## **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 2017 CoC Program grant competition.
- Additional training resources can be found on the HUD Exchange at https://www.hudexchange.info/e-snaps/quides/coc-program-competition-resources/
- Program policy questions and problems related to completing the application in e-snaps may be directed to HUD the HUD Exchange Ask A Question
- 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 2017 CoC Program NOFA.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2017 CoC Program NOFA, including the General Section Technical Correction, and all requirements and criteria met.
- 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 the instructions found on each individual screen
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps.
- 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 2017 CoC Program NOFA.

## 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: 09/18/2017

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: Yolo Community Care Continuum

b. Employer/Taxpayer Identification Number 94-2623205

(EIN/TIN):

c. Organizational DUNS:	001517374	PLUS 4	
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d. Address

Street 1: 285 West Court Street suite 207

Street 2:

City: Woodland

County:

State: California

Country: United States

Zip / Postal Code: 95695

e. Organizational Unit (optional)

**Department Name:** 

**Division Name:** 

f. Name and contact information of person to

рe

contacted on matters involving this

application

Prefix: Ms.

First Name: Debbie

Middle Name:

Last Name: Gravink

**Suffix:** 

Title: Fiscal Director

Organizational Affiliation: Yolo Community Care Continuum

**Telephone Number:** (530) 758-2160

**Extension:** 

FY2017 CoC Planning Project Application	Page 3	09/19/2017
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Fax Number: (530) 758-1386

Email: fiscal@y3c.org

Applicant: Yolo Community Care Continuum14818Project: Planning Project Application 2017159070

## 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 CoC Program

Title:

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6100-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) California

(for multiple selections hold CTRL+Key)

**15. Descriptive Title of Applicant's Project**: Planning Project Application 2017

16. Congressional District(s):

a. Applicant: CA-003

b. Project: CA-003

(for multiple selections hold CTRL+Key)

17. Proposed Project

a. Start Date: 07/01/2018

**b. End Date:** 06/30/2019

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 b. Program is subject to E.O. 12372 but has not State Executive Order 12372 Process? 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 No

If "YES," provide an explanation:

**Project:** Planning Project Application 2017

## 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: Ms.

First Name: Michele

Middle Name:

Last Name: Kellogg

Suffix:

Title: **Executive Director** 

**Telephone Number:** (530) 758-2160

(Format: 123-456-7890)

Fax Number: (530) 758-1386

(Format: 123-456-7890)

Email: main@y3c.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

**Date Signed:** 09/18/2017

## 1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - Form 2880 U.S. Department of Housing and Urban Development OMB Approval No. 2510-0011 (exp.11/30/2018)

### **Applicant/Recipient Information**

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Yolo Community Care Continuum

Prefix: Ms.

First Name: Michele

Middle Name:

Last Name: Kellogg

Suffix:

Title: Executive Director

Organizational Affiliation: Yolo Community Care Continuum

**Telephone Number:** (530) 758-2160

**Extension:** 

Email: main@y3c.org

City: Woodland

County:

State: California

**Country:** United States

Zip/Postal Code: 95695

**2. Employer ID Number (EIN):** 94-2623205

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance \$14,737

Requested/Received:

(Requested amounts will be automatically entered within applications)

FY2017 CoC Planning Project Application	Page 9	09/19/2017
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activity:

**5. State the name and location (street** Planning Project Application 2017 285 West address, city and state) of the project or Court Street suite 207 Woodland California

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 Yes specific project or activity? (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.

#### 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 this information is true and complete.

I AGREE:

Name / Title of Authorized Official: Michele Kellogg, Executive Director

**Signature of Authorized Official:** Considered signed upon submission in e-snaps.

**Date Signed:** 07/18/2017

## 1H. HUD 50070

#### **HUD 50070 Certification for a Drug Free Workplace**

**Applicant Name:** Yolo Community Care Continuum

**Program/Activity Receiving Federal Grant** CoC Program Funding:

Funding

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:		
а	l.	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	<b>).</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;
С	<b>:</b> .	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	I	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 hereby certify that all the information stated
herein, as well as any information provided in
the accompaniment herewith, is true and

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Applicant: Yolo Community Care Continuum	
Project: Planning Project Application 2017	

accurate.	
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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)

#### **Authorized Representative**

Prefix: Ms.

First Name: Michele

**Middle Name** 

Last Name: Kellogg

**Suffix:** 

Title: Executive Director

**Telephone Number:** (530) 758-2160

(Format: 123-456-7890)

Fax Number: (530) 758-1386

(Format: 123-456-7890)

Email: main@y3c.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

**Date Signed:** 09/18/2017

14818 159070

## 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:

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:** Yolo Community Care Continuum

Name / Title of Authorized Official: Michele Kellogg, Executive Director

**Signature of Authorized Official:** Considered signed upon submission in e-snaps.

**Date Signed:** 09/18/2017

## 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 No grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program?

**Legal Name:** Yolo Community Care Continuum

Street 1: 285 West Court Street suite 207

Street 2:

City: Woodland

County: Yolo

State: California

**Country:** United States

Zip / Postal Code: 95695

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 thi	s information	is true	and
_		comp	lete.

