

Submission Checklist

The following items for renewal applications must be submitted to HRDC by **by 4:00 PM on August 16**. Clearly label all attachments, using the attachment number given, even if attachments will end up not being numbered sequentially due to an attachment not being applicable. If an attachment does not apply, place a (✓) in the “Not Applicable” column. Only one copy of each attachment is required. Copies of all materials submitted must be single-sided only. Please do not submit materials that are printed double-sided.

Agency Name		Included (✓)	Not Applicable (✓)	Included with other renewal project application
Project Name				
	Submission Checklist (this page)			
	Completed Renewal Application (beginning on page 30 of this packet)			
Attachment Number	Attachment Description (ONE per agency) <i>Agencies only need to submit ONE (1) of each of the following, even if they are submitting multiple renewal applications</i>			
#1	Most recent A-133 audit			
#2	Most recent agency financial audit			
	<u>Participation of homeless/formerly homeless person (Part G)</u>			
#3	Documentation of participation of homeless/formerly homeless person (may have multiple, if project has sub recipient(s))			
#4	Request for waiver of this requirement submitted to HUD or HUD’s approval of waiver request			
Attachment Number	Attachment Description <i>Each individual project application must have the following attachments, as they apply to that project.</i>			
#5	Copy of most recent APR submitted to HUD via eSNAPS. See Appendix B for details.			
#6	APR generated from HMIS for the project under review for the time period of 1/1/2016 – 12/31/2016. See Appendix C for details.			
	<u>If monitored by HUD since June 2014: (Part B)</u>			
#7	Notification from HUD that project will be monitored			
#8	Monitoring report from HUD			
#9	Organization’s response to monitoring report			
#10	Documentation from HUD that monitoring concern or finding satisfied			
#11	Any other monitoring-related correspondence			
	<u>If project had significant project changes (Part C)</u>			
#12	Written communication to HUD requesting the significant change			
#13	HUD’s written approval of the change requested			
	<u>Signature Page</u> <i>If project has both recipient and sub recipient(s), it may have more than one signature page.</i>			
#14	Signed by Recipient			
#14	Signed by Sub recipient(s)			

The CoC Applicant reserves the right to request additional project or organizational information at a later date if needed. Any items not included in the checklist that are requested and submitted at a later date above will not result in points deducted from the application.

FY2017 Renewal Project Application

Part A: General Project Information

Applicant Organization's Name:	
Project Applicant Address:	
Street:	
City:	State: ZIP:
Contact Person of Project Applicant	
Name:	Phone Number:
Title:	Email:
Contact information for Project Applicant Executive Director (if different from above)	
__ information same as above	
Name:	Phone Number:
	Email:
Project Name:	
Project Address:	
Street:	
City:	State: ZIP:
<input type="checkbox"/> Check if project provides scattered-site leasing or rental assistance	
Project Sub-recipient Organization Name (If different from Applicant):	
Project Sub-recipient's Address (if applicable)	
Street:	
City:	State: Zip:
Contact Person of Project Sub-recipient	
Name:	Phone Number:
Title:	Email:
Project Component Type	
<input type="checkbox"/> Permanent Housing (PH) <ul style="list-style-type: none"> <input type="checkbox"/> Permanent Supportive Housing <input type="checkbox"/> Rapid Rehousing 	
<input type="checkbox"/> Transitional Housing (TH)	
<input type="checkbox"/> Supportive Services Only (SSO) <ul style="list-style-type: none"> <input type="checkbox"/> Coordinated Entry/CAM SSO <input type="checkbox"/> Non-Coordinated Entry/CAM SSO 	
<input type="checkbox"/> HMIS	
<input type="checkbox"/> CoC Planning	

Part B: HUD Monitoring Findings

Any findings may require further review

Question #1

Has this project been monitored by HUD within the last three years? (Since June 2014)

Yes No

If “Yes,” include as many of the following that apply as attachments to your application. Check “N/A” if not applicable:

