approach. ▪ <u>Collaboration</u>: Projects with specific referenced collaborations that include either MOU’s or other letters of documentation demonstrating collaborative efforts will receive up to 5 points. ▪ <u>Low Barrier</u>: Projects demonstrating Low Barriers to program admission and flexible participation policies designed to retain program participants will receive 5 points. ▪ <u>Leverage Impact</u>: Projects demonstrating that they are scalable relating to amount of funds available and have matching funds or in-kind services to maximize impact and support the project proposed will receive up to 5 points. ▪ <u>Understanding</u>: Projects demonstrating a clear understanding of the community goals, intended outcomes of this service area in the community homeless crisis response system, and a commitment to best practice service delivery, in a client-centered manner, that works towards a community where homelessness is rare, brief, and non-recurring may receive up to 5 points. 	25
<p>Oneby1 Coordinated Entry</p> <p>To receive maximum points, applicants must demonstrate and/or clearly show a commitment to Housing First, the Oneby1 Coordinated Entry System, and collaborating with community partners to ensure our community goal of effectively ending homelessness.</p>	25
<p>CSIS/HMIS – System Performance Measures</p> <p>Data Quality and Consistency – Up to 5 points Data Entry Timeliness – Up to 5 points Positive outcomes either at exit or with move in dates during participation – Up to 10 points Total days from project entry to move in date being from 30 to 60 days -Up to 5 points Households with permanent housing at exit remain stably housed at the one-year mark -Up to 5 points Households have an increase in income from project entry to project exit – Up to 5 points</p>	35
TOTAL POSSIBLE POINTS for PROJECTS	100



Agency Name: TSAS PSH Renewal

Application Received by Deadline: **Yes** No Time Received: 2:44 pm

Is the application complete: **Yes** No (Refer to application check list on back side)

Does the proposer have office space in Sarasota or Manatee: **Yes** No

Nonprofit Status: **Yes** No

At least one year of experience working within a homeless response system: **Yes** No

CoC member: **Yes** No Remark: _____

211 organizational profile: **Yes** No Remark: _____

HMIS participant: **Yes** No Remark: _____

Proper Format of 8-1/2 x 11 paper, 12pt Times New Roman, 1-inch margins: **Yes** No

All pages numbered: Yes **No**

Page limits met: **Yes** No

Renewal Application Checklist

- Most recent internal audit and response to any audit findings
- Document showing LOCCS drawdowns of project funds (quarterly drawdowns and remaining balance)
- Project APR for current or most recent contract period
- List of Current Board of Directors
- Copy of management letter or summary from the most recent audit
- Evidence of good standing with the State of Florida

Signature: Lauren Davis

Date: 10/06/2021

UPDATES TO RENEWAL: PROJECT QUALITY IMPROVEMENTS

- **SCALABILITY & COST-EFFECTIVENESS OF PERMANENT SUPPORTIVE HOUSING (PSH)**

Re: HUD-CoC Competition 2019, Application for PSH Bonus 2019

Scalability

Whether a project is scalable or not is an important question that should be asked. However, we would vie that it is prudent to ask if a project is scalable or not *and* why or why not rather than simply whether it is scalable or not. Some projects are truly scalable and others are truly not. The reason we stated our project was not scalable is because it was a brand new project and, as such, was requiring of new resources, such as a new staff person and mental health services. Due to the nature of building a HUD-CoC project budget in e-snaps, as part of the HUD-CoC Competition, one is limited by the structure of its line items. Thus, the project has already been scaled based on the available funds and budget structure (rental assistance, supportive services, etc.). This is part of the strategy of designing a project that will be sustainable for the long-term. When a project is designed, it should consider the essential components that will reach community goals and intended outcomes. When we designed the PSH Bonus project, we did just that. It was scaled down as much as possible based on the funding available. We do have many other projects in our agency that are easily scalable—a new PSH project is not one of them. When we did not receive the full funding request, we did not know how we were going to make up for it. We had requested \$371,174 and received \$302,901—a shortfall of \$68,273. We were trying to figure out what services to cut—which is not good for a PSH project. Over \$30,000 had been committed to mental health services, a most critical component, and was now gone. In a synchronous turn of events, Centerstone of Florida had just received a large, multi-year grant to provide mental health and substance use disorder services to homeless and newly housed persons and were looking to partner. This worked out in the favor of a successful project. Because of the resources brought forth by Centerstone, the project was scalable after all. We plan to continue to partner with Centerstone on our current and new RRH and PSH projects. As such, this year's new PSH Application for PSH Plus 2021 has been designed accordingly and, similar to the PSH Bonus Application, arrives to the reader already being scaled according to resources, collaboration and project balance.

Leveraging is tied to scalability (and sustainability) and successful outcomes in the design of the projects and the building of the RRH/PSH Team. Namely, by increasing housing services capacity and balancing the case management capacity to weather staff turnover, sick time and other time away, planned and unplanned. RRH clients and especially PSH clients must have dependable case management and other supportive services without interruption regardless of the challenges service providers and their staff experience.

Cost-Effectiveness

The 2019 RFP Application narrative included vetted information and research about the cost-effectiveness of PSH yet may have been ignored due to the focus on Scalability as well as the per person cost. In this year's RFP Application narrative, it is mentioned that Susan Pourciau points out that PSH can be expensive (p. 9, *PSH Plus 2021*) (particularly in our housing-burdened market). I would ask the reader to re-visit the section on cost-effectiveness of PSH in the PSH Bonus 2019 Application (Page 12, *PSH Pivot 2019*), and consider for both the PSH Bonus Renewal Application as well as our new PSH Plus 2021 Application.

Sarasota/Manatee Continuum of Care Project Proposal Cover Sheet

Legal Name of Agency: The Salvation Army, a GA Corp., for The Salvation Army Sarasota County Area Command

Project Name: PSH Pivot 2019

Agency Address: 1400 10th Street

City, State, Zip: Sarasota, FL 34236

Federal Identification Number (9- Digit #): 58-0660607

Website: <http://www.salvationarmyflorida.org/sarasota>

Counties to be Served: Sarasota and Manatee Counties

TYPES OF ACTIVITIES

AMOUNT

Permanent Supportive Housing	\$371,174
RRH for survivors through DV Bonus	\$0
Number of households to serve:	15-19 individuals per year

IMPORTANT INFORMATION:

Grant Contact Person and Title: Amy E. Jones, Regional Planning Analyst

Phone Number: 941-552-5174

E-mail Address: amy.e.jones@uss.salvationarmy.org

Authorized Signer for the Organization: Major Charles Whiten, Area Commander

Application Checklist

Cover Sheet

Executive Summary

Agency Qualifications (PART A)

Project detail and narrative (PART B)

Budget (PART C)

Budget narrative (PART C)

Agency Fiscal Assessment

Copy of any Memorandum of Understanding (MOU) or other formal agreements outlining relationships for the express purpose of collaboration with other organizations for this proposal

List of agencies that will be partners or subcontractors to assist in carrying out the proposed program description, if any

Copy of fiscal management policies

Copy of 501(c)3 or 501(c)4 status

Copy of management letter or summary from the most recent audit

List of Board of Directors

Organizational chart for the proposed project including executive level structure

Evidence of good standing with the State of Florida

Logic model (optional)

Signature:  _____

Date: 8/21/19

EXECUTIVE SUMMARY

This Proposal, *PSH Pivot 2019*, is respectfully submitted to the Suncoast Partnership to End Homelessness (SPEH) in response to the 2019 CoC Program Competition Request for Proposals (RFP). This Proposal presents our request for funding to create new Permanent Supportive Housing (PSH) capacity in the Oneby1 homeless response system for the Sarasota/Manatee Continuum of Care (FL-500).

In January of 2017, the U.S. Department of Housing and Urban Development (HUD) released its *Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System*. This notice established new requirements for every Continuum of Care (CoC) in the country, one requirement being the expectation to implement a new coordinated entry process by January of 2018. The Lead Agency for our Sarasota/Manatee Continuum of Care (CoC), Suncoast Partnership to End Homelessness (SPEH), led a successful effort to implement the Oneby1 Coordinated Entry System (CES) ahead of schedule in January of 2018. This Proposal is written within the context of a CES that has been functioning for over a year and a half.

A functioning system yields celebration in efficacy while also highlighting challenges and gaps. In our First Annual RFP Proposal submitted in 2018, we sought support for “Coordinated Entry System Optimization” within the context of a new and partially functioning Oneby1 CES. We went about this by seeking funding for four different Projects. In January of 2019, in which the timing of the Proposal coincided with reaching the one year mark of the implementation of Oneby1, we continued to seek support for “Coordinated Entry System Optimization,” in the context of a more developed and functioning CES. The entire design of our previous AURFP submissions, and resulting projects, were founded upon the will towards a functioning system that recognizes that all components of the system must work in order for any of the system to be effective.

We maintain that a functioning homeless response system requires that all components are properly resourced to be able to take participants into the system and to ensure participant flow out of the system into Permanent Housing (PH). Client success is not only dependent upon the stability and sustainability of the system, but also appropriate housing interventions that correspond with the level of care needed for each client. Unfortunately, given the lack of Permanent Supportive Housing (PSH) in our community, we have found ourselves implementing Rapid Rehousing (RRH) programs with participants who are candidates for Permanent Supportive Housing (PSH) interventions. Given the intense nature of support needed, we are concerned that the long-term stability of the participants and the outcomes of the CoC are at risk. Therefore, building upon the strength of our participation in Oneby1 CES and lessons learned through Rapidly Rehousing high acuity clients, we propose a new PSH Project, *PSH Pivot 2019*.

Our funding request is as follows:

- Permanent Supportive Housing (PSH)—scattered-site model.....\$371,174

PART A: AGENCY EXPERIENCE AND CAPACITY

The Salvation Army

The Salvation Army is an international, national and local organization with immense capacity. The Salvation Army was founded in England in 1865, in the United States in 1880, and has been serving the Sarasota community since 1927. Being a part of The Salvation Army at the international level affords incredible access to resources and development. Officers and staff are edified by a global institution with regular opportunities to network with experienced problem solvers. Being a part of The Salvation Army at the National, Territorial and Divisional Levels affords access to social science research and national best practices. The institutional memory and systematic mechanisms of The Salvation Army are tremendous. Peter F. Drucker labeled us, “The most effective organization in the United States.”

Divisional & Area Command Leadership

The Sarasota County Area Command is part of the Florida Division of The Salvation Army. Florida Divisional Headquarters (DHQ) and Territorial Headquarters (THQ) offer experience and capacity support to the Sarasota County Area Command. DHQ and THQ lead, guide and support us in areas of risk, legal, insurance, compliance, human resources, property, mission, finance, development and social services. The current Florida Divisional Social Services Director, Dr. Donald L. Dixon, has an extensive history of directing top-level social services programs throughout the state of Florida. Dr. Dixon served as an adjunct professor in the School of Social Work at the University of Florida for 13 years. Dr. Dixon has been pivotal in helping the Sarasota County Area Command transition to a Housing First model and Low-Barrier approach.

Area Commander of the Sarasota County Area Command, Major Chuck Whiten (Winthrop College, 1989 and The Salvation Army College for Officers’ Training, 1993) has worked in social services and shelter operations for over 25 years. He has managed multi-million-dollar operations inclusive of large facility management. From 2009-2017, Major Whiten served on two Divisional finance boards of The Salvation Army that oversaw programs and services in five states. Major Whiten has been leading our County-wide alignment efforts. Amy E. Jones (M.S. in Community & Regional Planning and M.S. in Sustainable-Design from the University of Texas at Austin) is the Regional Planning Analyst and oversees the design of grant projects and the processing of contracts while collaborating at the intersection of data, outcomes, finance and development. Ms. Jones has worked in non-profit management for over 15 years and has been with the agency for almost five years. Andrew Brady (B.S. in Criminology and A.A. in Police Science) is a new addition to The Salvation Army as our QLife Program Manager (QLife is short for our Quality of Life by Choice Model). Brady has a background in working with various state, county and non-profit organizations. Brady has worked within the homelessness field for over 10 years, six of those being responsible for federal and state grants such as ESG, Challenge, TANF, and FEMA. Brady is well-versed in Housing First, Evidence-based Practices and Trauma-informed Care.

Strategic & Fundraising Plans

In October of 2018, we brought to completion the goals and initiatives of our 2016-2018 strategic plan. The Strategic Plan for 2019-2024 has been composed, reviewed and approved by our County-wide Advisory Board and Divisional leadership. The Plan includes six Priority Areas and several Key Strategic Priorities in each area. These Key Strategic Priority Areas are: 1) Finance, 2) Programs, Services, and Ministries, 3) Human Resources, 4) Locations, Facilities, Equipment and

Technology, 5) Partnerships, and 6) Research and Development. The Salvation Army has aligned Salvation Army services within the borders of Sarasota County. For the purpose of this Proposal, we have maintained a Sarasota-centric orientation as the alignment is still in process.

Our fundraising plan is aligned with the projected annual budget, which we submit about ten months in advance to Divisional and Territorial Headquarters for oversight and review. We project how much we will need to raise in order to meet overall agency goals based on current income and expense streams in the context of an environment of ever-changing funding streams and programs. Income stream creation is based on a diversification of sources in order to ensure economic sustainability by not relying too heavily on any one source. Sources include individual donations, quasi-endowments, foundations, and County, State and Federal grants. A 2019 Fund Development Plan has been created and shared via the Giving Partner on GuideStar. This plan includes the following Budgeted Annual Fundraising Goals: Individual Donations, \$2,393,696; Contracts – national, state, local, \$3,924,707; Grants – community and family foundations, \$75,000; Special Event, \$175,000; and Gift in Kind, \$2,419,218, for a total of \$8,912,621.

We have a very active and engaged Advisory Board that adds value in innumerable ways. Board members lead the following subcommittees: Finance Subcommittee, Steering Committee, Life Recovery Subcommittee, Pathway of Hope Subcommittee, QLife Subcommittee, Development Subcommittee, and Program Subcommittee. Members of our Board work directly with clients, staff and community as well as participate in the annual Point-in-Time count. Board Members organize events and fundraisers. They participate in Community Alliance of Sarasota County meetings and Legislative Summits. One board member continues to lead the way for a State Legislative funding request for Community Addiction-Recovery Beds serving those with substance abuse disorders. This legislation was presented in January 2018 in both the House, as HB2071, and the Senate, as tracking number 1019, and was also presented during the 2019 Legislative Session as HB 2411. Other key Board members have gone above and beyond the call of duty in their service as leaders in our County-wide alignment process. There are typically nine Advisory Board meetings per year. In 2018, Board Attendance was 70%. So far, with data for the first six months of calendar year 2019, attendance is 62% for the new County-wide Board. Board giving participation has been 100% for both 2018 and 2019.

Experience Administering Funds

We have extensive experience administering federal, state and municipal funds. We have received state funding since 1990 and federal funding since 1996. Additionally, The Salvation Army at the Divisional and Territorial levels parents us with more than 150 years of experience in social services and government collaboration. Federal grants in which we have experience include: CSBG, FEMA-EFSP, ESG, HUD-CoC, CDBG and LIHEAP. State grants in which we have experience administering include Challenge Grant. Some grants are federal in origin and administered at the state level through a state agency, having the effect of a state grant, as we are monitored and accountable to the State. For example, this was the case with our long-standing ESG Shelter Operations grant, which is now passed through the CoC as part of this Unified funding process. This is the case for both our CSBG and LIHEAP dollars which are received by the State of Florida and administered through the Florida Department of Economic Opportunity (DEO). We contract directly with DEO in regard to LIHEAP funding. CSBG funding is received by Sarasota County and administered to us. These funding sources come with the rules and regulations associated with each entity, sometimes making for complex application and billing. In regard to HUD Program grants, we have been a direct recipient of HUD grants since 2000. We have been a

direct recipient of HUD-CoC funding for more than ten years: first for our transitional housing program, “FAITH,” and now for our Rapid Rehousing (RRH) projects, “Everyone’s Home.” We are the current (and re-current) recipient of multiple municipal funding streams such as with the City of Sarasota for Homeless Outreach Team (HOT) Beds and the Street Teams program and with Sarasota County for Emergency Shelter HOT Beds, Voluntary Interim Placement-Enhancement Program (VIP-ER), and Emergency and Supportive Financial Assistance program.

Capacity to Re-tool the Shelter towards Best Practices

More than five years ago, we began to make great changes in our service delivery platform. The Salvation Army at-large and our Command have long responded to best practices and national standards resulting from social science research. We continually adjust our services to the current and changing needs of the people we serve, aligning them with best practices. In 2014, along with many others across the country as years of data became available, our local and Divisional leaders identified the need to re-tool our services. For our Command, this began with a simple but hefty shift from being focused on “outputs” to “outcomes.” This initial change was largely internal as much time and energy were invested in a paradigm shift in which everyone in the organization at every level began to understand that there was a new focus in the Shelter: housing.

First, we became Housing-Focused. Then we became more aware of and more proficient at the Housing First approach. We re-tooled our long-standing HUD-CoC Transitional Housing grant to create Rapid Rehousing (RRH) capacity. While there was some traction in the community for a “comprehensive entry” or “coordinated entry” system (most efforts involving or led by our Area Commander at the time), the community had not yet gelled with support around one system. Today we are participating in a system of dynamic prioritization and assisted rapid resolution, which means we are in line with the most current best practice if not ahead of the curve. This is because the Oneby1 CES is working, thanks to Suncoast Partnership to End Homelessness (SPEH). Now that we have been participating in a functioning system for over a year, we are ready to re-tool case management and support capacity to line up with a supportive housing model.

Serving the Proposed Population

We have provided 200-240 beds of Emergency Shelter 24/7/365 at our 10th Street facility for over 15 years. We seek to shelter the unsheltered population we serve, while offering additional choices and services. Nearly 100% of our clients are literally homeless or chronically homeless (CH). In 2018, over 1,700 people participated in overnight sheltering and of those more than 100 CH were tracked in HMIS. Since serving as a Oneby1 Access Point, of more than 1,100 people who have received a Coordinated Intake, about 75 CH have been tracked. Our Shelter hosts various types of beds and programs including night-by-night sheltering, emergency weather sheltering, various program beds, and Bridge Housing. Collectively, these beds, under one roof, provide over 60,000 bed nights to over 2,000 unique clients annually.

We have been administering HUD Rapid Rehousing (RRH) and Homeless Prevention (HP) services since 2015. Our RRH services are founded upon years of HP experience. We continue to provide robust HP services through our Emergency Financial Assistance (EFA) Department, located at our “QLife” Center, at the Glasser/Schoenbaum Human Service Center (“QLife” is short for Quality of Life by Choice). Our RRH clients, Shelter clients and Case Managers continually have access to EFA, which typically serves about 4,500 people per year. With HUD HP/RRH funds we served 8 households with \$15,645 from 2015-2016, 7 of which remained stably housed 6 months after receiving assistance, and we assisted 6 additional households with \$26,331 from

2016-2017. With HUD-CoC RRH funds we served 57 literally homeless adults (including at least 6 CH) from 2016-2017, 25 of which exited to Permanent Housing (PH), and another 57 literally homeless adults (including at least 10 CH) from 2017-2018, 23 of which exited to PH.

Providing the Proposed Service

We currently provide services in coordination with the Oneby1 CES and SPEH. We provide RRH opportunities. We currently implement two HUD-CoC RRH Projects that increase community capacity by at least 26 beds in PH programs. We are finding that RRH housing interventions may not be the appropriate response for the participants we are receiving. A PSH housing intervention is the more appropriate response in many of the cases we see. Therefore, we see the need to increase PSH capacity. We see this as our chance to *pivot* toward PSH opportunities in our community; to pursue creating and implementing the PSH capacity through this Proposal; and, whether this Proposal is awarded or not, to *pivot* more aggressively toward thorough Housing First approaches and best practices associated with PSH in order to serve clients to the best of our ability. We must take ownership for the clients in RRH who are better suited for PSH and implement more training and practices associated with PSH responses. We need to *pivot* toward a Trauma-Informed, Housing First community culture where practitioners and everyone who comes into contact with clients has a common understanding of mission and goals. Our proposed PSH Project, *PSH Pivot 2019*, will dedicate 100% of the beds to chronically homeless individuals, and undoubtedly high acuity. In our current RRH Projects, at least 43% are high acuity.

Quality Assurance

The structure of The Salvation Army at Territorial, Divisional and local levels ensures compliance and quality through oversight, supervision and continuous improvement processes. Program audit compliance is routinely conducted, and we observe all federal and state compliances that apply (HIPAA/confidentiality, Code of Federal Regulations such as Title 24, etc.). Internally, collaboration across Departments is crucial for successful delivery of quality services such as to ensure payments for rental assistance are correct and timely. In partnerships with other agencies, quality assurance is first represented by a detailed Agreement in which both parties understand the expectations of each other. Regular meetings, communication and data analysis serve as continuous quality improvement mechanisms.

We appreciate the level of accountability afforded to us through funder supervision. On occasion, deficiencies in compliance are identified and corrected. In 2018, we responded to the Florida Department of Economic Opportunity (DEO) in reference to a monitoring report addressing findings or concerns associated with our LIHEAP grant. For example, \$124.92 had been misallocated due to a difference in agency mileage rates. Most recently, we responded to SPEH in reference to a Challenge Grant for Outreach, in which several data entry issues deserved correction. Even with the best attempts in communication, sometimes expectations are not perfectly clear by all parties at the front-end of a Project. We work with SPEH and others continually to try and get this right by setting up Projects to the best of our ability in CSIS before or when a Project starts. Of mention, and relating to the CSIS System Performance score to be considered as part of this application, to the best of our understanding the Data Consistency scores that apply to RRH and PSH Projects have not been streamlined and are causing lower “B” scores for shelter data. If this is true, we would ask for this to be considered and for Data Consistency scores to be waived at this time.

PART B: PROJECT PROPOSAL

Introduction

This Proposal, *PSH Pivot 2019*, is a request for \$371,714 to increase Permanent Supportive Housing (PSH) capacity in the homeless response system of the Sarasota/Manatee Continuum of Care, FL-500. We at The Salvation Army have been part of the response by helping resource and implement multiple components of the system such as Diversion, Outreach, Coordinated Entry, Prevention, Emergency Shelter, Bridge Beds and Rapid Rehousing. One component we did not anticipate implementing is Permanent Supportive Housing (PSH). Because the Oneby1 Coordinated Entry System (CES) has arrived at success—in that it is now functioning to assess and prioritize individuals from a by-name list—the critical importance of having appropriate housing interventions available to offer prioritized individuals is imperative. In what follows, we describe current and proposed participation, followed by a Budget Narrative and Budget (Part C).

Housing First and Chronically Homeless & Long-term Homeless

As explained in Part A, leadership within The Salvation Army re-tooled the Emergency Shelter in accordance with best practices. Implementing a Housing First (HF) approach began when we adopted a “Quality of Life by Choice” framework—or “QLife.” The QLife framework exemplifies HF (*See attached letter in which the Florida Divisional Headquarters acknowledges our Command as being a best practice site for Housing First*). We have adopted a HF philosophy in our practices at our “QLife” Shelter. HF does not require income, programmatic, or any other type of eligibility. HF is Low-Barrier because it removes barriers, particularly to housing. The primary ways we are connecting participants to housing opportunities is by hosting and supporting various Oneby1 system components and by implementing Rapid Rehousing (RRH) projects.

As a Low-Barrier, Housing-Focused Shelter, we serve chronically homeless (CH) and long-term homeless. In 2018, over 100 CH were served in our Shelter services. As an Access Point, more than 70 CH have been served to date. With HUD-CoC RRH funds from 2016-2017, we served 57 literally homeless adults, at least 6 of which were CH, and from 2016-2017, we served 50 literally homeless, at least 10 of which were CH. Additionally, with current HUD-CoC RRH funds that began in December of 2018, we have served 36 literally homeless adults, 5 of which are CH. With our most recent HUD ESG-RRH funds, we served 28 literally homeless, 17 of which are CH. The HOT Beds, designed to invite long-term homeless and CH to access housing-focused services, in the past year have served: City HOT Beds, 279 literally homeless, 44 of which are CH; County HOT Beds, 285 literally homeless, 44 of which are CH; and HOT Bridge Beds, 80 literally homeless, 24 of which are CH. Our proposed PSH Project, *PSH Pivot 2019*, will dedicate 100% of the beds to CH, and undoubtedly high acuity. In our recent RRH Projects, at least 43% were high acuity and the average score of all participants was more than 8.

Oneby1 and Shelter/Bridge Housing to Rapid Rehousing

We work within the Oneby1 CES to accept participants as referred by the CoC per the by-name prioritized list. We accept referrals through CSIS, with a focus on clients identified as high acuity, and thus clients who often have more barriers. We participate in Case Conferencing at Suncoast Partnership to End Homelessness (SPEH) weekly and have been at the table since inception. We coordinate to ensure effective, person-centered services. We participate with service providers, funders, consumers and other stakeholders in Oneby1, functioning as an Access Point and taking referrals for RRH through the CoC Prioritization process. We provide services aimed at helping

people access mainstream services, exit homelessness as quickly as possible and stabilize in housing. We rely upon prioritization, VI-SPDAT, and income verification (as a base line, not for eligibility) to determine that clients served are low and moderate income. We are responsible for the most coordinated intakes on record, more than 1,158, almost half for the entire CoC.

Our Case Managers and Housing Coordinator work together to create paths to housing for people to go from sheltered to housed through person-centered housing plans. Barriers are identified and overcome by working with landlords who accept clients with evictions or criminal backgrounds and by vetting eligibility for various funding sources. Case Managers assist clients in planning a budget and increasing income level. Motivational interviewing techniques help clients identify goals and possible steps towards self-resolution. Case Managers work on a crisis plan and support map with each client. The Case Manager links clients to resources such as furniture, medical needs, utility assistance and food. Overall, the housing plan captures major components of the person-centered plan such as barriers, needs and wants.

We provide housing subsidies by processing checks and mailing them to landlords. For landlords that require deposits or hand delivered checks, exceptions are made to keep landlord relations positive. Our Housing Coordinator works across systems and departments to connect with landlords and ensure a smooth process. Our Housing Coordinator conducts HUD Housing Quality Standards (HQS) inspections as well as ensures federal compliance for rent calculations. Case Managers and the Housing Coordinator work together to rapidly move participants into housing and offer a light touch. Weekly follow ups are conducted to assess current needs and resources, adjusting as needed to offer the appropriate level of support to maintain housing stability. Since we are serving high acuity clients, more intensive case management approaches are often necessary. Given the intense nature of support needed, we are concerned that the long-term stability of the participants, and therefore the RRH outcomes of the CoC, are at risk.

Pivot towards Permanent Supportive Capacity

Building upon the strength of our participation in Oneby1 CES and lessons learned through Rapidly Rehousing high acuity clients, we propose a new PSH Project, *PSH Pivot 2019*. This Project would serve at least 15 chronically homeless participants offering a full package of supports and services. This package includes rental assistance for at least 15 participants for 12 months during the first year of the Project and at least 19 participants during the second year of the Project (if awarded). *PSH Pivot 2019* will provide housing opportunities for participants to live independently in their own apartment or efficiency and will not include shared living situations. PSH combines a housing subsidy and supportive services and is a proven solution to chronic homelessness. According to the National Alliance on Ending Homelessness, PSH has been shown to not only help people experiencing chronic homelessness achieve long-term housing stability, but also improve their health and well-being. Consistent with low barrier practices already adopted in our shelter environment, there will be no programmatic requirements and services will be voluntary. We will engage clients and offer services using evidence-based practices such as trauma-informed care, progressive engagement, and harm reduction.

Trauma-informed care is an approach to engage people who have a history of trauma in a way that acknowledges their experiences and by extension traumatic symptoms which manifest both cognitively and behaviorally. When working with the chronically homeless, it is paramount that programs understand and adjust services to account for the high number of people with severe trauma both in their present and past. Understanding that problems/symptoms are inter-related and possible responses to or coping mechanisms to deal with the same is vitally important to move

forward. Our program attempts to foster a safe environment for our clients as well as involve them directly in the service planning. We are working to strengthen staff training and a culture of awareness to help ensure all clients are approached with trauma-informed care.

A progressive engagement approach is employed by our Case Managers, which means they look to provide the least amount of assistance necessary for helping the participant achieve success. Some people experiencing homelessness need less support than others. This support can be in the form of financial or wraparound supports. Some people may stabilize and become self-sufficient with minimal supports. Others may need intense supports. For those who need more supports, more supports are provided. This way, resources are best invested in line with approaches that are goal oriented. Through harm reduction strategies we recognize that complete abstinence from substance use or other addictive behaviors may neither be a realistic nor desired goal for some clients. The team accepts the behavior as a fact which allows for the goal of reducing potential harm to be explored and acted upon. Clients can be encouraged to learn about options if they would like help, but it is not a requirement for housing. Only when client behavior begins to affect a client's housing stability (such as causing behavior that can lead to a lease violation), does the CM alert the client to identify behaviors that may reduce the impact of risks.

Increasing Income and Housing Stability

Overall, there are two main ways we work with clients to increase income. These are employment and Social Security Benefits. Specific employment planning includes partnering with CareerSource Suncoast and Goodwill Manasota. As we refer clients to these services, clients are asked to sign a release of information so Case Managers can communicate with these partnering agencies towards collaborative support and progress. We have found this piece to be vital in that the CM is more informed as to where clients are in the process and are able to assist when challenges arise. Often clients need a phone to assist with obtaining and maintaining employment and we are able to connect them with our partner at Assurance Wireless to help get a SafeLink phone. SafeLink Wireless is a Tracfone carrier associated with the Lifeline assistance program. The government-funded program offers free and discounted services to those who qualify. When appropriate, we refer clients to Florida Vocational Rehabilitation, a federal-state program whose mission is to help people with disabilities find and maintain employment and enhance their independence. We further assist by helping the client to locate possible employment, providing transportation to Job Fairs, helping complete job applications, helping create or update resumes, providing clothing for interviews and work once obtained, and providing job lists.

We coordinate connections to mainstream benefits and other social services as part of the client-centered plan. Case Managers help assess benefits for which the clients will be eligible and help clients connect. We have an on-site partnership with WellCare Health Plans, a government-sponsored managed care service, including for those who have complex medical needs, primarily through Medicare and Medicaid. For those who qualify for Florida Medicaid, the WellCare company, Staywell, provides health care and long-term care services. We work with clients to connect with ACCESS Florida to vet their eligibility for Food Assistance benefits (Food Stamps). Another critical piece is the SOAR Program. SOAR stands for SSI/SSDI Outreach, Access, and Recovery. SOAR is a national program designed to increase access to the disability income benefit programs administered by the Social Security Administration (SSA) for those experiencing homelessness and have a serious mental illness, medical impairment, and/or a co-occurring substance use disorder. We have a full-time, Certified SOAR Case Worker on-site who works with clients through the application process.

Strategies to Achieve Performance Measures

By proposing this Project we have the opportunity to implement pointed strategies to pivot from a RRH response to a PSH level of service orientation, which in itself should enable us to better arrive at desired outcomes. Strategies that will reduce the number of first time homeless entering the system include the use of Outreach and Diversion services, progressive engagement, and continued collaboration both internally and with external partners. We continually help reduce the number of first time homeless through robust Homeless Prevention resources. Crisis prevention for individuals and families through emergency rent assistance or connections to funds such as Season of Sharing help keep people housed through an emergency instead of falling into homelessness. Strategies to improve permanent housing (PH) placement and retention include PH placements through this proposed PSH Project and having the appropriate housing intervention and level of service needed available. This Project would improve placement and retention since every participant will have their own rental unit which will foster independence. We can improve PH retention by pivoting to an intensive Supportive Services mentality and implementation for our high acuity clients in both our existing RRH projects and this proposed PSH Project. We can also improve retention by increasing resources for helping support Landlord relations, such as through a Landlord Mitigation fund.

Reducing the length of time individuals and families remain homeless is connected to Diversion and Prevention strategies as well as housing interventions. Through Diversion, a creative solution may be discovered or through Prevention style emergency assistance, a family or individual may be able to stabilize. Rapid Rehousing is intended to do just this; reduce the length of time homeless by housing people as quickly as possible. Strategies to reduce returns to homeless are consistent with those to improve permanent housing placements and retention in comparing what we have been doing with RRH attempts and what we need to do through a PSH approach. Namely, participants should be placed in the appropriate housing intervention based on acuity. Best practice dictates that participants should have their own place to live. The Housing First approach entails providing housing first and then offering services. If we exercise a PSH orientation with our RRH and PSH Projects, we will see less returns to homelessness.

We are challenged in relation to strategies to demonstrate an increase in income from employment. As described thoroughly above, we consistently connect our clients to opportunities for increased income and benefits. In some cases, clients have some form of income through employment, and may change jobs or go back to an old job, and the income is essentially the same. It is also challenging in working with high acuity individuals, possibly with co-occurring disorders, who may be chronically homeless. We say services are voluntary. Pressuring to obtain more gainful employment is tricky when working between a Housing First approach and a RRH housing intervention that expects sustainability planning much sooner than a PSH housing intervention.

There are also Move On Strategies to consider. United States Interagency Council on Homelessness (USICH) talks about Move On strategies for people who have obtained stability, potentially after a few years in PSH. The idea is to keep the continuum of services and housing interventions fluid and moving. Communities with diverse housing intervention portfolios are able to strike a balance in timing client needs. One client may choose to leave PSH after several years, or move through a Housing Choice Voucher, which opens a space for someone else.

Collaboration

As mentioned throughout this Proposal, we collaborate with many partners. Everyday there are numerous organizations present in the hub of the shelter offering access to resources and services to clients. For the PSH project represented by this Proposal, we will collaborate with Jewish Family

and Children's Services (JFCS). JFCS will provide wraparound mental health services to participants who have been housed. This is documented by a draft MOU Agreement in which the content has been vetted by both agencies. We will also collaborate with WellCare Health Plans, who connects our clients to health insurance resources. We are working with WellCare to formalize our successful collaboration as documented by a partially executed MOU Agreement. We also plan to collaborate with Florida's Recovery Oriented System of Care (ROSC) for peer supports.

PART C: BUDGET NARRATIVE & BUDGET

We are requesting \$371,714 in funds for Permanent Supportive Housing (PSH). This includes \$148,680 in rental assistance for at least 15 participants for 12 months; \$189,242 in supportive services including a Case Manager, move-in costs, housing services, peer supports/life skills, mental health services, outpatient health services, transportation, utility deposits, and one-time mobile technology costs. Match funding in the amount of \$92,794 will be in the form of TSA funds for staff. Other funding within our agency that supports this program include TSA funds for administration, TSA funds for operations, FEMA Emergency Shelter funds, funds originating from Homeless Outreach Team (HOT) Beds partnerships, Street Teams program (on-site option for self-resolvers), Centerstone (on-site connection with behavioral healthcare), foundation funds, private funds, and prevention funds. The Staffing Plan for *PSH Pivot 2019*, in line with the QLife Shelter is as follows: Program Director (1), 33%; QLife Shelter Program Manager (1), 100%; CMS Program Coordinators (4), 100%; Case Managers (3); 100%; Housing Coordinator (1), 100%; Case Workers (3), 100%; Lead Resident Monitors (2), 100%; Housing Monitors (10), 100%; Outreach/Diversion/Prevention Coordinator (1), 100%. 26 Total. Staff to Client Ratio: 1:5.

Cost Effectiveness, Sustainability, and Scalability

PSH is cost effective by nature. There is no shortage of in-depth analyses demonstrating not only the cost effectiveness of PSH but also the invaluable human benefit. Substantial cost savings are typically observed in costs such as emergency services, hospitalization and ambulance services. According to Corporation for Supportive Housing (CSH), six different studies concluded PSH results in a general decrease of the use of community services. As stated by CSH, "Supportive Housing saves significant money to many public institutions while using no more and sometimes fewer resources in return for better results." (<https://www.csh.org/supportive-housing-101/>). Findings include an annualized savings of \$16,282 per unit in New York and in Portland the annual savings per person was \$24,876.

Greg Shinn came to our community in 2015 and conducted an economic impact study: *The Relative Cost of Homelessness in the Suncoast Region of Florida And the Economic Impact of Providing Sustainable Housing Solutions*. Using local data, Shinn calculated the average annual cost of chronic homelessness to be at minimum \$15,761 per person per year in Sarasota. Sarasota County Health and Human Services conducted a local analysis of data from 2015 to 2016, *Behavioral Health Acute Care System Data Review*. Findings include that 298 identified as "high need" and "high utilization" (HNHU) of crisis facilities. Of the total HNHU, 65% were homeless and for the 41 highest utilizers, 86% experienced homeless. A conservative estimate of community cost associated with HNHU is \$1,465,540 for just six months.

This Project would be sustainable through Renewals through HUD and by the partnership and resources provided by The Salvation Army. This new Project is not scalable.

CoC-RFP Budget/QLife Shelter Budget

The Salvation Army/QLife Shelter		2019-2020
Revenue		Budget
Challenge - Bridge Beds		32,100
City-Street Teams		80,000
City-HOT		319,375
Centerstone		171,625
County-HOT		319,375
CoC-RFP for PSH		371,174
ESG-RRH		14,080
ESG Shelter Operations		45,000
HUD-CoC Everyone's Home 2017 RRH		221,919
HUD-CoC Everyone's Home 2017 RRH		85,113
FEMA - EFSP		61,570
Contributions - General		90,000
Program Service Fees		120,000
Investment Income		872,446
Other(GIK)		20,000
Total Revenue		2,823,777
Expenses		
Salaries/Wages		885,223
Employee Benefits		277,602
Payroll Taxes		62,748
Professional Fees/Contracts		2,100
General/Office Supplies and Postage		67,022
Telephone/Fax		12,200
Occupancy		168,160
Insurance		58,324
Equipment		219,440
Printing and Publications		1,500
Local Travel		8,170
Vehicle/Client Transportation		42,400
Conferences/Meetings/Trainings		7,500
Utilities		294,000
Specific Assistance to Individuals		323,194
Statewide and Support		394,194
Total Expense		2,823,777
SURPLUS OR (DEFICIT)		0

AGENCY FISCAL ASSESSMENT

The Chief Financial Officer or someone of comparable responsibility should complete this assessment, and the agency's Board Chair or Board Treasurer should certify the information. Please answer each question by checking Yes or No. Each section has space to add additional comments and explain any No responses. This information will be used to determine the agency's level of sophistication with regard to financial management.

A. BUDGETS

Yes or No

- Yes 1. Are formal budgets adopted by the governing board and recorded in the minutes?
- Yes 2. Are the budgets prepared in sufficient detail to provide a meaningful tool with which to identify and monitor subsequent performance?
- Yes 3. Are budgets routinely compared to actual revenues and expenditures and significant differences investigated?
- Yes 4. Are the results of the budget comparison (budget to actual) communicated to the Board of Directors on a regular basis?

Additional comments/explain any NO responses:

B. CASH

Yes or No

- Yes 1. Does the governing body authorize all bank accounts and check signatories?
- Yes 2. Are cash receipts entered in books of original entry by persons independent of the collection and deposit preparation functions?
- Yes 3. Are all disbursements, except petty cash disbursements, made by check?
4. Check Preparation:
- Yes a. Are checks prepared by specific employees who are independent of voucher/invoice approval?
- Yes b. Is there a clearly defined approval process and does all supporting documentation accompany checks presented for a signature?

- Yes c. Are all supporting documents properly canceled at time of signature to prevent duplicate payment?
- Yes d. Are all checks pre-numbered, blank stock controlled, used in numerical sequence, accounted for in numerical sequence, and reconciled to the check register?
- Yes e. Are checks required to be countersigned, or have dollar limits been established for single signature checks?
- Yes f. Are authorized check signers and the custody of checks after signature, independent of all payable, disbursement, cash receiving and general ledger functions?
- Yes 5. If check signing machines are used, are signature plates adequately safeguarded, used in the presence of the custodian, and controlled by using numbering devices?
- Yes 6. Bank Account and Statements
 - Yes a. Does a responsible individual (e.g., the Executive Director, CEO, etc.) receive the bank statements unopened from the banks?
 - Yes b. Are bank accounts reconciled within a timely specified period after the end of each month?
 - Yes c. Are reconciliations made by someone other than persons who participate in the receipt disbursement of cash?
 - Yes d. Are reconciliations reviewed by a responsible official?

Additional comments/explain any NO responses:

C. REVENUES AND EXPENDITURES

Yes or No

- Yes 1. Has an individual(s) been designated the responsible party for assuring compliance with the terms and conditions of all grants, restricted contributions, endowments, etc., received by the agency?
- Yes 2. Does an adequate system exist to allow for the allocation of costs applicable to various programs, funding sources, and other functions?
- Yes 3. Are purchases made in accordance with established requirements of the governing board and of funding sources?

Yes 5. Do purchase orders require independent approval that the expenditure is within budget of funding source restrictions?

Yes 6. Do adequate procedures exist to ensure that goods for which payment is made have been received, and that the goods are verified by someone other than the individual approving payment?

Additional comments/explain any NO responses:

D. PAYROLL

Yes No

Yes 1. Do employees complete and sign attendance and time records?

Yes 2. Are persons preparing the payroll independent of other payroll duties (e.g., timekeeping, distribution of checks, etc.), and is their access to other payroll data or cash restricted?

Yes 3. Is the payroll subject to final approval by a responsible agency official before payment is made?

No 4. Are payroll checks drawn on a separate clearing account and is the account reconciled by someone independent of all payroll transaction processing activities?

Yes 5. Are employee time records maintained in sufficient detail, and does an adequate system exist to allow for allocations of payroll costs to the proper accounts, programs, funding sources, and other functions?

Additional comments/explain any NO responses:

Payroll checks are drawn on operations bank account which includes accounts payable/accounts receivable.

E. FINANCIAL REPORTING

Yes No

Yes 1. Are the final review and approval of financial reports segregated from the responsibility for preparation of the reports?

Yes 2. Are the principal accounting, treasury, and custody functions segregated?

Yes 3. Are the necessary record keeping procedures in place to ensure that financial reports are accurate and filed in a timely manner?

Yes 4. Does the accounting system provide for accumulating and recording expenditures by award or grant and by cost category as shown in the budget?

5. Audits

- Yes 4. Does the accounting system provide for accumulating and recording expenditures by award or grant and by cost category as shown in the budget?
5. Audits
- Yes a. Has the agency been independently audited during the past two years?
- Yes b. If so, have reports been reviewed?
- Yes c. Was a Management Letter issued?
- Yes 6. Do procedures exist to monitor compliance with financial reporting requirements, use of funds and other conditions in accordance with grant terms, and timely billing of amounts due under grants?
- Yes 7. Is grant activity accounted for so that it can be separated from the accounting for activities funded from all other sources?
- Yes 8. Are reconciliations of the grant financial reports with supporting accounting records prepared, reviewed, and approved by a responsible agency official before filing?
- Yes 9. Are procedures in place to identify and preclude charging expenditures to programs which are disallowed by the grant?
- Yes 10. If the agency provides social services under governmental programs, does a responsible member of management review and approve the provision of services to ensure that recipients are eligible under specific program requirements?

Additional comments/explain any NO responses:

Completed by: Cynthia Carter
 Title: Finance Director
 Signature: Cynthia Carter
 Date: 8/12/2019

Certified by: [Signature]
 Title: Board Co-chair
 Signature: [Signature]
 Date: 8/13/2019

Memorandums of Understanding (MOUs) and Agreements—Existing

Re: Any Memorandums of Understanding or other formal agreements outlining relationships for the express purpose of collaboration with other organizations for this proposal

The following MOUs or Agreements are attached:

- Access Point Agreement with Suncoast Partnership to End Homelessness (SPEH)
- Oneby1 Coordinated Entry Partner Agreement with Suncoast Partnership to End Homelessness (SPEH)
- Collaboration Agreement with WellCare Health Plans, Inc. (*Partially Executed*)



Access Point - MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding, hereinafter referred to as "MOU," shall stand as evidence that The Salvation Army, a GA Corp., for The Salvation Army Sarasota Area Command, hereinafter referred to as AGENCY, agrees to work with the Suncoast Partnership to End Homelessness (Suncoast Partnership), which serves as the FL 500-Sarasota/Manatee Continuum of Care (CoC) lead Agency, as a designated Access Point in the Oneby1 Coordinated Entry System. To this end, each entity, agency and/or organization agrees to participate in an exchange of services and coordinating efforts to improve effective access to services in support of housing stability.

RESPONSIBILITIES

The CoC is required to establish and operate coordinated entry system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services.

AGENCY will be the Access Point ensuring professionally competent and responsive practices, which follow the attached Principles, Guidelines and Specific Requirements for the Oneby1 Access Point.

As the Lead Agency, the Suncoast Partnership will implement the coordinated entry system, respond to AGENCY concerns, advocate for system improvement, and ensure the Oneby1 Coordinated Entry System for the Sarasota/Manatee CoC remains efficient and effective, distributing updates and communication to AGENCY in a timely fashion or when the need arises.

TERM

This MOU is effective as of November 1, 2017, even if any signatures are made after that date. The MOU shall continue until either party provides 60 days' notice of intent to discontinue.

A printed copy of this MOU, the Principles, Guidelines and Specific Requirements and the Coordinated Entry System Manual will be provided to AGENCY upon execution of this agreement.

AUTHORIZED SIGNATURES

AGENCY: The Salvation Army, a GA Corp., for The Salvation Army Sarasota Area Command

(Print) Name: WARD MATTHEWS

Title: Secretary

Signature: [Signature] Date: OCT 27 2017

Suncoast Partnership to End Homelessness:

(Print) Name: Edward DeMarco

Title: CEO

Signature: [Signature] Date: 11/6/17



Principles, Guidelines and Specific Requirements for the Oneby1 Access Point

The Oneby1 Coordinated Entry Access Point will be visible, accessible, client focused, inclusive and supportive with the purpose of gathering the information necessary for a referral to a program to find a home for those who are homeless. The following is an outline of the requirements to be an Access Point in the Oneby1 Coordinated Entry System in Sarasota and Manatee Counties:

Visible – There must a sign that clearly indicates the organization is an Access Point. This sign will include available hours. The sign will be provided by the Suncoast Partnership with information made available from the Access Point organization.

Available – The Access Point must be available for walk-ins as well as appointments.

Accessible – The Access Point should not have any physical barriers that would prevent those who are disabled from taking advantage of the entry process. A procedure must also be in place to accommodate those that are deaf and hard of hearing or those that may have language barriers.

Client Focused - The person who is seeking assistance is to be respected, their choices valued and their information secured.

Uniform – Each Access Point will be engaged in much the same process. A uniform intake set of questions, a vulnerability and service prioritization tool, a referral for assistance, and a safety plan.

Complete, Correct and Current – The Access Point will work to assure that all information that is needed regarding a client is entered into HMIS. That this information is correct information as stated by the client, that inconsistencies that are a part of the client's record are reconciled and that the information is up to date, specifically information regarding housing status and income.

Inclusive – Although some Access Points are designed to serve specific populations, all Access Points are available to any person homeless or at risk. As a referral agent, the Access Point is able to put the client in contact with any number of resources, not just those within



their organization. In addition, no group or individual is to be excluded from entry unless there is or has been a threat or occurrence of violence.

Low or No Barrier – Everyone is encouraged to find a place they can call home. No rules should be put in place to exclude a person or group of persons from gaining entry and a referral to a project that might be best able to help.

In addition to the general requirements to become an Access Point, the **Oneby1** process as outlined in the **Oneby1 Coordinated Entry System Policies and Procedures** manual must be followed. Accordingly, the designated and trained Intake staff at the Access point will:

- Determine whether the client is homeless or at risk of becoming homeless and respond appropriately.
- Once it is determined they are homeless and should be prioritized for assistance, the **Oneby1** system ROI should be reviewed with the client and signed. A photo of the client should also be taken if the client is in agreement.
- The **Oneby1** intake including the VI-SPDAT, set-up in the HMIS system, should be completed.
- Options provided by the Eligibility Module should be reviewed with the client so they can make an informed decision as to which one is best for them.
- Appropriate referrals, based on client choice, should be made through the HMIS system.
- During the intake interview, the Access Point intake person should be determining what immediate needs will need to be addressed.
- The HMIS referral to a housing provider should be followed up with a phone call whenever possible in order to provide a “warm hand-off”.
- No person should be leaving the Access Point without a safety plan in place.
- The ROI and photo should be uploaded into HMIS by COB on the day of the intake.

Since “Access” is a key piece of the **Oneby1** system, the Access Point must notify the Director of Operations and Grants at the Suncoast Partnership immediately if there are any changes in location or available hours at their Access Point.

Although the guiding principles will not change, some operating procedures may as we implement, monitor, and evaluate our **Oneby1 Coordinated Entry System**. As this happens, Access Points will receive written notification electronically along with an updated version of the **Oneby1 Coordinated Entry Policies and Procedures** manual, should any changes be made. Any official changes made by the Suncoast Partnership, to the **Oneby1 Coordinated Entry System Policies and Procedures** manual will supersede the process outlined in this agreement.





THE SALVATION ARMY POLICY STATEMENT ON RELATIONSHIPS WITH OTHER GROUPS AND ORGANIZATIONS

The Salvation Army in the United States works cooperatively with many groups - governmental, social service, civic, religious, business, humanitarian, educational, health, character building, and other groups - in the pursuit of its mission to preach the Christian Gospel and meet human need.

Any agency, governmental or private, which enters into a contractual or cooperative relationship with The Salvation Army should be advised that:

1. The Salvation Army is an international religious and charitable movement, organized and operated on a quasi-military pattern, and is a branch of the Christian church.
2. All programs of The Salvation Army are administered by Salvation Army Officers, who are ministers of the Gospel.
3. The motivation of the organization is love of God and a practical concern for the needs of humanity.
4. The Salvation Army's provision of food, shelter, health services, counseling, and other physical, social, emotional, psychological and spiritual aid, is given on the basis of need, available resources and established program policies.

Organizations contracting and/or cooperating with The Salvation Army may be assured that because The Salvation Army is rooted in Christian compassion and is governed by Judeo-Christian ethics, The Salvation Army will strictly observe all provisions of its contracts and agreements.

Commissioners Conference:
May-96



Coordinated Entry Partner Agreement

The purpose of this Partner Agreement is to communicate guidelines for agency participation in the Coordinated Entry System for the Manatee/Sarasota Continuum of Care (FL-500) from the Suncoast Partnership to End Homelessness/Continuum of Care, herein referred to as Oneby1. Oneby1 is a collaborative initiative designed to create a more effective and efficient homeless response system, as well as assure compliance with HUD mandates. By signing this Agreement, participating organizations formally acknowledge the roles and responsibilities outlined in this Agreement.

By signing to be Oneby1 Coordinated Entry Partner Agreement, your agency agrees to:

- Utilize the Oneby1 process and tools for each person or family who is homeless or at risk.
- Provide your programs and projects' preferences and eligibility criteria, in writing, to Suncoast Partnership.
- For program entry into housing projects (RRH and PSH), accept referrals from the Suncoast Partnership considered to meet the eligibility criteria and program preferences of your agency's project that are selected by the Suncoast Partnership Oneby1 system from the CoC "by name" list. For other program entry and client services accept referrals from organizations within the CoC who appear to meet the eligibility criteria and program preferences of your agency's project.
- Participate in the annual evaluation of Oneby1.
- Participate in all mandatory trainings established by the CoC Leadership Council and/or Suncoast Partnership, including at least three training workshops provided by the Florida Housing Coalition through a contract with the Suncoast Partnership to End Homelessness.
- Attempt to reduce barriers to housing access.
- Enter information regarding those who receive services, shelter or program participation in a complete and comprehensive manner as required by the CoC and HMIS.
- Agree to comply with federal, state, and local HMIS data privacy, data rights, and data quality requirements as applicable.
- Assure data is accurate and up-to-date, responding to any data quality, completeness or privacy concerns addressed by The Suncoast Partnership or by the Leadership Council of the CoC.

The Partner agency maintains the right to:

- Determine the eligibility for all persons or families serviced, based on the criteria and requirements set forth by funders, grants or contracts and provided in writing to the Suncoast Partnership.
- Provide input as to the development, implementation, and evaluation of Oneby1.
- Receive support and training from the Suncoast Partnership in the implementation and maintenance of the HMIS and Oneby1 systems.
- Access CoC aggregate data collected through Oneby1 (except where data would affect the safety of participants).

Last Document Revision – 9/7/2018


The Suncoast Partnership maintains the right to:

- Implement the Oneby1 system throughout the Continuum of Care and assure that:
 - HMIS data including Housing Plans, and client information will be shared,
 - Eligibility criteria and program preferences will be coordinated,
 - Prioritization tools are utilized,
 - Referrals will be coordinated,
 - Planning and management decisions will be made using correct and complete data where possible.
- Coordinate, integrate, and leverage resources to maximize impact of services for individuals who are experiencing homelessness.
- Identify Access Points throughout the Continuum of Care as the navigation centers for those who are homeless.
- Develop an affirmative marketing plan that educates the community and stakeholders about the Oneby1 coordinated entry system, including, but not limited to, how it can be accessed.
- Provide marketing materials to providers to ensure consistent communication about the Oneby1 Coordinated Entry.
- Maintain and implement written policies and procedures on Oneby1 coordinated entry;
- Provide an annual training to all staff dedicated to Oneby1.
- Oversee implementation of case conferencing.
- Ensure that the client prioritization process includes a need acuity tool that is publicly available, well-crafted, comprehensive, and that prioritization of specific populations from among those who are homeless as locally defined.

IN WITNESS WHEREOF, the undersigned, duly authorized representatives of the respective Partner Agency, have signed this Partnership Agreement:

Please print clearly and sign and date in ink.

Scan and email to Edward DeMarco, ed@suncoastpartnership.org.

Agency or Organization: The Salvation Army, A Georgia Corporation for The Salvation Army Sarasota Area Command	
Authorized Representative: 	Title: Treasurer
Email: <small>THE SALVATION ARMY, A GEORGIA CORPORATION 1124 NORTH EAST AVENUE, N.E. ATLANTA, GEORGIA 30329</small>	Phone: (404) 728-1300
Mailing Address: ATLANTA, GEORGIA 30329	

JAMES K. SEILER

Authorized Representative Signature

DEC 05 2018

Date

Last Document Revision – 9/7/2018



THE SALVATION ARMY POLICY STATEMENT ON RELATIONSHIPS WITH OTHER GROUPS AND ORGANIZATIONS

The Salvation Army in the United States works cooperatively with many groups - governmental, social service, civic, religious, business, humanitarian, educational, health, character building, and other groups - in the pursuit of its mission to preach the Christian Gospel and meet human need.

Any agency, governmental or private, which enters into a contractual or cooperative relationship with The Salvation Army should be advised that:

1. The Salvation Army is an international religious and charitable movement, organized and operated on a quasi-military pattern, and is a branch of the Christian church.
2. All programs of The Salvation Army are administered by Salvation Army Officers, who are ministers of the Gospel.
3. The motivation of the organization is love of God and a practical concern for the needs of humanity.
4. The Salvation Army's provision of food, shelter, health services, counseling, and other physical, social, emotional, psychological and spiritual aid, is given on the basis of need, available resources and established program policies.

Organizations contracting and/or cooperating with The Salvation Army may be assured that because The Salvation Army is rooted in Christian compassion and is governed by Judeo-Christian ethics, The Salvation Army will strictly observe all provisions of its contracts and agreements.

Commissioners Conference:
May-96

COLLABORATION AGREEMENT

between

The Salvation Army, a GA Corporation, for The Salvation Army Sarasota County Area Command (TSA)
and
WellCare Health Plans, Inc. (WELLCARE)

Facility Use at Location:

The Salvation Army
Center of Hope
1400 10th Street
Sarasota, FL 34236

Purpose of Services: This AGREEMENT sets forth the terms between TSA and WELLCARE, the PARTIES, for collaboration in the following activity: on-site partnership to connect interested clients to health care opportunities. WellCare Health Plans is a government-sponsored managed care service, including for those who have complex medical needs, primarily through Medicare and Medicaid. For those who qualify for Florida Medicaid, the WellCare company, Staywell, provides health care and long-term care services This AGREEMENT is to express an understanding between PARTIES who seek to work together for the benefit of the people the PARTIES serve. Employees of WELLCARE conduct work at the TSA facility location for purposes stated in this AGREEMENT with WELLCARE.

TSA Agrees to:

- Collaborate with WELLCARE and provide access to clients and facilities for the purposes of this Collaboration
- Provide facility space and basic utilities associated with office space needed to perform duties (electric, heating/cooling, access to water utilities).

WELLCARE Agrees to:

- Collaborate with TSA and provide connections to healthcare to interested clients
- Be solely responsible for employment and supervision of its employees
- Be solely responsible for salary and benefits of its employees
- Provide office furniture, supplies and technology needed to perform duties (computers, internet service, telephones, printers, paper, ink, and all other equipment and supplies)

Specific Dates and Times of Usage: WELLCARE employees will typically work the following schedule and therefore have access to The Salvation Army's Center of Hope for the following times of usage: Tuesday (11:00 AM – 5:00 PM), Wednesday (10:00 AM – 1:00 PM), and Thursday (11:00 AM – 3:00 PM).

Mutual Indemnity: Each PARTY shall hold harmless, and indemnify the other PARTY and its directors, officers, agents and employees against any and all loss, liability, damage, or expense. However, neither PARTY shall be indemnified hereunder for any loss, liability, damage, or expense resulting from its sole negligence or willful misconduct.

HIPAA Standards and Privacy: Both providers agree to abide by the Health Insurance Portability and Accountability Act (HIPAA) Final Privacy Rule, 45 CFR Parts 164.306(a)(4) and 164.308(a), Health Information Technology for Economic and Clinical Health Act, any applicable federal or state laws pertaining to confidentiality of client records.