FY2017 CoC Planning Project Application	Page 15	09/19/2017
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## **Authorized Representative**

Prefix: Ms.

First Name: Michele

Middle Name:

Last Name: Kellogg

Suffix:

Title: Executive Director

14818

159070

**Telephone Number:** (530) 758-2160

(Format: 123-456-7890)

Fax Number: (530) 758-1386

(Format: 123-456-7890)

Email: main@y3c.org

Signature of Authorized Official: Considered signed upon submission in e-snaps.

**Date Signed:** 09/18/2017

## 2A. Project Detail

1a. CoC Number and Name: CA-521 - Davis, Woodland/Yolo County CoC

1b. Collaborative Applicant Name: Yolo Community Care Continuum

2. Project Name: Planning Project Application 2017

3. 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 the provisions of 24 CFR 578.7.

Yolo will use this planning grant to hire a third party consultant to assist CoC and ESG sub recipients in identifying opportunities for potential improvement in project management, operations and performance. The consultant will meet with each project recipient (of which there are fewer than 10 within the Yolo CoC) and conduct an in-depth review of all aspects of project implementation, from intake to exit. The consultant will work with each project on identifying opportunities to streamline processes, improve efficiencies and achieve the best possible outcomes for clients. The review will also consider opportunities to improve each projects' individual contributions to system-level performance measures, opportunities to improve fidelity to the Housing First model, and opportunities to strengthen partnerships through the coordinated entry system. Once the evaluation is complete, the consultant will provide a report to the CoC and each sub recipient summarizing the findings of the review, and identified opportunities for improvement.

It is important to underscore that the CoC's intent is not for the evaluations to be punitive, nor shall this work be viewed as a form of monitoring. Rather, the information is meant to provide sub recipients with third-party guidance for how to continually strengthen the services they provide to their clients.

The planning project funds will help the CoC in its compliance with the provisions of 24 CFR 578.7 in several ways. Most notably, the evaluations will strengthen project efficiency and performance, which means that the CoC will be able to better meet the needs of persons experiencing homelessness in Yolo County.

#### 2. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.

Assuming the grant term will be from July 1, 2018 through June 30, 2019, Yolo will use the following timeline. If HUD executes the contract earlier or later, the CoC will adjust the schedule accordingly.

July 2018 through August 2018—the CoC will select and contract with a third party consultant, who has demonstrated experience in conducting project-level reviews and developing project-level improvement plans.

September 2018 through November 2018—the CoC works with the consultant to develop a detailed scope of work.

December 2018 through March 2019—the consultant will conduct the projectlevel reviews.

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**Project:** Planning Project Application 2017

April 2019 through June 2019—the consultant will collate all of the information from the reviews and produce a written report summarizing the findings and recommendations. While much of the plan will include future actions to be completed by the sub recipients, some items may require system-level coordination or action by the CoC.

In terms of a management plan, the Collaborative Applicant will work with the Yolo County Homeless Program Coordinator and Homeless Analyst to oversee the grant. Before the Collaborative Applicant executes its contract with the consultant, the Homeless Coordinator and Analyst will develop a more detailed implementation plan that includes deadlines to ensure the timely completion of all work and a scope of work that clearly delineates expectations.

# 3. How will the requested funds improve the CoC's ability to evaluate the outcome of CoC and ESG projects?

Conducting project-level reviews will improve the CoC's ability to assess performance in several ways.

First, as part of the reviews, the third-party will consider how each individual project is contributing to the achievement of system-level performance measures. Once this information has been compiled and analyzed, the CoC can develop an improvement plan for system-level performance measures that takes into account the strengths and challenges of each individual CoC and ESG funded project.

Second, the comprehensive report will provide recommendations for each CoC and ESG funded project regarding opportunities for potential improvement in project management, operations and performance. This will provide projects and the CoC with valuable information regarding the support that each project might need to provide the best possible care to clients.

# 4. How will the planning activities continue beyond the expiration of HUD financial assistance?

The Yolo County Health and Human Services Agency funds one full-time Homeless Coordinator and one full-time Homeless Analyst. It will be the responsibility of these two positions to support each project sub recipient as they work to implement the recommendations for improvement once the review process is complete.

## 3A. Governance and Operations

- 1. How often does the CoC conduct meetings Monthly of the full CoC membership?
  - 2. Does the CoC include membership of a Yes homeless or formerly homeless person?
    - 2a. For members who are homeless or formerly homeless, what role do they play in the CoC membership? (Select all that apply)

, , , , , , , , , , , , , , , , , , ,	 11 7/	
Participates in CoC meetings:		X
Votes, including electing Coc Board:		X
Sits on CoC Board:		X
None:		

- 3. Does the CoC's governance charter incorporate written policies and procedures for each of the following
- a. Written agendas of CoC meetings? Yes
- b. Coordinated Entry? (Also known as Yes centralized or coordinated assessment)
- c. Process for monitoring outcomes of ESG Yes recipients?
  - d. CoC policies and procedures? Yes
  - e. Written process for board selection? Yes
- f. Code of Conduct for board members that Yes includes a recusal process?
  - g. Written standards for administering Yes assistance?
- 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?