Attached (✓)	
	Attachment #7: Notification letter or email from HUD that your project will be monitored
	Attachment #8: Monitoring report from HUD (the report that identifies any concerns or findings); OR <input type="checkbox"/> N/A: HUD has not yet provided our organization with their monitoring report
	Attachment #9: If monitoring report identified concerns, findings, or other items requiring a response, provide your organization’s response to these items; OR <input type="checkbox"/> N/A: The monitoring report did not contain any items requiring our organization’s response
	Attachment #10: Documentation from HUD that a monitoring concern or finding has been satisfied; OR <input type="checkbox"/> N/A: HUD has not yet responded to our organization’s response to the monitoring report
	Attachment #11: Any other monitoring-related correspondence between your organization and HUD; OR <input type="checkbox"/> N/A: No other correspondence to provide

Part C: Significant Project Changes

Any changes noted may require additional review

Question #1

Are there any significant changes in the project since the last funding approval?

Yes No

If “yes” complete the chart below to describe the change:

	Previous	New
Indicate change in the number of persons served		
Indicate change in the number of units		
Indicate change in project site location		
Indicate change in target population		
Indicate change in the project sponsor		
Indicate change in the component type		
Indicate change in the grantee/applicant		
Indicate change in the number of beds		
Line item or cost category budget changes more than 10%		
Other (explain) _____		

If “Yes,” include as many of the following that apply as attachments to your application. Check “N/A” if not applicable:

Attached (✓)	
	Attachment #12: Written communication to HUD requesting the significant change
	Attachment #13: HUD’s written approval of the change requested <input type="checkbox"/> N/A: HUD has not yet provided written approval of the requested change

Part D: APR Information

Value = not scored

Rationale given for late APR submissions to HUD will be reviewed; grantees should note that future funding competitions may deduct points from overall score for untimely submissions to HUD.

Question #1:

Complete the box with the information requested.

Term of most recent APR submitted to HUD:

*Operating Year
Start Date
(DD/MM/YY)* To _____
*Operating Year End
Date (DD/MM/YY)*

Date APR submitted to HUD via Esnaps:

Date (DD/MM/YY)

Question #2:

Was your APR submitted via eSNAPS to HUD within 90 days for the end of the project term?

Yes

No

Unsure

If “no”, please explain why the APR was not submitted to HUD in a timely fashion, and steps the grantee is taking to ensure timely submission in the future:

NOTE: It is recognized that during the summer of 2016, there were technical difficulties with eSNAPS that may have prevented APRs from being submitted on time or, in some instances, at all. If this situation impacted your organization, please make note of it above.

Part E: Continuous Quality Improvement Process (Optional)

Value = not scored

Question #1 (Responding to this question is optional.)

Agencies *may* provide, in one-half page or less, an explanation or commentary on the project’s performance for the evaluation criteria under review (clients exiting with income & mainstream resources, or housing performance). Agencies may include a description of any steps being taken to implement a continuous quality improvement program. While this question will NOT be scored, an explanation may be included to help reviewers understand any special circumstances that contributed to the project’s performance.

Part F: Financial Performance

Question #1

Value = 15 points

Complete the chart and answer the questions below. When completing the Project Grant Number section and total grant amount, refer to Appendix B which provides the grant number and grant amount for which spending information is requested. Depending on the term of the project being reported on, a project may be reporting on its FY2014 award or its FY2015 award. Also, note that this may be the same project number for which spending information was submitted in last year's application.

The information provided here may be verified with the local HUD Field Office and/or via a review of the project's APR.

		A	B	C
Project Name	Project Grant Number	Total grant amount	Total amount drawn down from LOCCS as of 90 days after the end of the most recently completed project term	Percentage of funds expended: [(B/A) x 100]

Question #2

Value = Not Scored

If the percentage of funds expended (column C) is less than 95% (if a non-rental assistance project) or less than 90% (if a rental assistance project), provide an explanation why not all funds were expended: *(max 1 paragraph)*

Part G: Consumer Participation

Value = up to 5 points for both questions combined

- *Over the course of CY2016, the organization had no current consumer participation and currently has no plan to incorporate consumer participation = 0 pts*
- *Over the course of CY2016, the organization had no current consumer participation, but has a plan in place to incorporate consumer participation = 3 pts*
- *Over the course of CY2016, organization had consumer participation and provided documentation of same = 5 pts*

If the project has a recipient and sub recipient(s) points will be awarded based on the extent to which all entities associated with the grant are compliant with this regulation.