Property: While the premises are used by WELLCARE employees, WELLCARE will be responsible for any damage to the premises, its furniture, fixtures or other accoutrement caused by the WELLCARE employees. WELLCARE employees are not to move, rearrange and add additional furniture or property in any way, shape or form without express permission from the Director of Program Services.

Responsibility for Supplies: In addition to providing work-related technology, WELLCARE is responsible for the provision of all supplies needed WELLCARE employees to perform duties.

Storage Space: In addition to providing work-related technology and supplies, WELLCARE is responsible for the provision of storage space needed for WELLCARE employees to perform duties.

Relationship: Both PARTIES understand this AGREEMENT does not create a landlord/tenant relationship.

Insurance Responsibilities: The Contracting Party will provide evidence of insurance including General Liability, Workers' Compensation and other insurance applicable to services provided under this agreement. Such insurance coverage may be either in the form of self-insurance and primary and/or excess coverage from responsible companies duly authorized to do business in the State of Florida. A copy of the Certificate of Insurance (COI) is attached to this AGREEMENT.

General Liability policies required by this agreement shall name The Salvation Army, A Georgia Corporation, 1424 Northeast Expressway, Atlanta, GA 30329-2088 as the Certificate Holder.

Funding: There is no accessed fee for usage of space. This AGREEMENT is not a commitment of funds.

Termination: This AGREEMENT is at-will and may be terminated at any time by either PARTY with written notice. Otherwise, this Agreement will last one (1) year from the date of execution.

Duration: The effective terms of this AGREEMENT are June 1, 2019 to January 31, 2021.

Authorized Signatures

WellCare Health Plans, Inc.

The Salvation Army, a GA Corporation, for
The Salvation Army Sarasota County Area Command

Nina Palermo
Print Name

Print Name

District Manager
Title

Title

8/20/2019
Date

Date

A copy of The Salvation Army Policy Statement on Relationships with Other Groups and Organizations must be attached to each copy of all contracts (Minute PL029 - "Relationships Between The Salvation Army and Other Groups and Organizations" - Guidelines, §IV--Procedures for Processing Contracts).

List of Agencies—Proposed Collaborations

Re: List of Agencies that will be partners or subcontractors to assist in carrying out the proposed program description.

Partner agencies who have expressed interest in collaborating on projects or services that could result from this Proposal are the following:

- Jewish Family and Children’s Service of the Suncoast (JFCS)

Please find attached:

- Draft MOU Agreement collaboration with JFCS, to provide wraparound mental health services and supports

PARTNER AGREEMENT

between

The Salvation Army, a GA Corporation, for The Salvation Army Sarasota County Area Command (TSA)

and

Jewish Family and Children's Service of the Suncoast, Inc. (JFCS)

As part of the HUD-CoC Program

Purpose: This AGREEMENT sets forth the terms between TSA and JFCS, the PARTIES, for collaboration in the following activity: Wraparound services for participants of HUD-CoC Permanent Supportive Housing (PSH) project through The Salvation Army. This AGREEMENT is to express an understanding between PARTIES who seek to work together for the benefit of the people the PARTIES serve. **Both PARTIES understand that clients accepting services are voluntary and are not a requirement for housing.**

TSA Agrees to:

- Refer Permanent Supportive Housing (PSH) clients to JFCS.
- Collaborate with JFCS and coordinate client cases
- Per the supportive services model, regularly inform clients of the JFCS services available (even when client declines)
- Make available other resources and connections to help facilitate this collaboration per the client's person-centered plan

JFCS Agrees to:

- Provide a licensed clinical therapist to make home/community visits two (2) times per week to provide accessible, therapeutic treatment
- Ensure the JFCS clinician is trained in treating serious, complex mental health disorders and the associated social, emotional, and physical challenges.
- Develop an individualized, evidenced-based treatment plan addressing both mental health and concurrent substance abuse disorders. Referrals to psychiatric services may be given as appropriate.

Entities: JFCS and TSA are independent entities. Employees of JFCS are not employees of TSA and employees of TSA are not employees of JFCS.

Payment Terms: All invoices for services rendered will be submitted by JFCS on a monthly basis to TSA. TSA will remit payment to JFCS within thirty (30) days from receipt. Each invoice shall include the amount of services rendered during the billing period and the fee for such services. Should a dispute arise regarding an invoice, the Area Commander (or person delegated) will contact JFCS to discuss and resolve the invoice dispute prior to additional action being taken. Payments on any disputed invoices or disputes on any portions of invoices will suspend payment of the disputed portions. This suspension of payment will not be deemed a breach of contract and no penalty or damages will be issues against JFCS or TSA. Upon written satisfaction of the dispute, the unpaid amounts will be paid within thirty (30) days from the date the matter is resolved.

Notices: All notices, requests, or correspondence required under this AGREEMENT shall be in writing, and delivered by United States mail to:

JFCS of the Suncoast
Attn: Heidi Brown/CEO
2688 Fruitville Road
Sarasota, FL 34237

The Salvation Army Sarasota County Area Command
Attn: Major Charles Whiten, Area Commander
P.O. Box 2792
Sarasota, FL 34230

Either PARTY may change the address which communications are to be sent by given written notice to the other PARTY.

Mutual Indemnity: Each PARTY shall hold harmless, and indemnify the other PARTY and its directors, officers, agents and employees against any and all loss, liability, damage, or expense. However, neither PARTY shall be indemnified hereunder for any loss, liability, damage, or expense resulting from its sole negligence or willful misconduct.

Disputes: If there is a dispute between the PARTIES concerning the interpretation, performance or lack of performance of any term, condition or provision of this AGREEMENT, the PARTIES agree that they will submit the dispute to mediation with a neutral third party prior to filing a lawsuit. If the mediation does not result in a resolution of the dispute, then the PARTIES may file suit to resolve the dispute. The PARTIES agree that jurisdiction for any lawsuit filed by either PARTY to enforce or interpret any provision, term or condition of this AGREEMENT shall be brought in a court of competent jurisdiction in the State of Florida, and that venue for that suit shall be in Sarasota County, Florida.

HIPAA Standards and Privacy: Both providers agree to abide by the Health Insurance Portability and Accountability Act (HIPAA) Final Privacy Rule, 45 CFR Parts 164.306(a)(4) and 164.308(a), Health Information Technology for Economic and Clinical Health Act, any applicable federal or state laws pertaining to confidentiality of client records.

Termination: This AGREEMENT is at-will and may be terminated at any time by either PARTY with written notice. Otherwise, this Agreement will last one (1) year from the date of execution.

Duration: The effective terms of this AGREEMENT are February 1, 2020 to January 31, 2021.

Authorized Signatures

Jewish Family and Children’s Service
of the Suncoast, Inc. (JFCS)

The Salvation Army, a GA Corporation, for
The Salvation Army Sarasota County Area Command

Print Name

Print Name

Title

Title

Date

Date

A copy of The Salvation Army Policy Statement on Relationships with Other Groups and Organizations must be attached to each copy of all contracts (Minute PL029 - "Relationships Between The Salvation Army and Other Groups and Organizations" - Guidelines, §IV--Procedures for Processing Contracts).

Fiscal Management Policies

The Salvation Army's fiscal management policies are drawn from:

- 1) The Salvation Army Minute No. 007
- 2) The Salvation Army's National Uniform Accounting Policy and Procedures Manual
- 3) The Salvation Army's National Uniform Accounting Guide—Chart of Accounts and Procedures with Territorial Supplements
- 4) Financial Accounting Standards Board
- 5) Policies and Standards per TSA Minute Book
- 6) Policies in the Employee Handbook
- 7) Policies per Department: specific procedures for Cost Allocation, etc., cash handling, etc.
- 8) Policies per Program/Contractual Agreement: LIHEAP, CSBG, etc.
- 9) Record Retention Manual
- 10) Great Plains Software parameters
- 11) Payroll Manual
- 12) HR Manual
- 13) OMB Standards

Items listed above and, namely, The Salvation Army's National Uniform Accounting Policy and Procedures Manual, are too voluminous to include as an attachment to this Proposal. We have included excerpts below from The Salvation Army Minute No. 007 on Fiscal Policies and Practices. Please do not hesitate to inform us if you would like us to provide more documentation.

Minute

MINUTE NO.

007

The Salvation Army

in the

United States of America

Fiscal Policies and Practices

Mission Statement

The Salvation Army, an international movement, is an evangelical part of the universal Christian church. Its message is based on the Bible. Its ministry is motivated by the love of God. Its mission is to preach the gospel of Jesus Christ and to meet human need in His name without discrimination.

PREFACE

For more than a century The Salvation Army has followed fiscal practices that have fostered public confidence and trust in its financial stewardship as an international religious and charitable movement. These practices date back to 1865 when its founder, William Booth, engaged a public accountant to audit the accounts of the newly formed East London Christian Revival Association, which later became The Salvation Army.

Because The Salvation Army in the United States has been associated with various funding groups since the early days of its formation, it has historically elected to prepare its financial statements to meet local reporting requirements as a charitable organization. While this resulted in a variety of financial statements across the nation, the Army was able to meet the responsibility of reporting to the public on a local basis.

Publication of a guide on *Audits of Voluntary Health and Welfare Organizations* (AICPA Audit Guide) by the American Institute of Certified Public Accountants in 1974 was a significant step in promulgating generally accepted accounting principles applicable to not-for-profit organizations. This effort was supplemented by the 1974 revision of *Standards of Accounting and Reporting for Voluntary Health and Welfare Organizations (Standards)* (first published in 1964).

The Salvation Army implemented the policies and practices incorporated in those publications at all levels of its organization on a national basis for fiscal years beginning on and after July 1, 1974. A subsequent revision of the Standards in 1988 (3rd revision) resulted in minor modifications to the Army's fiscal reporting practices.

In June 1993 the Financial Accounting Standards Board (FASB) issued two Statements of Financial Accounting Standards which significantly affect not-for-profit organizations.

Statement No. 116 establishes standards of financial accounting and reporting for contributions received and contributions made. Statement No. 117 establishes standards for general purpose external financial statements provided by not-for-profit organizations and extends the application of generally accepted accounting principles (GAAP) to all not-for-profit organizations.

There are some accounting policies in the Salvation Army for which the accounting practices are not specifically addressed in FASB Statements No. 116 and No. 117, or for which slight modifications of these standards are authorized in these fiscal policies. Nevertheless, the Army recognizes that substantial compliance with current accounting standards is essential to fulfill its fiduciary obligations to the public. Therefore, these standards will form the basis for financial reports issued for fiscal years beginning after December 15, 1994.

Issued by the authority of
The Commissioners' Conference
Latest Revision February 1999

TABLE OF CONTENTS

Chapter Page

I. FINANCIAL ACCOUNTING AND REPORTING PRACTICES 1-7

SALVATION ARMY FUND ACCOUNTING 1

Operating and Board Designated Funds 1

Land, Building and Equipment Funds 2

Donor Restricted Funds 2

Life Income and Annuity Funds 2

Donor Endowment Funds 2

FUND RECORDKEEPING 3

INVESTMENTS 3

LAND AND BUILDINGS 3

EQUIPMENT RESERVES 4

REVENUE AND EXPENSE RECOGNITION 4

Timing 4

Materiality 4

REVENUE 5

Contributions 5

Pledges 5

Legacies and Bequests 5

Grants 6

Contributed Services 6

Donations of Property, Equipment and Materials 6

Donations of Materials for Resale 6

EXPENSES 7

II. GENERAL PURPOSE FINANCIAL STATEMENTS 8-11

STANDARD FINANCIAL STATEMENTS 8

DISCLOSURE OF SIGNIFICANT ACCOUNTING POLICIES 8

COMBINED FINANCIAL STATEMENTS 8

BALANCE SHEET 8

STATEMENT OF ACTIVITIES 9-10

STATEMENT OF FUNCTIONAL EXPENSES 10

STATEMENT OF CASH FLOWS 11

Issued by the Authority of

The Territorial Commander

CC: February 1999 (pp 433-439) Colonel Gary Herndon

TFC: May 2002 Chief Secretary

EFFECTIVE

Fiscal Policies and Practices in the USA

EFFECTIVE

1999-02-01T09:51:31

GENERAL

Internal Revenue Service

Department of the Treasury

P. O. Box 2508
Cincinnati, OH 45201

Date: April 4, 2003

Person to Contact:
Jocle Bradshaw #31-02167
Customer Service Representative
Toll Free Telephone Number:
8:00 a.m. to 8:30 p.m. EST
877-829-5600
Fax Number:
513-263-3758
Federal Identification Number:
58-0660607

Salvation Army
1424 Northeast Expressway N E
Atlanta, GA 30329-2018

Dear Sir or Madam:

This is in response to your request of April 4, 2003, regarding your organization's tax exempt status.

In October 1955, we issued a determination letter that recognized your organization as exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code. That letter is still in effect.

We classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Code because it is an organization described in sections 509(a)(1) and 170(b)(1)(A)(i). This classification was based on the assumption that your organization's operations would continue as stated in your application. If your sources of support, character, method of operations, or purposes have changed, please let us know so we can consider the effect of the change on your organization's exempt and foundation status.

All exempt organizations (unless specifically excluded) are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more paid each employee during a calendar year. Your organization is not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

If your organization is a church or a qualified church-controlled organization as defined in section 3121(w)(3) of the Code, it may elect to exclude wages paid to its employees (other than for services performed in an unrelated trade or business) for social security taxes. This election must be made by filing Form 8274 by the day before the date the organization's first quarterly employment tax return would be due under the revised law. If your organization makes this election, its employees who earn \$100 or more during a calendar year become liable for the payment of the self-employment tax on the wages the organization pays them.

Donors may deduct contributions to your organization as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to your organization or for its use are deductible for federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Your organization is not required to file federal income tax returns unless it is subject to the tax on unrelated business income under section 511 of the Code. If your organization is subject to this tax, it must file an income tax return on the Form 990-T, Exempt Organization Business Income Tax Return. In this letter, we are not determining whether any of your organization's present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

Organizations that are not private foundations are not subject to the excise taxes under Chapter 42 of the Code. However, these organizations are not automatically exempt from other federal excise taxes.

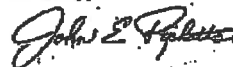
If your organization had a copy of its application for recognition of exemption on July 16, 1987, it is also required to make available for public inspection a copy of the exemption application, any supporting documents and the exemption letter to any individual who requests such documents in person or in writing. You can charge only a reasonable fee for reproduction and actual postage costs for the copied materials. The law does not require you to provide copies of public inspection documents that are widely available, such as by posting them on the Internet (World Wide Web). You may be liable for a penalty of \$20 a day for each day you do not make these documents available for public inspection.

Because this letter could help resolve questions about your organization's exempt status and foundation status, you should keep it with the organization's permanent records.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

This letter affirms your organization's exempt status.

Sincerely,



John E. Roberts, Director, REGS of 42
Customer Account Services



IRS Department of the Treasury
Internal Revenue Service

P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248564844
Jan. 23, 2009 LTR 4170C E0
58-0660607 000000 00 000

00014339

BODC: TE

THE SALVATION ARMY
ATTN LEGAL DEPT
1424 NE EXPRESSWAY
ATLANTA GA 30329



005567

Person to Contact: MRS BAKER
Toll Free Telephone Number: 1-877-829-5500

Dear TAXPAYER:

This is in response to your request of Jan. 13, 2009, regarding the tax-exempt status of THE SALVATION ARMY.

By a ruling dated June 1933, National Headquarters of the Salvation Army was held to be exempt from Federal income tax under section 103(6) of the Internal Revenue Act of 1932, which now corresponds to section 501(c)(3) of the Internal Revenue Code. Even though the organization was issued an individual ruling, the exemption letter covers all component units.

By a ruling dated April 1972, the National Headquarters of the Salvation Army and its component units were classified as those which are not a private foundation within the meaning of section 509(a) of the Code because they are described in sections 509(a)1 and 170(b)(1)(A)(i).

Donors may deduct contributions to this organization as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to the organization or for its use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

If you have any questions, please call us at the telephone number shown above.

Sincerely yours,

Michele M. Sullivan, Oper. Mgr.
Accounts Management Operations I

INDEPENDENT AUDITORS' MANAGEMENT LETTER

**THE SALVATION ARMY SARASOTA COMMAND
GENERAL OPERATING FUND**

September 30, 2018



RIVERO, GORDIMER & COMPANY, P.A.
CERTIFIED PUBLIC ACCOUNTANTS

Member
American Institute of Certified Public Accountants
Florida Institute of Certified Public Accountants

Herman V. Lazzara
Marc D. Sasser
Sam A. Lazzara
Kevin R. Bass
Jonathan E. Stein
Richard B. Gordimer, of Counsel
Cesar J. Rivero, in Memoriam (1942-2017)

Stephen G. Douglas
Michael E. Helton
Christopher F. Terrigino
James K. O'Connor

INDEPENDENT AUDITORS' MANAGEMENT LETTER

Board of Trustees
The Salvation Army, a Georgia Corporation

In planning and performing our audit of the financial statements of the General Operating Fund of The Salvation Army Sarasota Command (the "Organization"), a unit of The Salvation Army, a Georgia corporation, as of and for the fiscal year ended September 30, 2018, in accordance with auditing standards generally accepted in the United States of America, we considered the Program's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Program's internal control. Accordingly, we do not express an opinion on the effectiveness of the Program's internal control.

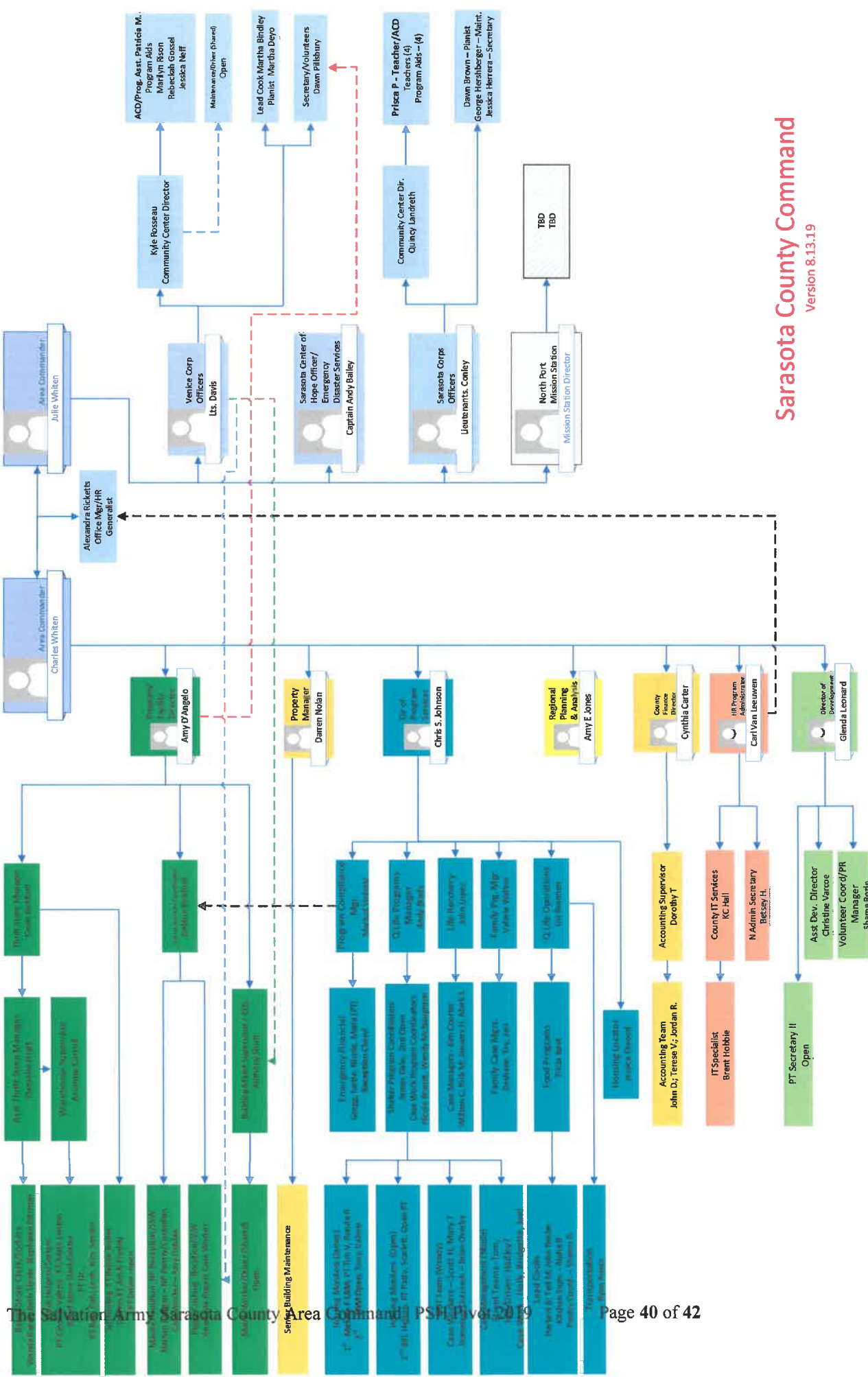
A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. *A material weakness* is a deficiency, or combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented or detected and corrected on a timely basis.

Our consideration of internal control was for the limited purpose described in the first paragraph and was not designed to identify all deficiencies in internal control that might be significant deficiencies or material weaknesses and, therefore, there can be no assurance that all such deficiencies have been identified. We did not identify any deficiencies in internal control that we consider to be material weaknesses, as defined above.

This communication is intended solely for the information and use of the Board of Trustees, management and grantor agencies and is not intended to be and should not be used by anyone other than these specified parties.

Tampa, Florida
January 11, 2019

Advisory Board 2019		Sarasota County Area Command		City, ST ZIP Code
Last name	First name	Company/Profession	Street address	
Bezner	Marilyn	Retired - Interior Designer	8944 Bernini Place	Sarasota, FL 34240
Brian	Dr. Bill	Retired - Physician	1211 Gulf of Mexico Dr. #502	Longboat Key, FL 34228
Carlesimo	Emilio	Retired - Fire Fighter	1976 San Silvestro Dr	Venice, FL 34285
Clayton	Carl	Real Estate Developer	4583 Baycedar Lane	Sarasota, FL 34241
Cool	Kim	Venice Gondolier - Writer	200 E. Venice Ave	Venice FL 34285
Cornish	David	Attorney	355 Venice Ave W.	Venice FL 34285
Darden	Elena	Retired	1712 Starling Drive	Sarasota, FL 34231
Dias	Floyd	Retired - Business	1731 Palm Lane	Nokomis, FL 34275
Farley	David	Retired-Farley Funeral Home	720 Cadiz Rd	Venice FL 34285
Frush	Dr. Edgar	Retired - Dental Surgeon	857 Nosota Way	Sarasota, FL 34242
Galica	Dr. Kathleen	Physical Therapist	763 John Ringling Blvd. #B3	Sarasota, FL 34236
Hutter	Rich	Retired - Engineer	477 Sherbrooke Ct	Venice, FL 34293
Katz	Rabbi Jonathan	Rabbi, JFCS	4900 Fallcrest Circle	Sarasota, FL 34233
Kovach	Frank	Retired - School Board	1290 Palm View Road	Sarasota, FL 34240
Lewis	Ronald	Retired-Real Estate Investments	4889 Brigitta Drive	Sarasota, FL 34241
Mallof	Joe	Retired-Business	2543 Vaccaro Drive	Sarasota, FL 34231
Morton	Eddie	Morton's Gourmet Markets	1924 S. Osprey Avenue	Sarasota, FL 34239
Pitts	Greg	Realtor - Caldwell Banker	817 Laurel Avenue	Venice, FL 34285
Rayevich	Ronald	Raymar Associates, Inc.	P. O. Box 2840	Sarasota, FL 34230
Rehmeyer	Dr. Richard	Physician	1880 Arlington St. #206	Sarasota, FL 34239
Reid	Dr. Parlana	Psychiatrist	627 Madison Court	Sarasota, FL 34236
Roberts	Nicholas	Banking-BBVA Compass	401 N. Cattlemen Rd, Suite 114	Sarasota, FL 34232
Rose	Wendy	Communications	1810 Oakwood Court	Venice, FL 34293
Scott	Neil	Attorney	1800 Second St. #818	Sarasota, FL 34236
Smith	Dan	Accountant	5026 Marsh Field Road	Sarasota, FL 34235
Stiff	Kevin	Government	3305 S. School Ave	Sarasota, FL 34239
Strickland	John	Attorney-Retired	1515 Kenilworth Street	Sarasota, FL 34231
Sutton	Paul	Retired - Sarasota Police	1124 Fraser Pine Blvd	Sarasota, FL 34240
vanAntwerp	Colin	Boar's Head	1819 Main Street, Suite 800	Sarasota, FL 34236
Wilcox	Kathryn	Volunteer	176 Emerson Drive	Sarasota, FL 34236
Williams	John	Farley Funeral Home	5900 S. Biscayne Drive	North Port, FL 34287
Wilson	Brad	Stifel, Nicolaus & Co, Inc	1819 Main St, #1002	Sarasota, FL 34236
Withers	Ernie	Mercedes-Benz of Sarasota	4754 Clark Road	Sarasota, FL 34233
Woodling	Dale	Retired US Army	480 Island Circle	Sarasota, FL 34242



Sarasota County Command
Version 8.13.19

State of Florida

Department of State

I certify from the records of this office that THE SALVATION ARMY is a Georgia corporation authorized to transact business in the State of Florida, qualified on September 10, 1928.

The document number of this corporation is 803387.

I further certify that said corporation has paid all fees due this office through December 31, 2019, that its most recent annual report/uniform business report was filed on February 12, 2019, and that its status is active.

I further certify that said corporation has not filed a Certificate of Withdrawal.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Twelfth day of February, 2019*



Randy R. R.
Secretary of State

Tracking Number: 4871134813CC

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>



April 24, 2015

Greetings, Major Ethan Frizzell:

As a follow-up to our meeting on April 10, 2015, I would like to commend you for your foresight and preparedness as it relates to best practices for sheltering and housing. It is clear that we share a philosophical stance as it relates to our Housing Continuum model, outlined in the draft white paper, "The Salvation Army Housing Continuum, Florida Division." Our shared stance is one that recognizes the increase in efficacy achieved when the footprint of emergency shelter (in space and budget) decreases while the footprint of supportive and permanent housing increases (in space and budget).

Models for housing are changing and so are their funding sources. As highlighted in the draft paper, "permanent housing is the one component not a part of the official housing continuum in the Southern Territory." This has the potential of rendering the traditional Salvation Army Housing Continuum model obsolete, and we recognize you are leading a shift in delivery through innovative measures.

The Sarasota Area Command has demonstrated exemplary leadership and change in its ability to maneuver amidst the most glaring obstacle; a lack of affordable housing. This has been achieved by creating the innovative Hybrid Housing model and by aligning best practices with current policy and research. This translates not only into "Doing the Most Good", but ensures the future of The Salvation Army Housing continuum will be one that is cutting edge and economically sustainable.

In Doing the Most Good,



Donald L. Dixon, Ph.D., MSW

enclosure: The Salvation Army Housing Continuum, Florida Division

cc: Dr. David Sutton, Director of Program Services

cc: Amy E. Jones, Planning Analyst

The Salvation Army Sarasota Area Command

Scoring Rubric – Permanent Supportive Housing	Max Points
<p>Agency Experience and Capacity</p> <p>Applicants demonstrating extensive experience in administering federal, state and municipal funds, and providing the proposed service and/or serving the proposed population, with demonstrated fiscal stability to maintain operations, will receive up to 15 points.</p>	14
<p>Project Quality</p> <p>Each application will be scored on the overall quality of the project, and the extent to which the applicant can clearly demonstrate the following:</p> <ul style="list-style-type: none"> ▪ <u>Housing First</u>: Applicants may receive up to 5 points based on the extent to which they have followed and will follow a Housing First Model/Low Barrier approach. ▪ <u>Collaboration</u>: Projects with specific referenced collaborations that include either MOU’s or other letters of documentation demonstrating collaborative efforts will receive up to 5 points. ▪ <u>Low Barrier</u>: Projects demonstrating Low Barriers to program admission and flexible participation policies designed to retain program participants will receive 5 points. ▪ <u>Leverage Impact</u>: Projects demonstrating that they are scalable relating to amount of funds available and have matching funds or in-kind services to maximize impact and support the project proposed will receive up to 5 points. ▪ <u>Understanding</u>: Projects demonstrating a clear understanding of the community goals, intended outcomes of this service area in the community homeless crisis response system, and a commitment to best practice service delivery, in a client centered manner, that works towards a community where homelessness is rare, brief, and non-recurring may receive up to 5 points. 	25
<p>Oneby1 Coordinated Entry</p> <p>To receive maximum points, applicants must demonstrate and/or clearly show a commitment to Housing First, the Oneby1 Coordinated Entry System, and collaborating with community partners to ensure our community goal of effectively ending homelessness.</p>	25
<p>CSIS/HMIS – System Performance Measures</p> <p>Data Quality – Up to 5 points Data Consistency – Up to 5 points Data Entry Timeliness – Up to 5 points Positive outcomes either at exit or with move in dates during participation – Up to 10 points Total days from project entry to move in date being from 30 to 60 days -Up to 5 points Households with permanent housing at exit remain stably housed at the one-year mark -Up to 5 points</p>	35
TOTAL POSSIBLE POINTS for PROJECTS	99

<u>Agency</u>	<u>Project</u>	<u>Renewal/New</u>	<u>Type</u>	<u>Amount</u>	<u>Scores</u>	<u>Exp and Capacity</u>	<u>Quality</u>	<u>OneBy1</u>	<u>CSIS/HMIS</u>	<u>Totals</u>	<u>Average</u>
1 Catholic Charities, Diocese of Venice, Inc.	CCDOV TH - RRH 2019	Renewal	RRH	\$83,275	Jennifer	12	20	20	15	67	72.8
					Nancy	14	25	25	15	79	
					Phil	15	23	23	15	76	
					Renese	13	20	22	15	70	
					Tarnisha	13	25	19	15	72	
2 Catholic Charities, Diocese of Venice, Inc.	DV Bonus	New Bonus	DV	\$517,338	Jennifer	12	25	20	15	72	73.8
					Nancy	14	25	22	15	76	
					Phil	15	23	23	15	76	
					Renese	13	20	25	15	73	
					Tarnisha	13	25	19	15	72	
3 Catholic Charities, Diocese of Venice, Inc.	PSH Bonus 2021	New Bonus	PSH	\$171,430	Jennifer	12	25	20	15	72	74
					Nancy	14	25	25	15	79	
					Phil	15	23	23	15	76	
					Renese	13	20	24	15	72	
					Tarnisha	11	25	20	15	71	
4 Community Assisted and Supported Living, Inc. d/b/a Rena Renewal PSH-RA COMBINED	Renewal	PSH	\$113,970	Jennifer	13	22	20	32	87	91.4	
				Nancy	15	23	23	32	93		
				Phil	15	23	25	32	95		
				Renese	14	22	21	32	89		
				Tarnisha	14	22	25	32	93		
5 Community Assisted and Supported Living, Inc. d/b/a Rena PSH Bonus 2021	New Bonus	PSH	\$172,446	Jennifer	14	25	20	32	91	91.6	
				Nancy	15	25	20	32	92		
				Phil	15	23	25	32	95		
				Renese	14	22	21	32	89		
				Tarnisha	15	25	19	32	91		
6 Society of St. Vincent de Paul South Pinellas, Inc.	Returning Home - Suncoast	Renewal	RRH	\$271,570	Jennifer	14	25	23	20	82	80.6
					Nancy	15	25	18	20	78	
					Phil	15	25	21	20	81	
					Renese	14	24	24	20	82	
					Tarnisha	15	25	20	20	80	
7 Suncoast Partnership to End Homelessness, Inc.	FL-500 HMIS Renewal FY2019	Renewal	HMIS	\$74,575							
8 Suncoast Partnership to End Homelessness, Inc.	FL-500 Oneby1 Coordinated Ent	Renewal	CE	\$50,006							
9 The Salvation Army, a GA Corp., for The Salvation Army Sar Everyone's Home 2019	Renewal	RRH	\$241,359	Jennifer	14	25	23	35	97	99.4	
				Nancy	15	25	25	35	100		
				Phil	15	25	25	35	100		
				Renese	15	25	25	35	100		
				Tarnisha	15	25	25	35	100		
10 The Salvation Army, a GA Corp., for The Salvation Army Sar PSH Bonus 2019	Renewal	PSH	\$313,629	Jennifer	14	25	23	35	97	99.4	
				Nancy	15	25	25	35	100		
				Phil	15	25	25	35	100		
				Renese	15	25	25	35	100		
				Tarnisha	15	25	25	35	100		
11 The Salvation Army, a GA Corp., for The Salvation Army Sar PSH Bonus 2021 with Reallocation/Bonu	Renewal	PSH	\$270,231	Jennifer	14	25	23	35	97	99.4	
				Nancy	15	25	25	35	100		
				Phil	15	25	25	35	100		
				Renese	15	25	25	35	100		
				Tarnisha	15	25	25	35	100		

* Note - TSAS PSH Projects were scored on CSIS/HMIS by norming scores. The Review and Ranking Committee awarded full points as the project did not have access to those points due to the project timing.

Our CoC did not reduce or reject any projects.



Suncoast CoC Leadership Council

FY21 CC Program Competition Priority Listing

Rank	Applicant Name	Project Name	Renewal/New	Project Component	Score	Amount	Previous Year
1	Suncoast Partnership to End Homelessness, Inc.	FL-500 HMIS Renewal FY2019	Renewal	HMIS	N/A	\$74,575	\$74,575
2	The Salvation Army, a GA Corp., for The Salvation Army Sarasota County Area Command	PSH Bonus 2019	Renewal	PSH	99.4	\$313,629	\$313,629
3	Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor	Suncoast CoC 2019 Renewal PSH-RA COMBINED	Renewal	PSH	91.4	\$113,970	\$113,970
4	Suncoast Partnership to End Homelessness, Inc.	FL-500 Oneby1 Coordinated Entry FY2019	Renewal	SSO-CE	N/A	\$50,006	\$50,006
5	The Salvation Army, a GA Corp., for The Salvation Army Sarasota County Area Command	Everyone's Home 2019	Renewal	RRH	99.4	\$241,359	\$241,359
6	Society of St. Vincent de Paul South Pinellas, Inc.	Returning Home - Suncoast	Renewal	RRH	80.6	\$271,570	\$271,570
7	Catholic Charities, Diocese of Venice, Inc.	CCDOV TH - RRH 2019	Renewal	RRH	72.8	\$83,275	\$83,275
8	The Salvation Army, a GA Corp., for The Salvation Army Sarasota County Area Command	PSH Plus 2021	Reallocation & CoC Bonus	PSH	99.4	\$270,231	N/A
9	Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor	FY21 PSH Rental Assistance Manatee and Sarasota Counties	CoC Bonus	PSH	91.6	\$172,446	N/A
10	Catholic Charities, Diocese of Venice, Inc.	Domestic Violence Bonus Funding	DV Bonus	DV	73.8	\$517,338	N/A
11	Catholic Charities, Diocese of Venice, Inc.	Permanent Supportive Housing	CoC Bonus	PSH	74	\$171,430	N/A

Project not required to be ranked – CoC Planning Grant for \$103,468.04

Ranking of projects is based on HUD policy priorities and expectations with review and oversight of renewal and new projects as found in the [FY21 CoC Program Competition NOFO](#) as well as local priorities established by the Leadership Council.



Need Help Now?

News and Notices:

FY2021 CC Program Competition Priority Listing - [Click to View](#)

FY 21-22 ESG CV1 RRH Contract - [Click to View](#)

FY 21-22 ESG CV2 RRH - [Click to View](#)

CoC Program Competition RFP Information Sessions - Q&A - [Click to View](#)

CoC Program Competition NOFO Released - [Click to View](#)

CoC Program Competition Request for Proposals Released- [Click to View](#)

CoC Program Competition RFP Information Sessions - [Click to Register](#)

ESG-CV2 Amendment #0002 for State Unified Contract QPZ04 - [Click to View](#)

July 14th, 2021 - Continuum of Care (CoC) Announces - Open Leadership Council Seats - [Click to View](#)

Previous Notices

From: [Chris Johnson](#)
To: [Eduardo Gloria](#)
Subject: RE: Approved Projects for the FY21 CoC Competition
Date: Tuesday, October 26, 2021 2:36:01 PM
Attachments: [image001.jpg](#)

Good Afternoon,

In addition to the previous email regarding your specific submission, please note that you can find the full Priority Listing on Suncoast's website at <https://www.suncoastpartnership.org/> under News and Notices.

Thank you and thank you for all you do in our Continuum.

Chris Johnson
Chief Executive Officer
Suncoast Partnership to End Homelessness
1750 17th Street/C-1
Sarasota, FL 34234
941-955-8987 x104

2017-2018_Logo SM



[Facebook](#) | [Website](#)

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From: Chris Johnson
Sent: Friday, October 22, 2021 2:47 PM
To: Eduardo Gloria <eduardo.gloria@catholiccharitiesdov.org>
Subject: Approved Projects for the FY21 CoC Competition

Good Afternoon,

Please know the Review and Rank committee has accepted your proposals for CoC Bonus for PSH in the amount of \$171,430 and your DV Bonus project in the amount of \$517,338 submitted in our RFP process to be ranked on the priority listing in the CoC Competition. In addition your renewal for

CCDOV TH-RRH 2019 in the amount of \$83,275 is also ranked on the priority listing in the CoC Competition.

Please remember demonstration of a formal collaboration with our two DV service providers must be included in both the narrative and by way of an attachment for the DV bonus.

Your applications need to be complete in eSnaps by 5:00 pm on Friday Monday, November 1st; the Suncoast Partnership targeted submission date to HUD is November 10th.

Necessary Suncoast Partnership staff need to be added as registrants to the agency's applicant profile, please contact Brandon Bellows, Brandon@suncoastpartnership.org or 941-955-8987 x101.

Thank you for all you do within our continuum of care.

Chris Johnson
Chief Executive Officer
Suncoast Partnership to End Homelessness
1750 17th Street/C-1
Sarasota, FL 34234
941-955-8987 x104



[Facebook](#) | [Website](#)

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From: [Chris Johnson](#)
To: "michele.matthews@uss.salvationarmy.org"; [Amy Jones](#)
Subject: RE: Approved Projects for the FY21 CoC Competition
Date: Tuesday, October 26, 2021 2:35:49 PM
Attachments: [image001.jpg](#)

Good Afternoon,

In addition to the previous email regarding your specific submission, please note that you can find the full Priority Listing on Suncoast's website at <https://www.suncoastpartnership.org/> under News and Notices.

Thank you and thank you for all you do in our Continuum.

Chris Johnson
Chief Executive Officer
Suncoast Partnership to End Homelessness
1750 17th Street/C-1
Sarasota, FL 34234
941-955-8987 x104

2017-2018_Logo SM



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From: Chris Johnson
Sent: Friday, October 22, 2021 2:47 PM
To: michele.matthews@uss.salvationarmy.org; Amy Jones <amy.e.jones@uss.salvationarmy.org>
Subject: Approved Projects for the FY21 CoC Competition

Good afternoon,

Please know the Review and Rank committee has accepted your proposal for CoC Bonus funding and reallocation for PSH submitted in our RFP process to be ranked on the priority listing in the CoC Competition in the amount of \$270,231. In addition, your renewal for Everyone's Home 2019 in the

amount of \$241,359 and your PSH Bonus 2019 in the amount of \$313,629 are also ranked on the priority listing in the CoC Competition.

Your applications need to be complete in eSnaps by 5:00 pm on Friday Monday, November 1st; the Suncoast Partnership targeted submission date to HUD is November 10th.

Necessary Suncoast Partnership staff need to be added as registrants to the agency's applicant profile, please contact Brandon Bellows, Brandon@suncoastpartnership.org or 941-955-8987 x101.

Thank you for all you do within our continuum of care.

Chris Johnson
Chief Executive Officer
Suncoast Partnership to End Homelessness
1750 17th Street/C-1
Sarasota, FL 34234
941-955-8987 x104



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From: [Chris Johnson](#)
To: [Michael Raposa](#); [David Conley](#); [Daisy Corea](#)
Subject: RE: Approved Projects for the FY21 CoC Competition
Date: Tuesday, October 26, 2021 2:35:31 PM
Attachments: [image001.jpg](#)

Good Afternoon,

In addition to the previous email regarding your specific submission, please note that you can find the full Priority Listing on Suncoast's website at <https://www.suncoastpartnership.org/> under News and Notices.

Thank you and thank you for all you do in our Continuum.

Chris Johnson
Chief Executive Officer
Suncoast Partnership to End Homelessness
1750 17th Street/C-1
Sarasota, FL 34234
941-955-8987 x104



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From: Chris Johnson
Sent: Friday, October 22, 2021 2:45 PM
To: Michael Raposa <michael@svdpsp.org>; David Conley <dave@svdpsp.org>; Daisy Corea <daisy@svdpsp.org>
Subject: Approved Projects for the FY21 CoC Competition

Good Afternoon,

Please know the Review and Rank committee has accepted your renewal proposal for Returning Home Suncoast in the amount of \$271,570 submitted in our RFP process to be ranked on the priority listing in the CoC Competition.

Your applications need to be complete in eSnaps by 5:00 pm on Friday Monday, November 1st; the Suncoast Partnership targeted submission date to HUD is November 10th.

Necessary Suncoast Partnership staff need to be added as registrants to the agency's applicant profile, please contact Brandon Bellows, Brandon@suncoastpartnership.org or 941-955-8987 x101.

Thank you for all you do within our continuum of care.

Chris Johnson
Chief Executive Officer
Suncoast Partnership to End Homelessness
1750 17th Street/C-1
Sarasota, FL 34234
941-955-8987 x104



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From: [Chris Johnson](#)
To: [Scott Eller](#); [PJ Brooks](#)
Subject: RE: Approved Projects for the FY21 CoC Competition
Date: Tuesday, October 26, 2021 2:36:15 PM
Attachments: [image001.jpg](#)

Good Afternoon,

In addition to the previous email regarding your specific submission, please note that you can find the full Priority Listing on Suncoast's website at <https://www.suncoastpartnership.org/> under News and Notices.

Thank you and thank you for all you do in our Continuum.

Chris Johnson
Chief Executive Officer
Suncoast Partnership to End Homelessness
1750 17th Street/C-1
Sarasota, FL 34234
941-955-8987 x104

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From: Chris Johnson
Sent: Friday, October 22, 2021 2:46 PM
To: Scott Eller <scott.eller@caslinc.org>; PJ Brooks <pj.brooks@caslinc.org>
Subject: Approved Projects for the FY21 CoC Competition

Good Afternoon,

Please know the Review and Rank committee has accepted your proposal for CoC Bonus funding for PSH submitted in our RFP process to be ranked on the priority listing in the CoC Competition in the amount of \$172,446. In addition, your renewal for Suncoast CoC 2019 Renewal PSH-RA COMBINED

in the amount of \$113,970 is also ranked on the priority listing in the CoC Competition.

Your applications need to be complete in eSnaps by 5:00 pm on Friday Monday, November 1st; the Suncoast Partnership targeted submission date to HUD is November 10th.

Necessary Suncoast Partnership staff need to be added as registrants to the agency's applicant profile, please contact Brandon Bellows, Brandon@suncoastpartnership.org or 941-955-8987 x101.

Thank you for all you do within our continuum of care.

Chris Johnson
Chief Executive Officer
Suncoast Partnership to End Homelessness
1750 17th Street/C-1
Sarasota, FL 34234
941-955-8987 x104



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Quick Links

Upcoming Meetings

Community Dashboard

Point in Time

Need Help Now?

News and Notices:

[FY21 Complete CoC Application - Click to View](#)

[FY21 CC Program Competition Priority Listing - Click to View](#)

[FY 21-22 ESG RRH Contract - Click to View](#)

[FY 21-22 ESG CV1 RRH Contract - Click to View](#)

Before Starting the Project Listings for the CoC Priority Listing

The CoC Consolidated Application requires TWO submissions. Both this Project Priority Listing AND the CoC Application MUST be completed and submitted prior to the CoC Program Competition submission deadline stated in the NOFO.

The CoC Priority Listing includes:

- Reallocation forms – must be completed if the CoC is reallocating eligible renewal projects to create new projects or if a project applicant will transition from an existing component to an eligible new component.

- Project Listings:

- New;
- Renewal;
- UFA Costs;
- CoC Planning;
- YHPD Renewal; and
- YHDP Replacement.
- Attachment Requirement

- HUD-2991, Certification of Consistency with the Consolidated Plan – Collaborative Applicants must attach an accurately completed, signed, and dated HUD-2991.

Things to Remember:

- New and Renewal Project Listings – all project applications must be reviewed, approved and ranked, or rejected based on the local CoC competition process.
- Project applications on the following Project Listings must be approved, they are not ranked per the FY 2021 CoC Program Competition NOFO:

- UFA Costs Project Listing;
- CoC planning Project Listing;
- YHPD Renewal Project Listing; and
- YHDP Replacement Project Listing.
- Collaborative Applicants are responsible for ensuring all project applications accurately appear on the Project Listings and there are no project applications missing from one or more Project Listings.
- For each project application rejected by the CoC the Collaborative Applicant must select the reason for the rejection from the dropdown provided.
- If the Collaborative Applicant needs to amend a project application for any reason, the Collaborative Applicant MUST ensure the amended project is returned to the applicable Project Listing AND ranked BEFORE submitting the CoC Priority Listing to HUD in e-snaps.

Additional training resources are available online on HUD’s website.
https://www.hud.gov/program_offices/comm_planning/coc/competition

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this form, please reference the FY 2021 CoC Priority Listing Detailed Instructions and FY 2021 CoC Priority Listing Navigational Guide on HUD's website. https://www.hud.gov/program_offices/comm_planning/coc/competition.

Collaborative Applicant Name: Suncoast Partnership to End Homelessness, Inc.

2. Reallocation

Instructions:

For guidance on completing this form, please reference the FY 2021 CoC Priority Listing Detailed Instructions and FY 2021 CoC Priority Listing Navigational Guide on HUD's website. https://www.hud.gov/program_offices/comm_planning/coc/competition.

2-1. Is the CoC reallocating funds from one or more eligible renewal grant(s) that will expire in calendar year 2022 into one or more new projects? Yes

3. Reallocation - Grant(s) Eliminated

CoCs reallocating eligible renewal project funds to create a new project application – as detailed in the FY 2021 CoC Program Competition NOFO – may do so by eliminating one or more expiring eligible renewal projects. CoCs that are eliminating eligible renewal projects must identify those projects on this form.

Amount Available for New Project: (Sum of All Eliminated Projects)				
\$97,785				
Eliminated Project Name	Grant Number Eliminated	Component Type	Annual Renewal Amount	Type of Reallocation
Everyone's Home B...	FL0713L4H002002	PH-RRH	\$97,785	Regular

3. Reallocation - Grant(s) Eliminated Details

Instructions:

For guidance on completing this form, please reference the FY 2021 CoC Priority Listing Detailed Instructions and FY 2021 CoC Priority Listing Navigational Guide on HUD's website. https://www.hud.gov/program_offices/comm_planning/coc/competition.

3-1 Complete each of the fields below for each eligible renewal grant that is being eliminated during the reallocation process. Refer to the FY 2021 Grant Inventory Worksheet to ensure all information entered is accurate.

Eliminated Project Name: Everyone's Home Bonus 2019

Grant Number of Eliminated Project: FL0713L4H002002

Eliminated Project Component Type: PH-RRH

Eliminated Project Annual Renewal Amount: \$97,785

3-2. Describe how the CoC determined that this project should be eliminated and include the date the project applicant was notified. (limit 750 characters)

The project was voluntarily reallocated by the recipient and combined with CoC Bonus funding to create a viable PSH project. The need for additional PSH funding within our community prompted the CoC Leadership Council and the Review and Ranking Committee to approve opening CoC Bonus funds for PSH projects only. They also approved this reallocation, expressing gratitude to the provider for voluntarily meeting the community's current need for additional PSH funding. The project applicant notified the Lead Agency 10/5/21 of their desire to reallocate.

4. Reallocation - Grant(s) Reduced

CoCs reallocating eligible renewal project funds to create a new project application – as detailed in the FY 2021 CoC Program Competition NOFO – may do so by eliminating one or more expiring eligible renewal projects. CoCs that are eliminating eligible renewal projects must identify those projects on this form.

Amount Available for New Project (Sum of All Reduced Projects)					
Reduced Project Name	Reduced Grant Number	Annual Renewal Amount	Amount Retained	Amount available for new project	Reallocation Type
This list contains no items					

Continuum of Care (CoC) New Project Listing

Instructions:

Prior to starting the New Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

To upload all new project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of new projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the New Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make the necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps. https://www.hud.gov/program_offices/comm_planning/coc/competition.

Project Name	Date Submitted	Comp Type	Applicant Name	Budget Amount	Grant Term	Rank	PH/Realloc	PSH/RRH	Expansion
FY21 PSH Rental A...	2021-11-03 14:47:...	PH	Community Assiste...	\$172,446	1 Year	9	PH Bonus	PSH	
PSH Plus 2021	2021-11-05 12:12:...	PH	The Salvation Arm...	\$270,231	1 Year	8	Both	PSH	
Domestic Violence..	2021-11-08 16:31:...	Joint TH & PH-RRH	Catholic Charitie...	\$517,338	1 Year	D10	DV Bonus		
Permanent Support...	2021-11-08 16:27:...	PH	Catholic Charitie...	\$171,430	1 Year	11	PH Bonus	PSH	

Continuum of Care (CoC) Renewal Project Listing

Instructions:

Prior to starting the Renewal Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

To upload all renewal project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of renewal projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the Renewal Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

https://www.hud.gov/program_offices/comm_planning/coc/competition.

The Collaborative Applicant certifies that there is a demonstrated need for all renewal permanent supportive housing and rapid re-housing projects listed on the Renewal Project Listing.

X

The Collaborative Applicant certifies all renewal permanent supportive housing and rapid rehousing projects listed on the Renewal Project Listing comply with program requirements and appropriate standards of quality and habitability.

X

The Collaborative Applicant does not have any renewal permanent supportive housing or rapid re-housing renewal projects.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Rank	PSH/RRH	Comp Type	Consolidation Type	Expansion Type
Everyon e's Home 2021	2021-10-31 10:58:...	1 Year	The Salvation Arm...	\$241,359	5	RRH	PH		
Returnin g Home - ...	2021-11-01 12:35:...	1 Year	Society of St. Vi...	\$271,570	6	RRH	PH		
Suncoast CoC 2021...	2021-11-01 08:35:...	1 Year	Commun ity Assiste...	\$113,970	3	PSH	PH		

FL-500 Oneby1 Coo...	2021-11-02 17:00:...	1 Year	Sarasota /Bradent o...	\$50,006	4		SSO		
FL-500 HMIS Renew...	2021-11-02 16:01:...	1 Year	Sarasota /Bradent o...	\$74,575	1		HMIS		
PSH Bonus 2021	2021-11-05 12:04:...	1 Year	The Salvation Arm...	\$313,629	2	PSH	PH		
CCDOV TH - RRH 2019	2021-11-08 16:34:...	1 Year	Catholic Charitie..	\$83,275	7		Joint TH & PH-RRH		

Continuum of Care (CoC) Planning Project Listing

Instructions:

Prior to starting the CoC Planning Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

To upload the CoC planning project application submitted to this Project Listing, click the "Update List" button. This process may take a few minutes while the project is located in the e-snaps system. You may update each of the Project Listings simultaneously. To review the CoC Planning Project Listing, click on the magnifying glass next to view the project details. To view the actual project application, click on the orange folder. If you identify errors in the project application, you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

Only one CoC planning project application can be submitted and only by the Collaborative Applicant designated by the CoC which must match the Collaborative Applicant information on the CoC Applicant Profile.

https://www.hud.gov/program_offices/comm_planning/coc/competition.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Accepted?
CoC Planning Proj...	2021-11-04 17:18:...	1 Year	Sarasota/Bradent O...	\$103,468	Yes

Continuum of Care (CoC) YHDP Renewal Project Listing

Instructions:

Prior to starting the YHDP Renewal Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

To upload all YHDP renewal project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of YHDP renewal and replacement projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the YHDP Renewal Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

https://www.hud.gov/program_offices/comm_planning/coc/competition.

The Collaborative Applicant certifies that there is a demonstrated need for all renewal permanent supportive housing and rapid rehousing projects listed on the Renewal Project Listing.

The Collaborative Applicant certifies all renewal permanent supportive housing and rapid rehousing projects listed on the Renewal Project Listing comply with program requirements and appropriate standards of quality and habitability.

The Collaborative Applicant does not have any renewal permanent supportive housing or rapid rehousing renewal projects.

Project Name	Date Submitted	Applicant Name	Budget Amount	Comp Type	Grant Term	Accepted ?	PSH/RRH	Consolidation Type
This list contains no items								

Continuum of Care (CoC) YHDP Replacement Project Listing

Instructions:

Prior to starting the YHDP Replacement Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

To upload all YHDP replacement project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of YHDP replacement projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the YHDP Replacement Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

https://www.hud.gov/program_offices/comm_planning/coc/competition.

Project Name	Date Submitted	Applicant Name	Budget Amount	Comp Type	Grant Term	Accepted?
This list contains no items						

Funding Summary

Instructions

This page provides the total budget summaries for each of the project listings after the you approved, ranked (New and Renewal Project Listings only), or rejected project applications. You must review this page to ensure the totals for each of the categories is accurate. The "Total CoC Request" indicates the total funding request amount your CoC's Collaborative Applicant will submit to HUD for funding consideration. As stated previously, only 1 UFA Cost project application (for UFA designated Collaborative Applicants only) and only 1 CoC Planning project application can be submitted and only the Collaborative Applicant designated by the CoC is eligible to request these funds.

Title	Total Amount
Renewal Amount	\$1,148,384
New Amount	\$1,131,445
CoC Planning Amount	\$103,468
YHDP Amount	
Rejected Amount	\$0
TOTAL CoC REQUEST	\$2,383,297

Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan (HUD-2991)	Yes	Certification of ...	11/04/2021
FY 2021 Rank Tool (optional)	No		
Other	No		
Other	No		

Attachment Details

Document Description: Certification of Consistency with the Consolidated Plan (HUD-2991)

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

WARNING: The FY2021 CoC Consolidated Application requires 2 submissions. Both this Project Priority Listing AND the CoC Consolidated Application MUST be submitted.

WARNING: The FY2021 CoC Consolidated Application requires 2 submissions. Both this Project Priority Listing AND the CoC Consolidated Application MUST be submitted.

Page	Last Updated
Before Starting	No Input Required
1A. Identification	10/28/2021
2. Reallocation	10/28/2021
3. Grant(s) Eliminated	11/03/2021
4. Grant(s) Reduced	No Input Required
5A. CoC New Project Listing	11/08/2021
5B. CoC Renewal Project Listing	11/08/2021
5D. CoC Planning Project Listing	11/08/2021
5E. YHDP Renewal	No Input Required

5F. YHDP Replace	No Input Required
Funding Summary	No Input Required
Attachments	11/04/2021
Submission Summary	No Input Required

**Certification of Consistency
with the Consolidated Plan**

U.S. Department of Housing
and Urban Development

I certify that the proposed activity or project in the application are consistent with the jurisdiction's current, approved Consolidated Plan
(Type or clearly print the following information.)

Applicant Name Suncoast Partnership to End Homelessness

Project Name 2021 Continuum of Care (CoC) Program Competition

Locations of the Project Fl. 500 Continuum of Care, Sarasota and Manatee Counties

Name of the Federal
Program to which the
applicant is applying 2021 Continuum of Care (CoC) Program Competition

Name of
Certifying Jurisdiction Sarasota County

Certifying Official
of the Jurisdiction
Name Cindy Emswett

Title General Manager, Office of Housing & Community Development

Signature *Cindy Emswett* **MEC**

Date 11-1-2021



Suncoast CoC Leadership Council

FY21 CC Program Competition Priority Listing

Rank	Applicant Name	Project Name	Renewal/Type	Project Component	Score	Amount	Priority Year
1	Suncoast Partnership to End Homelessness, Inc	FL 568 0005 Renewal FY2019	Renewal	HOUS	N/A	\$74,575	\$74,575
2	The Salvation Army - GA Corp., for The Salvation Army Sarasota County Area Command	PSH Bonus 2019	Renewal	PSH	99.6	\$312,429	\$312,429
3	Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor	Suncoast CoC 2019 Renewal PSN-BA COLM0040	Renewal	PSN	91.4	\$112,950	\$112,950
4	Suncoast Partnership to End Homelessness, Inc	FL 568 0005's Collaborative Entry FY2019	Support	SIW-CI	N/A	\$68,886	\$68,886
5	The Salvation Army - GA Corp., for The Salvation Army Sarasota County Area Command	Everyone's Home 2019	Renewal	HOUS	99.6	\$342,359	\$342,359
6	Society of St. Vincent de Paul South Florida, Inc	Reaching Home - Suncoast	Renewal	HOUS	86.6	\$272,570	\$272,570
7	Catholic Charities, Diocese of Venice, Inc	CC/DV TH - 08m 2019	Renewal	HOUS	73.8	\$63,275	\$63,275
8	The Salvation Army - GA Corp., for The Salvation Army Sarasota County Area Command	PSH Plus 2021	Renewal & CoC Bonus	PSH	99.6	\$276,211	N/A
9	Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor	FY21 PSH Rental Assistance M on up to 6m 5 or more Counties	CoC Bonus	PSH	91.4	\$172,444	N/A
10	Catholic Charities, Diocese of Venice, Inc	Domestic Violence Bonus Funding	DV Bonus	DV	73.8	\$527,934	N/A
11	Catholic Charities, Diocese of Venice, Inc	Parish-based Supportive Housing	CoC Bonus	PSH	76	\$173,498	N/A

Project not required to be ranked - CoC Planning Grant for \$103,688.00
 Ranking of projects based on HUD policy priorities and expectations with review and oversight of renewal and new projects as found in the
 RISES RISES COMPETITIVE RFP as well as local priorities established by the Leadership Council

**Certification of Consistency
with the Consolidated Plan**

U.S. Department of Housing
and Urban Development

I certify that the proposed activity/projects in the application are consistent with the jurisdiction's current approved Consolidated Plan
(Type or clearly print the following information.)

Applicant Name Suncoast Partnership to End Homelessness

Project Name 2021 Continuum of Care (CoC) Program Competition

Location of the Project FL 500 Continuum of Care, Sarasota and Manatee Counties

Name of the Federal
Program to which the
applicant is applying 2021 Continuum of Care (CoC) Program Competition

Name of
Certifying Jurisdiction City of Sarasota

Certifying Official
of the Jurisdiction
Name Steven Cover

Title Planning Director

Signature 

Date 11/2/21



Suncoast CoC Leadership Council

FY21 CC Program Competition Priority Listing

Rank	Applicant Name	Fund of Funds	Revised Term	Project Component	Score	Amount	Percent Total
1	Continued Partnership to End Homelessness, Inc	FY 500 HHS Renewal FY2019	Renewal	RMG	N/A	\$74,575	\$74,575
2	The Salvation Army, a SA Corp. for The Salvation Army Sarasota County Area Command	FY19 Bonus 2019	Renewal	PSH	99.4	\$111,429	\$111,429
3	Continued Partnership to End Homelessness, Inc. for The Partnership to End Homelessness	Partnership with 4022 Homeless Program Component	Renewal	PSH	91.4	\$111,970	\$111,970
4	Continued Partnership to End Homelessness, Inc	FY 500 Bonus1 Component Entry FY 2019	Renewal	SS B-C2	N/A	\$54,606	\$54,606
5	The Salvation Army, a SA Corp. for The Salvation Army Sarasota County Area Command	Volunteer Bonus 2019	Renewal	RMG	99.4	\$241,359	\$241,359
6	Parish of St. Vincent de Paul South Florida, Inc	Returning Home - Suncoast	Renewal	RMG	84.6	\$171,578	\$171,578
7	Catholic Charities, Diocese of Venice, Inc	CO-BW 7th - 8th 2019	Renewal	RMG	72.8	\$81,275	\$81,275
8	The Salvation Army, a SA Corp. for The Salvation Army Sarasota County Area Command	FY19 Plus 2019	Application & CoC Bonus	PSH	99.4	\$276,231	N/A
9	Continuity Assisted and Supported Living, Inc. d/b/a Renaissance Manor	FY21 PS in Assisted Residential M on 0-00 and Supportive Co-ops	CoC Bonus	PSH	91.6	\$172,446	N/A
10	Catholic Charities, Diocese of Venice, Inc	Continuity Supported Bonus Funding	OV Bonus	OV	73.8	\$127,356	N/A
11	Catholic Charities, Diocese of Venice, Inc	Partnership Supportive Housing	CoC Bonus	PSH	74	\$172,438	N/A

Projects that are required to be re-evaluated - All Projects for S03346804
 Ranking of projects is based on HUD policy priorities and expectations with review and oversight of renewal and new projects as found in the
[FY21 CoC Program Competition 2019](#) as well as local priorities established by the Leadership Council

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing
and Urban Development

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.
(Type or clearly print the following information:)

Applicant Name: _____

Project Name: _____

Location of the Project: _____

Name of the Federal
Program to which the
applicant is applying: _____

Name of
Certifying Jurisdiction: _____

Certifying Official
of the Jurisdiction
Name: _____

Title: _____

Signature: *Leroy J. Washington*

Date: _____



Suncoast CoC Leadership Council

FY21 CC Program Competition Priority Listing

Rank	Applicant Name	Project Name	Renewal/New	Project Component	Score	Amount	Previous Year
1	Suncoast Partnership to End Homelessness, Inc.	FL-500 HMIS Renewal FY2019	Renewal	HMIS	N/A	\$74,575	\$74,575
2	The Salvation Army, a GA Corp., for The Salvation Army Sarasota County Area Command	PSH Bonus 2019	Renewal	PSH	99.4	\$313,629	\$313,629
3	Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor	Suncoast CoC 2019 Renewal PSH-RA COMBINED	Renewal	PSH	91.4	\$113,970	\$113,970
4	Suncoast Partnership to End Homelessness, Inc.	FL-500 Oneby1 Coordinated Entry FY2019	Renewal	SSO-CE	N/A	\$50,006	\$50,006
5	The Salvation Army, a GA Corp., for The Salvation Army Sarasota County Area Command	Everyone's Home 2019	Renewal	RRH	99.4	\$241,359	\$241,359
6	Society of St. Vincent de Paul South Pinellas, Inc.	Returning Home - Suncoast	Renewal	RRH	80.6	\$271,570	\$271,570
7	Catholic Charities, Diocese of Venice, Inc.	CCDOV TH - RRH 2019	Renewal	RRH	72.8	\$83,275	\$83,275
8	The Salvation Army, a GA Corp., for The Salvation Army Sarasota County Area Command	PSH Plus 2021	Reallocation & CoC Bonus	PSH	99.4	\$270,231	N/A
9	Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor	FY21 PSH Rental Assistance Manatee and Sarasota Counties	CoC Bonus	PSH	91.6	\$172,446	N/A
10	Catholic Charities, Diocese of Venice, Inc.	Domestic Violence Bonus Funding	DV Bonus	DV	73.8	\$517,338	N/A
11	Catholic Charities, Diocese of Venice, Inc.	Permanent Supportive Housing	CoC Bonus	PSH	74	\$171,430	N/A

Project not required to be ranked – CoC Planning Grant for \$103,468.04

Ranking of projects is based on HUD policy priorities and expectations with review and oversight of renewal and new projects as found in the [FY21 CoC Program Competition NOFO](#) as well as local priorities established by the Leadership Council.

**Certification of Consistency
with the Consolidated Plan**U.S. Department of Housing
and Urban Development

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.
(Type or clearly print the following information:)

Applicant Name: Suncoast Partnership to End HomelessnessProject Name: 2021 Continuum of Care (CoC) Program CompetitionLocation of the Project: FL-500 Continuum of Care, Sarasota and Manatee CountiesName of the Federal
Program to which the
applicant is applying: 2021 Continuum of Care (CoC) Program CompetitionName of
Certifying Jurisdiction: City of Bradenton, FloridaCertifying Official
of the Jurisdiction
Name: Gene BrownTitle: MayorSignature: Date: 11/2/21



Suncoast CoC Leadership Council

FY21 CC Program Competition Priority Listing

Rank	Applicant Name	Project Name	Renewal/New	Project Component	Score	Amount	Previous Year
1	Suncoast Partnership to End Homelessness, Inc.	FL-500 HMIS Renewal FY2019	Renewal	HMIS	N/A	\$74,575	\$74,575
2	The Salvation Army, a GA Corp., for The Salvation Army Sarasota County Area Command	PSH Bonus 2019	Renewal	PSH	99.4	\$313,629	\$313,629
3	Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor	Suncoast CoC 2019 Renewal PSH-RA COMBINED	Renewal	PSH	91.4	\$113,970	\$113,970
4	Suncoast Partnership to End Homelessness, Inc.	FL 500 Oneby1 Coordinated Entry FY2019	Renewal	SSO-CE	N/A	\$50,006	\$50,006
5	The Salvation Army, a GA Corp., for The Salvation Army Sarasota County Area Command	Everyone's Home 2019	Renewal	RRH	99.4	\$241,359	\$241,359
6	Society of St. Vincent de Paul South Pinellas, Inc.	Returning Home - Suncoast	Renewal	RRH	80.6	\$271,570	\$271,570
7	Catholic Charities, Diocese of Venice, Inc.	CCDDV TH - RRH 2019	Renewal	RRH	72.8	\$83,275	\$83,275
8	The Salvation Army, a GA Corp., for The Salvation Army Sarasota County Area Command	PSH Plus 2021	Reallocation & CoC Bonus	PSH	99.4	\$270,231	N/A
9	Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor	FY21 PSH Rental Assistance Manatee and Sarasota Counties	CoC Bonus	PSH	91.6	\$172,446	N/A
10	Catholic Charities, Diocese of Venice, Inc.	Domestic Violence Bonus Funding	DV Bonus	DV	73.8	\$517,338	N/A
11	Catholic Charities, Diocese of Venice, Inc.	Permanent Supportive Housing	CoC Bonus	PSH	74	\$171,430	N/A

Project not required to be ranked – CoC Planning Grant for \$103,468.04

Ranking of projects is based on HUD policy priorities and expectations with review and oversight of renewal and new projects as found in the [FY21 CoC Program Competition NOFO](#) as well as local priorities established by the Leadership Council.

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Only Collaborative Applicants may apply for CoC Planning funds using this application, and only one CoC Planning application may be submitted during the FY 2021 CoC Program grant competition.
 - Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2021 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award management (SAM) in order to apply for funding under the Continuum of Care (CoC) Program Competition. For more information see the FY 2021 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2021 CoC Program Competition NOFO.
- Detailed instructions can be found on the left menu within e-snaps and on the HUD Exchange. They contain comprehensive instructions and should be used in tandem with the navigational guides, which are also found on the HUD Exchange.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any new or renewal project that fails to adhere to 24 CFR Part 578 and application requirements set forth in the FY 2021 CoC Program NOFO.

1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application: CoC Planning Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 11/04/2021

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier:

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: Suncoast Partnership to End Homelessness, Inc.

b. Employer/Taxpayer Identification Number (EIN/TIN): 20-2783762

c. Organizational DUNS:	610943651	PLUS 4	
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d. Address

Street 1: 1750 17th Street, C-1

Street 2:

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34234

e. Organizational Unit (optional)

Department Name: NA

Division Name: NA

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Mr.

First Name: Brandon

Middle Name:

Last Name: Bellows

Suffix:

Title: Chief Information Officer

Organizational Affiliation: Suncoast Partnership to End Homelessness, Inc.

Telephone Number: (941) 955-8987

Extension: 101

Fax Number: (941) 209-5595

Email: Brandon@suncoastpartnership.org

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6400-N-25

Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): Florida
(for multiple selections hold CTRL+Key)

15. Descriptive Title of Applicant's Project: CoC Planning Project Application FY2021

16. Congressional District(s):

a. Applicant: FL-016, FL-017

b. Project: FL-016, FL-017

(for multiple selections hold CTRL+Key)

17. Proposed Project

a. Start Date: 02/01/2022

b. End Date: 01/31/2023

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

I AGREE:

21. Authorized Representative

Prefix: Mr.

First Name: Christopher

Middle Name:

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Telephone Number: (941) 955-8987
(Format: 123-456-7890)

Fax Number: (941) 209-5595
(Format: 123-456-7890)

Email: chris@suncoastpartnership.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/04/2021

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2506-0214 (exp.02/28/2022)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Suncoast Partnership to End Homelessness, Inc.

Prefix: Mr.

First Name: Christopher

Middle Name:

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Organizational Affiliation: Christopher Johnson

Telephone Number: (941) 955-8987

Extension: 104

Email: chris@suncoastpartnership.org

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip/Postal Code: 34234

2. Employer ID Number (EIN): 20-2783762

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received

4a. Total Amount Requested for this project: \$103,468

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, city and state) of the project or activity: CoC Planning Project Application FY2021 1750 17th Street, C-1 Sarasota Florida

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
 (For further information, see 24 CFR Sec. 4.3).

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. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
HUD, 451 7th Street, S.W., Washington, DC 20410	Grant	\$74,875.00	HMIS
HUD, 451 7th Street, S.W., Washington, DC 20410	Grant	\$50,006.00	Coordinated Entry
HUD, 451 7th Street, S.W., Washington, DC 20410	Grant	\$103,468.00	CoC Planning

Part III Interested Parties

You must disclose:

FY2021 CoC Planning Project Application	Page 10	11/08/2021
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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).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation	Financial Interest in Project/Activity (\$)	Financial Interest in Project/Activity (%)
Suncoast Partnership to End Homelessness		Recipient of HMIS Funds	\$74,875.00	100%
Suncoast Partnership to End Homelessness		Recipient of CE Funds	\$50,006.00	100%
Suncoast Partnership to End Homelessness		Recipient of Planning Funds	\$103,468.00	100%

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

I AGREE:

Name / Title of Authorized Official: Christopher Johnson, Chief Executive Officer

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/04/2021

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Suncoast Partnership to End Homelessness, Inc.

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.	e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
b. Establishing an on-going drug-free awareness program to inform employees --- (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted --- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;	g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.
d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;	

Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application.
 Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I

X

acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Authorized Representative

Prefix: Mr.

First Name: Christopher

Middle Name

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Telephone Number: (941) 955-8987
(Format: 123-456-7890)

Fax Number: (941) 209-5595
(Format: 123-456-7890)

Email: chris@suncoastpartnership.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/04/2021

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person 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 this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person 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 this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file

the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: Suncoast Partnership to End Homelessness, Inc.

Name / Title of Authorized Official: Christopher Johnson, Chief Executive Officer

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/04/2021

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES
Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.
Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. 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."

Answer "No" if your organization is NOT engaged in lobbying.

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? No

Legal Name: Suncoast Partnership to End Homelessness, Inc.

Street 1: 1750 17th Street, C-1

Street 2:

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34234

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

X

Authorized Representative

Prefix: Mr.

First Name: Christopher

Middle Name:

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Telephone Number: (941) 955-8987
(Format: 123-456-7890)

Fax Number: (941) 209-5595
(Format: 123-456-7890)

Email: chris@suncoastpartnership.org

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/04/2021

IK. SF-424B

(SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007
Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|-----------|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |

- | | |
|-----|--|
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |
| 9. | Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements. |
| 10. | Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more. |
| 11. | Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205). |
| 12. | Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system. |
| 13. | Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.). |
| 14. | Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance. |
| 15. | Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance. |
| 16. | Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures. |
| 17. | Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations." |
| 18. | Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program. |
| 19. | Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award. |

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: Suncoast Partnership to End Homelessness, Inc.
Prefix: Mr.

First Name: Christopher

Middle Name:

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Signature of Authorized Certifying Official: Considered signed upon submission in e-snaps.

Date Signed: 11/04/2021

2A. Project Detail

- 1. CoC Number and Name:** FL-500 - Sarasota, Bradenton/Manatee, Sarasota Counties CoC
- 2. Collaborative Applicant Name:** Suncoast Partnership to End Homelessness, Inc.
- 3. Project Name:** CoC Planning Project Application FY2021
- 4. Component Type:** CoC Planning Project Application

2B. Project Description

1. Provide a description that addresses the entire scope of the proposed project and how the Collaborative Applicant will use grant funds to comply with 24 CFR 578.7:

For the past four years, our CoC has undergone a significant change in the design, and implementation of our homeless crisis response system, coordinated entry, and governance to ensure our community has the right criteria in place to prevent and end homelessness. We have continued to grow the Leadership Council established in FY17, annualized our request for proposals process to reduce the time crunch typically associated with the release of funding opportunities to allow for well thought through projects and collaboration that meet needs, fill gaps, and strengthen our homeless response system and community performance, and increased capacity at the lead agency to fully support our CoC and carry out the tasks and responsibilities of part 578, Continuum of Care program.

Over the past year specifically, the planning grant has allowed for us to expand coordination and collaboration through coordinated entry and case conferencing where we are facilitating separate bi-weekly meetings specific to individuals, families, Veterans and Unaccompanied Homeless Youth. These have expanded to include agencies previously not connected and absent from these meetings. Suncoast Partnership staff also continues to attend a weekly case conferencing focused on individuals coming into the system through law enforcement outreach teams. It has also allowed for improvements to our project and contract monitoring and evaluation.

In addition to ongoing management of the CoC program, community planning, and coordinated entry, specific objectives for the upcoming year include addressing the following identified needs and gaps: enhancing Manatee County collaboration in connection to the overall CoC; the development of a bi-weekly Manatee county specific outreach meeting to extend the strengths developed in Sarasota into Manatee; Creation of robust web-based on-demand orientation to educate on best practices, criteria and benchmarks for preventing and ending homelessness in a community; continued recruitment of Leadership Council members to fill known missing components (business, Manatee PHA, etc.); continued improvements to our monitoring and evaluation processes of projects and system components as well as targeted system component collaborative meetings with agencies; further planning around cross system data compilation to improve our community's access to a more comprehensive picture of system performance.

The Suncoast Partnership, with the assistance of this planning grant and increased funding from local governments and private foundations, continues to build the needed capacity to provide improved community wide planning and project development, grant management, evaluation of projects and approaches, coordination of services, and implementation of a more complete and effective coordinated entry system

2. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.

The planning grant supports, in part, three staff focused on CoC program management and compliance, coordinated entry and the homeless crisis response system, and grant and contract management including monitoring and evaluation. It also provides funds to support the executive team of the Chief Executive Officer (CEO), Chief Administrative Officer (CAO), and Chief Information Officer (CIO), all of whom are active participants in completion of activities under the planning grant and operation of the CoC program and homeless crisis response system in our community, as well as the planning, supervision, monitoring and evaluation. Specific additional tasks identified to be completed this year are estimated as follows:

Enhancing Manatee County collaboration in connection to the overall CoC: key leadership changes in agencies in Manatee county have opened the opportunity to build relationships to ensure that our two-county CoC operates as one cohesive system, ensuring consistency across county lines. Suncoast Partnership has been intentionally building strong relationships with Manatee county system providers throughout the pandemic, and is now seeing the beginnings of true progress. Suncoast staff will fully integrate Manatee County agencies in case-conferencing, outreach development, and rapid rehousing efforts by March 2022. This is measured by the agencies participation in these planning discussions and ongoing attendance at bi-weekly meetings.

The development of a bi-weekly Manatee county specific outreach meeting to extend the strengths developed in Sarasota into Manatee: Sarasota county has a robust weekly outreach meeting that coalesces outreach efforts across the county. Manatee county has committed to a similar meeting but will need intensive guidance to make this profitable to the system. These meetings began in October of 2022 and will be fully formed with all participating members by February of 2022.

Creation of robust web-based on-demand orientation to educate on best practices, criteria and benchmarks for preventing and ending homelessness in a community: Suncoast Partnership HMIS staff perform training on best-practices across the CoC. The pandemic brought to light the benefits and flexibilities of web-based training. In addition, it revealed the ability to record trainings and offer on-demand modules hosted to be hosted on Suncoast Partnership's website. This knowledge library of training materials in best-practices and HMIS needs is under construction and will have all the basic required and beneficial training archived by June 2022.

Continued recruitment of Leadership Council members to fill known missing components (business, Manatee PHA, etc.): Our Leadership Council has grown in impact by adding three seats to the Council this past year: a LGBTQ representative, a Seniors representative, and a Disability Services representative. The Council has recruited a hospital representative and one business representative, however, there are sectors and key system representation not yet participating: the Manatee County PHA, Manatee county business representative, Transition age youth, and Manatee Law Enforcement. The Leadership Council meeting will include discussion on these seats until they are filled which will be by August 2022.

Continued improvements to our monitoring and evaluation processes of projects and system components as well as targeted system component collaborative meetings with agencies: This past year, Suncoast Partnership brought agencies

together to do a system review of Coordinated Entry utilizing the HUD Coordinated Entry Process Self-Assessment and discussed how to better align the system for optimal performance. Suncoast Partnership also held two meetings of the rapid rehousing providers to discuss barriers, best practices, housing challenges and housing solutions. Similar meetings and system review initiatives must be held to coordinate and enhance Diversion/Early Intervention points within the system, Emergency Shelters, and PSH providers in order to ensure the highest and best use of funding, adherence to best practices and integrate the dynamic changes the system faces. These meetings will be held annually and will be completed each year prior to the CoC Annual Meeting in August 2022.

Further planning around cross system data compilation to improve our community's access to a more comprehensive picture of system performance: Unite Us has gained traction within the CoC and agencies that do not currently utilize HMIS and using Unite Us as a referral and data entry tool for Behavioral Health agencies and Healthcare agencies. It is imperative that the Homeless Crisis Response System compile data from this system to better serve clients that move across systems. These discussions have been ongoing with Unite Us and with the advent of a Mental Health Special Taxing District in Sarasota, the bridge between these systems must be integrated to best coordinate across the CoC. In addition, Suncoast Partnership's Chief Information Officer continues to participate in statewide calls around data warehousing as part of large strategy exploration. He is also utilizing Tableau to integrate data from HMIS with other available community data such as law enforcement outreach contacts and hosting interactive Tableau charts on Suncoast Partnership's website presenting PIT data over time. This will continue to be an ongoing effort by the lead agency to explore options and best practices that inform the Leadership Council. Due to the complexity in the nature of this goal, it is anticipated this will continue beyond the next year.

3. How will the requested funds improve or maintain the CoC's ability to evaluate the outcome of CoC and ESG projects?

With the support of planning dollars, the Suncoast Partnership has been able to make important improvements to the monitoring and evaluation process for CoC and ESG projects to ensure we are looking at and assessing the right criteria and most relevant data to effectively evaluate projects. Our expanded process which has included a dedicated Coordinated Entry Project Manager, a coordinated entry monitoring tool, has allowed us to better identify, and work with, projects that are not fully following guidelines and best practices as established by CoC and ESG rule as well as our Continuum of Care. We have been able to take on the addition of Sarasota County ESG dollars coming through our office which we subcontract to service providers to ensure the highest and best use within our coordinated entry system. This has been particularly vital with the influx of ESG-CV dollars into our community, increasing our ESG footprint by over 230% in 2020/2021. The planning grant has also helped to support a contract position that thoroughly monitors ESG and State dollars coming through our office on a monthly basis as part of the invoice process. She looks at data entry for consistency and correctness, views client stability plans and case notes, confirms information provided in invoicing matches information in HMIS, and provides technical assistance to sub-grantees and other service providers. The requested funds will continue to allow

us to manage these improvements we have made and allow for Suncoast Partnership to dedicate time to improving coordination with Manatee County in respects to ESG dollars and overall coordination of homeless dollars and services. As previously noted, this is vital as we continue to monitor, manage, and coordinate ESG / ESG-CV funding throughout 2022. And while we have made significant progress in our agency and Continuum's ability to evaluate performance of projects, there is always improvements to be made and more work to do. The planning dollars are necessary for our agency to train on best practices, monitor and evaluate on progress, and report information and findings.

3A. Governance and Operations

1. How often does the CoC conduct meetings of the full CoC membership? Bi-Monthly

2. Does the CoC include membership of a homeless or formerly homeless person? Yes

2a. For members who are homeless or formerly homeless, what role do they play in the CoC membership? (Select all that apply)

Participates in CoC meetings:	<input checked="" type="checkbox"/>
Votes, including electing Coc Board:	<input checked="" type="checkbox"/>
Sits on CoC Board:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

3. Does the CoC's governance charter incorporate written policies and procedures for each of the following

3a. Written agendas of CoC meetings? Yes

3b. Coordinated Entry? (Also known as centralized or coordinated assessment) Yes

3c. Process for monitoring outcomes of ESG recipients? Yes

3d. CoC policies and procedures? Yes

3e. Written process for board selection? Yes

3f. Code of Conduct for board members that includes a recusal process? Yes

3g. Written standards for administering assistance? Yes

4. Were there any written complaints received by the CoC in relation to project review, project selection, or other items related to 24 CFR 578.7 or 578.9 within the past 12 months? No

3B. Committees

Provide information for up to five of the most active CoC-wide planning committees, subcommittees and/or workgroups, to address homeless needs in the CoC's geographic area that recommend and set policy priorities for the CoC, including a brief description of the role and the frequency of the meetings. Only include committees, subcommittees and/or workgroups, that are directly involved in CoC-wide planning and not the regular delivery of services.

Name of Group	Role of the Group (max 750 characters)	Meeting Frequency	Name of Individuals and/or Organizations Represented
Leadership Council	Act as the planning and advisory Board for the CoC, includes key influencers in the community, each with decision making ability within their organizations or within their population. 24 different organizations and advocates, across system sectors including youth and lived homeless experience representation.	Bi-Monthly	30 different individuals/organizations representing government, private philanthropy, mental health, Sarasota Memorial Hospital, law enforcement, Lived Homeless experience, and CEO's from 6 community service providers.
Review and Rank Committee	Assist in the development of the annual request for proposal and review, scoring and ranking of submitted proposals. They also review and respond to appeals if necessary. They report all results of their committee work up to the full Leadership Council.	No regular meetings	5 organizations represented with Tarnisha Cliatt, the CEO of the Black Chamber of Commerce acting as the chair of the committee. Suncoast Partnership executive team serve as lead agency representatives.
Strategic Planning	This group develops and updates the strategic plan, gathering input from other workgroups as needed.	No regular meetings	6 Community organizations represented by Eduardo Gloria, COO of Catholic Charities as chair; Scott Eller, CEO CASL and Tarnisha Cliatt, CEO Black Chamber as Leadership Council representation. Suncoast Partnership CEO as lead agency representative.
Veteran Leadership workgroup	This group reviews Veteran priorities and progress towards criteria and benchmarks and identifies any gaps and strategies to address them.	Monthly	SSVF program directors from JFCS and Turning Points, Lue Richardson, VA Coordinated Entry, Gpd representatives, and Suncoast Partnership Veteran by-name list manager support.
HMIS Workgroup	Focuses on data integrity, data collaboration and sharing, performance standards and issues of security and privacy within the CoC.	Quarterly	20 participants representing 12 HMIS user organizations with Brandon Bellows, Suncoast Partnership Chief Information Officer as staff representative.

4A. Sources of Match

The following list summarizes the funds that will be used as Match for the project. To add a Matching source to the list, select the icon. To view or update a Matching source already listed, select the icon.

Summary for Match

Total Value of Cash Commitments:	\$26,000
Total Value of In-Kind Commitments:	\$0
Total Value of All Commitments:	\$26,000

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Type	Source	Contributor	Value of Commitments
Cash	Government	State of Florida ...	\$26,000

Sources of Match Details

1. Type of commitment: Cash

2. Source: Government

3. Name of source: State of Florida Staffing Grant

(Be as specific as possible and include the office or grant program as applicable)

4. Value of Written Commitment: \$26,000

4B. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 15, 2023? Yes

2. Does this project propose to allocate funds according to an indirect cost rate? No

3. Select a grant term: 1 Year

A description must be entered for Quantity. Any costs without a Quantity description will be removed from the budget.

Eligible Costs:	Quantity AND Description (max 400 characters)	Annual Assistance Requested (Applicant)
1. Coordination Activities	17% FTE-Project Manager salary \$27,040 plus benefits; 15% FTE -CAO salary \$70,083 plus benefits; 15% FTE-CEO salary \$106,400 plus benefits; 25% FTE Coordinated Entry Project Mgr salary @49,003.50 plus benefits.	\$51,333
2. Project Evaluation	3% FTE -CAO salary \$70,083 plus benefits; 3% FTE-CEO salary \$106,400 plus benefits; 2% FTE-CIO salary \$80,008.50 plus benefits	\$7,867
3. Project Monitoring Activities	5% FTE-CAO salary \$70,083 plus benefits; 20% FTE-Contract Manager salary \$50,017.50 plus benefits, 20% PTE – Project Manager salary \$27,040 plus benefits	\$22,611
4. Participation in the Consolidated Plan		
5. CoC Application Activities	5% FTE- CAO salary @ 70,083 plus benefits, 5% FTE -CIO salary \$80,008.50 plus benefits, 5% FTE-CEO salary @ 106,400 plus benefits	\$14,443
6. Determining Geographical Area to Be Served by the CoC		
7. Developing a CoC System		
8. HUD Compliance Activities	10% PTE-Project Manager salary \$27,040 plus benefits, 2% FTE-CEO salary \$106,400 plus benefits; 2% FTE- CAO salary @ 70,083 plus benefits	\$7,214
Total Costs Requested		\$103,468
Cash Match		\$26,000
In-Kind Match		\$0
Total Match		\$26,000
Total Budget		\$129,468

Click the 'Save' button to automatically calculate the Total Assistance

5A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1. Other Attachment(s)	No		
2. Other Attachment(s)	No		

Attachment Details

Document Description:

Attachment Details

Document Description:

5B. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or

disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance.

It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

1-Year Operation Rule.

For applicants receiving assistance for CoC planning: the project will be operated for the purpose specified in the application for any year for which such assistance is provided.

D. Explanation.

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall attach an explanation behind this page.

Name of Authorized Certifying Official: Christopher Johnson

Date: 11/04/2021

Title: Chief Executive Officer

Applicant Organization: Suncoast Partnership to End Homelessness, Inc.

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

X

6A. Submission Summary

Page	Last Updated
1A. SF-424 Application Type	No Input Required
1B. SF-424 Legal Applicant	No Input Required
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	11/04/2021
1E. SF-424 Compliance	10/28/2021
1F. SF-424 Declaration	10/28/2021
1G. HUD 2880	11/03/2021
1H. HUD 50070	10/28/2021
1I. Cert. Lobbying	10/28/2021
1J. SF-LLL	10/28/2021

IK. SF-424B	10/28/2021
2A. Project Detail	10/28/2021
2B. Description	10/29/2021
3A. Governance and Operations	10/29/2021
3B. Committees	10/29/2021
4A. Match	11/04/2021
4B. Funding Request	11/04/2021
5A. Attachment(s)	No Input Required
5B. Certification	10/29/2021

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2021 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition. For more information see FY 2021 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2021 CoC Program NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- Before starting the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- Carefully review each question in the Project Application. Questions from previous competitions may have been changed or removed, or new questions may have been added, and information previously submitted may or may not be relevant. Data from the FY 2019 Project Application will be imported into the FY 2021 Project Application; however, applicants will be required to review all fields for accuracy and to update information that may have been adjusted through the post award process or a grant agreement amendment. Data entered in the post award and amendment forms in e-snaps will not be imported into the project application.
- Rental assistance projects can only request the number of units and unit size as approved in the final HUD-approved Grant Inventory Worksheet (GIW).
- Transitional housing, permanent supportive housing with leasing, rapid re-housing, supportive services only, renewing safe havens, and HMIS can only request the Annual Renewal Amount (ARA) that appears on the CoC's HUD-approved GIW. If the ARA is reduced through the CoC's reallocation process, the final project funding request must reflect the reduced amount listed on the CoC's reallocation forms.
- HUD reserves the right to reduce or reject any renewal project that fails to adhere to 24 CFR part 578 and the application requirements set forth in the FY 2021 CoC Program Competition NOFA.

1A. SF-424 Application Type

1. Type of Submission: Application

2. Type of Application: Renewal Project Application

If "Revision", select appropriate letter(s):

If "Other", specify:

3. Date Received: 11/02/2021

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier: FL0006

This is the first 6 digits of the Grant Number, known as the PIN, that will also be indicated on Screen 3A Project Detail. This number must match the first 6 digits of the grant number on the HUD approved Grant Inventory Worksheet (GIW).

Check to confirm that the Federal Award Identifier has been updated to reflect the most recently awarded grant number

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: Suncoast Partnership to End Homelessness, Inc.

b. Employer/Taxpayer Identification Number (EIN/TIN): 20-2783762

	c. Organizational DUNS:	610943651	PLUS 4	
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d. Address

Street 1: 1750 17th Street, C-1

Street 2:

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34234

e. Organizational Unit (optional)

Department Name: NA

Division Name: NA

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Mr.

First Name: Brandon

Middle Name:

Last Name: Bellows

Suffix:

Title: Chief Information Officer

Organizational Affiliation: Suncoast Partnership to End Homelessness, Inc.

Telephone Number: (941) 955-8987

Extension: 101
Fax Number: (941) 209-5595
Email: Brandon@suncoastpartnership.org

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6500-N25

Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (State(s) only): Florida
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: FL-500 HMIS Renewal FY2019

16. Congressional District(s):

a. Applicant: FL-016, FL-017
(for multiple selections hold CTRL key)

b. Project: FL-016, FL-017
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 02/01/2021

b. End Date: 01/31/2022

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

I AGREE:

21. Authorized Representative

Prefix: Mr.

First Name: Christopher

Middle Name:

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Telephone Number: (941) 955-8987
(Format: 123-456-7890)

Fax Number: (941) 209-5595
(Format: 123-456-7890)

Email: chris@suncoastpartnership.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/02/2021

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2506-0214 (exp.02/28/2022)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Suncoast Partnership to End Homelessness, Inc.

Prefix: Mr.

First Name: Christopher

Middle Name:

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Organizational Affiliation: Christopher Johnson

Telephone Number: (941) 955-8987

Extension: 104

Email: chris@suncoastpartnership.org

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip/Postal Code: 34234

2. Employer ID Number (EIN): 20-2783762

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received

4a. Total Amount Requested for this project: \$74,575

5. State the name and location (street address, city and state) of the project or activity: FL-500 HMIS Renewal FY2019 1750 17th Street, C-1 Sarasota Florida

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
 (For further information, see 24 CFR Sec. 4.3).

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. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
HUD, 451 7th Street, S.W., Washington, DC 20410	Grant	\$74,875.00	HMIS
HUD, 451 7th Street, S.W., Washington, DC 20410	Grant	50006.0	Coordinated Entry
HUD, 451 7th Street, S.W., Washington, DC 20410	Grant	\$103,468.00	CoC Planning

Part III Interested Parties

You must disclose:
 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).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation	Financial Interest in Project/Activity (\$)	Financial Interest in Project/Activity (%)
Suncoast Partnership to End Homelessness		Recipient of HMIS Funds	\$74,875.00	100%
Suncoast Partnership to End Homelessness		Recipient of CE Funds	\$50,006.00	100%
Suncoast Partnership to End Homelessness		Recipient of Planning Funds	\$103,468.00	100%

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

I AGREE:

Name / Title of Authorized Official: Christopher Johnson, Chief Executive Officer

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 10/28/2021

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Suncoast Partnership to End Homelessness, Inc.

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.	e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
b. Establishing an on-going drug-free awareness program to inform employees --- (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted --- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;	g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.
d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;	

Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application.
 Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I

X

acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.



WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Authorized Representative

Prefix: Mr.

First Name: Christopher

Middle Name

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Telephone Number: (941) 955-8987
(Format: 123-456-7890)

Fax Number: (941) 209-5595
(Format: 123-456-7890)

Email: chris@suncoastpartnership.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/02/2021

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person 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 this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person 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 this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file

the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: Suncoast Partnership to End Homelessness, Inc.

Name / Title of Authorized Official: Christopher Johnson, Chief Executive Officer

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/02/2021

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES
Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.
Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. 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."

Answer "No" if your organization is NOT engaged in lobbying.

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? No

Legal Name: Suncoast Partnership to End Homelessness, Inc.
Street 1: 1750 17th Street, C-1
Street 2:
City: Sarasota
County: Sarasota
State: Florida
Country: United States
Zip / Postal Code: 34234

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

Authorized Representative

Prefix: Mr.

First Name: Christopher

Middle Name:

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Telephone Number: (941) 955-8987
(Format: 123-456-7890)

Fax Number: (941) 209-5595
(Format: 123-456-7890)

Email: chris@suncoastpartnership.org

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/02/2021

IK. SF-424B

(SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007
Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|-----------|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |

- 8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- 9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
- 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
- 13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
- 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
- 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
- 18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
- 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: Suncoast Partnership to End Homelessness, Inc.
Prefix: Mr.

First Name: Christopher

Middle Name:

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Signature of Authorized Certifying Official: Considered signed upon submission in e-snaps.

Date Signed: 11/02/2021

Information About Submission without Changes

Follow the instructions below making note of the exceptions and limitations to the “Submit Without Changes” process.

In general, HUD expects a project’s proposed project application information will remain the same from year-to-year unless changes are directed by HUD or approved through the grant agreement amendment process. However, HUD expects applicants to carefully review their information to determine if submitting without changes accurately reflects the expiring grant requesting renewal.

Due to e-snaps limitations, only previously submitted renewal applications can import data into the FY 2021 renewal project application. The data from previously submitted new and renewal project applications can be imported into a FY 2021 renewal project application. The “Submit without Changes” process is not applicable for:

- first time renewing project applications
- a project application that did not import last FY 2019 information
- a project that had Issues or Conditions that were addressed in FY 2019 Post-Award and updates need to be reflected in the FY 2021 project application
- a project that had amendments approved in FY 2019 or FY 2020 that need to be reflected in the FY 2021 project application

e-snaps will automatically be set to “Make Changes” and all questions on each screen must be updated.

Renewal projects that brought forward data from FY 2019 and have either a Leasing budget, Operating budget or use HUD PAID RENTS (Actual Rents) instead of FMR MAY NOT use the “Submit Without Changes” process and e-snaps will automatically be set to “Make Changes”. All Leasing and Operating budgets, along with Rental Assistance budgets that use HUD PAID Rent will need to be updated in the application. Refer to the GIW posted on the HUD Exchange for accurate budget information on leasing and operating budgets and refer to the HUD PAID RENT document sent by your field office from HUD HQ to accurately set your rental assistance budgets that use HUD PAID rents. This will only impact the FY 2021 competition.

The e-snaps screens that remain “open” for required annual updates and do not affect applicants’ ability to select “Submit without Changes” are:

- Recipient Performance Screen
- Consolidation and Expansion
- Screen 3A. Project Detail
- Screen 6D. Sources of Match
- All of Part 7: Attachments and Certification; and
- All of Part 8: Submission Summary.

All other screens in Part 2 through Part 6 begin in “Read-Only” format and should be reviewed for accuracy; including any updates that were made to the 2019 or 2020 project during the CoC Post Award Issues and Conditions process or as amended. If all the imported data is accurate and no edits or updates are needed to any screens other than the mandatory screens and questions noted above, project applicants should select “Submit Without Changes” in Part 8. If project applicants imported data and do need to make updates to the information on one or more screens, they must navigate to Part 8: “Submission Without Changes” Screen, select “Make Changes”, and check the box next to each relevant screen title to unlock screens for editing. After project applicants select the screens they intend to edit via checkboxes, click “Save” and those screens will be available for edit. Once a project applicant selects a checkbox and clicks “Save”, the project applicant cannot uncheck the box.

Please refer to the Detailed Instructions found on the left side menu of e-snaps or hud.gov to find more in depth information about applying under the FY 2021 CoC Competition.

Submission Without Changes

- 1. Are the requested renewal funds reduced from the previous award due to reallocation?** No
- 2. Do you wish to submit this application without making changes? Please refer to the guidelines below to inform you of the requirements.** Submit without changes

The applicant has selected “Submit without changes” to Question 2 above. If the applicant has identified project information on the preceding screens that does not match the current contract, select “Make changes” above and update the relevant project information.

Recipient Performance

1. Did you submit your previous year's Annual Performance Report (APR) on time? Yes

2. Do you have any unresolved HUD Monitoring or OIG Audit finding(s) concerning any previous grant term related to this renewal project request? No

3. Do you draw funds quarterly for your current renewal project? Yes

4. Have any funds remained available for recapture by HUD for the most recently expired grant term related to this renewal project request? No

Renewal Grant Consolidation or Renewal Grant Expansion

The FY2021 CoC Competition will continue offering opportunities to expand or consolidate CoC projects. A few changes have occurred that differentiate the process from FY 2019.

1. Expansions and Consolidations will submit individual applications.
 - a. Expansions will ONLY submit a Stand-Alone Renewal application and a Stand-Alone New application.
 - b. Consolidations will ONLY submit individual renewal project applications, identifying the renewal application that will survive, and the renewal applications that will terminate. Up to 10 grants may be included in a consolidation.
2. HUD HQ will combine the data (e.g., units, budgets) for Expansion or Consolidation requests from the individual project applications selected for conditional award and provide a data report with further instructions for the field office and conditional recipient.

**1. Is this renewal project application No
requesting to consolidate or expand?**

If "No" click on "Next" or "Save & Next" below to move to the next screen.

2A. Project Subrecipients

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards: \$0

Organization	Type	Sub-Award Amount
This list contains no items		

3A. Project Detail

1. Expiring Grant Project Identification Number (PIN): FL0006

(e.g., the "Federal Award Identifier" indicated on form 1A. Application Type)

2. CoC Number and Name: FL-500 - Sarasota, Bradenton/Manatee, Sarasota Counties CoC

3. CoC Collaborative Applicant Name: Suncoast Partnership to End Homelessness, Inc.

4. Project Name: FL-500 HMIS Renewal FY2019

5. Project Status: Standard

6. Component Type: HMIS

7. Is your organization, or subrecipient, a victim service provider defined in 24 CFR 578.3? No

3B. Project Description

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

1. Provide a description that addresses the entire scope of the proposed project.

The Suncoast Partnership to End Homelessness (SPEH) has successfully administered the HMIS system for its partners in the Continuum of Care for Manatee and Sarasota Counties, Florida for 15 years. The HMIS software that is used for data collection and reporting is ServicePoint from Wellsky. In the capacity of HMIS Lead Agency, the Suncoast Partnership oversees system security and licensing; data quality, consistency, and timeliness; all training and support for system users; and data reporting for CoC, ESG, CDBG, CSBG, SSVF and other local projects. Our HMIS team supports 237 users and 30 agencies with 147 projects throughout 2 counties. To best serve these agencies and users, we provide regularly scheduled trainings that include basic and advanced skills, both in person, on-site, and web based. To ensure the highest possible HMIS data, we provide monthly reports that cover HUD Universal Data Element completeness, data entry timeliness, and data consistency. This allows us to monitor for any data entry issues and provide targeted training. Additionally, we provide locally created performance reports that cover measures such as exits to permanent housing, increases in income, returns to homelessness, among other key measures of success. This allows us to identify underperforming projects, to either provide training, discuss project changes, or reconsider funding options.

HMIS staff design custom reports as needed; monitor outcomes and assure timely reporting to HUD. HMIS plays an important role in assuring homelessness in our CoC is rare, brief, and non-recurring. The HMIS system in our region has continued to expand the use of new modules and features. HMIS is the foundation of the Coordinated Entry process, providing a means to collect, organize, and assess information on persons experiencing homelessness in a uniform fashion using Access Points strategically placed throughout the community. This allows for better coordination of services, utilizing case conferencing, and prioritizing clients for service. The HMIS team works closely with continuum partners, local non-profits, businesses, churches, city, county and state governments to identify priorities and gaps in service for our diverse homeless population. Our HMIS system is now working on developing data sharing and coordination with local hospitals, domestic violence resources and shelters, local jails, and mental health providers while still protecting the privacy of the clients.

4A. HMIS Standards

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

1. Is the HMIS currently programmed to collect all Universal Data Elements (UDEs) as set forth in the 2020 HMIS Data Standard Notice? Yes

2. Does the HMIS produce all HUD-required reports and provide data needed for HUD reporting? (i.e., Annual Performance Reports, Annual Homeless Assessment table shells (this will be the Logitudinal System Analysis next year), data for CAPER/ESG reporting, SPM and Data Quality Table, etc).Assessment table shells (this will be the Logitudinal System Analysis next year), data for CAPER/ESG reporting, SPM and Data Quality Table, etc). Yes

3. Is your HMIS capable of generating all reports required by all Federal partners including HUD, VA, and HHS? Yes

4. Does the HMIS provide the CoC with an unduplicated count of program participants receiving services in the CoC? Yes

5. Does your HMIS implementation have a staff person responsible for insuring the implementation meets all privacy and security standards as required by HUD and the federal partners? Yes

6. Does your organization conduct a background check on all employees who access HMIS or view HMIS data? Yes

7. Does the HMIS Lead conduct Privacy and Security Training and follow up on privacy and security standards on a regular basis? Yes

8. Do you have a process in place to remove licenses for former users who no longer need access to HMIS (e.g. leave their job, fired, etc.) Yes

8a. How long does it take to remove licenses for former HMIS users? Within 24 hours

6A. Funding Request

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

2. Was the original project awarded as either a Samaritan Bonus or Permanent Housing Bonus project? No

3. Does this project propose to allocate funds according to an indirect cost rate? No

4. Renewal Grant Term: This field is pre-populated with a one-year grant term and cannot be edited: 1 Year

5. Select the costs for which funding is requested:

HMIS

6D. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the icon. To view or update a Match source already listed, select the icon.

Summary for Match

Total Value of Cash Commitments:	\$50,000
Total Value of In-Kind Commitments:	\$0
Total Value of All Commitments:	\$50,000

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Type	Source	Contributor	Value of Commitments
Cash	Government	Office of Housing...	\$50,000

Sources of Match Detail

- 1. Type of Match Commitment:** Cash
- 2. Source:** Government
- 3. Name of Source:** Office of Housing and Community Development
(Be as specific as possible and include the office or grant program as applicable)
- 4. Amount of Written Commitment:** \$50,000

6E. Summary Budget

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

The following information summarizes the funding request for the total term of the project. Budget amounts from the Leased Units, Rental Assistance, and Match screens have been automatically imported and cannot be edited. However, applicants must confirm and correct, if necessary, the total budget amounts for Leased Structures, Supportive Services, Operating, HMIS, and Admin. Budget amounts must reflect the most accurate project information according to the most recent project grant agreement or project grant agreement amendment, the CoC's final HUD-approved FY 2018 GIW or the project budget as reduced due to CoC reallocation. Please note that, new for FY 2018, there are no detailed budget screens for Leased Structures, Supportive Services, Operating, or HMIS costs. HUD expects the original details of past approved budgets for these costs to be the basis for future expenses. However, any reasonable and eligible costs within each CoC cost category can be expended and will be verified during a HUD monitoring.

Eligible Costs	Total Assistance Requested for 1 year Grant Term (Applicant)
1a. Leased Units	\$0
1b. Leased Structures	\$0
2. Rental Assistance	\$0
3. Supportive Services	\$0
4. Operating	\$0
5. HMIS	\$67,800
6. Sub-total Costs Requested	\$67,800
7. Admin (Up to 10%)	\$6,775
8. Total Assistance plus Admin Requested	\$74,575
9. Cash Match	\$50,000
10. In-Kind Match	\$0
11. Total Match	\$50,000
12. Total Budget	\$124,575

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No		
2) Other Attachment	No		
3) Other Attachment	No		

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

7B. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance. It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

Additional for Rental Assistance Projects:

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR 578.33(d) or 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

B. For non-Rental Assistance Projects Only.

20-Year Operation Rule.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 20 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

15-Year Operation Rule – 24 CFR part 578 only.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 15 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

1-Year Operation Rule.

For applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provided.

C. Explanation.

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.

Name of Authorized Certifying Official Christopher Johnson

Date: 11/02/2021

Title: Chief Executive Officer

Applicant Organization: Suncoast Partnership to End Homelessness, Inc.

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

Active SAM Status Requirement.

I certify that our organization has an active System for Award Management (SAM) registration as required by 2 CFR 200.300(b) at the time of project application submission to HUD and will ensure this SAM registration will be renewed annually to meet this requirement.

8B Submission Summary

Page	Last Updated
1A. SF-424 Application Type	10/29/2021
1B. SF-424 Legal Applicant	No Input Required
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	11/02/2021
1E. SF-424 Compliance	10/27/2021
1F. SF-424 Declaration	10/28/2021
1G. HUD-2880	11/02/2021

Renewal Project Application FY2021	Page 39	11/08/2021
------------------------------------	---------	------------

1H. HUD-50070	10/28/2021
1I. Cert. Lobbying	10/28/2021
1J. SF-LLL	10/28/2021
IK. SF-424B	10/28/2021
Submission Without Changes	11/02/2021
Recipient Performance	10/27/2021
Renewal Grant Consolidation or Renewal Grant Expansion	10/27/2021
2A. Subrecipients	No Input Required
3A. Project Detail	10/29/2021
3B. Description	10/27/2021
4A. HMIS Standards	10/27/2021
6A. Funding Request	10/27/2021
6D. Match	10/27/2021
6E. Summary Budget	No Input Required
7A. Attachment(s)	No Input Required
7B. Certification	11/02/2021

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2021 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition. For more information see FY 2021 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2021 CoC Program NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- Before starting the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- Carefully review each question in the Project Application. Questions from previous competitions may have been changed or removed, or new questions may have been added, and information previously submitted may or may not be relevant. Data from the FY 2019 Project Application will be imported into the FY 2021 Project Application; however, applicants will be required to review all fields for accuracy and to update information that may have been adjusted through the post award process or a grant agreement amendment. Data entered in the post award and amendment forms in e-snaps will not be imported into the project application.
- Rental assistance projects can only request the number of units and unit size as approved in the final HUD-approved Grant Inventory Worksheet (GIW).
- Transitional housing, permanent supportive housing with leasing, rapid re-housing, supportive services only, renewing safe havens, and HMIS can only request the Annual Renewal Amount (ARA) that appears on the CoC's HUD-approved GIW. If the ARA is reduced through the CoC's reallocation process, the final project funding request must reflect the reduced amount listed on the CoC's reallocation forms.
- HUD reserves the right to reduce or reject any renewal project that fails to adhere to 24 CFR part 578 and the application requirements set forth in the FY 2021 CoC Program Competition NOFA.

1A. SF-424 Application Type

1. Type of Submission: Application

2. Type of Application: Renewal Project Application

If "Revision", select appropriate letter(s):

If "Other", specify:

3. Date Received: 11/01/2021

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier: FL0673

This is the first 6 digits of the Grant Number, known as the PIN, that will also be indicated on Screen 3A Project Detail. This number must match the first 6 digits of the grant number on the HUD approved Grant Inventory Worksheet (GIW).

Check to confirm that the Federal Award Identifier has been updated to reflect the most recently awarded grant number

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

b. Employer/Taxpayer Identification Number (EIN/TIN): 65-0869993

	c. Organizational DUNS:	940621519	PLUS 4	
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d. Address

Street 1: 2911 Fruitville Road

Street 2:

City: Sarasota

County:

State: Florida

Country: United States

Zip / Postal Code: 34237

e. Organizational Unit (optional)

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Ms.

First Name: Phillip

Middle Name:

Last Name: Brooks

Suffix:

Title: COO

Organizational Affiliation: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

Applicant: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

940621519

Project: Suncoast CoC 2021 Renewal PSH-RA COMBINED

191411

Telephone Number: (941) 232-2572

Extension:

Fax Number: (941) 366-0033

Email: pj.brooks@caslinc.org

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6500-N25

Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (State(s) only): Florida
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: Suncoast CoC 2021 Renewal PSH-RA COMBINED

16. Congressional District(s):

a. Applicant: FL-019, FL-016, FL-017, FL-010, FL-009
(for multiple selections hold CTRL key)

b. Project: FL-016, FL-017
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 05/01/2021

b. End Date: 04/30/2022

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

I AGREE:

21. Authorized Representative

Prefix: Mr.

First Name: Julian

Middle Name: Scott

Last Name: Eller

Suffix:

Title: CEO

Telephone Number: (941) 225-2373
(Format: 123-456-7890)

Fax Number: (941) 366-0033
(Format: 123-456-7890)

Email: scott.eller@caslinc.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/01/2021

1G. HUD 2880

**Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2506-0214 (exp.02/28/2022)**

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

Prefix: Mr.

First Name: Julian

Middle Name: Scott

Last Name: Eller

Suffix:

Title: CEO

Organizational Affiliation: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

Telephone Number: (941) 225-2373

Extension:

Email: scott.eller@caslinc.org

City: Sarasota

County:

State: Florida

Country: United States

Zip/Postal Code: 34237

2. Employer ID Number (EIN): 65-0869993

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received

Renewal Project Application FY2021	Page 9	11/08/2021
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4a. Total Amount Requested for this project: \$113,970

5. State the name and location (street address, city and state) of the project or activity: Suncoast CoC 2021 Renewal PSH-RA COMBINED 2911 Fruitville Road Sarasota Florida

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
(For further information, see 24 CFR Sec. 4.3).

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. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
Suncoast Partnership to End Homelessness	PSH	\$100,314.00	Rental Assistance/Support Services
Lee County CoC	PSH	272303.0	Rental Assistance/Support Services
Collier County CoC	PSH	\$69,300.00	Rental Assistance/Supportive Services

Part III Interested Parties

You must disclose:

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).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation	Financial Interest in Project/Activity (\$)	Financial Interest in Project/Activity (%)
Eller, J. Scott	265-73-0445	Program Director/CEO	\$0.00	0%
NA				
NA				
NA				
NA				

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

I AGREE:

Name / Title of Authorized Official: Julian Eller, CEO

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 10/31/2021

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Community Assisted and Supported Living, Inc.
d/b/a Renaissance Manor

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
<p>a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.</p>	<p>e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;</p>
<p>b. Establishing an on-going drug-free awareness program to inform employees --- (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.</p>	<p>f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted --- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;</p>
<p>c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;</p>	<p>g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.</p>
<p>d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;</p>	

Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)
 Workplaces, including addresses, entered in the attached project application.
 Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying

documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.



WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Authorized Representative

Prefix: Mr.

First Name: Julian

Middle Name: Scott

Last Name: Eller

Suffix:

Title: CEO

Telephone Number: (941) 225-2373
(Format: 123-456-7890)

Fax Number: (941) 366-0033
(Format: 123-456-7890)

Email: scott.eller@caslinc.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/01/2021

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person 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 this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person 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 this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction

imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

Name / Title of Authorized Official: Julian Eller, CEO

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/01/2021

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.

Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. 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."

Answer "No" if your organization is NOT engaged in lobbying.

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? No

Legal Name: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

Street 1: 2911 Fruitville Road

Street 2:

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34237

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

Authorized Representative

Prefix: Mr.

First Name: Julian

Middle Name: Scott

Last Name: Eller

Suffix:

Title: CEO

Telephone Number: (941) 225-2373
(Format: 123-456-7890)

Fax Number: (941) 366-0033
(Format: 123-456-7890)

Email: scott.eller@caslinc.org

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/01/2021

IK. SF-424B

(SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007
Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|-----------|--|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |

- | | |
|-----|--|
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |
| 9. | Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements. |
| 10. | Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more. |
| 11. | Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205). |
| 12. | Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system. |
| 13. | Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.). |
| 14. | Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance. |
| 15. | Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance. |
| 16. | Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures. |
| 17. | Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations." |
| 18. | Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program. |
| 19. | Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award. |

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

Prefix: Mr.

First Name: Julian

Middle Name: Scott

Last Name: Eller

Suffix:

Title: CEO

Signature of Authorized Certifying Official: Considered signed upon submission in e-snaps.

Date Signed: 11/01/2021

Information About Submission without Changes

Follow the instructions below making note of the exceptions and limitations to the “Submit Without Changes” process.

In general, HUD expects a project’s proposed project application information will remain the same from year-to-year unless changes are directed by HUD or approved through the grant agreement amendment process. However, HUD expects applicants to carefully review their information to determine if submitting without changes accurately reflects the expiring grant requesting renewal.

Due to e-snaps limitations, only previously submitted renewal applications can import data into the FY 2021 renewal project application. The data from previously submitted new and renewal project applications can be imported into a FY 2021 renewal project application. The “Submit without Changes” process is not applicable for:

- first time renewing project applications
- a project application that did not import last FY 2019 information
- a project that had Issues or Conditions that were addressed in FY 2019 Post-Award and updates need to be reflected in the FY 2021 project application
- a project that had amendments approved in FY 2019 or FY 2020 that need to be reflected in the FY 2021 project application

e-snaps will automatically be set to “Make Changes” and all questions on each screen must be updated.

Renewal projects that brought forward data from FY 2019 and have either a Leasing budget, Operating budget or use HUD PAID RENTS (Actual Rents) instead of FMR MAY NOT use the “Submit Without Changes” process and e-snaps will automatically be set to “Make Changes”. All Leasing and Operating budgets, along with Rental Assistance budgets that use HUD PAID RENT will need to be updated in the application. Refer to the GIW posted on the HUD Exchange for accurate budget information on leasing and operating budgets and refer to the HUD PAID RENT document sent by your field office from HUD HQ to accurately set your rental assistance budgets that use HUD PAID rents. This will only impact the FY 2021 competition.

The e-snaps screens that remain “open” for required annual updates and do not affect applicants’ ability to select “Submit without Changes” are:

- Recipient Performance Screen
- Consolidation and Expansion
- Screen 3A. Project Detail
- Screen 6D. Sources of Match
- All of Part 7: Attachments and Certification; and
- All of Part 8: Submission Summary.

All other screens in Part 2 through Part 6 begin in “Read-Only” format and should be reviewed for accuracy; including any updates that were made to the 2019 or 2020 project during the CoC Post Award Issues and Conditions process or as amended. If all the imported data is accurate and no edits or updates are needed to any screens other than the mandatory screens and questions noted above, project applicants should select “Submit Without Changes” in Part 8. If project applicants imported data and do need to make updates to the information on one or more screens, they must navigate to Part 8: “Submission Without Changes” Screen, select “Make Changes”, and check the box next to each relevant screen title to unlock screens for editing. After project applicants select the screens they intend to edit via checkboxes, click “Save” and those screens will be available for edit. Once a project applicant selects a checkbox and clicks “Save”, the project applicant cannot uncheck the box.

Please refer to the Detailed Instructions found on the left side menu of e-snaps or hud.gov to

find more in depth information about applying under the FY 2021 CoC Competition.

Submission Without Changes

1. Are the requested renewal funds reduced from the previous award due to reallocation? No

2. Do you wish to submit this application without making changes? Please refer to the guidelines below to inform you of the requirements. Make changes

3. Specify which screens require changes by clicking the checkbox next to the name and then clicking the Save button.

Part 2 - Subrecipient Information	
2A. Subrecipients	<input type="checkbox"/>
Part 3 - Project Information	
3A. Project Detail	<input checked="" type="checkbox"/>
3B. Description	<input type="checkbox"/>
3C. Dedicated Plus	<input type="checkbox"/>
Part 4 - Housing Services and HMIS	
4A. Services	<input type="checkbox"/>
4B. Housing Type	<input type="checkbox"/>
Part 5 - Participants and Outreach Information	
5A. Households	<input type="checkbox"/>
5B. Subpopulations	<input type="checkbox"/>
Part 6 - Budget Information	
6A. Funding Request	<input checked="" type="checkbox"/>
6C. Rental Assistance	<input checked="" type="checkbox"/>
6D. Match	<input checked="" type="checkbox"/>

6E. Summary Budget	<input type="checkbox"/>
Part 7 - Attachment(s) & Certification	
7A. Attachment(s)	<input checked="" type="checkbox"/>
7B. Certification	<input checked="" type="checkbox"/>

You have selected "Make Changes" to question #2 above. Provide a brief description of the changes that will be made to the project information screens (bullets are appropriate):

Updating project award amounts and narrative.