HEARTH regulations require the following of CoC-funded recipient and sub recipients (24 CFR 578.75(g)):

“(1) Each recipient and sub recipient must provide for the participation of not less than one homeless individual or formerly homeless individual on the board of directors or other equivalent policymaking entity of the recipient or sub recipient, to the extent that such entity considers and makes policies and decisions regarding any project, supportive services, or assistance provided under this part. This requirement is waived if

a recipient or sub recipient is unable to meet such requirement and obtains HUD approval for a plan to otherwise consult with homeless or formerly homeless persons when considering and making policies and decisions.

Question #1a

Place a check mark (✓) in the appropriate box(es) below to signify the extent to which the recipient and sub-recipient(s) are compliant with this policy. If the recipient/sub-recipient is not currently compliant with the regulations, and has not requested a waiver, answer question **1b** below.

	Recipient/Sub recipient had consumer participation on board or other policy making entity at some point in CY2016 (✓)	Documentation of such consumer participation is attached (attachment #3) (✓)	OR	Waiver for this requirement has been requested and/or approved by HUD and a copy is attached (attachment #4) (✓)
Project recipient				
Project sub recipient(s): Sub recipient name: _____				

If more than one sub recipient, additional rows may be added to the table. The questions must be answered for each sub-recipient associated with the grant.

Question #1b

Describe, in ½ a page or less, how in the coming year the recipient and/or sub recipient will become compliant with the regulations found at 24 CFR 578.75(g)(1).

Note: Additional follow-up may occur for recipients and/or sub recipients which indicated in past applications a plan to become compliant with this regulation if the recipient/sub recipient indicates in the FY2017 application that they are not yet compliant.

Signature Page (Attachment #14)

This page is to be signed by the Executive Director of the recipient and sub recipient agency or his/her authorized representative. If a project has a more than one sub recipient, this page may be duplicated with each sub recipient signing the page.

My signature below affirms the following:

- 1) If awarded Continuum of Care funds by the U.S. Department of Housing and Urban Development, this project will comply with all program regulations as found in the Continuum of Care Program Interim Rule 24 CFR Part 578.
- 2) The organization will enter required project and client data into the Homeless Management Information System (HMIS) in accordance with the HMIS Data Standards and HMIS Policies & Procedures.
- 3) The funded project will participate in the Coordinated Assessment Model (CAM), once the phase that relates to the type of project being funded has been implemented.
- 4) The data submitted with this application (in both the APR submitted to HUD via eSNAPS and any data generated from HMIS) is complete, accurate, and correct.
- 5) It is understood that, should this project be eligible for an appeal, no appeal may be made on the basis of having initially submitted incomplete, incorrect, or inaccurate data. It is understood that details on the criteria and process for which my agency may submit an appeal to the Cumberland/Allegany County CoC Board are found in the Appeals Policy (attached) and that any appeals decisions made by the Cumberland/Allegany County CoC Board will be final.
- 6) It is understood that renewal and new projects will be submitted to HUD in accordance with the FY2017 Project Ranking Policies (attached) and that such project ranking decisions are final.
- 7) It is understood that should the Cumberland/Allegany County CoC Board decide to reallocate a renewal project in part or in whole to fund new project(s), such a decision is final and cannot be appealed to the Cumberland/Allegany County CoC Board.
- 8) It is understood that the Cumberland/Allegany County CoC Board is responsible for making decisions on which new and renewal projects are submitted to HUD each year as part of the annual CoC competition, and that the ultimate decision in whether or not a project is funded is made by HUD. It is further understood that 24 CFR §578.35 describes certain situations in which an agency may submit an appeal directly to HUD. It is agreed that the submission of an appeal to HUD, in accordance with HUD's policies and procedures, is the final recourse that may be taken for the project.
- 9) It is understood that if my agency has any outstanding assessments due to HRDC as of August 16, 2017, my renewal project application(s) will not be submitted to HUD via eSNAPS for funding.

Signed: _____ Date: _____
(Executive Director or authorized representative)

Name Printed: _____