You have selected "Make Changes." Once this screen is saved, you will be prohibited from "unchecking" any box that has been checked regardless of whether a change to data on the corresponding screen will be made.

Recipient Performance

1. Did you submit your previous year's Annual Performance Report (APR) on time? Yes

2. Do you have any unresolved HUD Monitoring or OIG Audit finding(s) concerning any previous grant term related to this renewal project request? No

3. Do you draw funds quarterly for your current renewal project? Yes

4. Have any funds remained available for recapture by HUD for the most recently expired grant term related to this renewal project request? No

Renewal Grant Consolidation or Renewal Grant Expansion

The FY2021 CoC Competition will continue offering opportunities to expand or consolidate CoC projects. A few changes have occurred that differentiate the process from FY 2019.

1. Expansions and Consolidations will submit individual applications.
 - a. Expansions will ONLY submit a Stand-Alone Renewal application and a Stand-Alone New application.
 - b. Consolidations will ONLY submit individual renewal project applications, identifying the renewal application that will survive, and the renewal applications that will terminate. Up to 10 grants may be included in a consolidation.

2. HUD HQ will combine the data (e.g., units, budgets) for Expansion or Consolidation requests from the individual project applications selected for conditional award and provide a data report with further instructions for the field office and conditional recipient.

1. Is this renewal project application No requesting to consolidate or expand?

If "No" click on "Next" or "Save & Next" below to move to the next screen.

2A. Project Subrecipients

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards: \$0

Organization	Type	Sub-Award Amount
This list contains no items		

3A. Project Detail

1. Expiring Grant Project Identification Number (PIN): FL0673

(e.g., the "Federal Award Identifier" indicated on form 1A. Application Type)

2. CoC Number and Name: FL-500 - Sarasota, Bradenton/Manatee, Sarasota Counties CoC

3. CoC Collaborative Applicant Name: Suncoast Partnership to End Homelessness, Inc.

4. Project Name: Suncoast CoC 2021 Renewal PSH-RA COMBINED

5. Project Status: Standard

6. Component Type: PH

6a. Select the type of PH project. PSH

7. Is your organization, or subrecipient, a victim service provider defined in 24 CFR 578.3? No

8. Does this project include Replacement Reserves as a CoC Operating Cost? No

(Attachment Requirement)

3B. Project Description

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

1. Provide a description that addresses the entire scope of the proposed project.

CASL’s Mission is to provide clean, safe, and affordable permanent supportive housing to persons with mental illness, substance abuse, or co-occurring disorders. The services provided by CASL and the activities that are requested for funding drive the program goals of Sarasota County; in particular the increase of housing availability, expansion of wrap around community services, expanded access to health care services, and enhanced self-sufficiency. CASL has over twenty-years of experience providing assistance to clients. CASL’s case management encourages residents that enter our program to work towards achieving distinct goals within three areas. The first is for residents to obtain and remain in permanent housing. Secondly, to achieve self-determination. Finally, to increase personal skills and income.

CASL combats chronic homelessness among the special needs population by providing affordable houses that allow clients to work to live independently through the support of case managers and community resources.

In early 2020, CASL will be opening the doors to Arbor Village, a new multi-unit affordable housing complex that will house low income adults with disabilities. Eligible tenants will have a diagnosed disability, and cannot have earnings of more than 60% AMI. To maximize the ability to serve Sarasota County residents with the highest acuity of needs, CASL seeks to utilize Rental Assistance to support 17 eligible clients.

2. Check the appropriate box(s) if this project will have a specific subpopulation focus. (Select all that apply)

N/A - Project Serves All Subpopulations	<input type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families with Children	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Chronic Homeless	<input type="checkbox"/>
		Other(Click 'Save' to update)	<input type="checkbox"/>

3. Housing First

3a. Does the project quickly move participants into permanent housing Yes

3b. Does the project enroll program participants who have the following barriers? Select all that apply.

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

3c. Will the project prevent program participant termination for the following reasons? Select all that apply.

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

3d. Does the project follow a "Housing First" approach? Yes

3C. Dedicated Plus

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

Dedicated and DedicatedPLUS

A “100% Dedicated” project is a permanent supportive housing project that commits 100% of its beds to chronically homeless individuals and families, according to NOFA Section III.3.b.

A “DedicatedPLUS” project is a permanent supportive housing project where 100% 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, that at a minimum, meet ONE of the following criteria according to NOFA Section III.3.d:

- (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.

A renewal project where 100 percent of the beds are dedicated in their current grant as described in NOFA Section III.A.3.b. must either become DedicatedPLUS or remain 100% Dedicated. If a renewal project currently has 100 percent of its beds dedicated to chronically homeless individuals and families and elects to become a DedicatedPLUS project, the project will be required to adhere to all fair housing requirements at 24 CFR 578.93. Any beds that the applicant identifies in this application as being dedicated to chronically homeless individuals and families in a DedicatedPLUS project must continue to operate in accordance with Section III.A.3.b. Beds are identified on Screen 4B.

1. Is this project “100% Dedicated,” “DedicatedPLUS,” or “N/A”? DedicatedPLUS

(Only select "N/A" if this project was originally awarded as a grant that did not have requirements to only serve persons experiencing chronic homelessness and meets the definition of “non-dedicated permanent supportive housing beds” in the NOFO Section III.C.2.p).

4A. Supportive Services for Program Participants

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

1. For all supportive services available to program participants, indicate who will provide them and how often they will be provided. Click 'Save' to update.

Supportive Services	Provider	Frequency
Assessment of Service Needs	Applicant	As needed
Assistance with Moving Costs	Non-Partner	As needed
Case Management	Applicant	As needed
Child Care	Non-Partner	As needed
Education Services	Non-Partner	As needed
Employment Assistance and Job Training	Partner	As needed
Food	Partner	As needed
Housing Search and Counseling Services	Partner	As needed
Legal Services	Non-Partner	As needed
Life Skills Training	Applicant	As needed
Mental Health Services	Partner	As needed
Outpatient Health Services	Non-Partner	As needed
Outreach Services	Applicant	As needed
Substance Abuse Treatment Services	Non-Partner	As needed
Transportation	Applicant	As needed
Utility Deposits	Applicant	As needed

Identify whether the project includes the following activities:

2. Transportation assistance to program participants to attend mainstream benefit appointments, employee training, or jobs? Yes

3. Annual follow-up with program participants to ensure mainstream benefits are received and renewed? Yes

4. Do program participants have access to Yes

SSI/SSDI technical assistance provided by this project, subrecipient, or partner agency?

4a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months? Yes

4B. Housing Type and Location

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

The following list summarizes each housing site in the project. To add a housing site to the list, select the icon. To view or update a housing site already listed, select the icon.

Total Units: 7

Total Beds: 17

Total Dedicated CH Beds: 17

Housing Type	Housing Type (JOINT)	Units	Beds
Clustered apartments	---	7	17

4B. Housing Type and Location Detail

1. Housing Type: Clustered apartments

2. Indicate the maximum number of units and beds available for program participants at the selected housing site.

a. Units: 7

b. Beds: 17

3. How many beds of the total beds in "2b. Beds" are dedicated to the chronically homeless? 17

This includes both the "dedicated" and "prioritized" beds from previous competitions.

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. 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.

Street 1: Fruitville Rd

Street 2:

City: Sarasota

State: Florida

ZIP Code: 34236

**5. Select the geographic area(s) associated with the address:
(for multiple selections hold CTRL Key)**

122766 Sarasota

5A. Program Participants - Households

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

Households	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Total Number of Households		17		17

Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Persons over age 24		17		17
Persons ages 18-24				0
Accompanied Children under age 18				0
Unaccompanied Children under age 18				0
Total Persons	0	17	0	17

Click Save to automatically calculate totals

5B. Program Participants - Subpopulations

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24										
Persons ages 18-24										
Children under age 18										
Total Persons	0	0	0	0	0	0	0	0	0	0

Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24	17									
Persons ages 18-24										
Total Persons	17	0	0	0	0	0	0	0	0	0

Click Save to automatically calculate totals

Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Accompanied Children under age 18										
Unaccompanied Children under age 18										
Total Persons	0			0	0	0	0	0	0	0

6A. Funding Request

1. Do any of the properties in this project have an active restrictive covenant? Yes

2. Was the original project awarded as either a Samaritan Bonus or Permanent Housing Bonus project? Yes

3. Does this project propose to allocate funds according to an indirect cost rate? No

4. Renewal Grant Term: This field is pre-populated with a one-year grant term and cannot be edited: 1 Year

5. Select the costs for which funding is requested:

Leased Units	<input type="checkbox"/>
Leased Structures	<input type="checkbox"/>
Rental Assistance	<input checked="" type="checkbox"/>
Supportive Services	<input type="checkbox"/>
Operating	<input type="checkbox"/>
HMIS	<input type="checkbox"/>

6C. Rental Assistance Budget

The following list summarizes the rental assistance funding request for the total term of the project. To add information to the list, select the icon. To view or update information already listed, select the icon.

Total Request for Grant Term:		\$111,900	
Total Units:		7	
Type of Rental Assistance	FMR Area	Total Units Requested	Total Request
SRA	FL - North Port-Sarasota-Bradenton, F...	7	\$111,900

Rental Assistance Budget Detail

Type of Rental Assistance: SRA

Metropolitan or non-metropolitan fair market rent area: FL - North Port-Sarasota-Bradenton, FL MSA (1208199999)

Does the applicant request rental assistance funding for less than the area's per unit size fair market rents? Yes

Size of Units	# of Units (Applicant)		FMR Area (Applicant)	HUD Paid Rent (Applicant)		12 Months		Total Request (Applicant)
SRO	3	x	\$631	\$631	x	12	=	\$22,716
0 Bedroom		x	\$841	\$811	x	12	=	\$0
1 Bedroom		x	\$992	\$917	x	12	=	\$0
2 Bedrooms		x	\$1,275	\$1,175	x	12	=	\$0
3 Bedrooms	2	x	\$1,686	\$1,686	x	12	=	\$40,464
4 Bedrooms	2	x	\$2,030	\$2,030	x	12	=	\$48,720
5 Bedrooms		x	\$2,335	\$2,224	x	12	=	\$0
6 Bedrooms		x	\$2,639	\$2,514	x	12	=	\$0
7 Bedrooms		x	\$2,944	\$2,803	x	12	=	\$0
8 Bedrooms		x	\$3,248	\$3,093	x	12	=	\$0
9 Bedrooms		x	\$3,553	\$3,384	x	12	=	\$0
Total Units and Annual Assistance Requested	7							\$111,900
Grant Term								1 Year
Total Request for Grant Term								\$111,900

Click the 'Save' button to automatically calculate totals.

6D. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the icon. To view or update a Match source already listed, select the icon.

Summary for Match

Total Value of Cash Commitments:	\$45,000
Total Value of In-Kind Commitments:	\$0
Total Value of All Commitments:	\$45,000

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? Yes

1a. Briefly describe the source of the program income:

Program income includes a service contract with Central Florida Behavioral Health Network. Program income will also include tenant rents. Tenants will pay no more than 30% of their income for their unit's rent. This figure will depend on the composition of tenants and their specific income limitations, and is challenging to estimate at this stage of the application. However, if all 16 tenants earn \$770 a month, they may have a rent payment of approximately \$231 per month, which could result in approximately \$44,352 of annual program income.

1b. Estimate the amount of program income that will be used as Match for this project: \$0

Type	Source	Contributor	Value of Commitments
Cash	Government	Central Florida B...	\$45,000

Sources of Match Detail

1. Type of Match Commitment: Cash

2. Source: Government

3. Name of Source: Central Florida Behavioral Health Network
(Be as specific as possible and include the office or grant program as applicable)

4. Amount of Written Commitment: \$45,000

6E. Summary Budget

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

The following information summarizes the funding request for the total term of the project. Budget amounts from the Leased Units, Rental Assistance, and Match screens have been automatically imported and cannot be edited. However, applicants must confirm and correct, if necessary, the total budget amounts for Leased Structures, Supportive Services, Operating, HMIS, and Admin. Budget amounts must reflect the most accurate project information according to the most recent project grant agreement or project grant agreement amendment, the CoC's final HUD-approved FY 2018 GIW or the project budget as reduced due to CoC reallocation. Please note that, new for FY 2018, there are no detailed budget screens for Leased Structures, Supportive Services, Operating, or HMIS costs. HUD expects the original details of past approved budgets for these costs to be the basis for future expenses. However, any reasonable and eligible costs within each CoC cost category can be expended and will be verified during a HUD monitoring.

Eligible Costs	Total Assistance Requested for 1 year Grant Term (Applicant)
1a. Leased Units	\$0
1b. Leased Structures	\$0
2. Rental Assistance	\$111,900
3. Supportive Services	\$0
4. Operating	\$0
5. HMIS	\$0
6. Sub-total Costs Requested	\$111,900
7. Admin (Up to 10%)	\$2,070
8. Total Assistance plus Admin Requested	\$113,970
9. Cash Match	\$45,000
10. In-Kind Match	\$0
11. Total Match	\$45,000
12. Total Budget	\$158,970

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No	Non Profit Docume...	11/01/2021
2) Other Attachment	No	Match Letter	11/01/2021
3) Other Attachment	No		

Attachment Details

Document Description: Non Profit Documentation

Attachment Details

Document Description: Match Letter

Attachment Details

Document Description: Suncoast CoC 2019 Renewal PSH-RA Expansion

7B. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance. It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

Additional for Rental Assistance Projects:

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR 578.33(d) or 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

B. For non-Rental Assistance Projects Only.

20-Year Operation Rule.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 20 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

15-Year Operation Rule – 24 CFR part 578 only.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 15 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

1-Year Operation Rule.

For applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provided.

C. Explanation.

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.

Name of Authorized Certifying Official Julian Eller

Date: 11/01/2021

Title: CEO

Applicant Organization: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

Active SAM Status Requirement. I certify that our organization has an active System for Award Management (SAM) registration as required by 2 CFR 200.300(b) at the time of project application submission to HUD and will ensure this SAM registration will be renewed annually to meet this requirement.

8B Submission Summary

Page	Last Updated
1A. SF-424 Application Type	11/01/2021
1B. SF-424 Legal Applicant	No Input Required

1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	11/01/2021
1E. SF-424 Compliance	10/31/2021
1F. SF-424 Declaration	10/31/2021
1G. HUD-2880	10/31/2021
1H. HUD-50070	10/31/2021
1I. Cert. Lobbying	10/31/2021
1J. SF-LLL	11/01/2021
IK. SF-424B	10/31/2021
Submission Without Changes	10/31/2021
Recipient Performance	10/31/2021
Renewal Grant Consolidation or Renewal Grant Expansion	11/01/2021
2A. Subrecipients	No Input Required
3A. Project Detail	11/01/2021
3B. Description	10/31/2021
3C. Dedicated Plus	10/31/2021
4A. Services	10/31/2021
4B. Housing Type	10/31/2021
5A. Households	10/31/2021
5B. Subpopulations	No Input Required
6A. Funding Request	10/31/2021
6C. Rental Assistance	11/01/2021
6D. Match	11/01/2021
6E. Summary Budget	No Input Required
7A. Attachment(s)	11/01/2021
7B. Certification	11/01/2021



Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

DR-14
R. 01/18

85-8012579193C-4	05/31/2019	05/31/2024	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

COMMUNITY ASSISTED AND SUPPORTED
LIVING INC
1401 16TH ST
SARASOTA FL 34236-2519

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



Important Information for Exempt Organizations

DR-14
R. 01/18

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (F.A.C.).
2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).
5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.
6. If you have questions about your exemption certificate, please call Taxpayer Services at 850-488-6800. The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.



October 4, 2021

Chris Johnson, CEO
Suncoast Partnership to End Homelessness
1750 17th St., Bldg C-1
Sarasota, FL 34234

Re: FY 2021 Match and Leverage – Rental Assistance Renewal Application
Grant Number: FL0673L4H001901

Dear Mr. Johnson:

Please accept this letter demonstrating the match to be provided by CASL for the HUD CoC NOFO Renewal Application. Please note that our organization’s primary mission is to serve persons who have disabling conditions, inclusive of mental illness and/or substance abuse disorders, often resulting in homelessness.

Our matching funds are as follows:

CoC Project	Match	Type	Source
CoC-Renewal Rental Assistance	\$45,000	Cash (CFBHN)	CFBHN Contract # QG041-21
Total	\$45,000		

Sincerely,

A handwritten signature in blue ink, appearing to read 'J. Scott Eller', with a long horizontal stroke extending to the right.

J. Scott Eller, CEO
Community Assisted and Supported Living, Inc.
2911 Fruitville Road
Sarasota, FL 34237

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2021 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition. For more information see FY 2021 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2021 CoC Program NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- Before starting the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- Carefully review each question in the Project Application. Questions from previous competitions may have been changed or removed, or new questions may have been added, and information previously submitted may or may not be relevant. Data from the FY 2019 Project Application will be imported into the FY 2021 Project Application; however, applicants will be required to review all fields for accuracy and to update information that may have been adjusted through the post award process or a grant agreement amendment. Data entered in the post award and amendment forms in e-snaps will not be imported into the project application.
- Rental assistance projects can only request the number of units and unit size as approved in the final HUD-approved Grant Inventory Worksheet (GIW).
- Transitional housing, permanent supportive housing with leasing, rapid re-housing, supportive services only, renewing safe havens, and HMIS can only request the Annual Renewal Amount (ARA) that appears on the CoC's HUD-approved GIW. If the ARA is reduced through the CoC's reallocation process, the final project funding request must reflect the reduced amount listed on the CoC's reallocation forms.
- HUD reserves the right to reduce or reject any renewal project that fails to adhere to 24 CFR part 578 and the application requirements set forth in the FY 2021 CoC Program Competition NOFA.

1A. SF-424 Application Type

1. Type of Submission: Application

2. Type of Application: Renewal Project Application

If "Revision", select appropriate letter(s):

If "Other", specify:

3. Date Received: 11/02/2021

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier: FL0830

This is the first 6 digits of the Grant Number, known as the PIN, that will also be indicated on Screen 3A Project Detail. This number must match the first 6 digits of the grant number on the HUD approved Grant Inventory Worksheet (GIW).

Check to confirm that the Federal Award Identifier has been updated to reflect the most recently awarded grant number

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: Suncoast Partnership to End Homelessness, Inc.

b. Employer/Taxpayer Identification Number (EIN/TIN): 20-2783762

	c. Organizational DUNS:	610943651	PLUS 4	
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d. Address

Street 1: 1750 17th Street, C-1

Street 2:

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34234

e. Organizational Unit (optional)

Department Name: NA

Division Name: NA

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Mr.

First Name: Brandon

Middle Name:

Last Name: Bellows

Suffix:

Title: Chief Information Officer

Organizational Affiliation: Suncoast Partnership to End Homelessness, Inc.

Telephone Number: (941) 955-8987

Extension: 101
Fax Number: (941) 209-5595
Email: Brandon@suncoastpartnership.org

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6500-N25

Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (State(s) only): Florida
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: FL-500 Oneby1 Coordinated Entry FY2019

16. Congressional District(s):

a. Applicant: FL-016, FL-017
(for multiple selections hold CTRL key)

b. Project: FL-016, FL-017
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 02/01/2021

b. End Date: 01/31/2022

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

I AGREE:

21. Authorized Representative

Prefix: Mr.

First Name: Christopher

Middle Name:

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Telephone Number: (941) 955-8987
(Format: 123-456-7890)

Fax Number: (941) 209-5595
(Format: 123-456-7890)

Email: chris@suncoastpartnership.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/02/2021

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2506-0214 (exp.02/28/2022)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Suncoast Partnership to End Homelessness, Inc.

Prefix: Mr.

First Name: Christopher

Middle Name:

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Organizational Affiliation: Christopher Johnson

Telephone Number: (941) 955-8987

Extension: 104

Email: chris@suncoastpartnership.org

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip/Postal Code: 34234

2. Employer ID Number (EIN): 20-2783762

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received

4a. Total Amount Requested for this project: \$50,006

5. State the name and location (street address, city and state) of the project or activity: FL-500 Oneby1 Coordinated Entry FY2019 1750 17th Street, C-1 Sarasota Florida

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
 (For further information, see 24 CFR Sec. 4.3).

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. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
HUD, 451 7th Street, S.W., Washington, DC 20410	Grant	\$74,875.00	HMIS
HUD, 451 7th Street, S.W., Washington, DC 20410	Grant	50006.0	Coordinated Entry
HUD, 451 7th Street, S.W., Washington, DC 20410	Grant	\$103,468.00	CoC Planning

Part III Interested Parties

You must disclose:
 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).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation	Financial Interest in Project/Activity (\$)	Financial Interest in Project/Activity (%)
Suncoast Partnership to End Homelessness		Recipient of HMIS Funds	\$74,875.00	100%
Suncoast Partnership to End Homelessness		Recipient of CE Funds	\$50,006.00	100%
Suncoast Partnership to End Homelessness		Recipient of Planning Funds	\$103,468.00	100%

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

I AGREE:

Name / Title of Authorized Official: Christopher Johnson, Chief Executive Officer

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 10/29/2021

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Suncoast Partnership to End Homelessness, Inc.

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.	e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
b. Establishing an on-going drug-free awareness program to inform employees --- (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted --- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;	g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.
d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;	

Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application.
 Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I

X

acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.



WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Authorized Representative

Prefix: Mr.

First Name: Christopher

Middle Name

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Telephone Number: (941) 955-8987
(Format: 123-456-7890)

Fax Number: (941) 209-5595
(Format: 123-456-7890)

Email: chris@suncoastpartnership.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/02/2021

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person 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 this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person 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 this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file

the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: Suncoast Partnership to End Homelessness, Inc.

Name / Title of Authorized Official: Christopher Johnson, Chief Executive Officer

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/02/2021

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES
Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.
Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. 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."

Answer "No" if your organization is NOT engaged in lobbying.

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? No

Legal Name: Suncoast Partnership to End Homelessness, Inc.
Street 1: 1750 17th Street, C-1
Street 2:
City: Sarasota
County: Sarasota
State: Florida
Country: United States
Zip / Postal Code: 34234

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

Authorized Representative

Prefix: Mr.

First Name: Christopher

Middle Name:

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Telephone Number: (941) 955-8987
(Format: 123-456-7890)

Fax Number: (941) 209-5595
(Format: 123-456-7890)

Email: chris@suncoastpartnership.org

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/02/2021

IK. SF-424B

(SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007
Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|-----------|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |

- 8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- 9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
- 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
- 13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
- 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
- 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
- 18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
- 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: Suncoast Partnership to End Homelessness, Inc.
Prefix: Mr.

First Name: Christopher

Middle Name:

Last Name: Johnson

Suffix:

Title: Chief Executive Officer

Signature of Authorized Certifying Official: Considered signed upon submission in e-snaps.

Date Signed: 11/02/2021

Information About Submission without Changes

Follow the instructions below making note of the exceptions and limitations to the “Submit Without Changes” process.

In general, HUD expects a project’s proposed project application information will remain the same from year-to-year unless changes are directed by HUD or approved through the grant agreement amendment process. However, HUD expects applicants to carefully review their information to determine if submitting without changes accurately reflects the expiring grant requesting renewal.

Due to e-snaps limitations, only previously submitted renewal applications can import data into the FY 2021 renewal project application. The data from previously submitted new and renewal project applications can be imported into a FY 2021 renewal project application. The “Submit without Changes” process is not applicable for:

- first time renewing project applications
- a project application that did not import last FY 2019 information
- a project that had Issues or Conditions that were addressed in FY 2019 Post-Award and updates need to be reflected in the FY 2021 project application
- a project that had amendments approved in FY 2019 or FY 2020 that need to be reflected in the FY 2021 project application

e-snaps will automatically be set to “Make Changes” and all questions on each screen must be updated.

Renewal projects that brought forward data from FY 2019 and have either a Leasing budget, Operating budget or use HUD PAID RENTS (Actual Rents) instead of FMR MAY NOT use the “Submit Without Changes” process and e-snaps will automatically be set to “Make Changes”. All Leasing and Operating budgets, along with Rental Assistance budgets that use HUD PAID RENT will need to be updated in the application. Refer to the GIW posted on the HUD Exchange for accurate budget information on leasing and operating budgets and refer to the HUD PAID RENT document sent by your field office from HUD HQ to accurately set your rental assistance budgets that use HUD PAID rents. This will only impact the FY 2021 competition.

The e-snaps screens that remain “open” for required annual updates and do not affect applicants’ ability to select “Submit without Changes” are:

- Recipient Performance Screen
- Consolidation and Expansion
- Screen 3A. Project Detail
- Screen 6D. Sources of Match
- All of Part 7: Attachments and Certification; and
- All of Part 8: Submission Summary.

All other screens in Part 2 through Part 6 begin in “Read-Only” format and should be reviewed for accuracy; including any updates that were made to the 2019 or 2020 project during the CoC Post Award Issues and Conditions process or as amended. If all the imported data is accurate and no edits or updates are needed to any screens other than the mandatory screens and questions noted above, project applicants should select “Submit Without Changes” in Part 8. If project applicants imported data and do need to make updates to the information on one or more screens, they must navigate to Part 8: “Submission Without Changes” Screen, select “Make Changes”, and check the box next to each relevant screen title to unlock screens for editing. After project applicants select the screens they intend to edit via checkboxes, click “Save” and those screens will be available for edit. Once a project applicant selects a checkbox and clicks “Save”, the project applicant cannot uncheck the box.

Please refer to the Detailed Instructions found on the left side menu of e-snaps or hud.gov to find more in depth information about applying under the FY 2021 CoC Competition.

Submission Without Changes

1. Are the requested renewal funds reduced from the previous award due to reallocation? No

2. Do you wish to submit this application without making changes? Please refer to the guidelines below to inform you of the requirements. Make changes

3. Specify which screens require changes by clicking the checkbox next to the name and then clicking the Save button.

Part 2 - Subrecipient Information	
2A. Subrecipients	<input type="checkbox"/>
Part 3 - Project Information	
3A. Project Detail	<input checked="" type="checkbox"/>
3B. Description	<input checked="" type="checkbox"/>
Part 4 - Housing Services and HMIS	
Part 5 - Participants and Outreach Information	
Part 6 - Budget Information	
6A. Funding Request	<input checked="" type="checkbox"/>
6D. Match	<input checked="" type="checkbox"/>
6E. Summary Budget	<input checked="" type="checkbox"/>
Part 7 - Attachment(s) & Certification	
7A. Attachment(s)	<input checked="" type="checkbox"/>
7B. Certification	<input checked="" type="checkbox"/>

You have selected "Make Changes" to question #2 above. Provide a brief description of the changes that will be made to the project information screens (bullets are appropriate):

- 3B - Updates to timeframes, and progress since it has been 2 years
- 6A - small changes to budget allocations within the renewal amount, salary adjustment, admin adjustment, operating cost adjustment

You have selected "Make Changes." Once this screen is saved, you will be prohibited from "unchecking" any box that has been checked regardless of whether a change to data on the corresponding screen will be made.

Recipient Performance

1. Did you submit your previous year's Annual Performance Report (APR) on time? Yes

2. Do you have any unresolved HUD Monitoring or OIG Audit finding(s) concerning any previous grant term related to this renewal project request? No

3. Do you draw funds quarterly for your current renewal project? Yes

4. Have any funds remained available for recapture by HUD for the most recently expired grant term related to this renewal project request? No

Renewal Grant Consolidation or Renewal Grant Expansion

The FY2021 CoC Competition will continue offering opportunities to expand or consolidate CoC projects. A few changes have occurred that differentiate the process from FY 2019.

1. Expansions and Consolidations will submit individual applications.
 - a. Expansions will ONLY submit a Stand-Alone Renewal application and a Stand-Alone New application.
 - b. Consolidations will ONLY submit individual renewal project applications, identifying the renewal application that will survive, and the renewal applications that will terminate. Up to 10 grants may be included in a consolidation.



2. HUD HQ will combine the data (e.g., units, budgets) for Expansion or Consolidation requests from the individual project applications selected for conditional award and provide a data report with further instructions for the field office and conditional recipient.

1. Is this renewal project application No requesting to consolidate or expand?

If "No" click on "Next" or "Save & Next" below to move to the next screen.

2A. Project Subrecipients

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards: \$0

Organization	Type	Sub-Award Amount
This list contains no items		

3A. Project Detail

1. Expiring Grant Project Identification Number (PIN): FL0830

(e.g., the "Federal Award Identifier" indicated on form 1A. Application Type)

2. CoC Number and Name: FL-500 - Sarasota, Bradenton/Manatee, Sarasota Counties CoC

3. CoC Collaborative Applicant Name: Suncoast Partnership to End Homelessness, Inc.

4. Project Name: FL-500 Oneby1 Coordinated Entry FY2019

5. Project Status: Standard

6. Component Type: SSO

6a. Please select the type of SSO project: Coordinated Entry

7. Is your organization, or subrecipient, a victim service provider defined in 24 CFR 578.3? No

3B. Project Description

1. Provide a description that addresses the entire scope of the proposed project.

Our community has made significant changes in our homeless crisis response system (HCRS) over the past 4 years. One way was through the implementation of the coordinated entry system (CES) that changed from “no wrong door” to single points of access spread throughout our geographic area and outreach staff to provide mobile Access Point (AP) intakes to accommodate all needs. We have had a Coordinated Entry (CE) project manager on staff at Suncoast Partnership (SP) since the early stages of our system change and have utilized partner agencies to serve as APs for intakes including the VI-SPDAT. Agencies have taken on this responsibility to benefit our community & the people we serve, without necessarily funding additional positions to do so. One of the areas we identified to strengthen our CES & ensure better triage of clients and connection to the most appropriate services, is with CE intake staff at the lead agency and partnered with service providers to utilize their locations to ensure clients’ access and entry on the Community by-name list. SP has taken a number of steps to provide training and support to agencies including: utilizing Florida Housing Coalition for trainings on trauma-informed care, cultural competency, diversion and motivational interviewing (MI); and SP providing ongoing, personalized training on AP intakes, administering Vi-SPDAT and HMIS accuracy and consistency in data entry. Even with regular support, our CE project manager spends much time reviewing each agency’s assessments because of incorrect or inconsistent data entry that impacts people being matched with the right intervention to resolve their crisis. With dedicated CE intake on SP staff, we can ensure those providing diversion services at the front door and completing CE intake are doing so with the highest of quality work. This has increased efficiencies dramatically in our system and freed up time for the CE project manager to focus on other aspects of the CES. Two of those focuses for the coming year include enhancing coordination with our victim-service providers to better integrate victims of domestic violence and human trafficking into our CES as well as lessening time between referral and RRH/PSH project participation and housing. The CE intake specialist works under our project manager, and is trained and skilled at MI, cultural competency, proper administration of the Vi-SPDAT, and a trauma-informed approach. They are trained in conflict resolution, mediation, and techniques for empowering through problem-solving conversations to divert those who are appropriate for diversion and EI from entering our HCRS. Correct, consistent, and complete data is a priority of SP and will be a performance measure of this role. We will be using this position as a model/trainer to support agencies providing AP services and continue to look for funding to expand our CE team with SP staff.

2. Check the appropriate box(s) if this project will have a specific subpopulation focus. (Select all that apply)

N/A - Project Serves All Subpopulations	<input type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>

Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families with Children	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Chronic Homeless	<input type="checkbox"/>
		Other(Click 'Save' to update)	<input type="checkbox"/>

3. Housing First

3a. Does the project quickly move participants into permanent housing Yes

3b. Does the project enroll program participants who have the following barriers? Select all that apply.

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

3c. Will the project prevent program participant termination for the following reasons? Select all that apply.

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

3d. Does the project follow a "Housing First" approach? Yes

4. As a renewal SSO-Coordinated Entry project update the following questions.

4a. Will the coordinated entry process cover the CoC's entire geographic area? Yes

4b. Will the coordinated entry process be Yes

**affirmatively marketed and easily accessible
by individuals and families seeking
assistance?**

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.

We have 7 access points spread throughout our CoC geographic area and 8 mobile access points available to travel throughout the continuum. Information regarding access points is provided to the community and those experiencing homelessness in a number of ways:

- through 211;
- on resource guides distributed by outreach workers, law enforcement, faith based organizations, drop-in centers, and a mobile clinic;
- through hand-outs and information at community meetings and presentations;
- through our service providers who have all trained those responsible for answering phones to direct people experiencing homelessness to an open access point;
- Suncoast Partnership and partner organization's websites;
- through mass email communication updates;
- by word of mouth through those receiving services, outreach workers and teams, law enforcement, hospital staff, and staff at the overnight shelter which also serves as an access point for coordinated entry intake seven days a week;
- through community engagement and successfully partnering with agencies within and outside of the CoC.

4d. Does the coordinated entry process use a comprehensive, standardized assessment process? Yes

4e. Describe the referral process and how the coordinated entry process ensures program participants are directed to appropriate housing and services.

At an access point, initial client needs and wants are determined through their coordinated entry intake and assessment process which includes a discussion with trained staff, a standard assessment that includes the administration of the VI-SPDAT, and a safety plan as needed. The coordinated entry project manager reviews all new intakes from the previous day first thing in the morning and places people on the community by-name list. Those who are literally homeless are triaged utilizing three criteria: length of time they have been homeless, acuity of need based on their VI-SPDAT score, and the date of assessment. The coordinated entry project manager matches each permanent housing opening to a person on the by-name list based on a person's expressed wants, their eligibility for that specific project, and appropriate intervention needs. A referral is then made from the Suncoast Partnership to the project. As this is a client choice system, if the agency who receives the referral engages with the person and they do not want to work with that agency or project, the coordinated entry project manager is notified and the person is placed back on the by-name list in their same position until a new option is

located. Weekly case conferencing with community service providers also helps to ensure that all of the relevant information for participants is considered and that they are connected to appropriate available services.

4f. If the coordinated entry process includes differences in access, entry, assessment, or referral for certain subpopulations, are those differences limited only to the following five groups: Yes

- (1) adults without children,**
- (2) adults accompanied by children;**
- (3) unaccompanied youth;**
- (4) households fleeing domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions (including human trafficking); and**
- (5) persons at risk of homelessness.**

4g. This coordinated entry project will refer persons experiencing homelessness to projects that specifically coordinates and integrates mainstream health, social services, and employment programs to program participants for which they may be eligible? Yes

6A. Funding Request

1. Do any of the properties in this project have an active restrictive covenant? No
2. Was the original project awarded as either a Samaritan Bonus or Permanent Housing Bonus project? No
3. Does this project propose to allocate funds according to an indirect cost rate? No
4. Renewal Grant Term: This field is pre-populated with a one-year grant term and cannot be edited: 1 Year
5. Select the costs for which funding is requested:
- | | |
|---------------------|-------------------------------------|
| Leased Structures | <input type="checkbox"/> |
| Supportive Services | <input checked="" type="checkbox"/> |
| HMIS | <input type="checkbox"/> |

6D. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the icon. To view or update a Match source already listed, select the icon.

Summary for Match

Total Value of Cash Commitments:	\$14,380
Total Value of In-Kind Commitments:	\$0
Total Value of All Commitments:	\$14,380

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Type	Source	Contributor	Value of Commitments
Cash	Government	State of Florida ...	\$14,380

Sources of Match Detail

- 1. Type of Match Commitment:** Cash
- 2. Source:** Government
- 3. Name of Source:** State of Florida Challenge Funding
(Be as specific as possible and include the office or grant program as applicable)
- 4. Amount of Written Commitment:** \$14,380

6E. Summary Budget

The following information summarizes the funding request for the total term of the project. Budget amounts from the Leased Units, Rental Assistance, and Match screens have been automatically imported and cannot be edited. However, applicants must confirm and correct, if necessary, the total budget amounts for Leased Structures, Supportive Services, Operating, HMIS, and Admin. Budget amounts must reflect the most accurate project information according to the most recent project grant agreement or project grant agreement amendment, the CoC's final HUD-approved FY 2018 GIW or the project budget as reduced due to CoC reallocation. Please note that, new for FY 2018, there are no detailed budget screens for Leased Structures, Supportive Services, Operating, or HMIS costs. HUD expects the original details of past approved budgets for these costs to be the basis for future expenses. However, any reasonable and eligible costs within each CoC cost category can be expended and will be verified during a HUD monitoring.

Eligible Costs	Total Assistance Requested for 1 year Grant Term (Applicant)
1a. Leased Units	\$0
1b. Leased Structures	\$0
2. Rental Assistance	\$0
3. Supportive Services	\$45,500
4. Operating	\$0
5. HMIS	\$0
6. Sub-total Costs Requested	\$45,500
7. Admin (Up to 10%)	\$4,506
8. Total Assistance plus Admin Requested	\$50,006
9. Cash Match	\$14,380
10. In-Kind Match	\$0
11. Total Match	\$14,380
12. Total Budget	\$64,386

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No		
2) Other Attachment	No		
3) Other Attachment	No		

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

7B. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance. It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

Additional for Rental Assistance Projects:

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR 578.33(d) or 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

B. For non-Rental Assistance Projects Only.

20-Year Operation Rule.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 20 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

15-Year Operation Rule – 24 CFR part 578 only.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 15 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

1-Year Operation Rule.

For applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provided.

C. Explanation.

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.

Name of Authorized Certifying Official Christopher Johnson

Date: 11/02/2021

Title: Chief Executive Officer

Applicant Organization: Suncoast Partnership to End Homelessness, Inc.

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

Active SAM Status Requirement.

I certify that our organization has an active System for Award Management (SAM) registration as required by 2 CFR 200.300(b) at the time of project application submission to HUD and will ensure this SAM registration will be renewed annually to meet this requirement.

8B Submission Summary

Page	Last Updated
1A. SF-424 Application Type	10/29/2021
1B. SF-424 Legal Applicant	No Input Required
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	10/29/2021
1E. SF-424 Compliance	10/29/2021
1F. SF-424 Declaration	10/29/2021
1G. HUD-2880	11/02/2021
1H. HUD-50070	10/29/2021

Renewal Project Application FY2021	Page 41	11/08/2021
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1I. Cert. Lobbying	10/29/2021
1J. SF-LLL	10/29/2021
IK. SF-424B	10/29/2021
Submission Without Changes	11/02/2021
Recipient Performance	11/02/2021
Renewal Grant Consolidation or Renewal Grant Expansion	11/02/2021
2A. Subrecipients	No Input Required
3A. Project Detail	11/02/2021
3B. Description	11/02/2021
6A. Funding Request	11/02/2021
6D. Match	10/29/2021
6E. Summary Budget	No Input Required
7A. Attachment(s)	No Input Required
7B. Certification	11/02/2021

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2021 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition. For more information see FY 2021 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2021 CoC Program NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- Before starting the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- Carefully review each question in the Project Application. Questions from previous competitions may have been changed or removed, or new questions may have been added, and information previously submitted may or may not be relevant. Data from the FY 2019 Project Application will be imported into the FY 2021 Project Application; however, applicants will be required to review all fields for accuracy and to update information that may have been adjusted through the post award process or a grant agreement amendment. Data entered in the post award and amendment forms in e-snaps will not be imported into the project application.
- Rental assistance projects can only request the number of units and unit size as approved in the final HUD-approved Grant Inventory Worksheet (GIW).
- Transitional housing, permanent supportive housing with leasing, rapid re-housing, supportive services only, renewing safe havens, and HMIS can only request the Annual Renewal Amount (ARA) that appears on the CoC's HUD-approved GIW. If the ARA is reduced through the CoC's reallocation process, the final project funding request must reflect the reduced amount listed on the CoC's reallocation forms.
- HUD reserves the right to reduce or reject any renewal project that fails to adhere to 24 CFR part 578 and the application requirements set forth in the FY 2021 CoC Program Competition NOFA.

1A. SF-424 Application Type

1. Type of Submission: Application

2. Type of Application: Renewal Project Application

If "Revision", select appropriate letter(s):

If "Other", specify:

3. Date Received: 10/31/2021

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier: FL0671

This is the first 6 digits of the Grant Number, known as the PIN, that will also be indicated on Screen 3A Project Detail. This number must match the first 6 digits of the grant number on the HUD approved Grant Inventory Worksheet (GIW).

Check to confirm that the Federal Award Identifier has been updated to reflect the most recently awarded grant number

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

b. Employer/Taxpayer Identification Number (EIN/TIN): 58-0660607

	c. Organizational DUNS:	965290430	PLUS 4	
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d. Address

Street 1: 1400 10th Street

Street 2:

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34236

e. Organizational Unit (optional)

Department Name: Sarasota County Area Command

Division Name: Florida Division

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Ms.

First Name: Amy E

Middle Name:

Last Name: Jones

Suffix:

Title: Director of Planning & Programs

Organizational Affiliation: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

Telephone Number: (941) 364-8845

Extension: 1109

Fax Number: (941) 954-4645

Email: amy.e.jones@uss.salvationarmy.org

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6500-N25

Title: Continuum of Care Homeless Assistance
Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (State(s) only): Florida
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: Everyone's Home 2021

16. Congressional District(s):

a. Applicant: FL-016, FL-017
(for multiple selections hold CTRL key)

b. Project: FL-016, FL-017
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 02/01/2022

b. End Date: 01/31/2023

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

I AGREE:

21. Authorized Representative

Prefix: Lt. Colonel

First Name: Michele

Middle Name:

Last Name: Matthews

Suffix:

Title: Area Commander/CEO

Telephone Number: (941) 364-8845
(Format: 123-456-7890)

Fax Number: (941) 954-4645
(Format: 123-456-7890)

Email: michele.matthews@uss.salvationarmy.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 10/31/2021

1G. HUD 2880

**Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2506-0214 (exp.02/28/2022)**

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

Prefix:

First Name: Michele

Middle Name:

Last Name: Matthews

Suffix:

Title: Area Commander/CEO

Organizational Affiliation: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

Telephone Number: (941) 364-8845

Extension: 1101

Email: michele.matthews@uss.salvationarmy.org

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip/Postal Code: 34236

2. Employer ID Number (EIN): 58-0660607

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received

Renewal Project Application FY2021	Page 9	11/08/2021
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4a. Total Amount Requested for this project: \$241,359

5. State the name and location (street address, city and state) of the project or activity: Everyone's Home 2021 1400 10th Street Sarasota Florida

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
(For further information, see 24 CFR Sec. 4.3).

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. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
HUD/FL/DCF/CoC FL-500, Sarasota, FL	ESG	\$173,182.00	Shelter Operations/Housing Waiting
HHS/FL/DEO/Sarasota County Govt., Sarasota, FL	CSBG	90000.0	Employability/Self Sufficiency/Transitional Housing
FEMA/FL/Glasser-Schoenbaum Human Services Center, Sarasota, FL	EFSP	\$161,202.00	Shelter Operations/Financial Assistance/Food
HHS/FL/DEO, Tallahassee, FL	LIHEAP	\$1,000,000.00	Home Energy/Sustainability
NA	NA	\$0.00	NA

Part III Interested Parties

You must disclose:

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).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation	Financial Interest in Project/Activity (\$)	Financial Interest in Project/Activity (%)
NA	NA	NA	\$0.00	0%
NA	NA	NA	\$0.00	0%
NA	NA	NA	\$0.00	0%
NA	NA	NA	\$0.00	0%
NA	NA	NA	\$0.00	0%

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

I AGREE:

Name / Title of Authorized Official: Michele Matthews, Area Commander/CEO

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 09/24/2021

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
<p>a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.</p>	<p>e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;</p>
<p>b. Establishing an on-going drug-free awareness program to inform employees --- (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.</p>	<p>f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted --- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;</p>
<p>c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;</p>	<p>g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.</p>
<p>d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;</p>	

Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)
 Workplaces, including addresses, entered in the attached project application.
 Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying

documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.



WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Authorized Representative

Prefix: Lt. Colonel

First Name: Michele

Middle Name:

Last Name: Matthews

Suffix:

Title: Area Commander/CEO

Telephone Number: (941) 364-8845
(Format: 123-456-7890)

Fax Number: (941) 954-4645
(Format: 123-456-7890)

Email: michele.matthews@uss.salvationarmy.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 10/31/2021

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person 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 this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person 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 this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction

imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

Name / Title of Authorized Official: Michele Matthews, Area Commander/CEO

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 10/31/2021

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.

Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. 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."

Answer "No" if your organization is NOT engaged in lobbying.

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? No

Legal Name: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

Street 1: 1400 10th Street

Street 2:

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34236

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

Authorized Representative

Prefix: Lt. Colonel

First Name: Michele

Middle Name:

Last Name: Matthews

Suffix:

Title: Area Commander/CEO

Telephone Number: (941) 364-8845
(Format: 123-456-7890)

Fax Number: (941) 954-4645
(Format: 123-456-7890)

Email: michele.matthews@uss.salvationarmy.org

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 10/31/2021

IK. SF-424B

(SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007
Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|-----------|--|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |

- 8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- 9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
- 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
- 13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
- 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
- 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
- 18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
- 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

Prefix: Lt. Colonel

First Name: Michele

Middle Name:

Last Name: Matthews

Suffix:

Title: Area Commander/CEO

Signature of Authorized Certifying Official: Considered signed upon submission in e-snaps.

Date Signed: 10/31/2021

Information About Submission without Changes

Follow the instructions below making note of the exceptions and limitations to the "Submit Without Changes" process.

In general, HUD expects a project's proposed project application information will remain the same from year-to-year unless changes are directed by HUD or approved through the grant agreement amendment process. However, HUD expects applicants to carefully review their information to determine if submitting without changes accurately reflects the expiring grant requesting renewal.

Due to e-snaps limitations, only previously submitted renewal applications can import data into the FY 2021 renewal project application. The data from previously submitted new and renewal project applications can be imported into a FY 2021 renewal project application. The "Submit without Changes" process is not applicable for:

- first time renewing project applications
- a project application that did not import last FY 2019 information
- a project that had Issues or Conditions that were addressed in FY 2019 Post-Award and updates need to be reflected in the FY 2021 project application
- a project that had amendments approved in FY 2019 or FY 2020 that need to be reflected in the FY 2021 project application

e-snaps will automatically be set to "Make Changes" and all questions on each screen must be updated.

Renewal projects that brought forward data from FY 2019 and have either a Leasing budget, Operating budget or use HUD PAID RENTS (Actual Rents) instead of FMR MAY NOT use the "Submit Without Changes" process and e-snaps will automatically be set to "Make Changes". All Leasing and Operating budgets, along with Rental Assistance budgets that use HUD PAID RENT will need to be updated in the application. Refer to the GIW posted on the HUD Exchange for accurate budget information on leasing and operating budgets and refer to the HUD PAID RENT document sent by your field office from HUD HQ to accurately set your rental assistance budgets that use HUD PAID rents. This will only impact the FY 2021 competition.

The e-snaps screens that remain "open" for required annual updates and do not affect applicants' ability to select "Submit without Changes" are:

- Recipient Performance Screen
- Consolidation and Expansion
- Screen 3A. Project Detail
- Screen 6D. Sources of Match
- All of Part 7: Attachments and Certification; and
- All of Part 8: Submission Summary.

All other screens in Part 2 through Part 6 begin in "Read-Only" format and should be reviewed for accuracy; including any updates that were made to the 2019 or 2020 project during the CoC Post Award Issues and Conditions process or as amended. If all the imported data is accurate and no edits or updates are needed to any screens other than the mandatory screens and questions noted above, project applicants should select "Submit Without Changes" in Part 8. If project applicants imported data and do need to make updates to the information on one or more screens, they must navigate to Part 8: "Submission Without Changes" Screen, select "Make Changes", and check the box next to each relevant screen title to unlock screens for editing. After project applicants select the screens they intend to edit via checkboxes, click ""Save"" and those screens will be available for edit. Once a project applicant selects a checkbox and clicks ""Save"", the project applicant cannot uncheck the box.

Please refer to the Detailed Instructions found on the left side menu of e-snaps or hud.gov to

find more in depth information about applying under the FY 2021 CoC Competition.

Submission Without Changes

1. Are the requested renewal funds reduced from the previous award due to reallocation? No

2. Do you wish to submit this application without making changes? Please refer to the guidelines below to inform you of the requirements. Make changes

3. Specify which screens require changes by clicking the checkbox next to the name and then clicking the Save button.

Part 2 - Subrecipient Information	
2A. Subrecipients	<input type="checkbox"/>
Part 3 - Project Information	
3A. Project Detail	<input checked="" type="checkbox"/>
3B. Description	<input type="checkbox"/>
Part 4 - Housing Services and HMIS	
4A. Services	<input type="checkbox"/>
4B. Housing Type	<input type="checkbox"/>
Part 5 - Participants and Outreach Information	
5A. Households	<input type="checkbox"/>
5B. Subpopulations	<input type="checkbox"/>
Part 6 - Budget Information	
6A. Funding Request	<input checked="" type="checkbox"/>
6C. Rental Assistance	<input checked="" type="checkbox"/>
6D. Match	<input checked="" type="checkbox"/>
6E. Summary Budget	<input type="checkbox"/>
Part 7 - Attachment(s) & Certification	

7A. Attachment(s)	<input checked="" type="checkbox"/>
7B. Certification	<input checked="" type="checkbox"/>

You have selected "Make Changes" to question #2 above. Provide a brief description of the changes that will be made to the project information screens (bullets are appropriate):

I did not select the boxes above yet they are saved the way they are. The only intended change is moving Rental Assistance to Administrative costs to enable us to claim our 10% Admin. Even though this screen states I have selected "Make Changes," I am unable to make any changes.

You have selected "Make Changes." Once this screen is saved, you will be prohibited from "unchecking" any box that has been checked regardless of whether a change to data on the corresponding screen will be made.

Recipient Performance

1. Did you submit your previous year's Annual Performance Report (APR) on time? Yes

2. Do you have any unresolved HUD Monitoring or OIG Audit finding(s) concerning any previous grant term related to this renewal project request? No

3. Do you draw funds quarterly for your current renewal project? No

3a. If no was selected, explain why CoC Program funds are not drawn quarterly.

Funds are drawn monthly.

4. Have any funds remained available for recapture by HUD for the most recently expired grant term related to this renewal project request? No

Renewal Grant Consolidation or Renewal Grant Expansion

The FY2021 CoC Competition will continue offering opportunities to expand or consolidate CoC projects. A few changes have occurred that differentiate the process from FY 2019.

1. Expansions and Consolidations will submit individual applications.
 - a. Expansions will ONLY submit a Stand-Alone Renewal application and a Stand-Alone New application.
 - b. Consolidations will ONLY submit individual renewal project applications, identifying the renewal application that will survive, and the renewal applications that will terminate. Up to 10 grants may be included in a consolidation.

2. HUD HQ will combine the data (e.g., units, budgets) for Expansion or Consolidation requests from the individual project applications selected for conditional award and provide a data report with further instructions for the field office and conditional recipient.

1. Is this renewal project application No requesting to consolidate or expand?

If "No" click on "Next" or "Save & Next" below to move to the next screen.

2A. Project Subrecipients

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards: \$0

Organization	Type	Sub-Award Amount
This list contains no items		

3A. Project Detail

1. Expiring Grant Project Identification Number (PIN): FL0671

(e.g., the "Federal Award Identifier" indicated on form 1A. Application Type)

2. CoC Number and Name: FL-500 - Sarasota, Bradenton/Manatee, Sarasota Counties CoC

3. CoC Collaborative Applicant Name: Suncoast Partnership to End Homelessness, Inc.

4. Project Name: Everyone's Home 2021

5. Project Status: Standard

6. Component Type: PH

6a. Select the type of PH project. RRH

7. Is your organization, or subrecipient, a victim service provider defined in 24 CFR 578.3? No

3B. Project Description

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

1. Provide a description that addresses the entire scope of the proposed project.

Everyone's Home 2019 is a rapid rehousing (RRH) renewal project for moving homeless families and individuals in Manatee and Sarasota Counties into permanent housing (PH) as quickly as possible, including chronically homeless, youth ages 18 to 24, victims of domestic violence and persons presenting with substance abuse and/or mental illness. This project rapidly rehuses and provides rental assistance for up to 12 months to at least five families and five individuals, totaling 18 people. The project focuses on housing placement, housing stability, income increases, and accessing mainstream benefits. Our case managers (CMs), housing coordinator (HC), and many community partners work together to offer extensive supportive services to participants. We offer a bridge bed in our emergency shelter to participants while the participant is assisted every step of the way by the CM and HC to obtain housing. The CM works with the participant to establish a client-centered plan, including safety planning and accessing medical care, mental health treatment, life skills training, budgeting, educational opportunities, employment, insurance, Medicare/Medicaid, Social Security and food benefits. Our staff assist participants with moving into their new home, such as with move-in costs, the physical move, and the provision of furniture. The CM conducts follow-up visits, and regularly offers voluntary wraparound services. The CM and HC continue to work with the participant and Landlord to help ensure housing stability. Key evidence-based practices employed are progressive engagement, harm reduction, trauma-informed care and motivational interviewing.

When we originally submitted the application for this project in 2017, there was uncertainty about a coordinated entry system (CES) and if one would be implemented in the future. We referenced this system, "Oneby1," in the narrative of our FY2017 applications. Today, we are operating in the context of a functioning Oneby1 CES in which we accept participants referred by the CoC per the prioritized by-name list. We accept referrals through HMIS, with a focus on clients identified as high acuity, and thus clients who often have many complex barriers. Our CoC and our community have made immense strides in improving service delivery by committing to a CES in which the most in need are prioritized. However, we were not necessarily prepared for the high acuity participants referred to our RRH projects, who are more appropriate for permanent supportive housing (PSH) housing interventions. We have a shortage of PSH in our community and we are working on that. All this being said, the configuration of units and participants represented by this project was

designed to fit the needs of the participants before the Oneby1 was working. Therefore, we may seek to amend this Project in the future to serve less people with more services.

2. Check the appropriate box(s) if this project will have a specific subpopulation focus. (Select all that apply)

N/A - Project Serves All Subpopulations	<input type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families with Children	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Chronic Homeless	<input type="checkbox"/>
		Other(Click 'Save' to update)	<input type="checkbox"/>

3. Housing First

3a. Does the project quickly move participants into permanent housing Yes

3b. Does the project enroll program participants who have the following barriers? Select all that apply.

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

3c. Will the project prevent program participant termination for the following reasons? Select all that apply.

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

3d. Does the project follow a "Housing First" approach? Yes

4A. Supportive Services for Program Participants

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

1. For all supportive services available to program participants, indicate who will provide them and how often they will be provided. Click 'Save' to update.

Supportive Services	Provider	Frequency
Assessment of Service Needs	Applicant	Daily
Assistance with Moving Costs	Applicant	As needed
Case Management	Applicant	Daily
Child Care	Partner	As needed
Education Services	Partner	As needed
Employment Assistance and Job Training	Partner	As needed
Food	Applicant	As needed
Housing Search and Counseling Services	Applicant	Daily
Legal Services	Partner	As needed
Life Skills Training	Partner	As needed
Mental Health Services	Partner	Weekly
Outpatient Health Services	Partner	As needed
Outreach Services	Applicant	Daily
Substance Abuse Treatment Services	Partner	As needed
Transportation	Applicant	As needed
Utility Deposits	Applicant	As needed

Identify whether the project includes the following activities:

2. Transportation assistance to program participants to attend mainstream benefit appointments, employee training, or jobs? Yes

3. Annual follow-up with program participants to ensure mainstream benefits are received and renewed? Yes

4. Do program participants have access to Yes

**SSI/SSDI technical assistance provided by
this project, subrecipient, or partner agency?**

**4a. Has the staff person providing the
technical assistance completed SOAR
training in the past 24 months?** Yes

4B. Housing Type and Location

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

The following list summarizes each housing site in the project. To add a housing site to the list, select the icon. To view or update a housing site already listed, select the icon.

Total Units: 10

Total Beds: 18

Housing Type	Housing Type (JOINT)	Units	Beds
Scattered-site apartments (...)	---	10	18

4B. Housing Type and Location Detail

1. Housing Type: Scattered-site apartments (including efficiencies)

2. Indicate the maximum number of units and beds available for program participants at the selected housing site.

a. Units: 10

b. Beds: 18

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 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.

Street 1: 1400 10th Street

Street 2:

City: Sarasota

State: Florida

ZIP Code: 34236

**4. Select the geographic area(s) associated with the address:
(for multiple selections hold CTRL Key)**

129081 Manatee County, 120270 Bradenton,
122766 Sarasota, 129115 Sarasota County

5A. Program Participants - Households

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

Households	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Total Number of Households	5	5		10

Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Persons over age 24	3	2		5
Persons ages 18-24	2	3		5
Accompanied Children under age 18	8			8
Unaccompanied Children under age 18				0
Total Persons	13	5	0	18

Click Save to automatically calculate totals

5B. Program Participants - Subpopulations

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24							1	1	1	
Persons ages 18-24				1			1			
Children under age 18						1		1	1	5
Total Persons	0	0	0	1	0	1	2	2	2	5

Click Save to automatically calculate totals

Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24	2			1		1				
Persons ages 18-24				1			1			1
Total Persons	2	0	0	2	0	1	1	0	0	1

Click Save to automatically calculate totals

Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Accompanied Children under age 18										

Unaccompanied Children under age 18										
Total Persons	0			0	0	0	0	0	0	0

Describe the unlisted subpopulations referred to above:

Adults ages 18-24 in Households without children can be considered unaccompanied youth over 18. Unaccompanied youth that do not fall under any of the subpopulations above typically do not present as persons listed by the subpopulations. The unaccompanied youth typically do not fit into the chronically homeless subpopulation by definition but are literally homeless at least once in one year.

6A. Funding Request

1. Do any of the properties in this project have an active restrictive covenant? No

2. Was the original project awarded as either a Samaritan Bonus or Permanent Housing Bonus project? No

3. Does this project propose to allocate funds according to an indirect cost rate? No

4. Renewal Grant Term: This field is pre-populated with a one-year grant term and cannot be edited: 1 Year

5. Select the costs for which funding is requested:

Rental Assistance	<input checked="" type="checkbox"/>
Supportive Services	<input checked="" type="checkbox"/>
HMIS	<input type="checkbox"/>

6C. Rental Assistance Budget

The following list summarizes the rental assistance funding request for the total term of the project. To add information to the list, select the icon. To view or update information already listed, select the icon.

Total Request for Grant Term:		\$142,260	
Total Units:		10	
Type of Rental Assistance	FMR Area	Total Units Requested	Total Request
TRA	FL - North Port-Sarasota-Bradenton, F...	10	\$142,260

Rental Assistance Budget Detail

Type of Rental Assistance: TRA

Metropolitan or non-metropolitan fair market rent area: FL - North Port-Sarasota-Bradenton, FL MSA (1208199999)

Does the applicant request rental assistance funding for less than the area's per unit size fair market rents? No

Size of Units	# of Units (Applicant)		FMR Area (Applicant)	HUD Paid Rent (Applicant)		12 Months		Total Request (Applicant)
SRO		x	\$631	\$631	x	12	=	\$0
0 Bedroom	2	x	\$841	\$841	x	12	=	\$20,184
1 Bedroom	3	x	\$992	\$992	x	12	=	\$35,712
2 Bedrooms	3	x	\$1,275	\$1,275	x	12	=	\$45,900
3 Bedrooms	2	x	\$1,686	\$1,686	x	12	=	\$40,464
4 Bedrooms		x	\$2,030	\$2,030	x	12	=	\$0
5 Bedrooms		x	\$2,335	\$2,335	x	12	=	\$0
6 Bedrooms		x	\$2,639	\$2,639	x	12	=	\$0
7 Bedrooms		x	\$2,944	\$2,944	x	12	=	\$0
8 Bedrooms		x	\$3,248	\$3,248	x	12	=	\$0
9 Bedrooms		x	\$3,553	\$3,553	x	12	=	\$0
Total Units and Annual Assistance Requested	10							\$142,260
Grant Term								1 Year
Total Request for Grant Term								\$142,260

Click the 'Save' button to automatically calculate totals.

6D. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the icon. To view or update a Match source already listed, select the icon.

Summary for Match

Total Value of Cash Commitments:	\$60,340
Total Value of In-Kind Commitments:	\$0
Total Value of All Commitments:	\$60,340

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Type	Source	Contributor	Value of Commitments
Cash	Private	The Salvation Arm...	\$60,340

Sources of Match Detail

1. Type of Match Commitment: Cash

2. Source: Private

3. Name of Source: The Salvation Army general operating funds
(Be as specific as possible and include the office or grant program as applicable)

4. Amount of Written Commitment: \$60,340

6E. Summary Budget

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

The following information summarizes the funding request for the total term of the project. Budget amounts from the Leased Units, Rental Assistance, and Match screens have been automatically imported and cannot be edited. However, applicants must confirm and correct, if necessary, the total budget amounts for Leased Structures, Supportive Services, Operating, HMIS, and Admin. Budget amounts must reflect the most accurate project information according to the most recent project grant agreement or project grant agreement amendment, the CoC's final HUD-approved FY 2018 GIW or the project budget as reduced due to CoC reallocation. Please note that, new for FY 2018, there are no detailed budget screens for Leased Structures, Supportive Services, Operating, or HMIS costs. HUD expects the original details of past approved budgets for these costs to be the basis for future expenses. However, any reasonable and eligible costs within each CoC cost category can be expended and will be verified during a HUD monitoring.

Eligible Costs	Total Assistance Requested for 1 year Grant Term (Applicant)
1a. Leased Units	\$0
1b. Leased Structures	\$0
2. Rental Assistance	\$142,260
3. Supportive Services	\$88,692
4. Operating	\$0
5. HMIS	\$0
6. Sub-total Costs Requested	\$230,952
7. Admin (Up to 10%)	\$10,407
8. Total Assistance plus Admin Requested	\$241,359
9. Cash Match	\$60,340
10. In-Kind Match	\$0
11. Total Match	\$60,340
12. Total Budget	\$301,699

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No	IRS Determination...	10/27/2021
2) Other Attachment	No	Matching Funds Le...	10/27/2021
3) Other Attachment	No		

Attachment Details

Document Description: IRS Determination Letter

Attachment Details

Document Description: Matching Funds Letter

Attachment Details

Document Description:

7B. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance. It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

Additional for Rental Assistance Projects:

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR 578.33(d) or 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

B. For non-Rental Assistance Projects Only.

20-Year Operation Rule.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 20 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

15-Year Operation Rule – 24 CFR part 578 only.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 15 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

1-Year Operation Rule.

For applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provided.

C. Explanation.

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.

Name of Authorized Certifying Official Michele Matthews

Date: 10/31/2021

Title: Area Commander/CEO

Applicant Organization: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

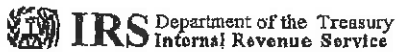
Active SAM Status Requirement. I certify that our organization has an active System for Award Management (SAM) registration as required by 2 CFR 200.300(b) at the time of project application submission to HUD and will ensure this SAM registration will be renewed annually to meet this requirement.

8B Submission Summary

Page	Last Updated
1A. SF-424 Application Type	09/24/2021
1B. SF-424 Legal Applicant	No Input Required
1C. SF-424 Application Details	No Input Required

Renewal Project Application FY2021	Page 49	11/08/2021
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1D. SF-424 Congressional District(s)	10/27/2021
1E. SF-424 Compliance	09/24/2021
1F. SF-424 Declaration	09/24/2021
1G. HUD-2880	09/24/2021
1H. HUD-50070	09/24/2021
1I. Cert. Lobbying	09/24/2021
1J. SF-LLL	09/24/2021
IK. SF-424B	09/24/2021
Submission Without Changes	10/27/2021
Recipient Performance	10/25/2021
Renewal Grant Consolidation or Renewal Grant Expansion	10/25/2021
2A. Subrecipients	No Input Required
3A. Project Detail	10/25/2021
3B. Description	09/24/2021
4A. Services	09/24/2021
4B. Housing Type	09/24/2021
5A. Households	09/24/2021
5B. Subpopulations	09/24/2021
6A. Funding Request	09/24/2021
6C. Rental Assistance	09/24/2021
6D. Match	10/26/2021
6E. Summary Budget	No Input Required
7A. Attachment(s)	10/27/2021
7B. Certification	10/27/2021



CINCINNATI OH 45999-0038

In reply refer to: 0248254921
July 31, 2020 LTR 4168C 0
58-0660607 000000 00

00013274

BODC: TE

THE SALVATION ARMY
TERRITORIAL HEADQUARTERS
% LEGAL DEPARTMENT
1424 NORTHEAST EXPY NE
BROOKHAVEN GA 30329



005202

Employer ID number: 58-0660607
Form 990 required: No

Dear Taxpayer:

We're responding to your request dated July 22, 2020, about your tax-exempt status.

We issued you a determination letter in November 1994, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(3).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(i).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after the end of your annual accounting period:

- Form 990, Return of Organization Exempt From Income Tax
- Form 990EZ, Short Form Return of Organization Exempt From Income Tax
- Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990-EZ
- Form 990-PF, Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

According to IRC Section 6033(j), if you don't file a required annual information return or notice for 3 consecutive years, we'll revoke your tax-exempt status on the due date of the 3rd required return or notice.

You can get IRS forms or publications you need from our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500 between 8 a.m. and 5 p.m.,

0248254921
July 31, 2020 LTR 4168C 0
58-0660607 000000 00
00013275

THE SALVATION ARMY
TERRITORIAL HEADQUARTERS
% LEGAL DEPARTMENT
1424 NORTHEAST EXPY NE
BROOKHAVEN GA 30329

local time, Monday through Friday (Alaska and Hawaii follow Pacific time).

Thank you for your cooperation.

Sincerely yours,



Kim A. Billups, Operations Manager
Accounts Management Operations 1



**DOING THE
MOST GOOD**
SARASOTA COUNTY

William Booth, *Founder*
Brian Peddle, *General*
Commissioner Willis Howell, *Territorial Commander*
Lt. Colonel Kenneth Luyk, *Divisional Commander*
Lt. Colonel Michele Matthews, *Area Commander*
Lt. Colonel Ward Matthews, *Area Commander*

October 26, 2021

U.S. Department of Housing and Urban Development
Office of Community Planning and Development
Attn: Kevin P. Chung
400 West Bay Street, Suite 1015
Jacksonville, FL 32202

Re: Match Funding for HUD FY2021 CoC Program Renewal Grant, FL0671L4H002002,
"Everyone's Home" Rapid Rehousing Project

To Whom It May Concern:

This letter serves as documentation for a Match commitment by The Salvation Army of Sarasota County toward the renewal of the stated HUD CoC Program Grant, FL0671L4H002002, "Everyone's Home" Rapid Rehousing Project (current e-snaps application project number 186992).

We, The Salvation Army of Sarasota County, will commit \$ \$60,340 from our general operating funds as Match funding. We pledge to match these funds during the expected 12-month grant period of February 1, 2022 to January 1, 2023.

We are grateful for the opportunity to continue to serve the community through the HUD-CoC Grant Program.

Thank you,

Cynthia Carter
Director of Finance

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2021 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition. For more information see FY 2021 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2021 CoC Program NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- Before starting the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- Carefully review each question in the Project Application. Questions from previous competitions may have been changed or removed, or new questions may have been added, and information previously submitted may or may not be relevant. Data from the FY 2019 Project Application will be imported into the FY 2021 Project Application; however, applicants will be required to review all fields for accuracy and to update information that may have been adjusted through the post award process or a grant agreement amendment. Data entered in the post award and amendment forms in e-snaps will not be imported into the project application.
- Rental assistance projects can only request the number of units and unit size as approved in the final HUD-approved Grant Inventory Worksheet (GIW).
- Transitional housing, permanent supportive housing with leasing, rapid re-housing, supportive services only, renewing safe havens, and HMIS can only request the Annual Renewal Amount (ARA) that appears on the CoC's HUD-approved GIW. If the ARA is reduced through the CoC's reallocation process, the final project funding request must reflect the reduced amount listed on the CoC's reallocation forms.
- HUD reserves the right to reduce or reject any renewal project that fails to adhere to 24 CFR part 578 and the application requirements set forth in the FY 2021 CoC Program Competition NOFA.

1A. SF-424 Application Type

1. Type of Submission: Application

2. Type of Application: Renewal Project Application

If "Revision", select appropriate letter(s):

If "Other", specify:

3. Date Received: 11/01/2021

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier: FL0831

This is the first 6 digits of the Grant Number, known as the PIN, that will also be indicated on Screen 3A Project Detail. This number must match the first 6 digits of the grant number on the HUD approved Grant Inventory Worksheet (GIW).

Check to confirm that the Federal Award Identifier has been updated to reflect the most recently awarded grant number

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: Society of St. Vincent de Paul South Pinellas, Inc.

b. Employer/Taxpayer Identification Number (EIN/TIN): 59-2380770

	c. Organizational DUNS:	021474730	PLUS 4	
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d. Address

Street 1: 384 15th Street North

Street 2:

City: St. Petersburg

County: Pinellas

State: Florida

Country: United States

Zip / Postal Code: 33705-2016

e. Organizational Unit (optional)

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Mr.

First Name: Nehemiah

Middle Name:

Last Name: Warner

Suffix:

Title: Grant Specialist

Organizational Affiliation: Society of St. Vincent de Paul South Pinellas, Inc.

Telephone Number: (727) 338-3198

Extension:

Fax Number: (727) 821-6244

Email: nehemiah@svdpsp.org

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6500-N25

Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (State(s) only): Florida
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: Returning Home - Suncoast 2021

16. Congressional District(s):

a. Applicant: FL-013, FL-012
(for multiple selections hold CTRL key)

b. Project: FL-016
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 01/01/2023

b. End Date: 12/31/2023

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

I AGREE:

21. Authorized Representative

Prefix: Mr.

First Name: Michael

Middle Name: J.

Last Name: Raposa

Suffix:

Title: Chief Executive Officer

Telephone Number: (727) 954-7990
(Format: 123-456-7890)

Fax Number: (727) 821-6244
(Format: 123-456-7890)

Email: michael@svdpsp.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/01/2021

1G. HUD 2880

**Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2506-0214 (exp.02/28/2022)**

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Society of St. Vincent de Paul South Pinellas, Inc.

Prefix: Mr.

First Name: Michael

Middle Name: J.

Last Name: Raposa

Suffix:

Title: Chief Executive Officer

Organizational Affiliation: Society of St. Vincent de Paul South Pinellas, Inc.

Telephone Number: (727) 954-7990

Extension:

Email: michael@svdpsp.org

City: St. Petersburg

County: Pinellas

State: Florida

Country: United States

Zip/Postal Code: 33705-2016

2. Employer ID Number (EIN): 59-2380770

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received

4a. Total Amount Requested for this project: \$271,570

5. State the name and location (street address, city and state) of the project or activity: Returning Home - Suncoast 2021 384 15th Street North St. Petersburg Florida

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
(For further information, see 24 CFR Sec. 4.3).

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. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
Department of Veterans Affairs, Supportive Services for Veteran Families Program Office, 810 Vermont Ave, NW, Room 6-1310, Washington, DC 20420	Grant	\$136,000.00	Services and rental assistance for Eligible Households (Polk County)
Department of Veterans Affairs, Supportive Services for Veteran Families Program Office, 810 Vermont Ave, NW, Room 6-1310, Washington, DC 20420	Grant	131500.0	Services and rental assistance for eligible households in Pasco County
Department of Veterans Affairs, Supportive Services for Veteran Families Program Office, 810 Vermont Ave, NW, Room 6-1310, Washington, DC 20420	Grant	\$49,600.00	Services and rental assistance for eligible households in Mid FL Counties
Department of Veterans Affairs, Supportive Services for Veteran Families Program Office, 810 Vermont Ave, NW, Room 6-1310, Washington, DC 20420	Grant	\$62,030.00	Services and rental assistance for eligible households in Pinellas County

Department of Veterans Affairs, Supportive Services for Veteran Families Program Office, 810 Vermont Ave, NW, Room 6-1310, Washington, DC 20420	Grant	\$158,105.00	Services and rental assistance for eligible households in Lower South Side of Bay Pines
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Part III Interested Parties

You must disclose:

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).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation	Financial Interest in Project/Activity (\$)	Financial Interest in Project/Activity (%)
NA	NA	NA	\$0.00	0%

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

I AGREE:

Name / Title of Authorized Official: Michael Raposa, Chief Executive Officer

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/01/2021

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Society of St. Vincent de Paul South Pinellas, Inc.

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.	e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
b. Establishing an on-going drug-free awareness program to inform employees --- (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted --- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;	g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.
d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;	

Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application.

Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying

X

documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.



WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Authorized Representative

Prefix: Mr.

First Name: Michael

Middle Name: J.

Last Name: Raposa

Suffix:

Title: Chief Executive Officer

Telephone Number: (727) 954-7990
(Format: 123-456-7890)

Fax Number: (727) 821-6244
(Format: 123-456-7890)

Email: michael@svdpsp.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/01/2021

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person 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 this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person 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 this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file

the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: Society of St. Vincent de Paul South Pinellas, Inc.

Name / Title of Authorized Official: Michael Raposa, Chief Executive Officer

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/01/2021

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.

Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. 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."

Answer "No" if your organization is NOT engaged in lobbying.

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? No

Legal Name: Society of St. Vincent de Paul South Pinellas, Inc.

Street 1: 384 15th Street North

Street 2:

City: St. Petersburg

County: Pinellas

State: Florida

Country: United States

Zip / Postal Code: 33705-2016

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and

complete.

Authorized Representative

Prefix: Mr.

First Name: Michael

Middle Name: J.

Last Name: Raposa

Suffix:

Title: Chief Executive Officer

Telephone Number: (727) 954-7990
(Format: 123-456-7890)

Fax Number: (727) 821-6244
(Format: 123-456-7890)

Email: michael@svdpsp.org

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/01/2021

IK. SF-424B

(SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007
Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|----|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |

- 8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- 9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
- 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
- 13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
- 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
- 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
- 18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
- 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: Society of St. Vincent de Paul South Pinellas, Inc.

Prefix: Mr.

First Name: Michael

Middle Name: J.

Last Name: Raposa

Suffix:

Title: Chief Executive Officer

Signature of Authorized Certifying Official: Considered signed upon submission in e-snaps.

Date Signed: 11/01/2021

Information About Submission without Changes

Follow the instructions below making note of the exceptions and limitations to the "Submit Without Changes" process.

In general, HUD expects a project's proposed project application information will remain the same from year-to-year unless changes are directed by HUD or approved through the grant agreement amendment process. However, HUD expects applicants to carefully review their information to determine if submitting without changes accurately reflects the expiring grant requesting renewal.

Due to e-snaps limitations, only previously submitted renewal applications can import data into the FY 2021 renewal project application. The data from previously submitted new and renewal project applications can be imported into a FY 2021 renewal project application. The "Submit without Changes" process is not applicable for:

- first time renewing project applications
- a project application that did not import last FY 2019 information
- a project that had Issues or Conditions that were addressed in FY 2019 Post-Award and updates need to be reflected in the FY 2021 project application
- a project that had amendments approved in FY 2019 or FY 2020 that need to be reflected in the FY 2021 project application

e-snaps will automatically be set to "Make Changes" and all questions on each screen must be updated.

Renewal projects that brought forward data from FY 2019 and have either a Leasing budget, Operating budget or use HUD PAID RENTS (Actual Rents) instead of FMR MAY NOT use the "Submit Without Changes" process and e-snaps will automatically be set to "Make Changes". All Leasing and Operating budgets, along with Rental Assistance budgets that use HUD PAID Rent will need to be updated in the application. Refer to the GIW posted on the HUD Exchange for accurate budget information on leasing and operating budgets and refer to the HUD PAID RENT document sent by your field office from HUD HQ to accurately set your rental assistance budgets that use HUD PAID rents. This will only impact the FY 2021 competition.

The e-snaps screens that remain "open" for required annual updates and do not affect applicants' ability to select "Submit without Changes" are:

- Recipient Performance Screen
- Consolidation and Expansion
- Screen 3A. Project Detail
- Screen 6D. Sources of Match
- All of Part 7: Attachments and Certification; and
- All of Part 8: Submission Summary.

All other screens in Part 2 through Part 6 begin in "Read-Only" format and should be reviewed for accuracy; including any updates that were made to the 2019 or 2020 project during the CoC Post Award Issues and Conditions process or as amended. If all the imported data is accurate and no edits or updates are needed to any screens other than the mandatory screens and questions noted above, project applicants should select "Submit Without Changes" in Part 8. If project applicants imported data and do need to make updates to the information on one or more screens, they must navigate to Part 8: "Submission Without Changes" Screen, select "Make Changes", and check the box next to each relevant screen title to unlock screens for editing. After project applicants select the screens they intend to edit via checkboxes, click ""Save"" and those screens will be available for edit. Once a project applicant selects a checkbox and clicks ""Save"", the project applicant cannot uncheck the box.

Please refer to the Detailed Instructions found on the left side menu of e-snaps or hud.gov to find more in depth information about applying under the FY 2021 CoC Competition.

Submission Without Changes

1. Are the requested renewal funds reduced from the previous award due to reallocation? No

2. Do you wish to submit this application without making changes? Please refer to the guidelines below to inform you of the requirements. Make changes

3. Specify which screens require changes by clicking the checkbox next to the name and then clicking the Save button.

Part 2 - Subrecipient Information	
2A. Subrecipients	<input type="checkbox"/>
Part 3 - Project Information	
3A. Project Detail	<input checked="" type="checkbox"/>
3B. Description	<input type="checkbox"/>
Part 4 - Housing Services and HMIS	
4A. Services	<input type="checkbox"/>
4B. Housing Type	<input type="checkbox"/>
Part 5 - Participants and Outreach Information	
5A. Households	<input type="checkbox"/>
5B. Subpopulations	<input type="checkbox"/>
Part 6 - Budget Information	
6A. Funding Request	<input checked="" type="checkbox"/>
6C. Rental Assistance	<input type="checkbox"/>
6D. Match	<input checked="" type="checkbox"/>
6E. Summary Budget	<input type="checkbox"/>
Part 7 - Attachment(s) & Certification	

7A. Attachment(s)	<input checked="" type="checkbox"/>
7B. Certification	<input checked="" type="checkbox"/>

You have selected "Make Changes" to question #2 above. Provide a brief description of the changes that will be made to the project information screens (bullets are appropriate):

6A Funding Request: Previously, SVdP CARES had requested a 10% indirect cost rate. SVdP CARES is removing this request.

You have selected "Make Changes." Once this screen is saved, you will be prohibited from "unchecking" any box that has been checked regardless of whether a change to data on the corresponding screen will be made.

Recipient Performance

1. Did you submit your previous year's Annual Performance Report (APR) on time? Not Applicable

1a. If you did not submit your APR on time to the SAGE website, provide an explanation.

Initial grant year is still active and will end 12/31/21 upon which SVdP CARES will submit the APR in SAGE on time.

2. Do you have any unresolved HUD Monitoring or OIG Audit finding(s) concerning any previous grant term related to this renewal project request? No

3. Do you draw funds quarterly for your current renewal project? Yes

4. Have any funds remained available for recapture by HUD for the most recently expired grant term related to this renewal project request? No

Renewal Grant Consolidation or Renewal Grant Expansion

The FY2021 CoC Competition will continue offering opportunities to expand or consolidate CoC projects. A few changes have occurred that differentiate the process from FY 2019.

1. Expansions and Consolidations will submit individual applications.
 - a. Expansions will ONLY submit a Stand-Alone Renewal application and a Stand-Alone New application.
 - b. Consolidations will ONLY submit individual renewal project applications, identifying the renewal application that will survive, and the renewal applications that will terminate. Up to 10 grants may be included in a consolidation.

2. HUD HQ will combine the data (e.g., units, budgets) for Expansion or Consolidation requests from the individual project applications selected for conditional award and provide a data report with further instructions for the field office and conditional recipient.

1. Is this renewal project application No requesting to consolidate or expand?

If "No" click on "Next" or "Save & Next" below to move to the next screen.

2A. Project Subrecipients

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the icon. To view or update subrecipient information already listed, select the view option.

Total Expected Sub-Awards: \$0

Organization	Type	Sub-Award Amount
This list contains no items		

3A. Project Detail

1. Expiring Grant Project Identification Number (PIN): FL0831

(e.g., the "Federal Award Identifier" indicated on form 1A. Application Type)

2. CoC Number and Name: FL-500 - Sarasota, Bradenton/Manatee, Sarasota Counties CoC

3. CoC Collaborative Applicant Name: Suncoast Partnership to End Homelessness, Inc.

4. Project Name: Returning Home - Suncoast 2021

5. Project Status: Standard

6. Component Type: PH

6a. Select the type of PH project. RRH

7. Is your organization, or subrecipient, a victim service provider defined in 24 CFR 578.3? No

3B. Project Description

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

1. Provide a description that addresses the entire scope of the proposed project.

The Society of St. Vincent de Paul South Pinellas Inc., doing business as SVdP CARES is a highly qualified non-profit organization interested in helping fill gaps in the homeless crisis response system in the Sarasota and Manatee County.

We are proposing a rapid rehousing project that will house 13 households estimating that three households will have one or more children and ten will be without children. To assist individuals and families experiencing homelessness who are seeking permanent housing. The program adheres to the principles of Housing First – low barriers to admission, targeting the most vulnerable, supporting choice and self-determination, and facilitating social and community integration. The focus is provide permanent housing quickly without preconditions and barriers to entry, such as sobriety, treatment adherence or service participation. We will only accept referrals prioritized through the CoC’s Coordinated Assessment System.

Additional support includes help with application fees, security and utility deposits, and support services such as case management, housing search, transportation, assistance in accessing education and employment services, and life skills training to address topics such as budgeting and being a good tenant.

A Housing Specialist (HS) will focus on developing relationships with as they work with participants matching their preferences with housing. The HS will work closely with the Case Manager (CM) to provide support to the landlords, assist with educating the client regarding requirements of the lease and ensure each unit is inspected and meets Housing Quality Standards. All requests for financial assistance will be ‘needs based’ and reviewed by program management and finance for eligibility.

CM will focus on issues that impede access to housing. After placement the focus shifts to barriers that impact retention. CM will assess the current benefits received by the household, potential benefits for which they are eligible and the employment status of each adult in the household. Based on the households’ needs a plan is developed addressing education or training needed to promote stability, child care and after school programs needed, transportation issues, linkage to employment services, health and behavioral health care, budgeting classes, and credit counseling, as well as referral for public benefits (i.e. Food Stamps, TANF, and Unemployment). All households seeking disability income will receive assistance by SOAR trained staff.

The CM will work to transition at least 85% of households assisted into housing and increase the income for 20% or more households. Staff are trained in best practices such as Housing First, Trauma Informed Care, and Motivational

Interviewing. As one of the five key components to the homeless crisis response system, this project will help build the foundation needed to move away from managing homelessness to making homelessness brief, rare and nonrecurring.

2. Check the appropriate box(s) if this project will have a specific subpopulation focus. (Select all that apply)

N/A - Project Serves All Subpopulations	<input type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families with Children	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Chronic Homeless	<input type="checkbox"/>
		Other(Click 'Save' to update)	<input type="checkbox"/>

Other: Individuals whose homelessness is long term, high acuity

3. Housing First

3a. Does the project quickly move participants into permanent housing Yes

3b. Does the project enroll program participants who have the following barriers? Select all that apply.

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

3c. Will the project prevent program participant termination for the following reasons? Select all that apply.

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>

Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

3d. Does the project follow a "Housing First" approach? Yes

4A. Supportive Services for Program Participants

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

1. For all supportive services available to program participants, indicate who will provide them and how often they will be provided. Click 'Save' to update.

Supportive Services	Provider	Frequency
Assessment of Service Needs	Applicant	Monthly
Assistance with Moving Costs	Applicant	As needed
Case Management	Applicant	Bi-weekly
Child Care	Partner	As needed
Education Services	Non-Partner	As needed
Employment Assistance and Job Training	Applicant	As needed
Food	Applicant	As needed
Housing Search and Counseling Services	Applicant	As needed
Legal Services	Partner	As needed
Life Skills Training	Applicant	As needed
Mental Health Services	Partner	As needed
Outpatient Health Services	Partner	As needed
Outreach Services	Partner	As needed
Substance Abuse Treatment Services	Partner	As needed
Transportation	Applicant	As needed
Utility Deposits	Applicant	As needed

Identify whether the project includes the following activities:

2. Transportation assistance to program participants to attend mainstream benefit appointments, employee training, or jobs? Yes

3. Annual follow-up with program participants to ensure mainstream benefits are received and renewed? Yes

4. Do program participants have access to SSI/SSDI technical assistance provided by Yes

this project, subrecipient, or partner agency?

4a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months? Yes

4B. Housing Type and Location

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

The following list summarizes each housing site in the project. To add a housing site to the list, select the icon. To view or update a housing site already listed, select the icon.

Total Units: 13

Total Beds: 16

Housing Type	Housing Type (JOINT)	Units	Beds
Scattered-site apartments (...)	---	13	16

4B. Housing Type and Location Detail

1. Housing Type: Scattered-site apartments (including efficiencies)

2. Indicate the maximum number of units and beds available for program participants at the selected housing site.

a. Units: 13

b. Beds: 16

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 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.

Street 1: 384 15th Street North

Street 2:

City: St. Petersburg

State: Florida

ZIP Code: 33705

**4. Select the geographic area(s) associated with the address:
(for multiple selections hold CTRL Key)**

129081 Manatee County, 120270 Bradenton,
122766 Sarasota, 129115 Sarasota County

5A. Program Participants - Households

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

Households	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Total Number of Households	3	10	0	13

Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Persons over age 24	4	11		15
Persons ages 18-24	0	1		1
Accompanied Children under age 18	6		0	6
Unaccompanied Children under age 18			0	0
Total Persons	10	12	0	22

Click Save to automatically calculate totals

5B. Program Participants - Subpopulations

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24	0	0	1	1	0	1	1	1	0	0
Persons ages 18-24	0	0	0	0	0	0	0	0	0	0
Children under age 18	0			0	0	1	1	1	1	2
Total Persons	0	0	1	1	0	2	2	2	1	2

Click Save to automatically calculate totals

Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24	1	0	1	2	0	2	2	2	0	3
Persons ages 18-24	0	0	0	1	0	0	0	0	0	0
Total Persons	1	0	1	3	0	2	2	2	0	3

Click Save to automatically calculate totals

Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Accompanied Children under age 18										
Unaccompanied Children under age 18										

Total Persons	0			0	0	0	0	0	0	0
---------------	---	--	--	---	---	---	---	---	---	---

Describe the unlisted subpopulations referred to above:

Unlisted subpopulations includes individuals experiencing homelessness due to economic issues, family struggles, or other circumstances not listed.

6A. Funding Request

1. Do any of the properties in this project have an active restrictive covenant? No
2. Was the original project awarded as either a Samaritan Bonus or Permanent Housing Bonus project? No
3. Does this project propose to allocate funds according to an indirect cost rate? No
4. Renewal Grant Term: This field is pre-populated with a one-year grant term and cannot be edited: 1 Year
5. Select the costs for which funding is requested:
- | | |
|---------------------|-------------------------------------|
| Rental Assistance | <input checked="" type="checkbox"/> |
| Supportive Services | <input checked="" type="checkbox"/> |
| HMIS | <input checked="" type="checkbox"/> |

6C. Rental Assistance Budget

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

The following list summarizes the rental assistance funding request for the total term of the project. To add information to the list, select the icon. To view or update information already listed, select the icon.

Total Request for Grant Term:		\$157,692	
Total Units:		13	
Type of Rental Assistance	FMR Area	Total Units Requested	Total Request
TRA	FL - North Port-Sarasota-Bradenton, F...	13	\$157,692

Rental Assistance Budget Detail

Type of Rental Assistance: TRA

Metropolitan or non-metropolitan fair market rent area: FL - North Port-Sarasota-Bradenton, FL MSA (1208199999)

Does the applicant request rental assistance funding for less than the area's per unit size fair market rents? No

Size of Units	# of Units (Applicant)		FMR Area (Applicant)	HUD Paid Rent (Applicant)		12 Months		Total Request (Applicant)
SRO		x	\$631	\$631	x	12	=	\$0
0 Bedroom	4	x	\$841	\$841	x	12	=	\$40,368
1 Bedroom	6	x	\$992	\$992	x	12	=	\$71,424
2 Bedrooms	3	x	\$1,275	\$1,275	x	12	=	\$45,900
3 Bedrooms		x	\$1,686	\$1,686	x	12	=	\$0
4 Bedrooms		x	\$2,030	\$2,030	x	12	=	\$0
5 Bedrooms		x	\$2,335	\$2,335	x	12	=	\$0
6 Bedrooms		x	\$2,639	\$2,639	x	12	=	\$0
7 Bedrooms		x	\$2,944	\$2,944	x	12	=	\$0
8 Bedrooms		x	\$3,248	\$3,248	x	12	=	\$0
9 Bedrooms		x	\$3,553	\$3,553	x	12	=	\$0
Total Units and Annual Assistance Requested	13							\$157,692
Grant Term								1 Year
Total Request for Grant Term								\$157,692

Click the 'Save' button to automatically calculate totals.

6D. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the icon. To view or update a Match source already listed, select the icon.

Summary for Match

Total Value of Cash Commitments:	\$67,893
Total Value of In-Kind Commitments:	\$0
Total Value of All Commitments:	\$67,893

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Type	Source	Contributor	Value of Commitments
Cash	Government	US Department of ...	\$67,893

Sources of Match Detail

1. Type of Match Commitment: Cash

2. Source: Government

3. Name of Source: US Department of Veterans Affairs
(Be as specific as possible and include the office or grant program as applicable)

4. Amount of Written Commitment: \$67,893

6E. Summary Budget

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

The following information summarizes the funding request for the total term of the project. Budget amounts from the Leased Units, Rental Assistance, and Match screens have been automatically imported and cannot be edited. However, applicants must confirm and correct, if necessary, the total budget amounts for Leased Structures, Supportive Services, Operating, HMIS, and Admin. Budget amounts must reflect the most accurate project information according to the most recent project grant agreement or project grant agreement amendment, the CoC's final HUD-approved FY 2018 GIW or the project budget as reduced due to CoC reallocation. Please note that, new for FY 2018, there are no detailed budget screens for Leased Structures, Supportive Services, Operating, or HMIS costs. HUD expects the original details of past approved budgets for these costs to be the basis for future expenses. However, any reasonable and eligible costs within each CoC cost category can be expended and will be verified during a HUD monitoring.

Eligible Costs	Total Assistance Requested for 1 year Grant Term (Applicant)
1a. Leased Units	\$0
1b. Leased Structures	\$0
2. Rental Assistance	\$157,692
3. Supportive Services	\$89,686
4. Operating	\$0
5. HMIS	\$1,465
6. Sub-total Costs Requested	\$248,843
7. Admin (Up to 10%)	\$22,727
8. Total Assistance plus Admin Requested	\$271,570
9. Cash Match	\$67,893
10. In-Kind Match	\$0
11. Total Match	\$67,893
12. Total Budget	\$339,463

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No		
2) Other Attachment	No		
3) Other Attachment	No		

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

7B. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance. It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

Additional for Rental Assistance Projects:

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR 578.33(d) or 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

B. For non-Rental Assistance Projects Only.

20-Year Operation Rule.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 20 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

15-Year Operation Rule – 24 CFR part 578 only.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 15 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

1-Year Operation Rule.

For applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provided.

C. Explanation.

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.

Name of Authorized Certifying Official Michael Raposa

Date: 11/01/2021

Title: Chief Executive Officer

Applicant Organization: Society of St. Vincent de Paul South Pinellas,

Inc.

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

Active SAM Status Requirement.

I certify that our organization has an active System for Award Management (SAM) registration as required by 2 CFR 200.300(b) at the time of project application submission to HUD and will ensure this SAM registration will be renewed annually to meet this requirement.

8B Submission Summary

Page	Last Updated
1A. SF-424 Application Type	11/01/2021
1B. SF-424 Legal Applicant	No Input Required
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	11/01/2021
Renewal Project Application FY2021	Page 49 11/08/2021

1E. SF-424 Compliance	11/01/2021
1F. SF-424 Declaration	11/01/2021
1G. HUD-2880	11/01/2021
1H. HUD-50070	11/01/2021
1I. Cert. Lobbying	11/01/2021
1J. SF-LLL	11/01/2021
IK. SF-424B	11/01/2021
Submission Without Changes	11/01/2021
Recipient Performance	11/01/2021
Renewal Grant Consolidation or Renewal Grant Expansion	11/01/2021
2A. Subrecipients	No Input Required
3A. Project Detail	11/01/2021
3B. Description	11/01/2021
4A. Services	11/01/2021
4B. Housing Type	11/01/2021
5A. Households	11/01/2021
5B. Subpopulations	11/01/2021
6A. Funding Request	11/01/2021
6C. Rental Assistance	11/01/2021
6D. Match	11/01/2021
6E. Summary Budget	No Input Required
7A. Attachment(s)	No Input Required
7B. Certification	11/01/2021

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2021 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user’s application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition. For more information see FY 2021 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2021 CoC Program NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- Before starting the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- Carefully review each question in the Project Application. Questions from previous competitions may have been changed or removed, or new questions may have been added, and information previously submitted may or may not be relevant. Data from the FY 2019 Project Application will be imported into the FY 2021 Project Application; however, applicants will be required to review all fields for accuracy and to update information that may have been adjusted through the post award process or a grant agreement amendment. Data entered in the post award and amendment forms in e-snaps will not be imported into the project application.
- Rental assistance projects can only request the number of units and unit size as approved in the final HUD-approved Grant Inventory Worksheet (GIW).
- Transitional housing, permanent supportive housing with leasing, rapid re-housing, supportive services only, renewing safe havens, and HMIS can only request the Annual Renewal Amount (ARA) that appears on the CoC’s HUD-approved GIW. If the ARA is reduced through the CoC’s reallocation process, the final project funding request must reflect the reduced amount listed on the CoC’s reallocation forms.
- HUD reserves the right to reduce or reject any renewal project that fails to adhere to 24 CFR part 578 and the application requirements set forth in the FY 2021 CoC Program Competition NOFA.

1A. SF-424 Application Type

1. Type of Submission: Application

2. Type of Application: Renewal Project Application

If "Revision", select appropriate letter(s):

If "Other", specify:

3. Date Received: 11/08/2021

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier: FL0828

This is the first 6 digits of the Grant Number, known as the PIN, that will also be indicated on Screen 3A Project Detail. This number must match the first 6 digits of the grant number on the HUD approved Grant Inventory Worksheet (GIW).

Check to confirm that the Federal Award Identifier has been updated to reflect the most recently awarded grant number

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: Catholic Charities, Diocese of Venice, Inc.

b. Employer/Taxpayer Identification Number (EIN/TIN): 59-2473176

	c. Organizational DUNS:	877686501	PLUS 4	
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d. Address

Street 1: 1000 Pinebrook Road

Street 2:

City: Venice

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34285-6426

e. Organizational Unit (optional)

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Ms.

First Name: Sandi

Middle Name: Lynn

Last Name: Rowland

Suffix:

Title: Director of Grants

Organizational Affiliation: Sandi Lynn Rowland

Telephone Number: (941) 222-1910

Extension:

Fax Number: (941) 441-1150

Email: sandi.rowland@catholiccharitiesdov.org

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6500-N25

Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (State(s) only): Florida
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: CCDOV TH - RRH 2019

16. Congressional District(s):

a. Applicant: FL-016, FL-017
(for multiple selections hold CTRL key)

b. Project: FL-016, FL-017
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 02/01/2020

b. End Date: 01/31/2021

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review: 09/20/2019

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

I AGREE:

21. Authorized Representative

Prefix: Mr.

First Name: Eduardo

Middle Name:

Last Name: Gloria

Suffix:

Title: CEO

Telephone Number: (941) 484-9543
(Format: 123-456-7890)

Fax Number: (941) 441-1150
(Format: 123-456-7890)

Email: eduardo.gloria@catholiccharitiesdov.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2506-0214 (exp.02/28/2022)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Catholic Charities, Diocese of Venice, Inc.

Prefix: Mr.

First Name: Eduardo

Middle Name:

Last Name: Gloria

Suffix:

Title: CEO

Organizational Affiliation: Eduardo Gloria

Telephone Number: (941) 484-9543

Extension:

Email: eduardo.gloria@catholiccharitiesdov.org

City: Venice

County: Sarasota

State: Florida

Country: United States

Zip/Postal Code: 34285-6426

2. Employer ID Number (EIN): 59-2473176

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received

4a. Total Amount Requested for this project: \$83,275

5. State the name and location (street address, city and state) of the project or activity: CCDOV TH - RRH 2019 1000 Pinebrook Road Venice Florida

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
(For further information, see 24 CFR Sec. 4.3).

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. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
HUD - 451 7th St. SW, Washington D.C. 20410	grant	\$171,430.00	PSH
HUD - 451 7th St. SW, Washington D.C. 20410	grant	517338.0	RRH
HUD - 451 7th St. SW, Washington D.C. 20410	grant	\$83,275.00	TH/RRH
NA			
NA			

Part III Interested Parties

You must disclose:

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).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation	Financial Interest in Project/Activity (\$)	Financial Interest in Project/Activity (%)
NA		NA	\$0.00	0%
NA				
NA				
NA				
NA				

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

I AGREE:

Name / Title of Authorized Official: Eduardo Gloria, CEO

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/05/2021

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Catholic Charities, Diocese of Venice, Inc.

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.	e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
b. Establishing an on-going drug-free awareness program to inform employees --- (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted --- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;	g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.
d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;	

Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application. Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I

X

acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.



WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Authorized Representative

Prefix: Mr.

First Name: Eduardo

Middle Name

Last Name: Gloria

Suffix:

Title: CEO

Telephone Number: (941) 484-9543
(Format: 123-456-7890)

Fax Number: (941) 441-1150
(Format: 123-456-7890)

Email: eduardo.gloria@catholiccharitiesdov.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person 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 this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person 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 this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file

the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: Catholic Charities, Diocese of Venice, Inc.

Name / Title of Authorized Official: Eduardo Gloria, CEO

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.

Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. 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."

Answer "No" if your organization is NOT engaged in lobbying.

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? No

Legal Name: Catholic Charities, Diocese of Venice, Inc.

Street 1: 1000 Pinebrook Road

Street 2:

City: Venice

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34285-6426

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

X

Authorized Representative

Prefix: Mr.

First Name: Eduardo

Middle Name:

Last Name: Gloria

Suffix:

Title: CEO

Telephone Number: (941) 484-9543
(Format: 123-456-7890)

Fax Number: (941) 441-1150
(Format: 123-456-7890)

Email: eduardo.gloria@catholiccharitiesdov.org

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

IK. SF-424B

(SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007
Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|----|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |

- | | |
|-----|--|
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |
| 9. | Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements. |
| 10. | Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more. |
| 11. | Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205). |
| 12. | Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system. |
| 13. | Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.). |
| 14. | Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance. |
| 15. | Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance. |
| 16. | Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures. |
| 17. | Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations." |
| 18. | Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program. |
| 19. | Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award. |

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: Catholic Charities, Diocese of Venice, Inc.

Prefix: Mr.

First Name: Eduardo

Middle Name:

Last Name: Gloria

Suffix:

Title: CEO

Signature of Authorized Certifying Official: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

Information About Submission without Changes

Follow the instructions below making note of the exceptions and limitations to the "Submit Without Changes" process.

In general, HUD expects a project's proposed project application information will remain the same from year-to-year unless changes are directed by HUD or approved through the grant agreement amendment process. However, HUD expects applicants to carefully review their information to determine if submitting without changes accurately reflects the expiring grant requesting renewal.

Due to e-snaps limitations, only previously submitted renewal applications can import data into the FY 2021 renewal project application. The data from previously submitted new and renewal project applications can be imported into a FY 2021 renewal project application. The "Submit without Changes" process is not applicable for:

- first time renewing project applications
- a project application that did not import last FY 2019 information
- a project that had Issues or Conditions that were addressed in FY 2019 Post-Award and updates need to be reflected in the FY 2021 project application
- a project that had amendments approved in FY 2019 or FY 2020 that need to be reflected in the FY 2021 project application

e-snaps will automatically be set to "Make Changes" and all questions on each screen must be updated.

Renewal projects that brought forward data from FY 2019 and have either a Leasing budget, Operating budget or use HUD PAID RENTS (Actual Rents) instead of FMR MAY NOT use the "Submit Without Changes" process and e-snaps will automatically be set to "Make Changes". All Leasing and Operating budgets, along with Rental Assistance budgets that use HUD PAID Rent will need to be updated in the application. Refer to the GIW posted on the HUD Exchange for accurate budget information on leasing and operating budgets and refer to the HUD PAID RENT document sent by your field office from HUD HQ to accurately set your rental assistance budgets that use HUD PAID rents. This will only impact the FY 2021 competition.

The e-snaps screens that remain "open" for required annual updates and do not affect applicants' ability to select "Submit without Changes" are:

- Recipient Performance Screen
- Consolidation and Expansion
- Screen 3A. Project Detail
- Screen 6D. Sources of Match
- All of Part 7: Attachments and Certification; and
- All of Part 8: Submission Summary.

All other screens in Part 2 through Part 6 begin in "Read-Only" format and should be reviewed for accuracy; including any updates that were made to the 2019 or 2020 project during the CoC Post Award Issues and Conditions process or as amended. If all the imported data is accurate and no edits or updates are needed to any screens other than the mandatory screens and questions noted above, project applicants should select "Submit Without Changes" in Part 8. If project applicants imported data and do need to make updates to the information on one or more screens, they must navigate to Part 8: "Submission Without Changes" Screen, select "Make Changes", and check the box next to each relevant screen title to unlock screens for editing. After project applicants select the screens they intend to edit via checkboxes, click ""Save"" and those screens will be available for edit. Once a project applicant selects a checkbox and clicks ""Save"", the project applicant cannot uncheck the box.

Please refer to the Detailed Instructions found on the left side menu of e-snaps or hud.gov to find more in depth information about applying under the FY 2021 CoC Competition.

Submission Without Changes

1. Are the requested renewal funds reduced from the previous award due to reallocation? No

2. Do you wish to submit this application without making changes? Please refer to the guidelines below to inform you of the requirements. Make changes

3. Specify which screens require changes by clicking the checkbox next to the name and then clicking the Save button.

Part 2 - Subrecipient Information	
2A. Subrecipients	<input type="checkbox"/>
Part 3 - Project Information	
3A. Project Detail	<input checked="" type="checkbox"/>
3B. Description	<input checked="" type="checkbox"/>
Part 4 - Housing Services and HMIS	
4A. Services	<input type="checkbox"/>
4B. Housing Type	<input checked="" type="checkbox"/>
Part 5 - Participants and Outreach Information	
5A. Households	<input type="checkbox"/>
5B. Subpopulations	<input type="checkbox"/>
Part 6 - Budget Information	
6A. Funding Request	<input checked="" type="checkbox"/>
6C. Rental Assistance	<input checked="" type="checkbox"/>
6D. Match	<input checked="" type="checkbox"/>
6E. Summary Budget	<input checked="" type="checkbox"/>
Part 7 - Attachment(s) & Certification	

7A. Attachment(s)	<input checked="" type="checkbox"/>
7A. In-Kind Match MOU Attachment	<input type="checkbox"/>
7B. Certification	<input checked="" type="checkbox"/>

You have selected "Make Changes" to question #2 above. Provide a brief description of the changes that will be made to the project information screens (bullets are appropriate):

Budget amendment executed for project moving funding from leased to rental units

You have selected "Make Changes." Once this screen is saved, you will be prohibited from "unchecking" any box that has been checked regardless of whether a change to data on the corresponding screen will be made.

Recipient Performance

1. Did you submit your previous year's Annual Performance Report (APR) on time? No

1a. If you did not submit your APR on time to the SAGE website, provide an explanation.

project was undergoing an amendment

2. Do you have any unresolved HUD Monitoring or OIG Audit finding(s) concerning any previous grant term related to this renewal project request? No

3. Do you draw funds quarterly for your current renewal project? Yes

4. Have any funds remained available for recapture by HUD for the most recently expired grant term related to this renewal project request? No

Renewal Grant Consolidation or Renewal Grant Expansion

The FY2021 CoC Competition will continue offering opportunities to expand or consolidate CoC projects. A few changes have occurred that differentiate the process from FY 2019.

1. Expansions and Consolidations will submit individual applications.
 - a. Expansions will ONLY submit a Stand-Alone Renewal application and a Stand-Alone New application.
 - b. Consolidations will ONLY submit individual renewal project applications, identifying the renewal application that will survive, and the renewal applications that will terminate. Up to 10 grants may be included in a consolidation.

2. HUD HQ will combine the data (e.g., units, budgets) for Expansion or Consolidation requests from the individual project applications selected for conditional award and provide a data report with further instructions for the field office and conditional recipient.

1. Is this renewal project application No requesting to consolidate or expand?

If "No" click on "Next" or "Save & Next" below to move to the next screen.

2A. Project Subrecipients

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards: \$0

Organization	Type	Sub-Award Amount
This list contains no items		

3A. Project Detail

1. Expiring Grant Project Identification Number (PIN): FL0828

(e.g., the "Federal Award Identifier" indicated on form 1A. Application Type)

2. CoC Number and Name: FL-500 - Sarasota, Bradenton/Manatee, Sarasota Counties CoC

3. CoC Collaborative Applicant Name: Suncoast Partnership to End Homelessness, Inc.

4. Project Name: CCDOV TH - RRH 2019

5. Project Status: Standard

6. Component Type: Joint TH & PH-RRH

7. Is your organization, or subrecipient, a victim service provider defined in 24 CFR 578.3? No

8. Does this project include Replacement Reserves as a CoC Operating Cost? No

(Attachment Requirement)

3B. Project Description

1. Provide a description that addresses the entire scope of the proposed project.

Within 4 months of award, the current seven Casa San Jose (CSJ) clients will be transitioned in place using HOPWA tenant based rental assistance (TBRA) vouchers from the Health Planning Council of Southwest Florida. The facility is clustered one-bedroom apartments restricted solely to persons with HIV/AIDS. Those residents who are disabled or elderly, will be encouraged to register for waiting list with the Sarasota Housing Authority. It is approximately a 3 year wait for a new applicant to be housed. No more than 50% of the transition grant will be used for eligible activities of the original program. The new project (New Start) can provide RRH for between 2 – 5 five households (singles/families) depending on who is referred to the program and their individual needs. The five units in Phase 2 will be provided through scattered housing and range from efficiency to three-bedroom units. Little more than 50% of renewal funding will be for the TH-RRH component. It is estimated to be fully operating within the one-year grant period. CCDOV anticipates accepting referrals for New Start within 60 days of award. CSJ will continue to provide supportive housing and services for four months for 8 CSJ residents. It is anticipated 2- 5 individuals/families can be served with the TH-RRH (Phase 2). CSJ served only males. The New Start Project will be an expansion of Family Haven which currently serves literally homeless families. New Start will target single, chronically homeless men and/or women, or families as coordinated through the Oneby1 coordinated entry program priorities. Considerations will be given to client choice, access to public schools, transportation, healthcare and other resources when selecting RRH units. In keeping with HUD guidelines, CCDOV will allow for the portability of tenant based rental assistance outside of the proposed service area for victims of domestic violence, stalking, or anyone experiencing life threatening circumstances. It is estimated within the one-year grant period, the project will be fully operating as New Start. Referrals will be accepted through Suncoast Partnership’s Oneby1 coordinated entry ensuring all placements match CoC priorities and services are not duplicated. Once housed, RRH participants may participate in case management, including: personal budgeting, life skills, vocational training, an/or other services to increase skills, stability, and income.

2. Check the appropriate box(s) if this project will have a specific subpopulation focus. (Select all that apply)

N/A - Project Serves All Subpopulations	<input type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families with Children	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Chronic Homeless	<input type="checkbox"/>
		Other(Click 'Save' to update)	<input type="checkbox"/>

3. Housing First

3a. Does the project quickly move participants into permanent housing Yes

3b. Does the project enroll program participants who have the following barriers? Select all that apply.

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

3c. Will the project prevent program participant termination for the following reasons? Select all that apply.

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

3d. Does the project follow a "Housing First" approach? Yes

4A. Supportive Services for Program Participants

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

1. For all supportive services available to program participants, indicate who will provide them and how often they will be provided. Click 'Save' to update.

Supportive Services	Provider	Frequency
Assessment of Service Needs	Applicant	Monthly
Assistance with Moving Costs	Applicant	As needed
Case Management	Applicant	Weekly
Child Care	Partner	As needed
Education Services	Partner	As needed
Employment Assistance and Job Training	Non-Partner	As needed
Food	Applicant	As needed
Housing Search and Counseling Services	Applicant	As needed
Legal Services	Partner	As needed
Life Skills Training	Applicant	As needed
Mental Health Services	Partner	As needed
Outpatient Health Services	Non-Partner	As needed
Outreach Services	Applicant	Monthly
Substance Abuse Treatment Services	Non-Partner	As needed
Transportation	Non-Partner	As needed
Utility Deposits	Partner	As needed

Identify whether the project includes the following activities:

2. Transportation assistance to program participants to attend mainstream benefit appointments, employee training, or jobs? Yes

3. Annual follow-up with program participants to ensure mainstream benefits are received and renewed? Yes

4. Do program participants have access to SSI/SSDI technical assistance provided by Yes

this project, subrecipient, or partner agency?

4a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months? No

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the  icon. To view or update a housing site already listed, select the  icon.

	TH	RRH	Total
Total Units:	0	5	5
Total Beds:	0	7	7
Housing Type	Housing Type (JOINT)		Units
---	Scattered-site ap...		5
			7

4B. Housing Type and Location Detail

The applicant has selected "JOINT TH & PH-RRH" as their component type and must list all CoC funded and Non CoC-funded units and beds being provided under this project.

1. Is this housing type for the TH or RRH portion of the project? RRH

2. Housing Type: Scattered-site apartments (including efficiencies)

3. What is the funding source for these units and beds? Mixed Funding
(If multiple sources, select "Mixed" from the dropdown menu)

Other Funding Source: Catholic Charities

4. Indicate the maximum number of units and beds available for project participants at the selected housing site.

a. Units: 5

b. Beds: 7

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.

Street 1: 1000 Pinebrook Road

Street 2:

City: Venice

State: Florida

ZIP Code: 34285

**6. Select the geographic area(s) associated with the address:
(for multiple selections hold CTRL Key)**

129115 Sarasota County

5A. Program Participants - Households

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

Households	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Total Number of Households	2	3		5

Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Persons over age 24	2	3		5
Persons ages 18-24				0
Accompanied Children under age 18	2			2
Unaccompanied Children under age 18				0
Total Persons	4	3	0	7

Click Save to automatically calculate totals

5B. Program Participants - Subpopulations

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24	2									
Persons ages 18-24										
Children under age 18	2									
Total Persons	4	0	0	0	0	0	0	0	0	0

Click Save to automatically calculate totals

Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24	3									
Persons ages 18-24										
Total Persons	3	0	0	0	0	0	0	0	0	0

Click Save to automatically calculate totals

Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Accompanied Children under age 18										
Unaccompanied Children under age 18										

Total Persons	0			0	0	0	0	0	0	0
----------------------	---	--	--	---	---	---	---	---	---	---

6A. Funding Request

1. Do any of the properties in this project have an active restrictive covenant? No
2. Was the original project awarded as either a Samaritan Bonus or Permanent Housing Bonus project? No
3. Does this project propose to allocate funds according to an indirect cost rate? No
4. Renewal Grant Term: This field is pre-populated with a one-year grant term and cannot be edited: 1 Year
5. Select the costs for which funding is requested:
- | | |
|---------------------|-------------------------------------|
| Leased Units | <input type="checkbox"/> |
| Leased Structures | <input type="checkbox"/> |
| Rental Assistance | <input checked="" type="checkbox"/> |
| Supportive Services | <input checked="" type="checkbox"/> |
| Operating | <input type="checkbox"/> |
| HMIS | <input type="checkbox"/> |

6C. Rental Assistance Budget

The following list summarizes the rental assistance funding request for the total term of the project. To add information to the list, select the icon. To view or update information already listed, select the icon.

Total Request for Grant Term:		\$54,084	
Total Units:		5	
Type of Rental Assistance	FMR Area	Total Units Requested	Total Request
TRA	FL - North Port-Sarasota-Bradenton, F...	5	\$54,084

Rental Assistance Budget Detail

Type of Rental Assistance: TRA

Metropolitan or non-metropolitan fair market rent area: FL - North Port-Sarasota-Bradenton, FL MSA (1208199999)

Does the applicant request rental assistance funding for less than the area's per unit size fair market rents? No

Size of Units	# of Units (Applicant)		FMR Area (Applicant)	HUD Paid Rent (Applicant)		12 Months		Total Request (Applicant)
SRO		x	\$631	\$631	x	12	=	\$0
0 Bedroom	3	x	\$841	\$841	x	12	=	\$30,276
1 Bedroom	2	x	\$992	\$992	x	12	=	\$23,808
2 Bedrooms		x	\$1,275	\$1,275	x	12	=	\$0
3 Bedrooms		x	\$1,686	\$1,686	x	12	=	\$0
4 Bedrooms		x	\$2,030	\$2,030	x	12	=	\$0
5 Bedrooms		x	\$2,335	\$2,335	x	12	=	\$0
6 Bedrooms		x	\$2,639	\$2,639	x	12	=	\$0
7 Bedrooms		x	\$2,944	\$2,944	x	12	=	\$0
8 Bedrooms		x	\$3,248	\$3,248	x	12	=	\$0
9 Bedrooms		x	\$3,553	\$3,553	x	12	=	\$0
Total Units and Annual Assistance Requested	5							\$54,084
Grant Term								1 Year
Total Request for Grant Term								\$54,084

Click the 'Save' button to automatically calculate totals.

6D. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the icon. To view or update a Match source already listed, select the icon.

Summary for Match

Total Value of Cash Commitments:	\$0
Total Value of In-Kind Commitments:	\$20,819
Total Value of All Commitments:	\$20,819

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Type	Source	Contributor	Value of Commitments
In-Kind	Private	Catholic Charitie...	\$20,819

Sources of Match Detail

1. Type of Match Commitment: In-Kind

2. Source: Private

3. Name of Source: Catholic Charities Diocese of Venice

(Be as specific as possible and include the office or grant program as applicable)

4. Amount of Written Commitment: \$20,819

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

6E. Summary Budget

The following information summarizes the funding request for the total term of the project. Budget amounts from the Leased Units, Rental Assistance, and Match screens have been automatically imported and cannot be edited. However, applicants must confirm and correct, if necessary, the total budget amounts for Leased Structures, Supportive Services, Operating, HMIS, and Admin. Budget amounts must reflect the most accurate project information according to the most recent project grant agreement or project grant agreement amendment, the CoC's final HUD-approved FY 2018 GIW or the project budget as reduced due to CoC reallocation. Please note that, new for FY 2018, there are no detailed budget screens for Leased Structures, Supportive Services, Operating, or HMIS costs. HUD expects the original details of past approved budgets for these costs to be the basis for future expenses. However, any reasonable and eligible costs within each CoC cost category can be expended and will be verified during a HUD monitoring.

Eligible Costs	Total Assistance Requested for 1 year Grant Term (Applicant)
1a. Leased Units	\$0
1b. Leased Structures	\$0
2. Rental Assistance	\$54,084
3. Supportive Services	\$29,191
4. Operating	\$0
5. HMIS	\$0
6. Sub-total Costs Requested	\$83,275
7. Admin (Up to 10%)	
8. Total Assistance plus Admin Requested	\$83,275
9. Cash Match	\$0
10. In-Kind Match	\$20,819
11. Total Match	\$20,819
12. Total Budget	\$104,094

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No		
2) Other Attachment	No	Match Commitment	11/08/2021
3) Other Attachment	No		

Attachment Details

Document Description:

Attachment Details

Document Description: Match Commitment

Attachment Details

Document Description:

7A. In-Kind Match MOU Attachment

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

Document Type	Required?	Document Description	Date Attached
In-Kind Match MOU	No		

Attachment Details

Document Description:

7B. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance. It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

Additional for Rental Assistance Projects:

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR 578.33(d) or 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

B. For non-Rental Assistance Projects Only.

20-Year Operation Rule.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 20 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

15-Year Operation Rule – 24 CFR part 578 only.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 15 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

1-Year Operation Rule.

For applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provided.

C. Explanation.

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.

Name of Authorized Certifying Official Eduardo Gloria

Date: 11/08/2021

Title: CEO

Applicant Organization: Catholic Charities, Diocese of Venice, Inc.

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

Active SAM Status Requirement.

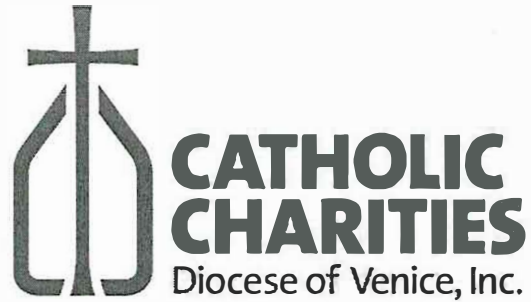
I certify that our organization has an active System for Award Management (SAM) registration as required by 2 CFR 200.300(b) at the time of project application submission to HUD and will ensure this SAM registration will be renewed annually to meet this requirement.

8B Submission Summary

Page	Last Updated
1A. SF-424 Application Type	11/05/2021
1B. SF-424 Legal Applicant	No Input Required
1C. SF-424 Application Details	No Input Required

Renewal Project Application FY2021	Page 51	11/08/2021
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1D. SF-424 Congressional District(s)	11/05/2021
1E. SF-424 Compliance	11/03/2021
1F. SF-424 Declaration	11/05/2021
1G. HUD-2880	11/05/2021
1H. HUD-50070	11/05/2021
1I. Cert. Lobbying	11/05/2021
1J. SF-LLL	11/05/2021
IK. SF-424B	11/05/2021
Submission Without Changes	11/05/2021
Recipient Performance	11/05/2021
Renewal Grant Consolidation or Renewal Grant Expansion	11/05/2021
2A. Subrecipients	No Input Required
3A. Project Detail	11/05/2021
3B. Description	11/03/2021
4A. Services	11/03/2021
4B. Housing Type	11/03/2021
5A. Households	11/03/2021
5B. Subpopulations	No Input Required
6A. Funding Request	11/05/2021
6C. Rental Assistance	11/08/2021
6D. Match	11/08/2021
6E. Summary Budget	No Input Required
7A. Attachment(s)	11/08/2021
7A. In-Kind Match MOU Attachment	No Input Required
7B. Certification	11/08/2021



Mr. Chris Johnson
Suncoast Partnership to End Homelessness
1750 17th St. C-1
Sarasota, FL 34234

Ref: CCDOV TH-RRH FL0828

Dear Mr. Johnson;

Through this letter I would like to confirm the 25% match commitment that will be provided by Catholic Charities Diocese of Venice Inc. regarding the above referenced grant opportunity. Our agency has committed to provide an in-kind match of at least \$20,819 for the proposed project, which we will comply with. Thank you and please reach out to me if I may be of further assistance or if there are any questions or concerns: eduardo.gloria@catholiccharitiesdov.org or 941-486-4700.

Sincerely,

A handwritten signature in blue ink, appearing to read "Eduardo Gloria", is written over a horizontal line.

Eduardo Gloria, Interim CEO

A handwritten date "11/5/2021" in blue ink is written over a horizontal line.

Date

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2021 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition. For more information see FY 2021 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2021 CoC Program NOFO and the FY 2021 General Section NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- New projects may only be submitted as either Reallocated, Bonus Projects, Reallocated + Bonus or DV Bonus. These funding methods are determined in collaboration with local CoC and it is critical that applicants indicate the correct funding method. Project applicants must communicate with their CoC to make sure that the CoC submissions reflect the same funding method.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any new project that fails to adhere to (24 CFR part 578 and application requirements set forth in FY 2021 CoC Program Competition NOFO.

1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application: New Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 11/05/2021

4. Applicant Identifier:

a. Federal Entity Identifier:

5. Federal Award Identifier:

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

b. Employer/Taxpayer Identification Number (EIN/TIN): 58-0660607

	c. Organizational DUNS:	965290430	PLUS 4:	
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d. Address

Street 1: 1400 10th Street

Street 2:

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34236

e. Organizational Unit (optional)

Department Name: Sarasota County Area Command

Division Name: Florida Division

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Ms.

First Name: Amy E

Middle Name:

Last Name: Jones

Suffix:

Title: Director of Planning & Programs

Organizational Affiliation: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

Telephone Number: (941) 364-8845

Extension: 1109

Fax Number: (941) 954-4645

Email: amy.e.jones@uss.salvationarmy.org

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6500-N-25

Title: Continuum of Care Homeless Assistance
Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): Florida
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: PSH Plus 2021

16. Congressional District(s):

16a. Applicant: FL-016, FL-017

16b. Project: FL-016, FL-017
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 08/01/2022

b. End Date: 07/31/2023

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

I AGREE:

21. Authorized Representative

Prefix: Lt. Colonel

First Name: Michele

Middle Name:

Last Name: Matthews

Suffix:

Title: Area Commander/CEO

Telephone Number: (941) 364-8845
(Format: 123-456-7890)

Fax Number: (941) 954-4645
(Format: 123-456-7890)

Email: michele.matthews@uss.salvationarmy.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/05/2021

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2506-0214 (exp.02/28/2022)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: The Salvation Army, a GA Corp., for The
Salvation Army of Sarasota County

Prefix:

First Name: Michele

Middle Name:

Last Name: Matthews

Suffix:

Title: Area Commander/CEO

Organizational Affiliation: The Salvation Army, a GA Corp., for The
Salvation Army of Sarasota County

Telephone Number: (941) 364-8845

Extension: 1101

Email: michele.matthews@uss.salvationarmy.org

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip/Postal Code: 34236

2. Employer ID Number (EIN): 58-0660607

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received

4a. Total Amount Requested for this project: \$270,231.00

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, City and State) of the project or activity.

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
(For further information, see 24 CFR Sec. 4.3).

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. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
HUD/FL/DCF/CoC FL-500, Sarasota, FL	ESG	\$173,182.00	Shelter Operations/Housing Waiting
HHS/FL/DEO/Sarasota County Govt., Sarasota, FL	CSBG	\$90,000.00	Employability/Self Sufficiency/Transitional Housing
FEMA/FL/Glasser-Schoenbaum Human Services Center, Sarasota, FL	EFSP	\$161,202.00	Shelter Operations/Financial Assistance/Food
HHS/FL/DEO, Tallahassee, FL	LIHEAP	\$1,000,000.00	Home Energy/Sustainability
NA	NA	\$0.00	NA

Note: If additional sources of Government Assistance, please use the

"Other Attachments" screen of the project applicant profile.

Part III Interested Parties

You must disclose:

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).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation	Financial Interest in Project/Activity (\$)	Financial Interest in Project/Activity (%)
NA	NA	NA	\$0.00	0%
NA	NA	NA	\$0.00	0%
NA	NA	NA	\$0.00	0%
NA	NA	NA	\$0.00	0%
NA	NA	NA	\$0.00	0%

Note: If there are no other people included, write NA in the boxes.

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

I AGREE:

Name / Title of Authorized Official: Michele Matthews, Area Commander/CEO

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/05/2021

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
<p>a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.</p>	<p>e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;</p>
<p>b. Establishing an on-going drug-free awareness program to inform employees --- (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.</p>	<p>f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted --- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;</p>
<p>c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;</p>	<p>g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.</p>
<p>d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;</p>	

2. Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application. Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

X

WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Authorized Representative

Prefix: Lt. Colonel

First Name: Michele

Middle Name:

Last Name: Matthews

Suffix:

Title: Area Commander/CEO

Telephone Number: (941) 364-8845
(Format: 123-456-7890)

Fax Number: (941) 954-4645
(Format: 123-456-7890)

Email: michele.matthews@uss.salvationarmy.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/05/2021

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person 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 this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person 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 this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction

imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

Name / Title of Authorized Official: Michele Matthews, Area Commander/CEO

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/05/2021

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.

Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. 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."

Answer "No" if your organization is NOT engaged in lobbying.

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? No

Legal Name: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

Street 1: 1400 10th Street

Street 2:

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34236

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

Authorized Representative

Prefix: Lt. Colonel

First Name: Michele

Middle Name:

Last Name: Matthews

Suffix:

Title: Area Commander/CEO

Telephone Number: (941) 364-8845
(Format: 123-456-7890)

Fax Number: (941) 954-4645
(Format: 123-456-7890)

Email: michele.matthews@uss.salvationarmy.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/05/2021

IK. SF-424B

(SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007
Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|-----------|--|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |

- 8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- 9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
- 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
- 13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
- 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
- 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
- 18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
- 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

Prefix: Lt. Colonel

First Name: Michele

Middle Name:

Last Name: Matthews

Suffix:

Title: Area Commander/CEO

Signature of Authorized Certifying Official: Considered signed upon submission in e-snaps.

Date Signed: 11/05/2021

1L. SF-424D

Are you requesting CoC Program funds for construction costs in this application? No

No SF-424D is required. Select "Save and Next" to move to the next screen.

2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards:

Organization	Type	Sub-Award Amount
This list contains no items		

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

1. Describe your organization’s (and subrecipient(s) if applicable) experience in effectively utilizing federal funds and performing the activities proposed in the application.

We have many years of experience in effectively utilizing federal funds. Our location has been receiving federal funds since at least 1996. The Salvation Army at the Divisional and Territorial levels leads us with the value of The Salvation Army’s 150 years of experience in social services and government collaboration. Federal funds in which our location has experience utilizing include CDBG, CSBG, FEMA-EFSP, ESG, HUD-CoC and LIHEAP. We have received Emergency Solutions Grant (ESG) funding through the Florida Department of Children and Families (DCF) numerous times over the last decade. For example, from 2009-2010 we utilized ESG funding to help approximately 65 families receive assistance to prevent eviction or foreclosure. 100% were housed at a 90-day check and 85% at an 180-day check. From 2012-2013 we utilized ESG funding for emergency assistance and for grant cycles 2014-2015 and 2015-2016, we utilized it for emergency shelter operations. Beginning with grant cycle 2016-2017, the ESG grant through DCF has been administered by the lead agency of our Continuum of Care (CoC), Suncoast Partnership to End Homelessness (SPEH), through which we continue to receive federal funds annually for shelter operations, including additional ESG-CV allocations through the COVID-19 pandemic. We serve over 2,000 clients per year through shelter operations funding. With ESG funds for Rapid Rehousing (RRH) administered locally through the Sarasota Office of Housing and Community Development, we served 8 households with \$15,645 from 2015-2016, seven of which remained stably housed six months after receiving assistance, and six additional households with \$26,331 from 2016-2017. With our most recent HUD ESG-RRH funds, we served 28 literally homeless individuals, 17 of which were chronically homeless.

We have a demonstrated capacity to handle large federal contracts such as agreements with the Florida Department of Economic Opportunity (DEO) for the Low-Income Home Energy Assistance Program (LIHEAP), at about \$1 million annually for more than seven years. Earliest record of our receiving LIHEAP is 2002-2003. We are the only LIHEAP provider in Sarasota County and typically receive about 1% of the LIHEAP distribution to the State of Florida. Our Emergency Financial Assistance (EFA) Department which administers LIHEAP typically serves about 4,500 people per year. We have been a direct recipient of HUD-CoC Program Grant funds for nearly 15 years. We implemented Project "FL0003L4H00" for 10 one-year cycles. A transitional housing (TH) project for families, it served mostly single mothers and fathers with children. The project was successful in achieving an overall success rate of 80%. We voluntarily reallocated this long-standing TH funding during the HUD FY2015 CoC Program Competition to switch gears to RRH projects, as encouraged by HUD policy briefs.

We have been administering HUD RRH and Homeless Prevention (HP) services since 2015. Our RRH services are founded upon years of HP experience. We continue to provide robust HP services through our EFA Department. With HUD HP/RRH funds we served eight households with \$15,645 from 2015-2016, seven of which remained stably housed 6 months after receiving assistance, along with six additional households with \$26,331 from 2016-2017. Through our RRH/PSH Department, our first two HUD-CoC RRH projects took place from 2016-2017 in which 54 persons exited to permanent housing, 31 of those in 90 days or less (a HUD standard at the time). About 22% of the population presented with a history of domestic violence while 32% of the population presented with physical and/or mental health conditions. 30% of participants improved their income before exiting the project and 94% remained housed and did not return to a homeless project. Our second two RRH projects took place from 2017-2018 in which 80 persons exited to permanent housing (PH), 23 of those in 90 days or less (a HUD standard at the time). About 6% of the population presented with a history of domestic violence while 42% of the population presented with physical and/or mental health conditions. 27% of participants improved their income before exiting the project and 88% remained housed and did not return to a homeless project. Our third set of RRH Projects took place from 2018-2020 in which 52 people participated, 14 new persons exiting to PH during the project and 45 overall were being case managed in housing. 9% of the population presented with a history of domestic violence while 89% presented with physical and/or mental health conditions. 43% of clients improved their income and 62% remained housed and did not return to a homeless project. Average length of time between program entry and housing move-in date was 38 days. We completed administering our fourth set of RRH projects earlier this year in which 59 people participated, 43 exited to permanent housing and 55 total were being case managed in housing. Nearly 20% presented with a history of domestic violence and 75% presented with physical and/or mental health conditions. 38% of the participants improved their income and 85% remained housed and did not return to a homeless project. Average length of time between program entry and housing move-in date was 30 days. This fourth set of completed projects took place during the height of the COVID-19 pandemic. SPEH brought it to our attention that from March 1, 2020 to February 28, 2021, we were the only RRH provider who saw an increase in our exits to PH during that time. We are currently in our fifth year of providing RRH services and in our first year of providing PSH services. Our first PSH Project began on January 1, 2021 and, to date, 15 individuals have enrolled into the Project and 12 of them have been housed. Six clients were housed in 7 days or less of entering the Project, three clients were housed within 8-14 days, two clients were housed within 15-21 days, and one client was housed within 31-60 days.

2. Describe your organization’s (and subrecipient(s) if applicable) experience in leveraging Federal, State, local and private sector funds.

Our agency has a long history of leveraging diverse funding sources, recognizing the importance of ever changing funding streams and the need to be flexible so as not to rely too heavily on any one source. The Salvation Army has a legacy of successful campaigns that secure private donor funds. This provides the organizational stability and economy of scale appropriate for

leveraging other funds. The Salvation Army's private funding makes it possible for the agency to take on federal, state or local government projects, and is therefore a leveraging tool in itself. At any given time, we leverage various private and public funding sources to achieve a sustainable implementation. Through a portfolio of funding, comprised of both direct client assistance and operational funds, we arrive at a flexibility of dollar use otherwise not achieved which enables us to ensure the full implementation of leveraged project dollars.

We often utilize private funds to leverage public funds into Sarasota County. For example, local private funds help leverage approximately \$1M annually in LIHEAP funding from DEO. We use local funds or private funds to match and therefore leverage ESG dollars for shelter operations awarded by DCF and administered by SPEH. We often use local government funds and United Way dollars to leverage other federal funds as we have done with CDBG and ESG funds administered through the Sarasota Office of Housing and Community Development. We have used local private and public funds to leverage state Challenge Grant funding, totaling over \$300,000.

For nearly 15 years, we have leveraged local dollars from private sources to ensure fully operational HUD-CoC Program grant projects. For 10 years, local sources contributed to ensure the success of our TH projects for families. Funding that covered the cost of supportive services, such as case management, allowed us to leverage funds to support families to rehouse or buy a home. To date, this model has almost reversed in that now we are leveraging operational funds to implement direct client assistance funds focused on self-sufficiency and being rehoused in the community. Funding we leverage within our family programs includes CSBG, CDBG and FEMA. As for our RRH and PSH projects, we have leveraged federal dollars to raise private dollars for four years. These private flexible dollars are used to complement the federal dollars and to fill in gaps such as for unforeseen client expense, landlord mitigation or flexible move-in funding.

The upkeep and preparedness of the physical plant associated with our emergency shelter facility at times requires updates and maintenance in which there may be an opportunity to leverage funding. Recently, for example, \$250,000 in private sector funds were used to leverage \$150,000 in local funding to cover the full cost of a facility generator and maintenance.

3. Describe your organization's (and subrecipient(s) if applicable) financial management structure.

The structure of The Salvation Army at Territorial, Divisional and local levels ensures compliance and quality through oversight, supervision and continuous improvement processes. The Salvation Army is organized administratively by territories and by subdivisions. The Southern Territorial Headquarters (THQ) is located in Atlanta, Georgia, and oversees administrative operations in 15 southern states and the District of Columbia. Our Divisional Headquarters (DHQ) oversees the State of Florida and provides direct supervision and support to the Sarasota County Area Command. Program compliance is routinely conducted, and we observe all federal and state compliances that apply (HIPAA/confidentiality, Code of Federal Regulations such as Title 24, etc.).

The Salvation Army has extensive fiscal management practices drawn from multiple sources such as The Salvation Army's National Uniform Accounting Policy and Procedures Manual, the Financial Accounting Standards Board, The Salvation Army Minute Book, OMB Standards and Great Plains Software. THQ, DHQ and our grantors hold us accountable with the expectation to observe federal and state cost allowance guidelines per OMB Circular A-122 and annual audits per OMB Circular A-133. We are audited twice per year, once by THQ and once by an outside auditor. A Divisional Finance Board (DFB) maintains regional oversight as well as oversight specific to location. Location budgets are submitted annually to the DFB for review, revision and approval.

Internally, all of our accounting affairs are overseen by our Finance Department, comprised of a finance director and three professional accounting staff. The Finance Department controls cost, ensures proper tracking and accounting of dollars, submits billing for grant dollars, implements policies and procedures, designs and prepares budgets, submits financial reports, procures insurance, and communicates risk prevention. The Director of Finance reports to the Area Commander and Advisory Board 10 times per year as another measure of accountability.

Internal coordination is furthered through collaboration and communication across Departments, such as between Planning & Programs, Finance, Support Services and Development. This is crucial for the successful delivery of quality services such as to ensure payments for rental assistance are correct and timely. A key activity is regular reconciliation of account balances, such as balances pertaining to direct client assistance. Allocating funds in FundManager in HMIS provides checks and balances between various Program departments. Regularly scheduled meetings to review balances originating from the Finance department compared to FundManager helps ensure consistency through cross-departmental oversight.

4. Are there any unresolved HUD monitoring or OIG audit findings for any HUD grants (including ESG) under your organization? No

3A. Project Detail

1. CoC Number and Name: FL-500 - Sarasota, Bradenton/Manatee, Sarasota Counties CoC

2. CoC Collaborative Applicant Name: Suncoast Partnership to End Homelessness, Inc.

3. Project Name: PSH Plus 2021

4. Project Status: Standard

5. Component Type: PH

5a. Select the type of PH project: PSH

6. Is your organization, or subrecipient, a victim service provider defined in 24 CFR 578.3? No

7. Is this new project application requesting to transition from eligible renewal project(s) that was awarded to the same recipient and fully eliminated through reallocation in this CoC Program Competition? (Attachment Requirement) No

8. Will funds requested in this new project application replace state or local government funds (24 CFR 578.87(a))? No

9. Will this project include replacement reserves in the Operating budget? No

3B. Project Description

1. Provide a description that addresses the entire scope of the proposed project.

This new project for permanent supportive housing (PSH) will serve at least 12 participants the first year and 15 participants the second year (if awarded and renewed). This project will be DedicatedPLUS, with 100% of the beds dedicated to serve individuals, households with children, and unaccompanied youth who meet the criteria per Section III.B.2.g. of the 2021 NOFO. Due to the need in our community, we anticipate project participants will mostly include chronically homeless (CH) individuals and high acuity long-term homeless.

This project will include a full package of supports and services including rental assistance, case management, housing location, move-in assistance, landlord relations, housing stability supports, connections to mainstream benefits and access to regular, voluntary services and resources according to each participant's client-centered plan such as mental health services, employment assistance, transportation, educational opportunities, life skills, peer supports, medication and outpatient health services. Through a scattered-site model, this project will provide housing opportunities for participants to live independently in their own apartment or efficiency and will not include shared living situations, unless expressed as the client's choice. This project will take place in the context of our CoC's coordinated entry system (CES) through which we receive referrals in HMIS from the prioritized by-name list. Consistent with low barrier practices, there will be no programmatic requirements and services will be voluntary. We will engage clients using evidence-based practices such as trauma-informed care, progressive engagement, and harm reduction.

Once we receive a referral for the project in HMIS, we will offer the participant one of our bridge beds in our shelter as part of a safety plan. Almost immediately, the participant will begin to receive case management, develop a client-centered plan, identify a pathway to housing and connect with mainstream benefit opportunities such as Medicare/Medicaid, Social Security and food benefits. Our Case Manager (CM) and Rehousing Program Manager (RPM) will work with participants to obtain housing as soon as possible and provide numerous supports for move-in such as financial assistance, furniture, the physical move and immediate necessities such as food and household goods. After move-in, the CM will conduct an initial follow-up home visit within 24-48 hours and conduct frequent follow-up visits and check-ins after that as the participant acclimates, addressing any needs along the way. The CM and RPM will be in constant communication with each other and as they work with the participant and the Landlord to foster housing stability.

2. For each primary project location, or structure, enter the number of days from the execution of the grant agreement that each of the following milestones will occur if this project is selected for conditional award.

Project Milestones	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement
	A	B	C	D
Begin hiring staff or expending funds	30			
Begin program participant enrollment	30			
Program participants occupy leased or rental assistance units or structure(s), or supportive services begin	30			
Leased or rental assistance units or structure, and supportive services near 100% capacity	180			
Closing on purchase of land, structure(s), or execution of structure lease				
Start rehabilitation				
Complete rehabilitation				
Start new construction				
Complete new construction				

2a. If requesting capital costs (i.e., acquisition, rehabilitation, or new construction), describe the proposed development activities with responsibilities of the applicant, and subrecipients if included, to develop and maintain the property using CoC Program funds.

N/A

3. Check the appropriate box(s) if this project will have a specific subpopulation focus.

(Select ALL that apply)

N/A - Project Serves All Subpopulations	<input type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Chronic Homeless	<input type="checkbox"/>
		Other (Click 'Save' to update)	<input type="checkbox"/>

4. Will your project participate in the CoC's Coordinated Entry (CE) process or recipient organization is a victim service provider, as defined in 24 CFR 578.3 and uses an alternate CE process that meets HUD's minimum requirements? Yes

5. Housing First

5a. Will the project quickly move participants into permanent housing? Yes

5b. Will the project enroll program participants who have the following barriers? Select all that apply.

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

5c. Will the project prevent program participant termination for the following reasons? Select all that apply.

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

5d. Will the project follow a "Housing First" approach? Yes
(Click 'Save' to update)

6 Will program participants be required to live in a specific structure, unit, or locality at any time while in the program? No

7. Will more than 16 persons live in a single structure? No

100% Dedicated or DedicatedPLUS

A "100% Dedicated" project is a permanent supportive housing project that commits 100% of its beds to chronically homeless individuals and families, according to NOFA Section III.3.b.

A “DedicatedPLUS” project is a permanent supportive housing project where 100% 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, that at a minimum, meet ONE of the following criteria according to NOFA Section III.3.d:

- (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.

A renewal project where 100 percent of the beds are dedicated in their current grant as described in NOFA Section III.A.3.b. must either become DedicatedPLUS or remain 100% Dedicated. If a renewal project currently has 100 percent of its beds dedicated to chronically homeless individuals and families and elects to become a DedicatedPLUS project, the project will be required to adhere to all fair housing requirements at 24 CFR 578.93. Any beds that the applicant identifies in this application as being dedicated to chronically homeless individuals and families in a DedicatedPLUS project must continue to operate in accordance with Section III.A.3.b. Beds are identified on Screen 4B.

**8. Is this project 100% Dedicated or DedicatedPLUS
DedicatedPLUS?**

3C. Project Expansion Information

1. Is this a “Project Expansion” of an eligible renewal project? No

4A. Supportive Services for Participants

1. Describe how program participants will be assisted to obtain and remain in permanent housing.

Participants will be assisted in obtaining and remaining in permanent housing (PH) through financial assistance, housing services and personal support offered through this project. To obtain PH, our full-time Rehousing Program Manager (RPM) is key in locating housing and maintaining positive landlord relations. As the RPM identifies available rental units, the RPM communicates these openings to the Case Managers (CM) and the client. Arrangements are made to show the unit to the interested client. When a unit aligns with client choice, a move-in is scheduled. The RPM and CM work together to ensure all angles of the process are addressed such as ensuring timely payment to landlord for move-in costs, arranging a moving van, providing furniture and move-in goods. To remain in PH, the CM and RPM work closely to support the participant on an ongoing basis, the CM focusing on the client and the RPM focusing on the landlord.

2. Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible.

The specific plan to increase income and connect to mainstream benefits begins during the initial stages of services with the participant. We coordinate connections to mainstream benefits, employment and other social services as part of the client-centered plan. The identification of a participant's desire, physical ability, and barriers are identified with action steps developed to counter them. The two main ways we work with clients to increase income is through employment and Social Security Benefits.

Specific employment planning includes partnering with local agencies such as CareerSource Suncoast (our local American Job Center) and Goodwill Manasota, which offers job connections and supported employment opportunities. As we refer clients to these services, clients are asked to sign a release of information so Case Managers (CMs) can communicate with these partnering agencies towards collaborative support and progress. We have found this piece to be vital in that the CM is more informed as to where clients are in the process and are able to assist when challenges arise. Often clients need a phone to assist with obtaining and maintaining employment and we are able to connect them with our partner at Assurance Wireless to help get a SafeLink phone. SafeLink Wireless is a Tracfone carrier associated with the Lifeline assistance program. The government-funded program offers free and discounted services to those who qualify. When appropriate, we refer clients to Florida Vocational Rehabilitation, a federal-state program whose mission is to help people with disabilities find and maintain employment and enhance their

independence. We further assist by helping the client to locate possible employment, providing job lists, providing transportation to Job Fairs, helping complete job applications, helping create or update resumes, and providing clothing for interviews and work once obtained.

To assist participants in accessing mainstream benefits, CMs help assess benefits for which the clients will be eligible and help them connect. We have a partnership with WellCare Health Plans, a government-sponsored managed care service, including for those who have complex medical needs, primarily through Medicare/Medicaid. For those who qualify for Florida Medicaid, the WellCare company, Staywell, provides health care and long-term care services. We work with clients to connect with ACCESS Florida to vet their eligibility for Food Assistance benefits (Food Stamps). Another critical piece is the SOAR (SSI/SSDI Outreach, Access, and Recovery) Program, designed to increase access to disability income benefit programs administered by the Social Security Administration (SSA) for those experiencing homelessness and have a serious mental illness, medical impairment, and/or a co-occurring substance use disorder. We partner with Certified SOAR Case workers who work with clients through the application process.

3. For all supportive services available to program participants, indicate who will provide them and how often they will be provided. Click 'Save' to update.

Supportive Services	Provider	Frequency
Assessment of Service Needs	Applicant	Daily
Assistance with Moving Costs	Applicant	As needed
Case Management	Applicant	As needed
Child Care	Partner	As needed
Education Services	Partner	As needed
Employment Assistance and Job Training	Partner	As needed
Food	Applicant	As needed
Housing Search and Counseling Services	Applicant	Daily
Legal Services	Partner	As needed
Life Skills Training	Applicant	As needed
Mental Health Services	Applicant	Bi-weekly
Outpatient Health Services	Applicant	As needed
Outreach Services	Applicant	As needed
Substance Abuse Treatment Services	Partner	As needed
Transportation	Applicant	As needed
Utility Deposits	Applicant	As needed

Identify whether the project will include the following activities:


4. Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs? Yes

5. Annual follow-ups with program participants to ensure mainstream benefits are received and renewed? Yes

6. Will program participants have access to SSI/SSDI technical assistance provided by this project the applicant, a subrecipient, or partner agency? Yes

6a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months. Yes

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the  icon. To view or update a housing site already listed, select the  icon.

Total Units: 12

Total Beds: 12

Total Dedicated CH Beds: 12

Housing Type	Housing Type (JOINT)	Units	Beds	Dedicated CH Beds
Scattered-site apartments (...)	---	12	12	12

4B. Housing Type and Location Detail

1. Housing Type: Scattered-site apartments (including efficiencies)

2. Indicate the maximum number of units and beds available for program participants at the selected housing site.

2a. Units: 12

2b. Beds: 12

3. How many beds in “2b. Beds” are dedicated to persons experiencing chronic homelessness? 12

This includes both the “dedicated” and “prioritized” beds.

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. 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.

Street 1: 1400 10th Street

Street 2:

City: Sarasota

State: Florida

ZIP Code: 34236

***5. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered.
(for multiple selections hold CTRL key)**

129081 Manatee County, 129115 Sarasota
County

5A. Project Participants - Households

Households Table

	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Number of Households		12		12
Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Persons over age 24		12		12
Persons ages 18-24				0
Accompanied Children under age 18				0
Unaccompanied Children under age 18				0
Total Persons	0	12	0	12

Click Save to automatically calculate totals

5B. Project Participants - Subpopulations

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24										
Persons ages 18-24										
Children under age 18										
Total Persons	0	0	0	0	0	0	0	0	0	0

Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24				4		4	1	2	1	
Persons ages 18-24										
Total Persons	0	0	0	4	0	4	1	2	1	0

Click Save to automatically calculate totals

Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Accompanied Children under age 18										
Unaccompanied Children under age 18										
Total Persons	0				0	0	0	0	0	0

6A. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 15, 2023? Yes

2. What type of CoC funding is this project applying for in this CoC Program Competition? Reallocation + CoC Bonus

3. Does this project propose to allocate funds according to an indirect cost rate? No

4. Select a grant term: 1 Year

*** 5. Select the costs for which funding is requested:**

Acquisition/Rehabilitation/New Construction	<input type="checkbox"/>
Leased Units	<input type="checkbox"/>
Leased Structures	<input type="checkbox"/>
Rental Assistance	<input checked="" type="checkbox"/>
Supportive Services	<input checked="" type="checkbox"/>
Operating	<input type="checkbox"/>
HMIS	<input type="checkbox"/>

6. If conditionally awarded, is this project requesting an initial grant term greater than 12 months? (13 to 18 months) No

6E. Rental Assistance Budget

The following list summarizes the rental assistance funding request for the total term of the project. To add information to the list, select the icon. To view or update information already listed, select the icon.

Total Request for Grant Term:			\$121,104
Total Units:			12
Type of Rental Assistance	FMR Area	Total Units Requested	Total Request
TRA	FL - North Port-Sarasota-Bradenton, F...	12	\$121,104

Rental Assistance Budget Detail

Instructions:

Type of Rental Assistance: Select the applicable type of rental assistance from the dropdown menu. Options include tenant-based (TRA), sponsor-based (SRA), and project-based assistance (PRA). Each type has unique requirements and applicants should refer to the 24 CFR 578.51 before making a selection.

Metropolitan or non-metropolitan fair market rent area: This is a required field. Select the FY 2016 FMR area in which the project is located. The list is sorted by state abbreviation. The selected FMR area will be used to populate the rents in the chart below.

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.

of units: This is a required field. For each unit size, enter the number of units for which funding is being requested.

FMR: These fields are populated with the FY 2016 FMR amounts based on the FMR area selected by the applicant. The FMRs are available online at <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 based on the number of units multiplied by the corresponding FMR and by 12 months.

Total Units and Annual Assistance Requested: The fields in this row are automatically calculated based on the total number of units and the sum of the total requests per unit size per year.

Grant Term: This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

Total Request for Grant Term: This field is automatically calculated based on the total annual assistance requested multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

Type of Rental Assistance: TRA

Metropolitan or non-metropolitan fair market rent area: FL - North Port-Sarasota-Bradenton, FL MSA (1208199999)

Size of Units	# of Units (Applicant)		FMR Area (Applicant)		12 Months		Total Request (Applicant)
SRO		x	\$631	x	12	=	\$0
0 Bedroom	12	x	\$841	x	12	=	\$121,104

1 Bedroom		x	\$992	x	12	=	\$0
2 Bedrooms		x	\$1,275	x	12	=	\$0
3 Bedrooms		x	\$1,686	x	12	=	\$0
4 Bedrooms		x	\$2,030	x	12	=	\$0
5 Bedrooms		x	\$2,335	x	12	=	\$0
6 Bedrooms		x	\$2,639	x	12	=	\$0
7 Bedrooms		x	\$2,944	x	12	=	\$0
8 Bedrooms		x	\$3,248	x	12	=	\$0
9 Bedrooms		x	\$3,553	x	12	=	\$0
Total Units and Annual Assistance Requested		12					\$121,104
Grant Term							1 Year
Total Request for Grant Term							\$121,104

Click the 'Save' button to automatically calculate totals.



6F. Supportive Services Budget

A quantity AND description must be entered for each requested cost.

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs		
2. Assistance with Moving Costs		
3. Case Management	1 Case Management Specialist	\$57,407
4. Child Care		
5. Education Services		
6. Employment Assistance		
7. Food	Food necessities at move-in (\$50 at 12 move-ins)	\$600
8. Housing/Counseling Services	1 Housing Coordinator	\$57,407
9. Legal Services		
10. Life Skills		
11. Mental Health Services	Assistance with co-pays, medications until income is secured (\$150 at 12 clients)	\$1,800
12. Outpatient Health Services	Assistance with co-pays, medications until income is secured (\$150 at 12 clients)	\$1,800
13. Outreach Services		
14. Substance Abuse Treatment Services		
15. Transportation	Transportation (100 30-day bus passes at \$30 each)	\$3,000
16. Utility Deposits	Utility Deposits (8 at \$318.50)	\$2,548
17. Operating Costs		
Total Annual Assistance Requested		\$124,562
Grant Term		1 Year
Total Request for Grant Term		\$124,562

Click the 'Save' button to automatically calculate totals.

6I. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the  icon. To view or update a Match source already listed, select the  icon.

Summary for Match

Total Amount of Cash Commitments:	\$67,558
Total Amount of In-Kind Commitments:	\$0
Total Amount of All Commitments:	\$67,558

1. Will this project generate program income **No**
described in 24 CFR 578.97 to use as Match
for this project?

Type	Source	Name of Source	Amount of Commitments
Cash	Private	The Salvation Arm...	\$67,558

Sources of Match Detail

1. Type of Match commitment: Cash

2. Source: Private

3. Name of Source: The Salvation Army general operating funds
(Be as specific as possible and include the office or grant program as applicable)

4. Amount of Written Commitment: \$67,558

6J. Summary Budget

The following information summarizes the funding request for the total term of the project. However, administrative costs can be entered in 8. Admin field below.

Eligible Costs	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Total Assistance Requested for Grant Term (Applicant)
1a. Acquisition			\$0
1b. Rehabilitation			\$0
1c. New Construction			\$0
2a. Leased Units	\$0	1 Year	\$0
2b. Leased Structures	\$0	1 Year	\$0
3. Rental Assistance	\$121,104	1 Year	\$121,104
4. Supportive Services	\$124,562	1 Year	\$124,562
5. Operating	\$0	1 Year	\$0
6. HMIS	\$0	1 Year	\$0
7. Sub-total Costs Requested			\$245,666
8. Admin (Up to 10%)			\$24,565
9. Total Assistance Plus Admin Requested			\$270,231
10. Cash Match			\$67,558
11. In-Kind Match			\$0
12. Total Match			\$67,558
13. Total Budget			\$337,789

Click the 'Save' button to automatically calculate totals.

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No	IRS Determination...	10/28/2021
3) Other Attachment(s)	No	Reallocated Proje...	10/28/2021
2) Other Attachment(s)	No	Match and MH MOU	11/05/2021

Attachment Details

Document Description: IRS Determination Letter

Attachment Details

Document Description: Reallocated Project Application

Attachment Details

Document Description: Match and MH MOU

7D. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance.

It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

Additional for Rental Assistance Projects:

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR part 578 or 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

B. For non-Rental Assistance Projects Only.

15-Year Operation Rule.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 15 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

1-Year Operation Rule.

Applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provide

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.

Name of Authorized Certifying Official: Michele Matthews

Date: 11/05/2021

Title: Area Commander/CEO

Applicant Organization: The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant

X

Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

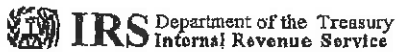
Active SAM Status Requirement. I certify that our organization has an active System for Award Management (SAM) registration as required by 2 CFR 200.300(b) at the time of project application submission to HUD and will ensure this SAM registration will be renewed annually to meet this requirement.

8B. Submission Summary

Applicant must click the submit button once all forms have a status of Complete.

Page		Last Updated
New Project Application FY2021	Page 53	11/08/2021

1A. SF-424 Application Type	No Input Required
1B. SF-424 Legal Applicant	No Input Required
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	10/27/2021
1E. SF-424 Compliance	10/01/2021
1F. SF-424 Declaration	10/01/2021
1G. HUD 2880	10/01/2021
1H. HUD 50070	10/01/2021
1I. Cert. Lobbying	10/01/2021
1J. SF-LLL	10/01/2021
IK. SF-424B	10/01/2021
1L. SF-424D	10/01/2021
2A. Subrecipients	No Input Required
2B. Experience	10/29/2021
3A. Project Detail	10/28/2021
3B. Description	10/29/2021
3C. Expansion	10/28/2021
4A. Services	10/29/2021
4B. Housing Type	10/28/2021
5A. Households	10/28/2021
5B. Subpopulations	No Input Required
6A. Funding Request	10/28/2021
6E. Rental Assistance	10/26/2021
6F. Supp Srvcs Budget	10/28/2021
6I. Match	10/28/2021
6J. Summary Budget	No Input Required
7A. Attachment(s)	11/05/2021
7D. Certification	10/31/2021



CINCINNATI OH 45999-0038

In reply refer to: 0248254921
July 31, 2020 LTR 4168C 0
58-0660607 000000 00

00013274
BODC: TE

THE SALVATION ARMY
TERRITORIAL HEADQUARTERS
% LEGAL DEPARTMENT
1424 NORTHEAST EXPY NE
BROOKHAVEN GA 30329



005202

Employer ID number: 58-0660607
Form 990 required: No

Dear Taxpayer:

We're responding to your request dated July 22, 2020, about your tax-exempt status.

We issued you a determination letter in November 1994, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(3).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(i).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after the end of your annual accounting period:

- Form 990, Return of Organization Exempt From Income Tax
- Form 990EZ, Short Form Return of Organization Exempt From Income Tax
- Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990-EZ
- Form 990-PF, Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

According to IRC Section 6033(j), if you don't file a required annual information return or notice for 3 consecutive years, we'll revoke your tax-exempt status on the due date of the 3rd required return or notice.

You can get IRS forms or publications you need from our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500 between 8 a.m. and 5 p.m.,

0248254921
July 31, 2020 LTR 4168C 0
58-0660607 000000 00
00013275

THE SALVATION ARMY
TERRITORIAL HEADQUARTERS
% LEGAL DEPARTMENT
1424 NORTHEAST EXPY NE
BROOKHAVEN GA 30329

local time, Monday through Friday (Alaska and Hawaii follow Pacific time).

Thank you for your cooperation.

Sincerely yours,



Kim A. Billups, Operations Manager
Accounts Management Operations 1

Recipient Acknowledgement

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

This text box presents comments and alerts, recorded by HUD, that do not qualify as issues or conditions.

The project no longer meets the match requirement do to a change in budget as awarded. The minimum required Total Match amount for the Grant Term is \$23,060

HUD has made at least one budget change that may require reconciliation before submission by adjusting budget subcategories on the following screen(s). This may also require a change to the total match commitment on the Sources of Match screen.

- Rental Assistance
- Match

HUD Award	Recipient Acknowledgement	Conditions Applicable to ALL Projects
		1. Match amount update needed in e-snaps and/or match documentation required. (Condition)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	a. Additional match commitment amount is required to be added to the e-snaps Match Screen due to a budget increase.
<input type="checkbox"/>	<input type="checkbox"/>	b. In-kind match commitment contributions provided by a third party must attach MOU documentation in e-snaps.
<input type="checkbox"/>	<input type="checkbox"/>	c. Match commitment documentation for this new conditionally awarded project must be attached in e-snaps.
		<p>a. The applicant must increase the match commitment amount on Screen 6D to reflect the budget increase. Match must be cash or in-kind contributions for no less than 25 percent of the total conditionally awarded amount, excluding leasing funds (if applicable), as provided under 24 CFR 578.73.</p> <p>b. For new and renewal conditionally awarded projects that indicate match commitments from in-kind contributions provided by a third party to be used as match must attach a memorandum of understanding (MOU) between the applicant and the third party on Screen 7A. The attached MOU(s) must meet the criteria as provided under 24 CFR 578.73(c)(3).</p> <p>c. For new conditionally awarded projects, the applicant must attach match commitment documentation in e-snaps on Screen 7A. The attached documentation must show match commitment (cash or in-kind contributions) for no less than 25 percent of the total grant amount, excluding leasing funds (if applicable), as provided under 24 CFR 578.73.</p>
<input type="checkbox"/>	<input type="checkbox"/>	2. Code of Conduct not on file with HUD or does not comply with 2 CFR part 200. (Condition)

<input type="checkbox"/>	<input type="checkbox"/>	3. HUD SF 2880 - Incomplete Recipient Disclosure/Update Report. (Condition)
		5. Performance or capacity concern(s). The applicant should provide a written management plan addressing the capacity concern(s) identified below. (Issue)
<input type="checkbox"/>	<input type="checkbox"/>	a. Applicant has a history of consistently submitting late APRs.
<input type="checkbox"/>	<input type="checkbox"/>	b. Applicant has a history of consistent drawdown issues or poor financial management.
<input type="checkbox"/>	<input type="checkbox"/>	c. Applicant has a history of consistent unresolved HUD monitoring or audit findings.
<input type="checkbox"/>	<input type="checkbox"/>	d. Other capacity concerns (details specified below in #22).
		6. Homeless Eligibility - Clarification is needed in the project application to confirm homeless eligibility of proposed program participants. (Issue)
<input type="checkbox"/>	<input type="checkbox"/>	a. Update(s) needed to Project Description on Screen 3B (details specified below in #22).
<input type="checkbox"/>	<input type="checkbox"/>	b. The project application identified 100% Dedicated to CH but Screen 5B tables did not identify a correct number of CH persons to equal the number of Dedicated CH Beds on Screen 4B.
<input type="checkbox"/>	<input type="checkbox"/>	c. PH-PSH or SH project application is unclear if proposing to serve households having at least one person with a disability. Updates should be made to the disability category numbers in the tables on Screen 5B.
<input type="checkbox"/>	<input type="checkbox"/>	8. Unit/Bed Counts - Clarification is needed to unit and/or bed counts on Screen 4B and /or updates are needed to other numbers in the project application for a general correlation between Screens 4B, 5A, or 5B tables. (Issue)
<input type="checkbox"/>	<input type="checkbox"/>	10. Consolidation Project. This project application was conditionally awarded as a consolidated project. (Issue)
<input type="checkbox"/>	<input type="checkbox"/>	11. Expansion Project. This project application was conditionally awarded as a Combined Renewal Expansion project. (Issue)
		13. Housing Type - clarification is needed for the Housing Type selection(s) on Screen 4B for the component type identified below. (Issue)
<input type="checkbox"/>	<input type="checkbox"/>	a. Joint TH/PH-RRH component project (details specified below in #22).
<input type="checkbox"/>	<input type="checkbox"/>	b. PH-PSH or PH-RRH component projects.
<input type="checkbox"/>	<input type="checkbox"/>	20. Possible violation of program regulation on service participation (details specified below in #22). (Issue)
		21. Renewal of YHDP youth projects under the CoC Program.
<input type="checkbox"/>	<input type="checkbox"/>	a. Waiver Request Attachments (Condition)
<input type="checkbox"/>	<input type="checkbox"/>	b. Youth Population Focus (details specified below in #22). (Issue)
		22. Other policy and program related conditions:
<input type="checkbox"/>	<input type="checkbox"/>	Other 1
<input type="checkbox"/>	<input type="checkbox"/>	Other 2
<input type="checkbox"/>	<input type="checkbox"/>	Other 3

<input type="checkbox"/>	<input type="checkbox"/>	Other 4
<input type="checkbox"/>	<input type="checkbox"/>	Other 5
<input type="checkbox"/>	<input type="checkbox"/>	Other 6

Attachments

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

Document Type	Required?	Document Description	Date Attached
01) Match Documentation	No	Match Letter	04/20/2020
02) Attachment(s)	No		
03) Attachment(s)	No		
04) Attachment(s)	No		
05) Attachment(s)	No		
06) Attachment(s)	No		
07) Attachment(s)	No		
08) Attachment(s)	No		
09) Attachment(s)	No		
10) Attachment(s)	No		

Attachment Details

Document Description: Match Letter

Attachment Details

Document Description:

Attachment Details

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Attachment Details

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Adjustments

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

Has HUD required that you adjust information submitted with your application to resolve Issues and Conditions made by HUD? Yes

Adjustments can only be made to resolve issues and conditions and to reconcile budget changes made by HUD before award. No new requests for changes to your project may be initiated using this form. All adjustments will be reviewed by HUD before grant agreement and may be rejected.

Briefly describe the adjustments being requested.

The project no longer meets the match requirement do to a change in budget as awarded. The minimum required Total Match amount for the Grant Term is \$23,060

1A. Application Type

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

This information cannot be edited. If updates are needed to this information, exit this step and update the Project Applicant Profile.

1. Type of Submission: Application

2. Type of Application: Renewal Project Application

If "Revision", select appropriate letter(s):

If "Other", specify:

3. Date Received: 04/20/2020

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier: FL0713L4H001901

6. Date Received by State:

7. State Application Identifier:

1B. Legal Applicant

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

This information cannot be edited. If updates are needed to this information, exit this step and update the Project Applicant Profile.

8. Applicant

a. Legal Name:

b. Employer/Taxpayer Identification Number (EIN/TIN): 58-0660607

	c. Organizational DUNS:	965290430	PLUS 4	
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d. Address

Street 1: 1400 10th Street

Street 2:

City: Sarasota

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34236

e. Organizational Unit (optional)

Department Name: Sarasota County Area Command

Division Name: Florida Division

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Ms.

First Name: Amy E

Middle Name:

Last Name: Jones

Suffix:

Title: Director of Planning & Programs

Organizational Affiliation:

Telephone Number: (941) 364-8845

Extension: 1109

Fax Number: (941) 954-4645

Email: amy.e.jones@uss.salvationarmy.org

1C. Application Details

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

This information cannot be edited. If updates are needed to this information, exit this step and update the Project Applicant Profile.

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status
If "Other" please specify:

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance CoC Program
Title:

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6300-N-25

Title: Continuum of Care Homeless Assistance
Competition

13. Competition Identification Number:

Title:

1D. Congressional District(s)

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

14. Area(s) affected by the project (State(s) only): Florida
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: Everyone's Home Bonus 2019

16. Congressional District(s):

a. Applicant: FL-016, FL-017

b. Project: FL-016, FL-017

(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 02/01/2020

b. End Date: 01/31/2021

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. Compliance

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

This information cannot be edited. If updates are needed to this information, exit this step and update the Project Applicant Profile.

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. Declaration

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

This information cannot be edited. If updates are needed to this information, exit this step and update the Project Applicant Profile.

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

I AGREE:

21. Authorized Representative

Prefix: Major

First Name: Charles

Middle Name:

Last Name: Whiten

Suffix:

Title: Area Commander/CEO

Telephone Number: (941) 364-8845
(Format: 123-456-7890)

Fax Number: (941) 954-4645
(Format: 123-456-7890)

Email: charles.whiten@uss.salvationarmy.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 04/20/2020

Recipient Performance

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

- 1. Has the recipient successfully submitted the APR on time for the most recently expired grant term related to this renewal project request?** Yes

- 2. Does the recipient have any unresolved HUD Monitoring and/or OIG Audit findings concerning any previous grant term related to this renewal project request?** No

- 3. Has the recipient maintained consistent Quarterly Drawdowns for the most recent grant terms related to this renewal project request?** Yes

- 4. Have any Funds been recaptured by HUD for the most recently expired grant term related to this renewal project request?** No

Renewal Expansion

As part of the FY 2019 CoC Program project application process, project applicants can request their eligible renewal projects to be part of a Expansion. This process can combine up to 1 stand-alone renewal project application and 2 stand-alone new expansion project applications into 1 combined renewal expansion project application. This means recipients no longer need to combine expansion data in CoC Post-Award. Renewal projects that are part of an expansion must expire in Calendar Year (CY) 2020, as confirmed on the FY 2019 GIW or eLOCCS, must be to the same recipient, and must be for the same component and project type (i.e., PH-PSH, PH-RRH, Joint TH/PH-RRH, TH, SSO, SSO-CE or HMIS).

1. Is this project application requesting to be part of a combined renewal expansion in the FY 2019 CoC Program Competition? "If "No" click on "Next" or "Save & Next" below to move to the next screen. No

Grant Consolidation

HUD encourages the consolidation of renewal grants. As part of the FY 2019 CoC Program project application process, project applicants can request their eligible renewal projects to be part of a Renewal Grant Consolidation. This process can consolidate up to 4 renewal grants into 1 consolidated grant. This means recipients no longer must wait for grant amendments to consolidate grants. All projects that are part of a renewal grant consolidation must expire in Calendar Year (CY) 2020, as confirmed on the FY 2019 Final GIW, must be to the same recipient, and must be for the same component and project type (i.e., PH-PSH, PH-RRH, Joint TH/PH-RRH, TH, SSO, SSO-CE or HMIS).

1. Is this project application requesting to be part of a renewal grant consolidation in the FY 2019 CoC Program Competition? No
If "No" click on "Next" or "Save & Next" below to move to the next screen.

2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the icon. To view or update subrecipient information already listed, select the view option.

Total Expected Sub-Awards: \$0

Organization	Type	Sub-Award Amount
This list contains no items		

3A. Project Detail

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

1. FY 2019 Grant Number: FL0713L4H001901

(e.g., the "Federal Award Identifier" indicated on form 1A. Application Type)

2a. CoC Number and Name: FL-500 - Sarasota, Bradenton/Manatee, Sarasota Counties CoC

2b. CoC Applicant Name: Suncoast Partnership to End Homelessness, Inc.

3. Project Name: Everyone's Home Bonus 2019

4. Project Status: Standard

	Renewal Project Application	HUD Award	Adjustment
5. Component Type:	PH	PH	PH

	Renewal Project Application	HUD Award	Adjustment
5a. Does the PH project provide PSH or RRH?	RRH	RRH	RRH

6. Does this project use one or more properties that have been conveyed through the Title V process? No

3B. Project Description

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

1a. Application description that addresses the entire scope of the proposed project.

Everyone's Home Bonus 2019 is a rapid rehousing (RRH) renewal project for moving homeless individuals in Manatee and Sarasota Counties into permanent housing (PH) as quickly as possible, including chronically homeless, youth ages 18 to 24, victims of domestic violence and persons presenting with substance abuse and/or mental illness. This project rapidly rehuses and provides rental assistance for up to 12 months to at least eight people. The Project focuses on housing placement, housing stability, income increases, and accessing mainstream benefits. Our case managers (CMs), housing coordinator (HC), and many community partners work together to offer extensive supportive services to participants. We offer a bridge bed in our emergency shelter to participants while the participant is assisted every step of the way by the CM and HC to obtain housing. The CM works with the participant to establish a client-centered plan, including safety planning and accessing medical care, mental health treatment, life skills training, budgeting, educational opportunities, employment, insurance, Medicare/Medicaid, Social Security and food benefits. Our staff assist participants with moving into their new home, such as with move-in costs, the physical move, and the provision of furniture. The CM conducts follow-up visits, and regularly offers voluntary wraparound services. The CM and HC continue to work with the participant and Landlord to help ensure housing stability. Key evidence-based practices employed are progressive engagement, harm reduction, trauma-informed care and motivational interviewing.

When we originally submitted the application for this project in 2017, there was uncertainty about a coordinated entry system (CES) and if one would be implemented in the future. We referenced this system, "Oneby1," in the narrative of our FY2017 applications. Today, we are operating in the context of a functioning Oneby1 CES in which we accept participants referred by the CoC per the prioritized by-name list. We accept referrals through HMIS, with a focus on clients identified as high acuity, and thus clients who often have many complex barriers. Our CoC and our community have made immense strides in improving service delivery by committing to a CES in which the most in need are prioritized. However, we were not necessarily prepared for the high acuity participants referred to our RRH projects, who are more appropriate for permanent supportive housing (PSH) housing interventions. We have a shortage of PSH in our community and we are working on that. All this being said, the configuration of units and participants represented by this Project was designed to fit the needs of the participants before the Oneby1 was working. Therefore, we may seek to amend this project in the future to serve less people with more services.

1b. Provide changes, if required, to the description that addresses the

entire scope of the proposed project.

Everyone's Home Bonus 2019 is a rapid rehousing (RRH) renewal project for moving homeless individuals in Manatee and Sarasota Counties into permanent housing (PH) as quickly as possible, including chronically homeless, youth ages 18 to 24, victims of domestic violence and persons presenting with substance abuse and/or mental illness. This project rapidly rehuses and provides rental assistance for up to 12 months to at least eight people. The Project focuses on housing placement, housing stability, income increases, and accessing mainstream benefits. Our case managers (CMs), housing coordinator (HC), and many community partners work together to offer extensive supportive services to participants. We offer a bridge bed in our emergency shelter to participants while the participant is assisted every step of the way by the CM and HC to obtain housing. The CM works with the participant to establish a client-centered plan, including safety planning and accessing medical care, mental health treatment, life skills training, budgeting, educational opportunities, employment, insurance, Medicare/Medicaid, Social Security and food benefits. Our staff assist participants with moving into their new home, such as with move-in costs, the physical move, and the provision of furniture. The CM conducts follow-up visits, and regularly offers voluntary wraparound services. The CM and HC continue to work with the participant and Landlord to help ensure housing stability. Key evidence-based practices employed are progressive engagement, harm reduction, trauma-informed care and motivational interviewing.

When we originally submitted the application for this project in 2017, there was uncertainty about a coordinated entry system (CES) and if one would be implemented in the future. We referenced this system, "Oneby1," in the narrative of our FY2017 applications. Today, we are operating in the context of a functioning Oneby1 CES in which we accept participants referred by the CoC per the prioritized by-name list. We accept referrals through HMIS, with a focus on clients identified as high acuity, and thus clients who often have many complex barriers. Our CoC and our community have made immense strides in improving service delivery by committing to a CES in which the most in need are prioritized. However, we were not necessarily prepared for the high acuity participants referred to our RRH projects, who are more appropriate for permanent supportive housing (PSH) housing interventions. We have a shortage of PSH in our community and we are working on that. All this being said, the configuration of units and participants represented by this Project was designed to fit the needs of the participants before the Oneby1 was working. Therefore, we may seek to amend this project in the future to serve less people with more services.

2. Does your project have a specific population focus? Yes

2a. Please identify the specific population focus. (Select ALL that apply)

Chronic Homeless	<input checked="" type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input checked="" type="checkbox"/>	Substance Abuse	<input checked="" type="checkbox"/>

Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input checked="" type="checkbox"/>
Families	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Other (Click 'Save' to update)	<input type="checkbox"/>

Other:

3. Housing First

a. Does the project quickly move participants into permanent housing Yes

b. Does the project ensure that participants are not screened out based on the following items?

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance abuse	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of domestic violence (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

c. Does the project ensure that participants are not terminated from the program for the following reasons? Select all that apply. (All Projects)

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>
Any other activity not covered in a lease agreement typically found in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

d. Does the project follow a "Housing First" approach? Yes

4A. Supportive Services for Participants

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

- 1. For all supportive services available to participants, indicate who will provide them and how often they will be provided.
Click 'Save' to update.**

Supportive Services	Provider	Frequency
Assessment of Service Needs	Applicant	Daily
Assistance with Moving Costs	Applicant	As needed
Case Management	Applicant	Daily
Child Care	Partner	As needed
Education Services	Partner	As needed
Employment Assistance and Job Training	Partner	As needed
Food	Applicant	As needed
Housing Search and Counseling Services	Applicant	Daily
Legal Services	Partner	As needed
Life Skills Training	Partner	As needed
Mental Health Services	Partner	As needed
Outpatient Health Services	Partner	As needed
Outreach Services	Applicant	Daily
Substance Abuse Treatment Services	Partner	As needed
Transportation	Applicant	As needed
Utility Deposits	Applicant	As needed

- 2. Please identify whether the project includes the following activities:**



2a. Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs? Yes

2b. At least annual follow-ups with participants to ensure mainstream benefits are received and renewed? Yes

3. Do project participants have access to SSI/SSDI technical assistance provided by the applicant, a subrecipient, or partner agency? Yes

3a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months. Yes

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the  icon. To view or update a housing site already listed, select the  icon.

Total Units: 8

Total Beds: 8

Housing Type	Housing Type (JOINT)	Units	Beds
Scattered-site apartments (...)	---	8	8

4B. Housing Type and Location Detail

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

1. Housing Type: Scattered-site apartments (including efficiencies)

2. Indicate the maximum number of units and beds available for project participants at the selected housing site.

a. Units: 8

b. Beds: 8

3. Address:

Street 1: 1400 10th Street

Street 2:

City: Sarasota

State: Florida

ZIP Code: 34236

**4. Select the geographic area(s) associated with the address:
(for multiple selections hold CTRL Key)**

129115 Sarasota County, 122766 Sarasota,
120270 Bradenton, 129081 Manatee County

5A. Project Participants - Households

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

Households	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Total Number of Households		8		8

Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Adults over age 24		6		6
Persons ages 18-24		2		2
Accompanied Children under age 18				0
Unaccompanied Children under age 18				0
Total Persons	0	8	0	8

Click Save to automatically calculate totals

5B. Project Participants - Subpopulations

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

Persons in Households with at Least One Adult and One Child

Characteristics	Chronically Homeless Non-Veterans	Chronically Homeless Veterans	Non-Chronically Homeless Veterans	Chronic Substance Abuse	Persons with HIV/AIDS	Severely Mentally Ill	Victims of Domestic Violence	Physical Disability	Developmental Disability	Persons not represented by listed subpopulations
Adults over age 24										
Persons ages 18-24										
Children under age 18										
Total Persons	0	0	0	0	0	0	0	0	0	0

Persons in Households without Children

Characteristics	Chronically Homeless Non-Veterans	Chronically Homeless Veterans	Non-Chronically Homeless Veterans	Chronic Substance Abuse	Persons with HIV/AIDS	Severely Mentally Ill	Victims of Domestic Violence	Physical Disability	Developmental Disability	Persons not represented by listed subpopulations
Adults over age 24	3			2				1		
Persons ages 18-24	0			1			1			
Total Persons	3	0	0	3	0	0	1	1	0	0

Click Save to automatically calculate totals

Persons in Households with Only Children

Characteristics	Chronically Homeless Non-Veterans	Chronically Homeless Veterans	Non-Chronically Homeless Veterans	Chronic Substance Abuse	Persons with HIV/AIDS	Severely Mentally Ill	Victims of Domestic Violence	Physical Disability	Developmental Disability	Persons not represented by listed subpopulations
Accompanied Children under age 18										
Unaccompanied Children under age 18										
Total Persons	0			0	0	0	0	0	0	0

6A. Funding Request

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

1. Do any of the properties in this project have an active restrictive covenant? No

2. Was the original project awarded as either a Samaritan Bonus or Permanent Housing Bonus project? Yes

3. Does this project propose to allocate funds according to an indirect cost rate? No

4. Select a grant term: 1 Year

6. Select the costs for which funding is being requested:

	Renewal Application	HUD Award	Adjustment
Leased Units	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leased Structures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rental Assistance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Supportive Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Operations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HMIS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6D. Rental Assistance Budget

The following list summarizes the rental assistance funding request for the total term of the project. To add information to the list, select the icon. To view or update information already listed, select the icon.

		Renewal Application	HUD Award		Adjustment	
Total Annual Assistance Request:		\$78,936	\$86,064		\$86,064	
Grant Term:		1 Year	1 Year		1 Year	
Total Request for Grant Term:		\$78,936	\$86,064		\$86,064	
Total Units:		8	8		8	
Rental Assistance Type	Rental Assistance Type (HUD Award)	Rental Assistance Type (Adjustment)	FMR from Project Application	FMR from Award	Total Units Requested	Total Request
TRA	TRA	TRA	FL - North Port-S...	FL - North Port-S...	8	\$86,064

Rental Assistance Budget Detail

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

Type of Rental Assistance: TRA
Renewal Application

Rental Assistance Type: TRA
Adjustment

All RRH and JOINT projects with CoC funded units must select TRA as the Rental Assistance Type.

	FMR Area
Metropolitan or non-metropolitan fair market rent area: Renewal Application	FL - North Port-Sarasota-Bradenton, FL MSA (1208199999)
Metropolitan or non-metropolitan fair market rent area: HUD Award	FL - North Port-Sarasota-Bradenton, FL MSA (1208199999)
Metropolitan or non-metropolitan fair market rent area: Adjustment	FL - North Port-Sarasota-Bradenton, FL MSA (1208199999)

No

Does the applicant request rental assistance funding for less than the area's per unit size fair market rents?
Applicant

No

Does the applicant request rental assistance funding for less than the area's per unit size fair market rents?
HUD Award

No

Does the applicant request rental assistance funding for less than the area's per unit size fair market rents?
Adjustment

Size of Units	# of Units (Renewal Submission)	# of Units (HUD Award)	# of Units (Adjustment)	FMR Area (Renewal Submission)	FMR Area (HUD Award)	FMR Area (Adjustment)	HUD Paid Rent (Applicant)	HUD Paid Rent (HUD Award)	HUD Paid Rent (Adjustment)	12 Months	Total Request (Renewal Submission)	Adjusted Total Assistance Requested (HUD Award)	Total Request (Adjustment)	
SRO			x	\$575	\$608	\$608	\$575	\$608	\$608	x	12	= \$0	\$0	\$0
0 Bedroom	2	2	2	x \$766	\$811	\$811	\$766	\$811	\$811	x	12	= \$18,384	\$19,464	\$19,464
1 Bedroom	6	6	6	x \$841	\$925	\$925	\$841	\$925	\$925	x	12	= \$60,552	\$66,600	\$66,600

2 Bedrooms				x	\$1,078	\$1,180	\$1,180	\$1,078	\$1,180	\$1,180	x	12	=	\$0	\$0	\$0
3 Bedrooms				x	\$1,473	\$1,597	\$1,597	\$1,473	\$1,597	\$1,597	x	12	=	\$0	\$0	\$0
4 Bedrooms				x	\$1,774	\$1,950	\$1,950	\$1,774	\$1,950	\$1,950	x	12	=	\$0	\$0	\$0
5 Bedrooms				x	\$2,040	\$2,243	\$2,243	\$2,040	\$2,243	\$2,243	x	12	=	\$0	\$0	\$0
6 Bedrooms				x	\$2,306	\$2,535	\$2,535	\$2,306	\$2,535	\$2,535	x	12	=	\$0	\$0	\$0
7 Bedrooms				x	\$2,572	\$2,828	\$2,828	\$2,572	\$2,828	\$2,828	x	12	=	\$0	\$0	\$0
8 Bedrooms				x	\$2,838	\$3,120	\$3,120	\$2,838	\$3,120	\$3,120	x	12	=	\$0	\$0	\$0
9 Bedrooms				x	\$3,105	\$3,413	\$3,413	\$3,105	\$3,413	\$3,413	x	12	=	\$0	\$0	\$0
Total Units and Annual Assistance Requested	8	8	8											\$78,936	\$86,064	\$86,064
Grant Term														1 Year		1 Year
Total Request for Grant Term														\$78,936	\$86,064	\$86,064

6H. Sources of Match

The following list summarizes the funds that will be used as Match for the project. To add a Matching source to the list, select the  icon. To view or update a Matching source already listed, select the  icon.

Summary for Match

Total Value of Cash Commitments:	\$23,060
Total Value of In-Kind Commitments:	\$0
Total Value of All Commitments:	\$23,060

1. Does this project generate program income as described in 24 CFR 578.97 that will be used as Match for this grant? No

Match/ Leverage	Type	Source	Contributor	Date of Commitment	Value of Commitments
Yes	Cash	Private	Community Foundat...	09/26/2019	\$23,060

Sources of Match Detail

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

- 1. Will this commitment be used towards Match?** Yes
- 2. Type of Commitment:** Cash
- 3. Type of Source:** Private
- 4. Name the Source of the Commitment:** Community Foundation of Sarasota County
(Be as specific as possible and include the office or grant program as applicable)
- 5. Date of Written Commitment:** 09/26/2019
- 6. Value of Written Commitment:** \$23,060

6I. Summary Budget

For help in completing Post Award steps, please take a look at the FY2019 Recipients Post-Award Instructional Guide available on the Hud Exchange.

The following information summarizes the funding request for the total term of the project. However, the appropriate amount of administrative costs must be entered in the available fields below.

Eligible Costs	Annual Assistance Requested (Renewal Submission)	Annual Assistance Requested (HUD Award)	Annual Assistance Requested (Adjustment)	Grant Term (Renewal Submission)	Grant Term (HUD Award)	Grant Term (Adjustment)	Total Assistance Requested for Grant Term (Renewal Submission)	Total Assistance Requested for Grant Term (HUD Award)	Total Assistance Requested for Grant Term (Adjustment)	Budget Change (Adjustment)
1a. Leased Units	\$0		\$0	1 Year	1 Year	1 Year	\$0	\$0	\$0	
1b. Leased Structures	\$0	\$0	\$0	1 Year	1 Year	1 Year	\$0	\$0	\$0	
2. Rental Assistance	\$78,936	\$86,064	\$86,064	1 Year	1 Year	1 Year	\$78,936	\$86,064	\$86,064	
3. Supportive Services	\$0	\$0	\$0	1 Year	1 Year	1 Year	\$0	\$0	\$0	
4. Operating	\$0	\$0	\$0	1 Year	1 Year	1 Year	\$0	\$0	\$0	
5. HMIS	\$0	\$0	\$0	1 Year	1 Year	1 Year	\$0	\$0	\$0	
6. Sub-total Costs Requested							\$78,936	\$86,064	\$86,064	
7. Admin (Up to 10%)							\$6,177	\$6,177	\$6,177	
8. Total Assistance plus Admin Requested							\$85,113	\$92,241	\$92,241	
9. Cash Match							\$21,278	\$21,278	\$23,060	Yes
10. In-Kind Match							\$0	\$0	\$0	
11. Total Match							\$21,278	\$21,278	\$23,060	Yes
12. Total Budget							\$106,391	\$113,519	\$115,301	Yes

Submission Summary

Page	Last Updated
Acknowledgement	04/20/2020
Attachments	04/20/2020
Adjustments	04/20/2020
1A. Application Type	No Input Required
1B. Legal Applicant	No Input Required
1C. Application Details	No Input Required

1D. Congressional District(s)	04/20/2020
1E. Compliance	No Input Required
1F. Declaration	No Input Required
Recipient Performance	04/20/2020
Renewal Expansion	04/20/2020
Grant Consolidation	04/20/2020
2A. Subrecipients	No Input Required
3A. Project Detail	04/20/2020
3B. Description	04/20/2020
4A. Services	04/20/2020
4B. Housing Type	04/20/2020
5A. Households	04/20/2020
5B. Subpopulations	No Input Required
6A. Funding Request	04/20/2020
6D. Rental Assistance	04/20/2020
6H. Match	04/20/2020
6I. Summary Budget	No Input Required



**COMMUNITY
FOUNDATION**
of Sarasota County

September 26, 2019

To: Whom it may Concern

Re: Season of Sharing funds for Salvation Army, Sarasota Chapter

Salvation Army is one of 6 fiscal agents in Sarasota County who receives funds raised each year.

The process for accessing funds requires the fiscal agents to submit their records of expending the amount of funding they are granted.

The Community Foundation of Sarasota County personnel review the report. If the report is approved, the fiscal agent is then approved of another disbursement of Season of Sharing Funds, providing funds are available.

This letter confirms there is funding of approximately \$100,000 of Season of Sharing funding available to Salvation Army for rent and utility assistance for the prevention of homelessness, available to them after February 1, 2020.

Sincerely,

Laura Spencer
Chief Financial & Administrative Officer

2635 Fruitville Road • Sarasota, FL 34237
Phone 941.955.3000 • Fax 941.952.1951
www.CFSarasota.org



Committed in compliance with National
Standards for U.S. Community Foundations



**DOING THE
MOST GOOD**
SARASOTA COUNTY

William Booth, *Founder*
Brian Peddle, *General*
Commissioner Willis Howell, *Territorial Commander*
Lt. Colonel Kenneth Luyk, *Divisional Commander*
Lt. Colonel Michele Matthews, *Area Commander*
Lt. Colonel Ward Matthews, *Area Commander*

October 26, 2021

U.S. Department of Housing and Urban Development
Office of Community Planning and Development
Attn: Kevin P. Chung
400 West Bay Street, Suite 1015
Jacksonville, FL 32202

Re: Match Funding for HUD FY2021 CoC Program Grant "PSH Plus 2021," a new Permanent Supportive Housing project

To Whom It May Concern:

This letter serves as documentation for a Match commitment by The Salvation Army of Sarasota County toward the stated HUD CoC project, "PSH Bonus 2021," a Permanent Supportive Housing project (current e-snaps application project number 188425).

We, The Salvation Army of Sarasota County, will commit \$67,557.75 from our general operating funds as Match funding. We pledge to match these funds during the expected 12-month grant period of August 1, 2022 to July 31, 2023.

We are grateful for the opportunity to continue to serve the community through the HUD-CoC Grant Program.

Thank you,

Cynthia Carter
Director of Finance

AGREEMENT

Between The Salvation Army, a GA Corp., for The Salvation Army of Sarasota County, FL (“TSA”) and Centerstone of Florida, Bradenton, FL (CENTERSTONE) for a
HOUSING-FOCUSED COLLABORATION

Location:

The Salvation Army Center of Hope
1400 10th Street
Sarasota, FL 34236

Purpose of AGREEMENT: This AGREEMENT sets forth the terms between TSA and CENTERSTONE, the PARTIES, for collaboration in community. This AGREEMENT is to express an understanding between PARTIES who seek to work together to provide collaborative services for homeless participants and formerly homeless participants, for whom joint advocacy and support is beneficial to both the PARTIES and the participants.

Participants: Participants are defined as the following: Individuals identified by TSA through the Rapid Rehousing (RRH) and Permanent Supportive Housing (PSH) Programs who are referred specifically to CENTERSTONE and are found appropriate for Centerstone’s “Connections” services, described below. Participants must meet TSA’s standard eligibility requirements and follow TSA’s Program requirements towards sustainability and housing placement as outlined by both federal and Continuum of Care policies.

Goals of Agreement: Individual and shared goals will be accomplished by the PARTIES undertaking the following Agreements in the interest of mutual clients.

CENTERSTONE agrees to:

- Review participants referred by TSA for possible inclusion in the Connections program, which provides outreach and housing navigation using a “housing first” approach that focuses on providing housing as a top priority without precondition or service participation requirements in addition to evidence-based treatment, access to federal income supports, individualized substance abuse treatment and planning, and more.
- Provide intensive case management services to participants by way of a credentialed team comprised of a Program Manager, Case Manager, and other relevant Connections staff. Case management services include but are not limited to mental health services, substance use services, co-occurring disorder services, and life skills education.
- Ensure participants have access to medications and outpatient treatment.
- Ensure CENTERSTONE Connections Clinical Team continues to work with TSA Case Managers for the benefit of the participant.
- Reinforce TSA goals as developed and implemented by the TSA RRH/PSH team.
- Effectively communicate known or developing issues or concerns to the TSA RRH/PSH team as soon as practical for the benefit of the participant and partnership of services. Both CENTERSTONE and TSA will utilize a Peer Support Model regarding team interactions and services provided.
- Participate in bi-weekly stakeholder meetings.
- Ensure staff has completed all necessary data entry into each participant’s client profile in the Community Services Information System (CSIS) as required.
- Be solely responsible for employment and supervision of CENTERSTONE staff.
- Be solely responsible for salary and benefits of CENTERSTONE staff.
- Provide office space, technology, and storage space needed for CENTERSTONE staff to perform duties.

TSA agrees to:

- Provide housing first, low barrier RRH/PSH services to participants referred through the Coordinated Entry System.
- Provide Intensive Case Management services to participants by way of a strength-based model comprised of Program Managers, Case Managers, and other relevant RRH/PSH staff. Case Management services include but are not limited to rehousing, employment assistance, budgeting, life skills training, case planning towards sustainability, and advocacy.
- Provide rental assistance funding for participants who are engaged in services and continue to meet the requirements of the RRH/PSH program as established by TSA.
- Ensure TSA RRH/PSH team continues to work with CENTERSTONE Connections Team Case Managers for the benefit of the participant.
- Reinforce CENTERSTONE goals as developed and implemented by the CENTERSTONE Connections team.
- Effectively communicate known or developing issues or concerns to the CENTERSTONE Connections Team as soon as practical for the benefit of the participant and partnership of services. Both CENTERSTONE and TSA will utilize a Peer Support Model regarding team interactions and services provided.
- Participate in bi-weekly stakeholder meetings.
- Ensure staff has completed all necessary data entry into participant's client profile in as required.
- Be solely responsible for employment and supervision of TSA staff.
- Be solely responsible for salary and benefits of TSA staff.
- Provide office space, technology, and storage space needed for TSA staff to perform duties.

Additional Provisions:

- CENTERSTONE and TSA reserve the right to enter into arrangements with other providers, whether for the same or similar services, if such PARTY deems it necessary in relation to programmatic or participant needs.

Compensation: This Agreement formalizes a cooperative agreement for making referrals to and providing services to mutual clients/patients. There will be no compensation or payment to either party by the other under this agreement.

Specific Dates and Times of Usage: CENTERSTONE staff will typically work within the following time window and will therefore have access to the above TSA facility for the following times of usage: Monday through Friday, 7:00 a.m. to 5:00 p.m.; CENTERSTONE staff will also have access to the above TSA facility as needed per approval of the TSA Director of Planning & Programs in order to access partnership participants and perform functions related to the Housing Collaboration. Most services provided by CENTERSTONE and TSA will be conducted in the community and/or, for those clients who have moved into permanent housing via the RRH or PSH Program, in a participant's dwelling.

Mutual Indemnity: Each PARTY shall hold harmless, and indemnify the other PARTY and its directors, officers, agents and employees against any and all loss, liability, damage, or expense. However, neither PARTY shall be indemnified hereunder for any loss, liability, damage, or expense resulting from its sole negligence or willful misconduct.

Confidentiality: As applicable, both providers will abide by the Health Insurance Portability and Accountability Act (HIPAA) Final Privacy Rule, 45 CFR Parts 164.306(a)(4) and 164.308(a), Health Information Technology for Economic and Clinical Health Act, and any other applicable federal or state laws pertaining to confidentiality of client records. Only with a signed release of information may the parties share client information.

Property: While the premises are used by CENTERSTONE staff, CENTERSTONE will be responsible for any damage to the premises, its furniture, fixtures or other accoutrement caused by CENTERSTONE staff.

Responsibility for Supplies: CENTERSTONE is responsible for the provision of all supplies needed for CENTERSTONE staff to perform duties.

Storage Space: CENTERSTONE is responsible for the provision of storage space needed for CENTERSTONE staff to perform duties.

Relationship: Both PARTIES understand this AGREEMENT does not create a landlord/tenant relationship.

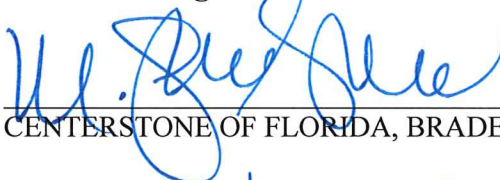
Entities: CENTERSTONE and TSA are independent entities. Employees of CENTERSTONE are not employees of TSA and employees of TSA are not employees of CENTERSTONE.

Insurance Responsibilities: CENTERSTONE will provide evidence of insurance including General Liability, Workers' Compensation and other insurance applicable to services provided under this agreement. Such insurance coverage may be either in the form of self-insurance and primary and/or excess coverage from responsible companies duly authorized to do business in the State of Florida. **General Liability policies required by this Agreement shall name The Salvation Army, A Georgia Corporation, 1424 Northeast Expressway, Atlanta, GA 30329-2088 as the Certificate Holder.**

Funding: This Agreement is not a commitment of funds.

Duration and Termination: This AGREEMENT is at-will and may be terminated at any time by either PARTY in writing. Otherwise, this AGREEMENT is effective from **October 1, 2021 to September 30, 2023.**

Authorized Signatures



CENTERSTONE OF FLORIDA, BRADENTON, FL

THE SALVATION ARMY, A GA CORPORATION, FOR
THE SALVATION ARMY OF SARASOTA COUNTY, FL

Melissa Larkin-Skinner

Print Name

Print Name

CEO

Title

Title

9/30/21

Date

Date

A copy of The Salvation Army Policy Statement on Relationships with Other Groups and Organizations must be attached to each copy of all contracts (Minute PL029 - "Relationships Between The Salvation Army and Other Groups and Organizations" - Guidelines, §IV--Procedures for Processing Contracts).

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2021 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition. For more information see FY 2021 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2021 CoC Program NOFO and the FY 2021 General Section NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- New projects may only be submitted as either Reallocated, Bonus Projects, Reallocated + Bonus or DV Bonus. These funding methods are determined in collaboration with local CoC and it is critical that applicants indicate the correct funding method. Project applicants must communicate with their CoC to make sure that the CoC submissions reflect the same funding method.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any new project that fails to adhere to (24 CFR part 578 and application requirements set forth in FY 2021 CoC Program Competition NOFO.

1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application: New Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 11/03/2021

4. Applicant Identifier:

a. Federal Entity Identifier:

5. Federal Award Identifier:

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

b. Employer/Taxpayer Identification Number (EIN/TIN): 65-0869993

	c. Organizational DUNS:	940621519	PLUS 4:	
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d. Address

Street 1: 2911 Fruitville Road

Street 2:

City: Sarasota

County:

State: Florida

Country: United States

Zip / Postal Code: 34237

e. Organizational Unit (optional)

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Ms.

First Name: Phillip

Middle Name:

Last Name: Brooks

Suffix:

Title: COO

Organizational Affiliation: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

Applicant: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

940621519

Project: FY21 PSH Rental Assistance Manatee and Sarasota Counties

191412

Telephone Number: (941) 232-2572

Extension:

Fax Number: (941) 366-0033

Email: pj.brooks@caslinc.org

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6500-N-25

Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): Florida
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: FY21 PSH Rental Assistance Manatee and Sarasota Counties

16. Congressional District(s):

16a. Applicant: FL-019, FL-016, FL-017, FL-010, FL-009

16b. Project: FL-016, FL-017
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 01/01/2022

b. End Date: 12/31/2022

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.
If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No
If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

I AGREE:

21. Authorized Representative

Prefix: Mr.

First Name: Julian

Middle Name: Scott

Last Name: Eller

Suffix:

Title: CEO

Telephone Number: (941) 225-2373
(Format: 123-456-7890)

Fax Number: (941) 366-0033
(Format: 123-456-7890)

Email: scott.eller@caslinc.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/03/2021

1G. HUD 2880

**Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2506-0214 (exp.02/28/2022)**

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

Prefix: Mr.

First Name: Julian

Middle Name: Scott

Last Name: Eller

Suffix:

Title: CEO

Organizational Affiliation: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

Telephone Number: (941) 225-2373

Extension:

Email: scott.eller@caslinc.org

City: Sarasota

County:

State: Florida

Country: United States

Zip/Postal Code: 34237

2. Employer ID Number (EIN): 65-0869993

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received

4a. Total Amount Requested for this project: \$172,446.00

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, City and State) of the project or activity.

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
(For further information, see 24 CFR Sec. 4.3).

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. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
Suncoast Partnership to End Homelessness	PSH	\$100,314.00	Rental Assistance/Support Services
Lee County CoC	PSH	\$272,303.00	Rental Assistance/Support Services
Collier County CoC	PSH	\$69,300.00	Rental Assistance/Supportive Services

Note: If additional sources of Government Assistance, please use the "Other Attachments" screen of the project applicant profile.

Part III Interested Parties

You must disclose:

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).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation	Financial Interest in Project/Activity (\$)	Financial Interest in Project/Activity (%)
Eller, J. Scott	265-73-0445	Program Director/CEO	\$0.00	0%
NA				
NA				
NA				
NA				

Note: If there are no other people included, write NA in the boxes.

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

I AGREE:

Name / Title of Authorized Official: Julian Eller, CEO

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/03/2021

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.	e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
b. Establishing an on-going drug-free awareness program to inform employees --- (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted --- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;	g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.
d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;	

2. Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application. Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

X

WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Authorized Representative

Prefix: Mr.

First Name: Julian

Middle Name: Scott

Last Name: Eller

Suffix:

Title: CEO

Telephone Number: (941) 225-2373
(Format: 123-456-7890)

Fax Number: (941) 366-0033
(Format: 123-456-7890)

Email: scott.eller@caslinc.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/03/2021

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person 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 this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person 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 this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction

imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

Name / Title of Authorized Official: Julian Eller, CEO

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/03/2021

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.

Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. 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."

Answer "No" if your organization is NOT engaged in lobbying.

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? No

Legal Name: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

Street 1: 2911 Fruitville Road

Street 2:

City: Sarasota

County:

State: Florida

Country: United States

Zip / Postal Code: 34237

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

Authorized Representative

Prefix: Mr.

First Name: Julian

Middle Name: Scott

Last Name: Eller

Suffix:

Title: CEO

Telephone Number: (941) 225-2373
(Format: 123-456-7890)

Fax Number: (941) 366-0033
(Format: 123-456-7890)

Email: scott.eller@caslinc.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/03/2021

IK. SF-424B

(SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007
Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|-----------|--|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |

- | | |
|-----|--|
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |
| 9. | Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements. |
| 10. | Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more. |
| 11. | Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205). |
| 12. | Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system. |
| 13. | Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.). |
| 14. | Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance. |
| 15. | Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance. |
| 16. | Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures. |
| 17. | Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations." |
| 18. | Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program. |
| 19. | Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award. |

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

Prefix: Mr.

First Name: Julian

Middle Name: Scott

Last Name: Eller

Suffix:

Title: CEO

Signature of Authorized Certifying Official: Considered signed upon submission in e-snaps.

Date Signed: 11/03/2021

1L. SF-424D

Are you requesting CoC Program funds for construction costs in this application? No

No SF-424D is required. Select "Save and Next" to move to the next screen.

2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards:

Organization	Type	Sub-Award Amount
This list contains no items		

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

1. Describe your organization’s (and subrecipient(s) if applicable) experience in effectively utilizing federal funds and performing the activities proposed in the application.

Community Assisted and Supported Living, Inc. (CASL) is a 501c3 corporation formed in 1998 for the purpose of developing permanent supportive housing and operating various programs to provide wrap around case management, permanent supportive housing, and combat chronic homelessness. Over the past 23 years, CASL has served over 2,500 individuals with a Disabling Condition and/or suffering from Chronic Homelessness. To date, our housing inventory includes 48 single family homes, 217 multifamily units, four group homes, and a 50-bed assisted living facility.

Traditionally, CASL has operated scattered site permanent housing with wrap around services, however in recent years development has trended towards larger mixed-use developments. CASL, in partnership with State, local, and private entities completed its first large scale multi-family affordable housing, Arbor Village, in Sarasota, FL consisting of 85 units utilizing Low-Income Housing Tax Credits (LIHTC) and National Housing Trust Funds (NHTF) from Florida Housing Finance Corporation (FHFC). Currently, CASL has another 3 developments under various stages of development leveraging CDBG and LIHTC funds, with a fourth that will be completed this year in Lee County consisting of 95 units within its Cypress Village development.

In October of 2021, CASL and its development partner, will be opening Cypress Village, a 95-unit garden style apartment that will allocate at least 50% of the units to serve individuals who are homeless. In Summer of 2022, again, CASL and its development partner will be opening, Swan Lake Village, an 84 unit development with set asides for households below 40% and 60%. Additionally, Swan Lake Village will designate 50%, 42 units, for households with disabling conditions, and a minimum of 13 units will be set aside for persons who are chronically homeless.

2. Describe your organization’s (and subrecipient(s) if applicable) experience in leveraging Federal, State, local and private sector funds.

In 2020, CASL served more than 670 individuals with a disabling condition, with more than half coming from homelessness. CASL’s annual budget is approximately \$6 million, which is funded through Federal (HOME, CDBG, HUD-Rental Assistance and CoC programs), State (Central Florida Behavioral Health Network, Medicaid HMO), local government contract dollars, donors, and resident rents. Of the total \$6 million budget, approximately \$4 million is reserved for services that are provided to CASL’s residents. As part of that total \$6 million budget, CASL receives \$2,693,677 in contracted funding from

CFBHN. CASL coordinates and administers rental assistance contracts and multiple state and federal contracts and acts as Medicaid Managed Care organization and functions as a representative payee organization for a portion of its residents.

3. Describe your organization’s (and subrecipient(s) if applicable) financial management structure.

CASL has maintained its gross revenue of approximately \$6 million over the past two years. Much of this is off-set however, due to associated operating expenses necessary to fund case management, administration, and general upkeep and maintenance. CASL currently operates with net income of approximately \$200k, however when compared to the organization’s annual budget, this represents a small fraction. The amount left over is customarily held in reserve to navigate potential budget shortfalls across the region it serves. This unfortunately, leaves little room for organic capital development expansion. Therefore, CASL diligently pursues competitive grant and tax credit opportunities in order to facilitate growth and assist the community in meeting its specific housing needs. CASL has contracted with Central Florida Behavioral Health Network (CFBHN) for \$2,693,677 in service funding.

CASL’s strategy of diversifying its funding agencies and sources, in addition to its programs provides the best insurance policy that CASL will be able to continue to operate in the event of a loss of funding from any one source. Over the past twenty-three years CASL has maintained its capacity even with losses to funding. CASL has accomplished this by developing relationships and collaborating with over thirty separate providers across seven counties to assure we maintain access to services on behalf of our clients. We will be our clients primary champion to address and break barriers that exist to Florida’s most vulnerable residents, the homeless, chronically homeless, mentally ill, and substance abusers. CASL has consistently maintained a recidivism rate of less than 5% over the past 23 years due to its continued efforts. CASL through its strong and strategic partnerships, has supported the community over the years to achieve these results.

Recently CASL has moved its accounting activities directly to Kerkering Barberio. Nicole Peterson, from Kerkering Barberio serves as the organization's CFO. In her short time with CASL, she has overhauled the organizations accounting and reporting functions to better deliver accurate and comprehensive reporting.

4. Are there any unresolved HUD monitoring or OIG audit findings for any HUD grants (including ESG) under your organization? No

3A. Project Detail

1. CoC Number and Name: FL-500 - Sarasota, Bradenton/Manatee, Sarasota Counties CoC

2. CoC Collaborative Applicant Name: Suncoast Partnership to End Homelessness, Inc.

3. Project Name: FY21 PSH Rental Assistance Manatee and Sarasota Counties

4. Project Status: Standard

5. Component Type: PH

5a. Select the type of PH project: PSH

6. Is your organization, or subrecipient, a victim service provider defined in 24 CFR 578.3? No

7. Is this new project application requesting to transition from eligible renewal project(s) that was awarded to the same recipient and fully eliminated through reallocation in this CoC Program Competition? (Attachment Requirement) No

8. Will funds requested in this new project application replace state or local government funds (24 CFR 578.87(a))? No

9. Will this project include replacement reserves in the Operating budget? No

3B. Project Description

1. Provide a description that addresses the entire scope of the proposed project.

While CASL’s primary mission is to assist individuals and households who have a mental illness, substance abuse, or developmental disability; we find many in this population intersect with being at-risk of, currently, or chronically homeless. To that end, our organization is intent on helping households obtain permanent housing as quickly as possible, in line with Housing First, by opting to aid persons meeting the definition of Dedicated PLUS.

Our organization’s permanent supportive housing model, an approach to “Housing First”, transitions people directly from homelessness into permanent supportive housing. The keys to this are wrap around services and collaborations between partnering agencies. CASL’s case managers assess each resident to determine their specific needs. Following the initial assessment, each resident is linked to services specific to their needs, ensuring their continued residence in permanent supportive housing.

We request funding to provide support for up to 13 households who are exiting chronic homelessness into a project based permanent supportive housing community. This support, in conjunction with the reduced income requirements for our multi-family developments will join to provide access to vulnerable populations within the Manatee-Sarasota CoC.

2. For each primary project location, or structure, enter the number of days from the execution of the grant agreement that each of the following milestones will occur if this project is selected for conditional award.

Project Milestones	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement
	A	B	C	D
Begin hiring staff or expending funds	30			
Begin program participant enrollment	15			
Program participants occupy leased or rental assistance units or structure(s), or supportive services begin	15			
Leased or rental assistance units or structure, and supportive services near 100% capacity	60			
Closing on purchase of land, structure(s), or execution of structure lease	0			
Start rehabilitation	0			
Complete rehabilitation	0			
Start new construction	0			
Complete new construction	0			

2a. If requesting capital costs (i.e., acquisition, rehabilitation, or new construction), describe the proposed development activities with responsibilities of the applicant, and subrecipients if included, to develop and maintain the property using CoC Program funds.

NA. This project is not requesting capital costs.

3. Check the appropriate box(s) if this project will have a specific subpopulation focus.

(Select ALL that apply)

N/A - Project Serves All Subpopulations	<input type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Chronic Homeless	<input type="checkbox"/>
		Other (Click 'Save' to update)	<input type="checkbox"/>

4. Will your project participate in the CoC's Coordinated Entry (CE) process or recipient organization is a victim service provider, as defined in 24 CFR 578.3 and uses an alternate CE process that meets HUD's minimum requirements? Yes

5. Housing First

5a. Will the project quickly move participants into permanent housing? Yes

5b. Will the project enroll program participants who have the following barriers? Select all that apply.

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

5c. Will the project prevent program participant termination for the following reasons? Select all that apply.

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

5d. Will the project follow a "Housing First" approach? Yes
 (Click 'Save' to update)

6 Will program participants be required to live in a specific structure, unit, or locality at any time while in the program? Yes

6a. Explain how and why the project will implement this requirement.

This application is requesting project based permanent supportive housing rental assistance at the Arbor Village multi-family development.

7. Will more than 16 persons live in a single structure? Yes

7a. Describe the local market conditions that necessitate a project of this size.

The Arbor Village Development addresses the current needs in Sarasota/Manatee counties to provide PSH for its most vulnerable population who are now living in unstable or restrictive settings. Individuals will be coming from 1) A literal state of homelessness; 2) institution or group home; 3) inpatient psychiatric or forensic hospital; or 4) jail. The Suncoast Partnership Continuum of Care point in time service indicates large demand for permanent supportive housing units for individuals with substance abuse and mental illness who are in a state of chronic homelessness.

7b. Describe how the project will be integrated into the neighborhood.

The projects fair housing marketing plan has passed review by Florida Housing Finance Corporation, the administrator of the LIHTC program for the state of Florida. CASL provides community transportation for individuals so they are able to access community based resources such as medical services, food and groceries, clothing and supplies, and public transportation. The development is centrally located within Sarasota County with access to general services and amenities within walking/biking distance. Additionally, the development is closely located to education facilities for families, and employment training opportunities are offered on-site to equip individuals with skills necessary to obtain gainful employment.

100% Dedicated or DedicatedPLUS

A “100% Dedicated” project is a permanent supportive housing project that commits 100% of its beds to chronically homeless individuals and families, according to NOFA Section III.3.b.

A “DedicatedPLUS” project is a permanent supportive housing project where 100% 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, that at a minimum, meet ONE of the following criteria according to NOFA Section III.3.d:

- (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.

A renewal project where 100 percent of the beds are dedicated in their current grant as described in NOFA Section III.A.3.b. must either become DedicatedPLUS or remain 100% Dedicated. If a renewal project currently has 100 percent of its beds dedicated to chronically homeless individuals and families and elects to become a DedicatedPLUS project, the project will be required to adhere to all fair housing requirements at 24 CFR 578.93. Any beds that the applicant identifies in this application as being dedicated to chronically homeless individuals and families in a DedicatedPLUS project must continue to operate in accordance with Section III.A.3.b. Beds are identified on Screen 4B.

**8. Is this project 100% Dedicated or DedicatedPLUS
DedicatedPLUS?**

3C. Project Expansion Information

1. Is this a “Project Expansion” of an eligible renewal project? No

4A. Supportive Services for Participants

1. Describe how program participants will be assisted to obtain and remain in permanent housing.

CASL’s model transitions people directly from homelessness into permanent supportive housing. The keys to this are wrap-around supports and the collaboration between partnering agencies. CASL’s case managers assess each resident to determine their specific areas of need. CASL’s SOAR-trained case managers conduct initial screening and intake to determine an applicant’s eligibility, readiness for our program, and any pre-entry needs. From the initial screening process, case managers gather information on six domains. CASL provides an initial layer of case management to its clients which is used as a base in which to further link clients with a variety of supportive services. The services are reviewed and monitored to determine the substantial progress towards goals are being met. If progress is not being attained, a new plan is developed, modified, or enhanced in order to ensure success.

2. Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible.

CASL will provide individual case management services to residents at Arbor Village. Onsite residential services will include nutrition and wellness coaching, job skills training, financial management, smoking cessation classes, holiday parties, and potentially AA and NA meetings. Often, CASL clients require services beyond the case management offered by CASL. In these situations, CASL leverages its collaborative partnerships with local service agencies to provide the specialized care or service needed. In many cases, these specialized services are provided by other participating CoC agencies. CASL has entered into MOU’s with Centerstone of Florida, NAMI, and First Step of Sarasota, local mental health provider and substance abuse providers, to encourage cooperation recognizing that individuals with disabling conditions are diverse in terms of their strengths, motivations, goals, backgrounds, and needs. Additionally, CASL is contracted by Central Florida Behavioral Health Network (CFBHN) the regional Managing Entity responsible DCF funds for behavioral health services. As part of its goal to support client engagement in services and supports, CASL will be adding a Recovery Peer Specialist to its team. A Recovery Peer Specialist is a person with lived experience who is in recovery from substance use or co-occurring mental health disorders. Their life experiences and recovery allow them to provide recovery support in such way that others can benefit from their experiences.

3. For all supportive services available to program participants, indicate who will provide them and how often they will be provided. Click 'Save' to update.

Supportive Services	Provider	Frequency
Assessment of Service Needs	Applicant	Weekly
Assistance with Moving Costs	Partner	As needed
Case Management	Applicant	Weekly
Child Care	Partner	As needed
Education Services	Partner	As needed
Employment Assistance and Job Training	Partner	As needed
Food	Partner	As needed
Housing Search and Counseling Services	Partner	As needed
Legal Services	Partner	As needed
Life Skills Training	Applicant	Weekly
Mental Health Services	Applicant	Weekly
Outpatient Health Services	Partner	As needed
Outreach Services	Applicant	Daily
Substance Abuse Treatment Services	Partner	As needed
Transportation	Applicant	Daily
Utility Deposits	Partner	As needed

Identify whether the project will include the following activities:



4. Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs? Yes

5. Annual follow-ups with program participants to ensure mainstream benefits are received and renewed? Yes

6. Will program participants have access to SSI/SSDI technical assistance provided by this project the applicant, a subrecipient, or partner agency? Yes

6a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months. Yes

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the  icon. To view or update a housing site already listed, select the  icon.

Total Units: 12

Total Beds: 21

Total Dedicated CH Beds: 21

Housing Type	Housing Type (JOINT)	Units	Beds	Dedicated CH Beds
Clustered apartments	---	12	21	21

4B. Housing Type and Location Detail

1. Housing Type: Clustered apartments

2. Indicate the maximum number of units and beds available for program participants at the selected housing site.

2a. Units: 12

2b. Beds: 21

3. How many beds in “2b. Beds” are dedicated to persons experiencing chronic homelessness? 21

This includes both the “dedicated” and “prioritized” beds.

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. 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.

Street 1: 2901 Fruitville Rd

Street 2:

City: Sarasota

State: Florida

ZIP Code: 34237

***5. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered.
(for multiple selections hold CTRL key)**

122766 Sarasota

5A. Project Participants - Households

Households Table

	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Number of Households	0	21	0	21
Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Persons over age 24	0	18		18
Persons ages 18-24	0	3		3
Accompanied Children under age 18	0			0
Unaccompanied Children under age 18				0
Total Persons	0	21	0	21

Click Save to automatically calculate totals

The number of children entered does not correspond to the number of households with only children.

5B. Project Participants - Subpopulations

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24										
Persons ages 18-24										
Children under age 18										
Total Persons	0	0	0	0	0	0	0	0	0	0

Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24	18			9		9				
Persons ages 18-24	3			1		2				
Total Persons	21	0	0	10	0	11	0	0	0	0

Click Save to automatically calculate totals

Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Accompanied Children under age 18										
Unaccompanied Children under age 18										
Total Persons	0				0	0	0	0	0	0

6A. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 15, 2023? Yes

2. What type of CoC funding is this project applying for in this CoC Program Competition? CoC Bonus

3. Does this project propose to allocate funds according to an indirect cost rate? No

4. Select a grant term: 1 Year

*** 5. Select the costs for which funding is requested:**

Acquisition/Rehabilitation/New Construction	<input type="checkbox"/>
Leased Units	<input type="checkbox"/>
Leased Structures	<input type="checkbox"/>
Rental Assistance	<input checked="" type="checkbox"/>
Supportive Services	<input type="checkbox"/>
Operating	<input type="checkbox"/>
HMIS	<input type="checkbox"/>

6. If conditionally awarded, is this project requesting an initial grant term greater than 12 months? (13 to 18 months) No

6E. Rental Assistance Budget

The following list summarizes the rental assistance funding request for the total term of the project. To add information to the list, select the icon. To view or update information already listed, select the icon.

Total Request for Grant Term:			\$171,600
Total Units:			12
Type of Rental Assistance	FMR Area	Total Units Requested	Total Request
PRA	FL - North Port-Sarasota-Bradenton, F...	12	\$171,600

Rental Assistance Budget Detail

Instructions:

Type of Rental Assistance: Select the applicable type of rental assistance from the dropdown menu. Options include tenant-based (TRA), sponsor-based (SRA), and project-based assistance (PRA). Each type has unique requirements and applicants should refer to the 24 CFR 578.51 before making a selection.

Metropolitan or non-metropolitan fair market rent area: This is a required field. Select the FY 2016 FMR area in which the project is located. The list is sorted by state abbreviation. The selected FMR area will be used to populate the rents in the chart below.

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.

of units: This is a required field. For each unit size, enter the number of units for which funding is being requested.

FMR: These fields are populated with the FY 2016 FMR amounts based on the FMR area selected by the applicant. The FMRs are available online at <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 based on the number of units multiplied by the corresponding FMR and by 12 months.

Total Units and Annual Assistance Requested: The fields in this row are automatically calculated based on the total number of units and the sum of the total requests per unit size per year.

Grant Term: This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

Total Request for Grant Term: This field is automatically calculated based on the total annual assistance requested multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange:
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

Type of Rental Assistance: PRA



Metropolitan or non-metropolitan fair market rent area: FL - North Port-Sarasota-Bradenton, FL MSA (1208199999)

Size of Units	# of Units (Applicant)		FMR Area (Applicant)		12 Months		Total Request (Applicant)
SRO	0	x	\$631	x	12	=	\$0
0 Bedroom	1	x	\$841	x	12	=	\$10,092

1 Bedroom	2	x	\$992	x	12	=	\$23,808
2 Bedrooms	9	x	\$1,275	x	12	=	\$137,700
3 Bedrooms		x	\$1,686	x	12	=	\$0
4 Bedrooms		x	\$2,030	x	12	=	\$0
5 Bedrooms		x	\$2,335	x	12	=	\$0
6 Bedrooms		x	\$2,639	x	12	=	\$0
7 Bedrooms		x	\$2,944	x	12	=	\$0
8 Bedrooms		x	\$3,248	x	12	=	\$0
9 Bedrooms		x	\$3,553	x	12	=	\$0
Total Units and Annual Assistance Requested	12						\$171,600
Grant Term							1 Year
Total Request for Grant Term							\$171,600

Click the 'Save' button to automatically calculate totals.

6I. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the  icon. To view or update a Match source already listed, select the  icon.

Summary for Match

Total Amount of Cash Commitments:	\$50,000
Total Amount of In-Kind Commitments:	\$0
Total Amount of All Commitments:	\$50,000

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Type	Source	Name of Source	Amount of Commitments
Cash	Private	Central Florida B...	\$50,000

Sources of Match Detail

1. Type of Match commitment: Cash

2. Source: Private

3. Name of Source: Central Florida Behavioral Health Network (CFBHN)
(Be as specific as possible and include the office or grant program as applicable)

4. Amount of Written Commitment: \$50,000

6J. Summary Budget

The following information summarizes the funding request for the total term of the project. However, administrative costs can be entered in 8. Admin field below.

Eligible Costs	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Total Assistance Requested for Grant Term (Applicant)
1a. Acquisition			\$0
1b. Rehabilitation			\$0
1c. New Construction			\$0
2a. Leased Units	\$0	1 Year	\$0
2b. Leased Structures	\$0	1 Year	\$0
3. Rental Assistance	\$171,600	1 Year	\$171,600
4. Supportive Services	\$0	1 Year	\$0
5. Operating	\$0	1 Year	\$0
6. HMIS	\$0	1 Year	\$0
7. Sub-total Costs Requested			\$171,600
8. Admin (Up to 10%)			\$846
9. Total Assistance Plus Admin Requested			\$172,446
10. Cash Match			\$50,000
11. In-Kind Match			\$0
12. Total Match			\$50,000
13. Total Budget			\$222,446

Click the 'Save' button to automatically calculate totals.

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No	Non Profit Docume...	10/31/2021
3) Other Attachment(s)	No	CASL Healthcare M...	11/03/2021
2) Other Attachment(s)	No	FY 21 Sarasota Bo...	10/31/2021

Attachment Details

Document Description: Non Profit Documentation

Attachment Details

Document Description: CASL Healthcare MOUs 2021

Attachment Details

Document Description: FY 21 Sarasota Bonus Match

7D. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance.

It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

Additional for Rental Assistance Projects:

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR part 578 or 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

B. For non-Rental Assistance Projects Only.

15-Year Operation Rule.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 15 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

1-Year Operation Rule.

Applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provide

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.

Name of Authorized Certifying Official: Julian Eller

Date: 11/03/2021

Title: CEO

Applicant Organization: Community Assisted and Supported Living, Inc. d/b/a Renaissance Manor

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant

X

Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

Active SAM Status Requirement. I certify that our organization has an active System for Award Management (SAM) registration as required by 2 CFR 200.300(b) at the time of project application submission to HUD and will ensure this SAM registration will be renewed annually to meet this requirement.

8B. Submission Summary

Applicant must click the submit button once all forms have a status of Complete.

Page	Last Updated
1A. SF-424 Application Type	No Input Required
New Project Application FY2021	Page 49
	11/08/2021

1B. SF-424 Legal Applicant	No Input Required
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	10/31/2021
1E. SF-424 Compliance	10/31/2021
1F. SF-424 Declaration	10/31/2021
1G. HUD 2880	10/31/2021
1H. HUD 50070	10/31/2021
1I. Cert. Lobbying	10/31/2021
1J. SF-LLL	10/31/2021
IK. SF-424B	10/31/2021
1L. SF-424D	10/31/2021
2A. Subrecipients	No Input Required
2B. Experience	10/31/2021
3A. Project Detail	10/31/2021
3B. Description	10/31/2021
3C. Expansion	10/31/2021
4A. Services	10/31/2021
4B. Housing Type	10/31/2021
5A. Households	10/31/2021
5B. Subpopulations	No Input Required
6A. Funding Request	10/31/2021
6E. Rental Assistance	11/01/2021
6I. Match	10/31/2021
6J. Summary Budget	No Input Required
7A. Attachment(s)	11/03/2021
7D. Certification	10/31/2021



Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

DR-14
R. 01/18

85-8012579193C-4	05/31/2019	05/31/2024	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

COMMUNITY ASSISTED AND SUPPORTED
LIVING INC
1401 16TH ST
SARASOTA FL 34236-2519

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



Important Information for Exempt Organizations

DR-14
R. 01/18

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (F.A.C.).
2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).
5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.
6. If you have questions about your exemption certificate, please call Taxpayer Services at 850-488-6800. The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.



Health Care with Heart

April 7, 2021

Sarasota County Property
Management Division, 1660 Ringling Blvd., Suite #240
Sarasota, FL 34236

Re: County-owned land ("Property") located at 2501 Dr. Martin Luther King Jr. Way,
Sarasota, Florida 34234.

J. Scott Eller, CEO
Community Assisted and Supported Living, Inc.
2911 Fruitville Road
Sarasota, FL 34237

Dear Scott:

As the CEO of CenterPlace Health, Inc., I am writing to support a collaboration to develop and expand affordable housing and primary care opportunities, especially for women with infants and children and any patient with health disparities. CenterPlace Health has developed cultural, linguistic, and clinical expertise that is increasingly important as the needs and health disparities in our local health care system continue to grow and change.

We recognize the importance of stable housing as the cornerstone toward ensuring individuals have a safe place to live and thrive. CenterPlace Health is the primary indigent healthcare provider in our community with an array of services that include primary children and adult care, OB, dental services, and behavioral health. This collaboration to responding to all the social determinants of health and could be seen as catalyst to a medical Home concept not seen in Sarasota County.

The target populations to be served by the proposed housing are indigent or working poor and often rely heavily on the health care services they can access through our organization for themselves and their families. For many, it is the only healthcare available to them outside of the emergency room. As a collaborative partner of this initiative, it is our commitment to CASL would include the following services:

- Primary medical care to all eligible residents for both children and adults
- Behavioral Health care to all eligible residents both adult and Children
- Dental care and preventative services on site for both adult and Children
- On site Pharmacy
- Access to lab and radiology services
- Same day access
- A sliding fee scale in ensure affordable services
- Partner with CASL on joint staff training opportunities, Community outreach and guiding homeless populations to see a way out.

1750 17th Street, Bldg. N
Sarasota, FL 34234
Phone: 941-529-0202
www.centerplacehealth.org

CenterPlace Health also has some unique requests as part of this opportunity to enhance our one stop primary care medical home. This would include the development of a community garden and community classroom. These would allow us the opportunity to provide chronic disease management classes that would include selection and preparation of fresh foods grown in the community garden.

With our mutual relationship, we will experience increased collaboration, improved efficiency, an integrated continuum of care, improved care management, and treatment of the whole patient. As partners in this project CenterPlace Health is requesting property to accommodate a 30,000 square foot medical facility to include adequate parking, a community garden and an outdoor classroom. We support our community partner's efforts to serve our most vulnerable population through its holistic approach with the ultimate goal of improving the overall health of our community.

Sincerely yours,

A handwritten signature in blue ink, appearing to read "Mel Parker", with a stylized flourish at the end.

Melissa Parker, CEO

**Memorandum of Understanding
Between
First Step of Sarasota, Inc.
AND
Community Assisted and Supported Living, Inc.**

This Memorandum of Understanding (MOU) is to establish a collaborative partnership between First Step of Sarasota, Inc. (FSOS) and Community Assisted and Supported Living, Inc. (CASL).

I. Purpose and Anticipated Results

The purpose of this agreement is to develop a shared understanding regarding the process between FSOS and CASL to assist individuals diagnosed with mental illness, substance use and co-occurring disorders in respects to securing permanent, supportive housing.

II. Responsibilities of Each Agency

A. FSOS will:

- Review all referrals received by CASL and communicate an outcome;
- Refer individuals meeting CASL's eligibility criteria for supportive housing;
- Obtain the necessary releases of information to effectively communicate with CASL on the status of those receiving services from both organizations, as needed;
- Partner with CASL to address any barriers to access to care before, during and following the referral process;
- Provide case management services to individuals residing in CASL's supportive housing, as appropriate
- Provide behavioral health services to CASL referrals within the scope of FSOS services guidelines.

B. CASL will:

- Review all referrals received by FSOS and communicate an outcome;
- Provide safe and stable housing for individuals experiencing homelessness as a result of chronic and disabling mental illness, including substance use and co-occurring disorders;
- Refer individuals in need of mental health, substance use and co-occurring disorders for treatment at FSOS, as appropriate;

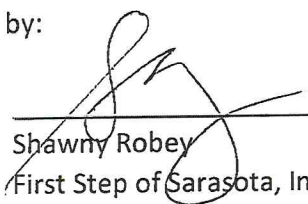
- Obtain the necessary releases of information to effectively communicate with FSOS on the status of those receiving services from both organizations, as needed;
- Partner with FSOS to address any barriers to access to care before, during and following the referral process.

III.

Duration and Modification of the Agreement

This agreement can be modified at any time by a written modification of this agreement that satisfies both parties. This agreement will be in effect when signed by both parties and shall remain in effect until terminated in writing by either party.


Agreed to by:



Shawn Robey
First Step of Sarasota, Inc.

9/28/21

Date



Scott Eller, CEO
Community Assisted and Supported Living

09/28/2021

Date

**Memorandum of Understanding
Between Centerstone of Florida, Inc.
and
Community Assisted and Supported Living, Inc.**

This **Memorandum of Understanding (MOU)** is to establish a collaborative partnership of support between Centerstone of Florida, Inc. (Centerstone) and Community Assisted and Supported Living, Inc. (CASL), further, to be known as the Key Partners.

WHEREAS, the sole purpose of this **Memorandum of Understanding** is to encourage cooperation between the Key Partners,

WHEREAS, Centerstone wishes to partner with CASL as a permanent supportive housing provider with respect to the housing and support needs of individuals with disabling conditions to include mental illness or co-occurring disorders and those experiencing homelessness, and

WHEREAS, Centerstone desires to collaborate with CASL because of their commitment to the behavioral health needs for individuals with disabling conditions to include mental illness or co-occurring disorders and those experiencing homelessness in Sarasota County, and

WHEREAS, The Key Partners recognize the extraordinary community value of linking behavioral health services and clean, safe, affordable housing to low-income individuals with disabilities, and

WHEREAS, the Key Partners understand that this collaboration which is unique and specialized; is critical to helping individuals with disabling conditions to include mental illness or co-occurring disorders and those experiencing homelessness receive community-based behavioral health and permanent supportive housing services information from Sarasota County Continuum of Care and

THEREFORE, the Key Partners agree that it is in the best interests of all concerned to enter this **Memorandum of Understanding**.

II. GUIDING PRINCIPLES

Key Partners to this **Memorandum of Understanding** jointly recognize that individuals with disabling conditions to include mental illness or co-occurring disorders and those experiencing homelessness are diverse in terms of their strengths, motivation, goals, backgrounds, and needs;

- Those individuals are members of the community with all the rights, privileges, opportunities accorded to the greater community;
- Those individuals have a right to privacy, and the right to determine for themselves matters affecting their lives;
- In designing and implementing services, the input of the individuals shall be sought.

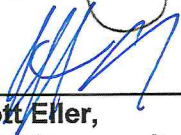
TERM

This MOU Agreement will begin effective the date of September 20, 2021 and will continue through September 30, 2025. This Agreement may be terminated in accordance with the section on Termination below.

- ## **IV. TERMINATION**
- Key Partners may terminate their participation with this Agreement for any reason by giving the other parties ninety (90) days prior written notice.

- V. **NONDISCRIMINATION.** There shall be no discrimination of any individual on account of race, color, creed, religion, sex, marital status, sexual orientation, age, handicap, ancestry or national origin in the administration of this program.
- VI. **AMENDMENTS.** This MOU may be amended only with the mutual consent of the Key Partners.
- VII. **CERTIFICATION OF AUTHORITY TO SIGN MOU.** The persons signing this MOU on behalf of the Key Partners hereto certify by said signatures that they are duly authorized to sign this document.

Signed:  Date: 9/21/21
Melissa Larkin-Skinner
CEO, Centerstone of Florida, Inc.

Signed:  Date: 09/21/2021
Scott Eller,
CEO, Community Assisted and Supported Living, Inc.



10/5/2021

Suncoast Partnership to End Homelessness

Re: 2021 Match

To Whom It May Concern,

Please accept this letter demonstrating the match and leverage to be provided by CASL for the CoC application. Please note that our organization's primary mission is to serve persons who have developmental disabilities, mental illness, or are battling substance abuse, often many of whom are homeless or chronically homeless.

Our list of leveraged and match funding is as follows:

CoC Rental Match	Match	Type
CASL Case Management	\$50,000	Agency Funded/CFBHN
TOTAL	\$50,000	

CASL will be using our agency's funds to provide the match for the requested rental assistance funding through the CoC. We will fund the case management costs related to the requested rental assistance. Additionally, CASL is bringing on board a Peer Specialist with lived experience, to support our chronically homeless clients.

By using these funds as match we will be able to provide additional access to client services, case management, and life skills.

Sincerely,

A handwritten signature in blue ink, appearing to read 'J. Scott Eller', is written over a light blue horizontal line.

J. Scott Eller
CEO
Community Assisted & Supported Living, Inc.

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2021 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition. For more information see FY 2021 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2021 CoC Program NOFO and the FY 2021 General Section NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- New projects may only be submitted as either Reallocated, Bonus Projects, Reallocated + Bonus or DV Bonus. These funding methods are determined in collaboration with local CoC and it is critical that applicants indicate the correct funding method. Project applicants must communicate with their CoC to make sure that the CoC submissions reflect the same funding method.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any new project that fails to adhere to (24 CFR part 578 and application requirements set forth in FY 2021 CoC Program Competition NOFO.

1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application: New Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 11/08/2021

4. Applicant Identifier:

a. Federal Entity Identifier:

5. Federal Award Identifier:

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: Catholic Charities, Diocese of Venice, Inc.

b. Employer/Taxpayer Identification Number (EIN/TIN): 59-2473176

	c. Organizational DUNS:	877686501	PLUS 4:	
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d. Address

Street 1: 1000 Pinebrook Road

Street 2:

City: Venice

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34285-6426

e. Organizational Unit (optional)

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Ms.

First Name: Sandi

Middle Name: Lynn

Last Name: Rowland

Suffix:

Title: Director of Grants

Organizational Affiliation: Sandi Lynn Rowland

Telephone Number: (941) 222-1910

Applicant: Catholic Charities, Diocese of Venice, Inc.

877686501

Project: Domestic Violence Bonus Funding

191536

Extension:

Fax Number: (941) 441-1150

Email: sandi.rowland@catholiccharitiesdov.org

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6500-N-25

Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): Florida
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: Domestic Violence Bonus Funding

16. Congressional District(s):

16a. Applicant: FL-016, FL-017

16b. Project: FL-016, FL-017
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 02/01/2022

b. End Date: 01/31/2023

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

I AGREE:

21. Authorized Representative

Prefix: Mr.

First Name: Eduardo

Middle Name:

Last Name: Gloria

Suffix:

Title: CEO

Telephone Number: (941) 484-9543
(Format: 123-456-7890)

Fax Number: (941) 441-1150
(Format: 123-456-7890)

Email: eduardo.gloria@catholiccharitiesdov.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

1G. HUD 2880

**Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2506-0214 (exp.02/28/2022)**

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Catholic Charities, Diocese of Venice, Inc.

Prefix: Mr.

First Name: Eduardo

Middle Name:

Last Name: Gloria

Suffix:

Title: CEO

Organizational Affiliation: Eduardo Gloria

Telephone Number: (941) 484-9543

Extension:

Email: eduardo.gloria@catholiccharitiesdov.org

City: Venice

County: Sarasota

State: Florida

Country: United States

Zip/Postal Code: 34285-6426

2. Employer ID Number (EIN): 59-2473176

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received

4a. Total Amount Requested for this project: \$517,338.00

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, City and State) of the project or activity.

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
 (For further information, see 24 CFR Sec. 4.3).

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. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
HUD - 451 7th St. SW, Washington D.C. 20410	grant	\$171,430.00	PSH
HUD - 451 7th St. SW, Washington D.C. 20410	grant	\$517,338.00	RRH
HUD - 451 7th St. SW, Washington D.C. 20410	grant	\$83,275.00	TH/RRH
NA			
NA			

Note: If additional sources of Government Assistance, please use the "Other Attachments" screen of the project applicant profile.

Part III Interested Parties

You must disclose:

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).

Table with 5 columns: Alphabetical list of all persons with a reportable financial interest in the project or activity, Social Security No. or Employee ID No., Type of Participation, Financial Interest in Project/Activity (\$), and Financial Interest in Project/Activity (%). All rows contain 'NA'.

Note: If there are no other people included, write NA in the boxes.

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

I AGREE: [X]

Name / Title of Authorized Official: Eduardo Gloria, CEO

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Catholic Charities, Diocese of Venice, Inc.

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
<p>a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.</p>	<p>e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;</p>
<p>b. Establishing an on-going drug-free awareness program to inform employees --- (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.</p>	<p>f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted --- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;</p>
<p>c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;</p>	<p>g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.</p>
<p>d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;</p>	

2. Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)
 Workplaces, including addresses, entered in the attached project application.
 Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying X

documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.



WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Authorized Representative

Prefix: Mr.

First Name: Eduardo

Middle Name

Last Name: Gloria

Suffix:

Title: CEO

Telephone Number: (941) 484-9543
(Format: 123-456-7890)

Fax Number: (941) 441-1150
(Format: 123-456-7890)

Email: eduardo.gloria@catholiccharitiesdov.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person 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 this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person 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 this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file

the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: Catholic Charities, Diocese of Venice, Inc.

Name / Title of Authorized Official: Eduardo Gloria, CEO

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.

Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. 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."

Answer "No" if your organization is NOT engaged in lobbying.

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? No

Legal Name: Catholic Charities, Diocese of Venice, Inc.

Street 1: 1000 Pinebrook Road

Street 2:

City: Venice

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34285-6426

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

X

Authorized Representative

Prefix: Mr.

First Name: Eduardo

Middle Name:

Last Name: Gloria

Suffix:

Title: CEO

Telephone Number: (941) 484-9543
(Format: 123-456-7890)

Fax Number: (941) 441-1150
(Format: 123-456-7890)

Email: eduardo.gloria@catholiccharitiesdov.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

IK. SF-424B

(SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007
Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|----|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |

- | | |
|-----|--|
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |
| 9. | Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements. |
| 10. | Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more. |
| 11. | Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205). |
| 12. | Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system. |
| 13. | Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.). |
| 14. | Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance. |
| 15. | Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance. |
| 16. | Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures. |
| 17. | Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations." |
| 18. | Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program. |
| 19. | Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award. |

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: Catholic Charities, Diocese of Venice, Inc.

Prefix: Mr.

First Name: Eduardo

Middle Name:

Last Name: Gloria

Suffix:

Title: CEO

Signature of Authorized Certifying Official: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

1L. SF-424D

Are you requesting CoC Program funds for construction costs in this application? No

No SF-424D is required. Select "Save and Next" to move to the next screen.

2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards:

Organization	Type	Sub-Award Amount
This list contains no items		

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

1. Describe your organization’s (and subrecipient(s) if applicable) experience in effectively utilizing federal funds and performing the activities proposed in the application.

CCDOV has a proven track record in developing and managing housing programs that prevent homelessness and provide long term housing solutions for vulnerable populations. Catholic Charities’ executive leadership and program staff bring a breadth of experience in program management to ensure the effective and efficient use of grant funds. With an agency budget of approximately \$10 million annually, Catholic Charities Diocese of Venice maintains a diversified fundraising strategy. With multiple revenue streams, the agency’s largest sources of funding include contributions from individuals; Diocesan subsidy; fundraising events; United Way and other non-governmental grants; and federal, state, and local government grants. The agency has significantly increased grant revenue over the last two years as a proportion of total revenue. In fiscal year 2019-2020 CCDOV effectively managed an agency budget that consisted of 24.8% in grant funding. CCDOV’s executive team has substantial experience overseeing and ensuring compliance for well-known federal grant programs such as ESG; HUD SHP; HUD TH-RHH; HUD RRH; HUD VASH; SAMHSA TCEHIV; DOJ-OJP; HRSA 330H (for federally qualified health care facilities serving homeless); HOPWA; and VA grant per diem funding providing transitional housing for veterans. The agency was recently awarded \$879,237 from Lee County to implement a Rapid Rehousing Program with ESG-CV funding and has a pending \$1.2 million grant with Suncoast for Rapid Rehousing.

Chief Executive Officer, Eduardo Gloria, MPA has over 20 years of human services experience. At Catholic Charities, Mr. Gloria is responsible for overseeing key business operations; development of a \$10M annual operating budget; development of policies and procedures; employee and program performance assessments; public fund development; and the agency’s housing strategy for 10 counties in Southwest Florida. Prior to his current position, he served as Chief Operating Officer at the Alpha-1 Foundation and Camillus House in Miami where he managed multiple supported housing and care delivery systems employing 160+ staff and providing direct services to over 15,000 persons each year. His portfolio included Low Income Housing Tax Credit (LIHTC) and Community Development Block Grant (CDBG) funded housing (1,500+ persons each night); congregate meal and pantry services; and primary health care for the poor.

2. Describe your organization’s (and subrecipient(s) if applicable) experience in leveraging Federal, State, local and private sector funds.

Catholic Charities has extensive experience in leveraging Federal, State, Local and Private Sector Funds for housing projects. In Sarasota, Catholic Charities leveraged a total of \$1.2 million to develop Casa San Jose, housing for people

with HIV/AIDS in partnership with the Suncoast Continuum of Care.

3. Describe your organization's (and subrecipient(s) if applicable) financial management structure.

CCDOV's financial management is led by a Director of Finance who reports to the CEO. CCDOV maintains a system of procedures and cross referencing to minimize the likelihood of misappropriation of funds and maximize the ability to detect it. A complete and independent audit of all financial records is performed annually and is reviewed by the agency's Governing Board.

4. Are there any unresolved HUD monitoring or OIG audit findings for any HUD grants (including ESG) under your organization? No

3A. Project Detail

1. CoC Number and Name: FL-500 - Sarasota, Bradenton/Manatee, Sarasota Counties CoC

2. CoC Collaborative Applicant Name: Suncoast Partnership to End Homelessness, Inc.

3. Project Name: Domestic Violence Bonus Funding

4. Project Status: Standard

5. Component Type: Joint TH & PH-RRH

6. Is your organization, or subrecipient, a victim service provider defined in 24 CFR 578.3? No

7. Is this new project application requesting to transition from eligible renewal project(s) that was awarded to the same recipient and fully eliminated through reallocation in this CoC Program Competition? (Attachment Requirement) No

8. Will funds requested in this new project application replace state or local government funds (24 CFR 578.87(a))? No

9. Will this project include replacement reserves in the Operating budget? No

3B. Project Description

1. Provide a description that addresses the entire scope of the proposed project.

Catholic Charities Diocese of Venice (CCDOV) will provide victim-center Rapid Rehousing (RRH) to assist victims of domestic violence locate and secure permanent housing in Sarasota and Manatee counties. In addition to housing, the program will offer clients intensive case management including; free mental health counseling, SOAR screening for SSI and SSDI eligibility, referral to employment and training opportunities, and connection to low cost medical care. These interventions address many of the barriers faced by victims of domestic violence as they seek to gain financial independence and rebuild their lives. CCDOV is collaborating with Safe Place and Rape Crisis Center (SPARCC) in Sarasota and HOPE Family Services (HOPE) in Manatee counties and will receive referrals from these agencies for domestic violence victims transitioning out of emergency shelter. Over the course of one year, it is anticipated that approximately 40 households (approximately 95 individuals) will receive housing for approximately 12 months in one bedroom, 2 bedroom and 3 bedroom housing units. Total project costs are \$646,672 including \$517,338 requested from Suncoast Coc and \$129,334 provided as a combination an in-kind and cash match by CCDOV.

Rental and Move-in Assistance: A key component to CCDOV’s housing first approach is tailored rental assistance. CCDOV understands that one of the primary barriers to securing housing is limited finances. Rental assistance that provides incoming or outgoing clients the means to quickly access housing will be provided through the proposed program. Rental assistance can include help with application fees, security deposits, utility deposits, and other needs. As each household’s financial status changes, the amount of housing subsidy will be adjusted based on the client’s ability to cover some or all of their rental costs.

2. For each primary project location, or structure, enter the number of days from the execution of the grant agreement that each of the following milestones will occur if this project is selected for conditional award.

Project Milestones	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement
	A	B	C	D
Begin hiring staff or expending funds	45			
Begin program participant enrollment	45			
Program participants occupy leased or rental assistance units or structure(s), or supportive services begin	60			
Leased or rental assistance units or structure, and supportive services near 100% capacity	120			

Closing on purchase of land, structure(s), or execution of structure lease				
Start rehabilitation				
Complete rehabilitation				
Start new construction				
Complete new construction				

3. Check the appropriate box(s) if this project will have a specific subpopulation focus.

(Select ALL that apply)

N/A - Project Serves All Subpopulations	<input type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Chronic Homeless	<input type="checkbox"/>
		Other (Click 'Save' to update)	<input type="checkbox"/>

4. Will your project participate in the CoC's Coordinated Entry (CE) process or recipient organization is a victim service provider, as defined in 24 CFR 578.3 and uses an alternate CE process that meets HUD's minimum requirements? Yes

5. Housing First

5a. Will the project quickly move participants into permanent housing? Yes

5b. Will the project enroll program participants who have the following barriers? Select all that apply.

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

5c. Will the project prevent program participant termination for the following reasons? Select all that apply.

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

5d. Will the project follow a "Housing First" approach? Yes
(Click 'Save' to update)

6 Will program participants be required to live in a specific structure, unit, or locality at any time while in the program? No

7. Will more than 16 persons live in a single structure? No

3C. Project Expansion Information

1. Is this a “Project Expansion” of an eligible renewal project? No

4A. Supportive Services for Participants

1. Describe how program participants will be assisted to obtain and remain in permanent housing.

The Project Director will locate new rental properties that meet the program requirements by fostering partnerships with landlords, property management companies, realtors, and publicly subsidized housing properties. The Project Director will educate owners and property managers on the RRH model and explain the benefits of having a third-party for rental stability, financial stability and to troubleshoot any issues that may arise. Once housing is secured, participants will complete a Rental Assistance Agreement detailing move in date, security deposit, furniture assistance, the total rent due each month, the portion to be paid by Catholic Charities, and the participant's portion. Participant rent will not exceed 30% of gross monthly income. Clients work with case managers to set goals and determine the right approach to ensure success in advancing to permanent housing. All plans are reviewed monthly with the client to determine ongoing need and progress towards meeting defined goals.

2. Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible.

Families and individuals will receive a package of assistance tailored to meet individual needs and wants which work to:

- Establish participants strengths for a strengths-based housing-first approach
- Client-centered exit plan for self-sufficiency.
- Linkage to enhanced income opportunities via SOAR trained case managers to help apply for SSD/SSDI benefits
- Links to employment training and location services.
- Childcare, transportation other needed services.
- Medical services, through warm hand offs to low cost/sliding fee scale federally qualified health centers such as Centerplace Health
- Behavioral Health Services through CCDOV's licensed mental health providers or other appropriate community services.
- Offer individual and group skill classes which may include topics such as tenant responsibilities, budgeting, parenting, nutrition, financial counseling with the goal of having tenant councils for case workers collaborate with clients and landlords to problem-solve issues that may jeopardize stability.

3. For all supportive services available to program participants, indicate who will provide them and how often they will be provided.

Click 'Save' to update.

Supportive Services	Provider	Frequency
Assessment of Service Needs	Applicant	As needed
Assistance with Moving Costs	Applicant	As needed
Case Management	Applicant	As needed
Child Care	Non-Partner	As needed
Education Services	Non-Partner	As needed
Employment Assistance and Job Training	Partner	As needed
Food	Applicant	As needed
Housing Search and Counseling Services	Applicant	As needed
Legal Services	Partner	As needed
Life Skills Training	Partner	As needed
Mental Health Services	Applicant	As needed
Outpatient Health Services	Partner	As needed
Outreach Services	Non-Partner	As needed
Substance Abuse Treatment Services	Partner	As needed
Transportation	Non-Partner	As needed
Utility Deposits	Applicant	Annually

Identify whether the project will include the following activities:



4. Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs? No

5. Annual follow-ups with program participants to ensure mainstream benefits are received and renewed? No

6. Will program participants have access to SSI/SSDI technical assistance provided by this project the applicant, a subrecipient, or partner agency? Yes

6a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months. Yes

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the  icon. To view or update a housing site already listed, select the  icon.

List all CoC-funded and Non CoC-funded units and beds for this project

	TH	RRH	Total
Total Units:	0	29	29
Total Beds:	0	81	81
Housing Type	Housing Type (JOINT)	Units	Beds
---	Scattered-site ap...	29	81

4B. Housing Type and Location Detail

The applicant has selected "JOINT TH & PH-RRH" as their component type and must list all CoC funded and Non CoC-funded units and beds being provided under this project.

1. Is this housing type and location for the TH RRH
portion or the RRH portion of the project?

2. Housing Type: Scattered-site apartments (including efficiencies)

3. What is the funding source for these units CoC
and beds?
(If multiple sources, select "Mixed" from the
dropdown menu)

4. Indicate the maximum number of units and beds available for program
participants at the selected housing site.

2a. Units: 29

2b. Beds: 81

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.

Street 1: 5055 N. Tamiami Trail

Street 2:

City: Sarasota

State: Florida

ZIP Code: 34234

6. Select the geographic area(s) associated with the address. For new
projects, select the area(s) expected to be covered.

(for multiple selections hold CTRL key)

122766 Sarasota

5A. Project Participants - Households

Households Table

	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Number of Households	29	0	0	29
Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Persons over age 24	27	0	0	27
Persons ages 18-24	2	0	0	2
Accompanied Children under age 18	52	0	0	52
Unaccompanied Children under age 18	0	0	0	0
Total Persons	81	0	0	81

Click Save to automatically calculate totals

5B. Project Participants - Subpopulations

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24							27			
Persons ages 18-24							2			
Children under age 18							52			
Total Persons	0	0	0	0	0	0	81	0	0	0

Click Save to automatically calculate totals

Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans- (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24										
Persons ages 18-24										
Total Persons	0	0	0	0	0	0	0	0	0	0

Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Accompanied Children under age 18										
Unaccompanied Children under age 18										
Total Persons	0				0	0	0	0	0	0

6A. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 15, 2023? Yes

1a. DV Bonus Only: This project can realistically be under grant agreement by September 15, 2022.

2. What type of CoC funding is this project applying for in this CoC Program Competition? DV Bonus

Only RRH, SSO and JOINT component types can apply for this funding

3. Does this project propose to allocate funds according to an indirect cost rate? No

4. Select a grant term: 1 Year

* 5. Select the costs for which funding is requested:

Leased Units	<input type="checkbox"/>
Leased Structures	<input type="checkbox"/>
Rental Assistance	<input checked="" type="checkbox"/>
Supportive Services	<input checked="" type="checkbox"/>
Operating	<input type="checkbox"/>
HMIS	<input type="checkbox"/>

6. If conditionally awarded, is this project requesting an initial grant term greater than 12 months? (13 to 18 months) No

6E. Rental Assistance Budget

The following list summarizes the rental assistance funding request for the total term of the project. To add information to the list, select the icon. To view or update information already listed, select the icon.

Total Request for Grant Term:			\$406,344
Total Units:			29
Type of Rental Assistance	FMR Area	Total Units Requested	Total Request
TRA	FL - North Port-Sarasota-Bradenton, F...	29	\$406,344

Rental Assistance Budget Detail

Instructions:

Type of Rental Assistance: Select the applicable type of rental assistance from the dropdown menu. Options include tenant-based (TRA), sponsor-based (SRA), and project-based assistance (PRA). Each type has unique requirements and applicants should refer to the 24 CFR 578.51 before making a selection.

Metropolitan or non-metropolitan fair market rent area: This is a required field. Select the FY 2016 FMR area in which the project is located. The list is sorted by state abbreviation. The selected FMR area will be used to populate the rents in the chart below.

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.

of units: This is a required field. For each unit size, enter the number of units for which funding is being requested.

FMR: These fields are populated with the FY 2016 FMR amounts based on the FMR area selected by the applicant. The FMRs are available online at <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 based on the number of units multiplied by the corresponding FMR and by 12 months.

Total Units and Annual Assistance Requested: The fields in this row are automatically calculated based on the total number of units and the sum of the total requests per unit size per year.

Grant Term: This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

Total Request for Grant Term: This field is automatically calculated based on the total annual assistance requested multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

Type of Rental Assistance: TRA

The RRH component of a Joint TH-RRH project can only use TRA. The TH component of a Joint TH-RRH project part of the component can only use PRA and SRA or the Leased Units budget.

Metropolitan or non-metropolitan fair market rent area: FL - North Port-Sarasota-Bradenton, FL MSA (1208199999)

Size of Units	# of Units (Applicant)	FMR Area (Applicant)	12 Months	Total Request (Applicant)
---------------	------------------------	----------------------	-----------	---------------------------

SRO		x	\$631	x	12	=	\$0
0 Bedroom		x	\$841	x	12	=	\$0
1 Bedroom	11	x	\$992	x	12	=	\$130,944
2 Bedrooms	18	x	\$1,275	x	12	=	\$275,400
3 Bedrooms		x	\$1,686	x	12	=	\$0
4 Bedrooms		x	\$2,030	x	12	=	\$0
5 Bedrooms		x	\$2,335	x	12	=	\$0
6 Bedrooms		x	\$2,639	x	12	=	\$0
7 Bedrooms		x	\$2,944	x	12	=	\$0
8 Bedrooms		x	\$3,248	x	12	=	\$0
9 Bedrooms		x	\$3,553	x	12	=	\$0
Total Units and Annual Assistance Requested	29						\$406,344
Grant Term							1 Year
Total Request for Grant Term							\$406,344

Click the 'Save' button to automatically calculate totals.



6F. Supportive Services Budget

A quantity AND description must be entered for each requested cost.

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs		
2. Assistance with Moving Costs		
3. Case Management	2 fulltime case managers	\$110,400
4. Child Care		
5. Education Services		
6. Employment Assistance		
7. Food		
8. Housing/Counseling Services		
9. Legal Services		
10. Life Skills		
11. Mental Health Services		
12. Outpatient Health Services		
13. Outreach Services		
14. Substance Abuse Treatment Services		
15. Transportation		
16. Utility Deposits		
17. Operating Costs		
Total Annual Assistance Requested		\$110,400
Grant Term		1 Year
Total Request for Grant Term		\$110,400

Click the 'Save' button to automatically calculate totals.

6I. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the  icon. To view or update a Match source already listed, select the  icon.

Summary for Match

Total Amount of Cash Commitments:	\$27,432
Total Amount of In-Kind Commitments:	\$101,903
Total Amount of All Commitments:	\$129,335

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Type	Source	Name of Source	Amount of Commitments
In-Kind	Private	Catholic Charitie...	\$101,903
Cash	Private	Catholic Charitie...	\$27,432

Sources of Match Detail

1. Type of Match commitment: In-Kind

2. Source: Private

3. Name of Source: Catholic Charities Diocese of Venice

(Be as specific as possible and include the office or grant program as applicable)

4. Amount of Written Commitment: \$101,903

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Sources of Match Detail

1. Type of Match commitment: Cash

2. Source: Private

3. Name of Source: Catholic Charities Diocese of Venice

(Be as specific as possible and include the office or grant program as applicable)

4. Amount of Written Commitment: \$27,432

6J. Summary Budget

The following information summarizes the funding request for the total term of the project. However, administrative costs can be entered in 8. Admin field below.

Eligible Costs	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Total Assistance Requested for Grant Term (Applicant)
1a. Acquisition			\$0
1b. Rehabilitation			\$0
1c. New Construction			\$0
2a. Leased Units	\$0	1 Year	\$0
2b. Leased Structures	\$0	1 Year	\$0
3. Rental Assistance	\$406,344	1 Year	\$406,344
4. Supportive Services	\$110,400	1 Year	\$110,400
5. Operating	\$0	1 Year	\$0
6. HMIS	\$0	1 Year	\$0
7. Sub-total Costs Requested			\$516,744
8. Admin (Up to 10%)			\$594
9. Total Assistance Plus Admin Requested			\$517,338
10. Cash Match			\$27,432
11. In-Kind Match			\$101,903
12. Total Match			\$129,335
13. Total Budget			\$646,673

Click the 'Save' button to automatically calculate totals.

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No		
2) Other Attachment(s)	No	MOU with D.V. Pro...	11/05/2021
3) Other Attachment(s)	No	Match Commitment	11/08/2021

Attachment Details

Document Description:

Attachment Details

Document Description: MOU with D.V. Providers

Attachment Details

Document Description: Match Commitment

7A. In-Kind MOU Attachment

Document Type	Required?	Document Description	Date Attached
In-Kind Match MOU	No	In kind match com...	11/08/2021

Attachment Details

Document Description: In kind match commitment

7D. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance.

It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

Additional for Rental Assistance Projects:

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR part 578 or 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

B. For non-Rental Assistance Projects Only.

15-Year Operation Rule.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 15 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

1-Year Operation Rule.

Applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provide

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.

Name of Authorized Certifying Official: Eduardo Gloria

Date: 11/08/2021

Title: CEO

Applicant Organization: Catholic Charities, Diocese of Venice, Inc.

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent

X

statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

Active SAM Status Requirement. I certify that our organization has an active System for Award Management (SAM) registration as required by 2 CFR 200.300(b) at the time of project application submission to HUD and will ensure this SAM registration will be renewed annually to meet this requirement.

8B. Submission Summary

Applicant must click the submit button once all forms have a status of Complete.

Applicant must click the submit button once all forms have a status of Complete.

Page	Last Updated
1A. SF-424 Application Type	No Input Required
1B. SF-424 Legal Applicant	No Input Required
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	11/04/2021
1E. SF-424 Compliance	11/03/2021
1F. SF-424 Declaration	11/03/2021
1G. HUD 2880	11/05/2021
1H. HUD 50070	11/03/2021
1I. Cert. Lobbying	11/03/2021
1J. SF-LLL	11/03/2021
IK. SF-424B	11/03/2021
1L. SF-424D	11/03/2021
2A. Subrecipients	No Input Required
2B. Experience	11/04/2021
3A. Project Detail	11/04/2021
3B. Description	11/04/2021
3C. Expansion	11/03/2021
4A. Services	11/04/2021
4B. Housing Type	11/05/2021
5A. Households	11/05/2021
5B. Subpopulations	No Input Required
6A. Funding Request	11/05/2021
6E. Rental Assistance	11/05/2021
6F. Supp Srvcs Budget	11/08/2021
6I. Match	11/08/2021
6J. Summary Budget	No Input Required
7A. Attachment(s)	11/05/2021

7A. In-Kind MOU Attachment	11/08/2021
7D. Certification	11/05/2021

MEMORANDUM OF UNDERSTANDING

Between

CATHOLIC CHARITIES DIOCESE OF VENICE, Inc. (CCDOV)

And

HOPE FAMILY SERVICES AND SAFE PLACE (HOPE)

SAFE PLACE AND RAPE CRISIS CENTER (SPARCC)

This document serves as an agreement for professional services and collaboration between Catholic Charities Diocese of Venice (CCDOV), HOPE Family Services and Safe Place (HOPE) the certified domestic violence center for Manatee County, and Safe Place and Rape Crisis Center (SPARCC) the certified domestic violence center for Sarasota County. HOPE and SPARCC will refer domestic violence victims receiving emergency shelter in their respective counties to Catholic Charities for placement in the Rapid Rehousing Program. This collaboration is dependent on CCDOV receiving funding from the Suncoast partnership, Continuum of Care Domestic Violence Bonus Funding for a Rapid Rehousing Program in Manatee and Sarasota counties.

Specific activities and responsibilities of each party are described below.


Certified Domestic Violence Centers – HOPE Family Services (HOPE) & Safe Place and Rape Crisis Center (SPARCC) Roles, Responsibilities and Goals:

- HOPE and SPARCC will provide support and referral services to people fleeing domestic violence, dating violence, sexual assault, or stalking as defined in 24 CF 578.3 and/or victims of human trafficking, and their children. HOPE and SPARCC will offer a range of direct services to the survivor and the children including options such as crisis intervention, safety planning, emergency shelter, counseling, advocacy including with the partners to this agreement and other types of services as available and determined by the survivor.
- Refer people fleeing domestic violence, dating violence, sexual assault, or stalking as defined in 24 CF 578.3 and/or victims of human trafficking to CCDOV for medium and long term housing.
- Provide continued safety planning and supportive services to individuals referred into the RRH project.
- Maintain programs and services that demonstrate trauma-informed, victim-centered approach.
- Consult and review project protocols to ensure the project maintains a trauma-informed, victim-centered approach.
- HOPE and SPARCC will coordinate with case managers and other staff to share information regarding survivors of domestic violence as permitted by and in compliance with Florida confidentiality and privilege laws as outlined in Florida Statutes sections 39.908; 90.5035 and 90.5036, and the Federal Violence Against Women Act of 2005.

Catholic Charities Diocese of Venice Roles, Responsibilities and Goals:

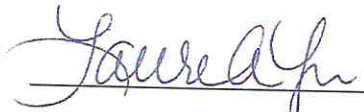
1. Consult with HOPE and SPARCC to develop protocols that demonstrate trauma-informed, victim-centered approach.
2. Accept referrals for medium and long term housing directly from HOPE and SPARCC.
3. Create and maintain a medium and long term housing wait list for referred qualified applicant who have a referral from HOPE and SPARCC.
4. Refer people fleeing domestic violence, dating violence, sexual assault, or stalking as defined in 24 CF 578.3 and/or victims of human trafficking to HOPE for services in Manatee County and to SPARCC for services in Sarasota and DeSoto Counties for services that fall outside of housing case management.

There is no limit on the number of referrals to be made but continued acceptance of referrals from HOPE and SPARCC to CCDOV for domestic violence client housing is dependent on funds available. This agreement will be in force for a period of one year unless either party chooses to terminate the agreement before said date.




Jessica Hays, President and CEO Safe Place and Rape
Crisis Center

9/30/21
Date



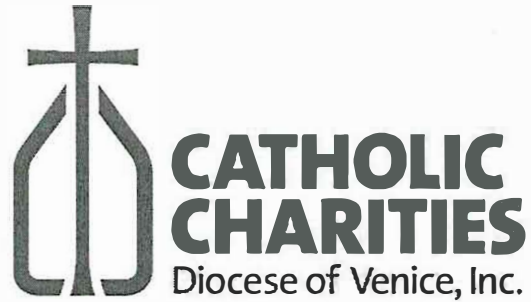
Laurel Lynch, CEO HOPE Family Services

1 Oct 2021
Date



Eduardo Gloria, Interim CEO, Catholic Charities Diocese of Venice, Inc.

10/21/2021
Date



Mr. Chris Johnson
Suncoast Partnership to End Homelessness
1750 17th St. C-1
Sarasota, FL 34234

Ref: Domestic Violence RRH/TH Bonus Funding

Dear Mr. Johnson;

Through this letter I would like to confirm the 25% match commitment that will be provided by Catholic Charities Diocese of Venice Inc. regarding the above referenced grant opportunity. Our agency has committed to provide a combination in-kind and cash match of at least \$129,335 for the proposed project, which we will comply with. Thank you and please reach out to me if I may be of further assistance or if there are any questions or concerns:
eduardo.gloria@catholiccharitiesdov.org or 941-486-4700.

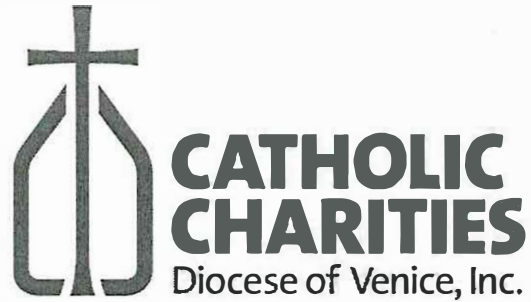
Sincerely,

A handwritten signature in blue ink, appearing to read "Eduardo Gloria", is written over a horizontal line.

Eduardo Gloria, Interim CEO

A handwritten date "11/5/2021" in blue ink is written over a horizontal line.

Date



Mr. Chris Johnson
Suncoast Partnership to End Homelessness
1750 17th St. C-1
Sarasota, FL 34234

Ref: Domestic Violence RRH/TH Bonus Funding

Dear Mr. Johnson;

Through this letter I would like to confirm the 25% match commitment that will be provided by Catholic Charities Diocese of Venice Inc. regarding the above referenced grant opportunity. Our agency has committed to provide an in-kind match of at least \$101,903 for the proposed project, which we will comply with. Thank you and please reach out to me if I may be of further assistance or if there are any questions or concerns: eduardo.gloria@catholiccharitiesdov.org or 941-486-4700.

Sincerely,

A handwritten signature in blue ink, appearing to read "Eduardo Gloria", is written over a horizontal line.

Eduardo Gloria, Interim CEO

A handwritten date "11/5/2021" in blue ink is written over a horizontal line.

Date

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2021 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition. For more information see FY 2021 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2021 CoC Program NOFO and the FY 2021 General Section NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- New projects may only be submitted as either Reallocated, Bonus Projects, Reallocated + Bonus or DV Bonus. These funding methods are determined in collaboration with local CoC and it is critical that applicants indicate the correct funding method. Project applicants must communicate with their CoC to make sure that the CoC submissions reflect the same funding method.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any new project that fails to adhere to (24 CFR part 578 and application requirements set forth in FY 2021 CoC Program Competition NOFO.

1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application: New Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 11/08/2021

4. Applicant Identifier:

a. Federal Entity Identifier:

5. Federal Award Identifier:

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: Catholic Charities, Diocese of Venice, Inc.

b. Employer/Taxpayer Identification Number (EIN/TIN): 59-2473176

	c. Organizational DUNS:	877686501	PLUS 4:	
--	--------------------------------	-----------	----------------	--

d. Address

Street 1: 1000 Pinebrook Road

Street 2:

City: Venice

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34285-6426

e. Organizational Unit (optional)

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Ms.

First Name: Sandi

Middle Name: Lynn

Last Name: Rowland

Suffix:

Title: Director of Grants

Organizational Affiliation: Sandi Lynn Rowland

Telephone Number: (941) 222-1910

Applicant: Catholic Charities, Diocese of Venice, Inc.

877686501

Project: Permanent Supportive Housing

191537

Extension:

Fax Number: (941) 441-1150

Email: sandi.rowland@catholiccharitiesdov.org

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6500-N-25

Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): Florida
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: Permanent Supportive Housing

16. Congressional District(s):

16a. Applicant: FL-016, FL-017

16b. Project: FL-016, FL-017
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 02/01/2022

b. End Date: 01/31/2023

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

I AGREE:

21. Authorized Representative

Prefix: Mr.

First Name: Eduardo

Middle Name:

Last Name: Gloria

Suffix:

Title: CEO

Telephone Number: (941) 484-9543
(Format: 123-456-7890)

Fax Number: (941) 441-1150
(Format: 123-456-7890)

Email: eduardo.gloria@catholiccharitiesdov.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2506-0214 (exp.02/28/2022)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Catholic Charities, Diocese of Venice, Inc.

Prefix: Mr.

First Name: Eduardo

Middle Name:

Last Name: Gloria

Suffix:

Title: CEO

Organizational Affiliation: Eduardo Gloria

Telephone Number: (941) 484-9543

Extension:

Email: eduardo.gloria@catholiccharitiesdov.org

City: Venice

County: Sarasota

State: Florida

Country: United States

Zip/Postal Code: 34285-6426

2. Employer ID Number (EIN): 59-2473176

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received

4a. Total Amount Requested for this project: \$171,430.00

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, City and State) of the project or activity.

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
 (For further information, see 24 CFR Sec. 4.3).

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. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
HUD - 451 7th St. SW, Washington D.C. 20410	grant	\$171,430.00	PSH
HUD - 451 7th St. SW, Washington D.C. 20410	grant	\$517,338.00	RRH
HUD - 451 7th St. SW, Washington D.C. 20410	grant	\$83,275.00	TH/RRH
NA			
NA			

Note: If additional sources of Government Assistance, please use the "Other Attachments" screen of the project applicant profile.

Part III Interested Parties

You must disclose:

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).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation	Financial Interest in Project/Activity (\$)	Financial Interest in Project/Activity (%)
NA		NA	\$0.00	0%
NA				
NA				
NA				
NA				

Note: If there are no other people included, write NA in the boxes.

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

I AGREE:

Name / Title of Authorized Official: Eduardo Gloria, CEO

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Catholic Charities, Diocese of Venice, Inc.

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.	e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
b. Establishing an on-going drug-free awareness program to inform employees --- (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted --- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;	g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.
d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;	

2. Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)
 Workplaces, including addresses, entered in the attached project application.
 Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying X

documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.



WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Authorized Representative

Prefix: Mr.

First Name: Eduardo

Middle Name

Last Name: Gloria

Suffix:

Title: CEO

Telephone Number: (941) 484-9543
(Format: 123-456-7890)

Fax Number: (941) 441-1150
(Format: 123-456-7890)

Email: eduardo.gloria@catholiccharitiesdov.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person 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 this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person 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 this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file

the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: Catholic Charities, Diocese of Venice, Inc.

Name / Title of Authorized Official: Eduardo Gloria, CEO

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.

Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. 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."

Answer "No" if your organization is NOT engaged in lobbying.

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? No

Legal Name: Catholic Charities, Diocese of Venice, Inc.

Street 1: 1000 Pinebrook Road

Street 2:

City: Venice

County: Sarasota

State: Florida

Country: United States

Zip / Postal Code: 34285-6426

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

X

Authorized Representative

Prefix: Mr.

First Name: Eduardo

Middle Name:

Last Name: Gloria

Suffix:

Title: CEO

Telephone Number: (941) 484-9543
(Format: 123-456-7890)

Fax Number: (941) 441-1150
(Format: 123-456-7890)

Email: eduardo.gloria@catholiccharitiesdov.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 11/08/2021

IK. SF-424B

(SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007
Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|----|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |

- | | |
|-----|--|
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |
| 9. | Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements. |
| 10. | Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more. |
| 11. | Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205). |
| 12. | Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system. |
| 13. | Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.). |
| 14. | Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance. |
| 15. | Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance. |
| 16. | Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures. |
| 17. | Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations." |
| 18. | Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program. |
| 19. | Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award. |

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: Catholic Charities, Diocese of Venice, Inc.

Prefix: Mr.

First Name: Eduardo

Middle Name:

Last Name: Gloria

Suffix:

Title: CEO

Signature of Authorized Certifying Official: Considered signed upon submission in e-snaps.



Date Signed: 11/08/2021

1L. SF-424D

Are you requesting CoC Program funds for construction costs in this application? No

No SF-424D is required. Select "Save and Next" to move to the next screen.

2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards:

Organization	Type	Sub-Award Amount
This list contains no items		

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

1. Describe your organization’s (and subrecipient(s) if applicable) experience in effectively utilizing federal funds and performing the activities proposed in the application.

CCDOV’s executive team has substantial experience overseeing and ensuring compliance for well-known federal grant programs such as ESG; HUD SHP; HUD TH-RHH; HUD RRH; HUD VASH; SAMHSA TCE-HIV; DOJ-OJP; HRSA 330H (for federally qualified health care facilities serving homeless); HOPWA; and VA grant per diem funding providing transitional housing for veterans. The agency was recently awarded \$879,237 from Lee County to implement a Rapid Rehousing Program with ESG-CV funding and has a pending \$1.2 million grant with Suncoast for Rapid Rehousing. Chief Executive Officer, Eduardo Gloria, MPA has over 20 years of human services experience. At Catholic Charities, Mr. Gloria is responsible for overseeing key business operations; development of a \$10M annual operating budget; development of policies and procedures; employee and program performance assessments; public fund development; and the agency’s housing strategy for 10 counties in Southwest Florida. Prior to his current position, he served as Chief Operating Officer at the Alpha-1 Foundation and Camillus House in Miami where he managed multiple supported housing and care delivery systems employing 160+ staff and providing direct services to over 15,000 persons each year.

CCDOV has extensive experience providing services and housing to persons experiencing homelessness or at risk of homelessness. Current examples include:

St. John Paul II Villas – a 64 unit permanent housing complex for formerly homeless seniors in DeSoto county

Casa San Juan Bosco – 97 unit permanent housing for migrant farmworker families in DeSoto county

New Paradigm- 15 unit transitional housing for formerly homeless families in Sarasota county

Family Haven – Shelter operations in South Sarasota county

Casa San Jose – an 8-unit transitional housing facility for men with HIV/AIDS

Our Mother’s House – 22 unit transitional housing for homeless mothers with children

CCDOV Human Trafficking Victim Assistance Program – 15 units of rapid rehousing for victims of human trafficking located in Lee county.

2. Describe your organization’s (and subrecipient(s) if applicable) experience in leveraging Federal, State, local and private sector funds.

Catholic Charities has extensive experience in leveraging Federal, State, Local and Private Sector Funds for housing projects. In Sarasota, Catholic Charities leveraged a total of \$1.2 million to develop Casa San Jose, housing for people with HIV/AIDS in partnership with the Suncoast Continuum of Care.

3. Describe your organization's (and subrecipient(s) if applicable) financial management structure.

CCDOV's financial management is led by a Director of Finance who reports to the CEO. CCDOV maintains a system of procedures and cross referencing to minimize the likelihood of misappropriation of funds and maximize the ability to detect it. A complete and independent audit of all financial records is performed annually and is reviewed by the agency's Governing Board.

4. Are there any unresolved HUD monitoring or OIG audit findings for any HUD grants (including ESG) under your organization? No

3A. Project Detail

1. CoC Number and Name: FL-500 - Sarasota, Bradenton/Manatee, Sarasota Counties CoC

2. CoC Collaborative Applicant Name: Suncoast Partnership to End Homelessness, Inc.

3. Project Name: Permanent Supportive Housing

4. Project Status: Standard

5. Component Type: PH

5a. Select the type of PH project: PSH

6. Is your organization, or subrecipient, a victim service provider defined in 24 CFR 578.3? No

7. Is this new project application requesting to transition from eligible renewal project(s) that was awarded to the same recipient and fully eliminated through reallocation in this CoC Program Competition? (Attachment Requirement) No

8. Will funds requested in this new project application replace state or local government funds (24 CFR 578.87(a))? No

9. Will this project include replacement reserves in the Operating budget? No

3B. Project Description

1. Provide a description that addresses the entire scope of the proposed project.

Catholic Charities Diocese of Venice (CCDOV) is requesting funds to implement a Permanent Supportive Housing (PSH) Bonus funding program serving approximately 15 families in Sarasota and Manatee Counties. The proposed program targets persons meeting the definition of DedicatedPLUS. Following a Housing First and Client Choice approach, CCDOV’s Permanent Supportive Housing Program will connect homeless individuals to permanent housing including targeted support services through a tailored system of care. CCDOV will leverage its integrated system of care and partnerships with other service providers to ensure homeless individuals find immediate and practical solutions to basic needs as well as permanent housing. Catholic Charities Diocese of Venice (CCDOV) has extensive experience managing similar programs which provide housing solutions and wrap around supports including several Rapid Rehousing projects and other housing and homelessness prevention programs. The proposed Permanent Supportive Housing program in Sarasota County builds on CCDOV’s experience working with Suncoast partnership and the Oneby 1 Coordinated Entry system.

2. For each primary project location, or structure, enter the number of days from the execution of the grant agreement that each of the following milestones will occur if this project is selected for conditional award.

Project Milestones	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement
	A	B	C	D
Begin hiring staff or expending funds	30			
Begin program participant enrollment	60			
Program participants occupy leased or rental assistance units or structure(s), or supportive services begin	60			
Leased or rental assistance units or structure, and supportive services near 100% capacity	180			
Closing on purchase of land, structure(s), or execution of structure lease				
Start rehabilitation				
Complete rehabilitation				
Start new construction				
Complete new construction				

2a. If requesting capital costs (i.e., acquisition, rehabilitation, or new

construction), describe the proposed development activities with responsibilities of the applicant, and subrecipients if included, to develop and maintain the property using CoC Program funds.

3. Check the appropriate box(s) if this project will have a specific subpopulation focus.

(Select ALL that apply)

N/A - Project Serves All Subpopulations	<input type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Chronic Homeless	<input type="checkbox"/>
		Other (Click 'Save' to update)	<input type="checkbox"/>

4. Will your project participate in the CoC's Coordinated Entry (CE) process or recipient organization is a victim service provider, as defined in 24 CFR 578.3 and uses an alternate CE process that meets HUD's minimum requirements? Yes

5. Housing First

5a. Will the project quickly move participants into permanent housing? Yes

5b. Will the project enroll program participants who have the following barriers? Select all that apply.

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

5c. Will the project prevent program participant termination for the following reasons? Select all that apply.

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>

Loss of income or failure to improve income	<input checked="" type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

5d. Will the project follow a "Housing First" approach? Yes
 (Click 'Save' to update)

6 Will program participants be required to live in a specific structure, unit, or locality at any time while in the program? No

7. Will more than 16 persons live in a single structure? No

100% Dedicated or DedicatedPLUS

A "100% Dedicated" project is a permanent supportive housing project that commits 100% of its beds to chronically homeless individuals and families, according to NOFA Section III.3.b.

A "DedicatedPLUS" project is a permanent supportive housing project where 100% 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, that at a minimum, meet ONE of the following criteria according to NOFA Section III.3.d:

- (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.

A renewal project where 100 percent of the beds are dedicated in their current grant as described in NOFA Section III.A.3.b. must either become DedicatedPLUS or remain 100% Dedicated. If a renewal project currently has 100 percent of its beds dedicated to chronically homeless individuals and families and elects to become a DedicatedPLUS project, the project will be required to adhere to all fair housing requirements at 24 CFR 578.93. Any beds that the

applicant identifies in this application as being dedicated to chronically homeless individuals and families in a DedicatedPLUS project must continue to operate in accordance with Section III.A.3.b. Beds are identified on Screen 4B.

**8. Is this project 100% Dedicated or DedicatedPLUS
DedicatedPLUS?**

3C. Project Expansion Information

1. Is this a “Project Expansion” of an eligible renewal project? No

4A. Supportive Services for Participants

1. Describe how program participants will be assisted to obtain and remain in permanent housing.

The program is based on Housing First and Client Choice models. Client access to local resources including schools, transportation, and health care will drive the unit selection process. Every effort will be made to secure housing for participants in geographic areas of preference. CCDOV will prioritize client choice where clients already have positive support networks in place to identify convenient and safe locations that are close to employment and have access to public transportation. Staff will work to locate new rental properties in the county that meet the PSH program requirements. This will be done by fostering partnerships with landlords, property management companies, realtors, and publicly subsidized housing properties. CCDOV will not only educate owners and property managers on the PSH model but also explain the benefits of having a third-party liaison for rental stability, financial stability and to help troubleshoot any issues that may arise between landlord and tenant.

2. Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible.

Families and individuals will receive a package of assistance tailored to meet individual needs and wants which work to:

- Establish participants strengths for a strengths-based housing-first approach
- Client-centered exit plan for self-sufficiency.
- Linkage to enhanced income opportunities via SOAR trained case managers to help apply for SSD/SSDI benefits
- Links to employment training and location services.
- Childcare, transportation other needed services.
- Medical services, through warm hand offs to low cost/sliding fee scale federally qualified health centers such as Centerplace Health
- Behavioral Health Services through CCDOV’s licensed mental health providers or other appropriate community services.
- Offer individual and group skill classes which may include topics such as tenant responsibilities, budgeting, parenting, nutrition, financial counseling with the goal of having tenant councils for case workers collaborate with clients and

3. For all supportive services available to program participants, indicate who will provide them and how often they will be provided.

Click 'Save' to update.

Supportive Services		Provider	Frequency
New Project Application FY2021	Page 31		11/08/2021

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

Applicant	As needed
Applicant	Annually
Applicant	Annually
Non-Partner	As needed
Non-Partner	As needed
Non-Partner	As needed
Applicant	As needed
Applicant	As needed
Non-Partner	As needed
Non-Partner	As needed
Non-Partner	As needed
Non-Partner	As needed
Non-Partner	As needed
Non-Partner	As needed
Non-Partner	As needed
Non-Partner	As needed
Non-Partner	As needed
Non-Partner	Annually

Identify whether the project will include the following activities:



4. Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs? No

5. Annual follow-ups with program participants to ensure mainstream benefits are received and renewed? Yes

6. Will program participants have access to SSI/SSDI technical assistance provided by this project the applicant, a subrecipient, or partner agency? Yes

6a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months. Yes

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the  icon. To view or update a housing site already listed, select the  icon.

Total Units: 10

Total Beds: 12

Total Dedicated CH Beds: 12

Housing Type	Housing Type (JOINT)	Units	Beds	Dedicated CH Beds
Scattered-site apartments (...)	---	10	12	12

4B. Housing Type and Location Detail

1. Housing Type: Scattered-site apartments (including efficiencies)

2. Indicate the maximum number of units and beds available for program participants at the selected housing site.

2a. Units: 10

2b. Beds: 12

3. How many beds in “2b. Beds” are dedicated to persons experiencing chronic homelessness? 12

This includes both the “dedicated” and “prioritized” beds.

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. 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.

Street 1: 5055 N. Tamiami Trail

Street 2:

City: Sarasota

State: Florida

ZIP Code: 34234

***5. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered.
(for multiple selections hold CTRL key)**

129081 Manatee County, 122766 Sarasota

5A. Project Participants - Households

Households Table

	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Number of Households	2	8	0	10
Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Persons over age 24	2	6		8
Persons ages 18-24		2		2
Accompanied Children under age 18	2		0	2
Unaccompanied Children under age 18			0	0
Total Persons	4	8	0	12

Click Save to automatically calculate totals

5B. Project Participants - Subpopulations

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24	2									
Persons ages 18-24										
Children under age 18	2									
Total Persons	4	0	0	0	0	0	0	0	0	0

Click Save to automatically calculate totals

Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans- (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24	6									
Persons ages 18-24	2									
Total Persons	8	0	0	0	0	0	0	0	0	0

Click Save to automatically calculate totals

Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Accompanied Children under age 18										
Unaccompanied Children under age 18										
Total Persons	0				0	0	0	0	0	0

6A. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 15, 2023? Yes

2. What type of CoC funding is this project applying for in this CoC Program Competition? CoC Bonus

3. Does this project propose to allocate funds according to an indirect cost rate? No

4. Select a grant term: 1 Year

*** 5. Select the costs for which funding is requested:**

Acquisition/Rehabilitation/New Construction	<input type="checkbox"/>
Leased Units	<input type="checkbox"/>
Leased Structures	<input type="checkbox"/>
Rental Assistance	<input checked="" type="checkbox"/>
Supportive Services	<input checked="" type="checkbox"/>
Operating	<input type="checkbox"/>
HMIS	<input type="checkbox"/>

6. If conditionally awarded, is this project requesting an initial grant term greater than 12 months? (13 to 18 months) No

6E. Rental Assistance Budget

The following list summarizes the rental assistance funding request for the total term of the project. To add information to the list, select the icon. To view or update information already listed, select the icon.

Total Request for Grant Term:			\$115,188
Total Units:			10
Type of Rental Assistance	FMR Area	Total Units Requested	Total Request
TRA	FL - North Port-Sarasota-Bradenton, F...	10	\$115,188

Rental Assistance Budget Detail

Instructions:

Type of Rental Assistance: Select the applicable type of rental assistance from the dropdown menu. Options include tenant-based (TRA), sponsor-based (SRA), and project-based assistance (PRA). Each type has unique requirements and applicants should refer to the 24 CFR 578.51 before making a selection.

Metropolitan or non-metropolitan fair market rent area: This is a required field. Select the FY 2016 FMR area in which the project is located. The list is sorted by state abbreviation. The selected FMR area will be used to populate the rents in the chart below.

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.

of units: This is a required field. For each unit size, enter the number of units for which funding is being requested.

FMR: These fields are populated with the FY 2016 FMR amounts based on the FMR area selected by the applicant. The FMRs are available online at <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 based on the number of units multiplied by the corresponding FMR and by 12 months.

Total Units and Annual Assistance Requested: The fields in this row are automatically calculated based on the total number of units and the sum of the total requests per unit size per year.

Grant Term: This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

Total Request for Grant Term: This field is automatically calculated based on the total annual assistance requested multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange:
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

Type of Rental Assistance: TRA

Metropolitan or non-metropolitan fair market rent area: FL - North Port-Sarasota-Bradenton, FL MSA (1208199999)

Size of Units	# of Units (Applicant)		FMR Area (Applicant)		12 Months			Total Request (Applicant)
SRO		x	\$631	x	12		=	\$0
0 Bedroom	4	x	\$841	x	12		=	\$40,368
1 Bedroom	5	x	\$992	x	12		=	\$59,520

2 Bedrooms	1	x	\$1,275	x	12	=	\$15,300
3 Bedrooms		x	\$1,686	x	12	=	\$0
4 Bedrooms		x	\$2,030	x	12	=	\$0
5 Bedrooms		x	\$2,335	x	12	=	\$0
6 Bedrooms		x	\$2,639	x	12	=	\$0
7 Bedrooms		x	\$2,944	x	12	=	\$0
8 Bedrooms		x	\$3,248	x	12	=	\$0
9 Bedrooms		x	\$3,553	x	12	=	\$0
Total Units and Annual Assistance Requested	10						\$115,188
Grant Term							1 Year
Total Request for Grant Term							\$115,188

Click the 'Save' button to automatically calculate totals.

6F. Supportive Services Budget

A quantity AND description must be entered for each requested cost.

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs		
2. Assistance with Moving Costs		
3. Case Management	1 fulltime case managers	\$55,200
4. Child Care		
5. Education Services		
6. Employment Assistance		
7. Food		
8. Housing/Counseling Services		
9. Legal Services		
10. Life Skills		
11. Mental Health Services		
12. Outpatient Health Services		
13. Outreach Services		
14. Substance Abuse Treatment Services		
15. Transportation		
16. Utility Deposits		
17. Operating Costs		
Total Annual Assistance Requested		\$55,200
Grant Term		1 Year
Total Request for Grant Term		\$55,200

Click the 'Save' button to automatically calculate totals.

6I. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the icon. To view or update a Match source already listed, select the icon.

Summary for Match

Total Amount of Cash Commitments:	\$0
Total Amount of In-Kind Commitments:	\$43,810
Total Amount of All Commitments:	\$43,810

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Type	Source	Name of Source	Amount of Commitments
In-Kind	Private	Catholic Charitie...	\$43,810

Sources of Match Detail

1. Type of Match commitment: In-Kind

2. Source: Private

3. Name of Source: Catholic Charities Diocese of Venice

(Be as specific as possible and include the office or grant program as applicable)

4. Amount of Written Commitment: \$43,810

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

6J. Summary Budget

The following information summarizes the funding request for the total term of the project. However, administrative costs can be entered in 8. Admin field below.

Eligible Costs	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Total Assistance Requested for Grant Term (Applicant)
1a. Acquisition			\$0
1b. Rehabilitation			\$0
1c. New Construction			\$0
2a. Leased Units	\$0	1 Year	\$0
2b. Leased Structures	\$0	1 Year	\$0
3. Rental Assistance	\$115,188	1 Year	\$115,188
4. Supportive Services	\$55,200	1 Year	\$55,200
5. Operating	\$0	1 Year	\$0
6. HMIS	\$0	1 Year	\$0
7. Sub-total Costs Requested			\$170,388
8. Admin (Up to 10%)			\$1,042
9. Total Assistance Plus Admin Requested			\$171,430
10. Cash Match			\$0
11. In-Kind Match			\$43,810
12. Total Match			\$43,810
13. Total Budget			\$215,240

Click the 'Save' button to automatically calculate totals.

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No		
2) Other Attachment(s)	No	Match Commitment	11/08/2021
3) Other Attachment(s)	No		

Attachment Details

Document Description:

Attachment Details

Document Description: Match Commitment

Attachment Details

Document Description:

7A. In-Kind MOU Attachment

Document Type	Required?	Document Description	Date Attached
In-Kind Match MOU	No	In kind match com...	11/08/2021

Attachment Details

Document Description: In kind match commitment

7D. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance.

It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

Additional for Rental Assistance Projects:

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR part 578 or 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

B. For non-Rental Assistance Projects Only.

15-Year Operation Rule.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 15 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

1-Year Operation Rule.

Applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provide

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.

Name of Authorized Certifying Official: Eduardo Gloria

Date: 11/08/2021

Title: CEO

Applicant Organization: Catholic Charities, Diocese of Venice, Inc.

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent

X

statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

Active SAM Status Requirement. I certify that our organization has an active System for Award Management (SAM) registration as required by 2 CFR 200.300(b) at the time of project application submission to HUD and will ensure this SAM registration will be renewed annually to meet this requirement.

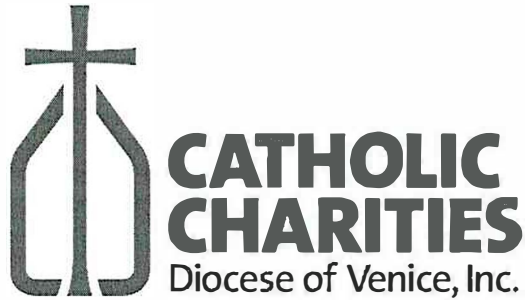
8B. Submission Summary

Applicant must click the submit button once all forms have a status of Complete.

Applicant must click the submit button once all forms have a status of Complete.

Page	Last Updated
1A. SF-424 Application Type	No Input Required
1B. SF-424 Legal Applicant	No Input Required
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	11/05/2021
1E. SF-424 Compliance	11/05/2021
1F. SF-424 Declaration	11/05/2021
1G. HUD 2880	11/05/2021
1H. HUD 50070	11/05/2021
1I. Cert. Lobbying	11/05/2021
1J. SF-LLL	11/05/2021
IK. SF-424B	11/05/2021
1L. SF-424D	11/05/2021
2A. Subrecipients	No Input Required
2B. Experience	11/05/2021
3A. Project Detail	11/05/2021
3B. Description	11/05/2021
3C. Expansion	11/05/2021
4A. Services	11/05/2021
4B. Housing Type	11/05/2021
5A. Households	11/05/2021
5B. Subpopulations	No Input Required
6A. Funding Request	11/05/2021
6E. Rental Assistance	11/05/2021
6F. Supp Srvcs Budget	11/05/2021
6I. Match	11/05/2021
6J. Summary Budget	No Input Required
7A. Attachment(s)	11/08/2021

7A. In-Kind MOU Attachment	11/08/2021
7D. Certification	11/05/2021



Mr. Chris Johnson
Suncoast Partnership to End Homelessness
1750 17th St. C-1
Sarasota, FL 34234

Ref: Permanent Supportive Housing Bonus Funding

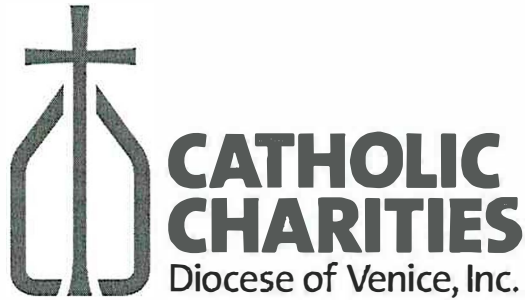
Dear Mr. Johnson;

Through this letter I would like to confirm the 25% match commitment that will be provided by Catholic Charities Diocese of Venice Inc. regarding the above referenced grant opportunity. Our agency has committed to provide an in-kind match of at least \$43,810 for the proposed project, which we will comply with. Thank you and please reach out to me if I may be of further assistance or if there are any questions or concerns: eduardo.gloria@catholiccharitiesdov.org or 941-486-4700.

Sincerely,

Eduardo Gloria, Interim CEO

Date



Mr. Chris Johnson
Suncoast Partnership to End Homelessness
1750 17th St. C-1
Sarasota, FL 34234

Ref: Permanent Supportive Housing Bonus Funding

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Eduardo Gloria, Interim CEO

Date