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## 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.

Committee Name	Role of the Committee (max 750 characters)	Meeting Frequency	Name of Individuals and/or Organizations Represented
CoC Technical Subcommittee	The CoC Technical Committee meets on a quarterly basis to discuss technical matters relating to the receipt of homeless funds, particularly from the CoC or ESG grants. The Subcommittee ensures that any issues relating to funding are addressed, and that the CoC meets all requirements for federal and state grants. The Subcommittee also assists with the development of CoC policies and procedures, and assists with the writing of the CoC collaborative application.	Quarterly	The Subcommittee is open to all CoC members, but the CoC and ESG sub recipients attend the meetings most frequently.
CoC Data Subcommittee	The CoC Data Subcommittee meets on a quarterly basis to discuss matters relating to HMIS. The Subcommittee reviews all reports submitted to HUD including the Point-in-Time Count, Housing Inventory Count, and System Performance Measures Report. The Subcommittee also monitors HMIS project-level data to ensure compliance with the CoC's HMIS Data Quality as well as Privacy and Security Plans.	Quarterly	The Subcommittee is open to all CoC members, but HMIS-participating providers attend the meetings most frequently.
Homeless Strategic Plan Executive Commission	The Homeless Strategic Plan Executive Commission is the policy making body for the homeless system in Yolo County. The Commission meets on a quarterly basis to review progress on the Strategic Plan, and to provide direction regarding homeless policy priorities. The Homeless Strategic Plan covers the same geographic areas as the Yolo CoC.	Quarterly	The Commission is composed of one elected official from each local jurisdiction, as well as the CoC Chair. Representatives from the CoC member agencies routinely attend the meetings.

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## 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:	\$0
Total Value of In-Kind Commitments:	\$3,685
Total Value of All Commitments:	\$3,685

1. Does this project generate program income No as described in 24 CFR 578.97 that will be used as Match for this grant?

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.

Match	Туре	Source	Contributor	Date of Commitment	Value of Commitments
Yes	In-Kind	Government	Yolo County Healt	09/08/2017	\$3,685

## **Sources of Match Details**

1. Will this commitment be used towards Yes

Match?

2. Type of commitment: In-Kind

3. Type of source: Government

**4. Name the source of the commitment:** Yolo County Health and Human Services Agency

(Be as specific as possible and include the office or grant program as applicable)

**5. Date of Written Commitment:** 09/08/2017

6. Value of Written Commitment: \$3,685

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.

**Applicant:** Yolo Community Care Continuum **Project:** Planning Project Application 2017

## 4B. Funding Request

1. Will it be feasible for the project to be Yes under grant agreement by September 30, 2019?

2. Does this project propose to allocate funds Yes according to an indirect cost rate?

Indirect cost rate proposals should be submitted as soon as the applicant is notified of a conditional award and no later than three months after the award.

Conditional award recipients will be asked to submit the proposal or approved rate during the e-snaps post-award process.

a. Please complete the indirect cost rate schedule below: (At least one row must be entered)

Administering Department/Agency	Indirect Cost Rate	Direct Cost Base
Yolo Community Care Continuum	10.00%	\$14,737.00

- b. Has this rate been approved by your Yes cognizant agency?
- c. Do you plan to use the 10% de minimis Yes rate?

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:	Qı	(max 400 characters) Assistar Reques		Annual Assistance Requested (Applicant)
1. Coordination Activities	recipients in identifying opportu operations and performance. The the services proposed in the 20	recipients in identifying opportunities for improvement in project management, operations and performance. The Yolo CoC will contract with HomeBase to complete the services proposed in the 2017 Planning Grant at a rate of \$150 per hour, for a total of 89 hours (\$150/hour*89hours=\$13,264), plus a de minimis indirect cost rate of		\$14,737
FY2017 CoC Plannii	FY2017 CoC Planning Project Application Page 24 09/19/2		9/2017	

2. Project Evaluation	
3. Project Monitoring Activities	
4. Participation in the Consolidated Plan	
5. CoC Application Activities	
6. Determining Geographical Area to Be Served by the CoC	
7. Developing a CoC System	
8. HUD Compliance Activities	
Total Costs Requested	\$14,737
Cash Match	\$0
In-Kind Match	\$3,685
Total Match	\$3,685
Total Budget	\$18,422

Click the 'Save' button to automatically calculate the Total Assistance

Applicant: Yolo Community Care Continuum14818Project: Planning Project Application 2017159070

# 5A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1. Other Attachment(s)	No		
2. Other Attachment(s)	No		

## **Attachment Details**

**Document Description:** In Kind Match MOU

## **Attachment Details**

**Document Description:** 

Applicant: Yolo Community Care Continuum14818Project: Planning Project Application 2017159070

## **5A. In-Kind MOU Attachment**

Document Type	Required?	<b>Document Description</b>	Date Attached
In-Kind Match MOU	No	In Kind Match MOU	09/18/2017

Applicant: Yolo Community Care Continuum14818Project: Planning Project Application 2017159070

## **Attachment Details**

**Document Description:** In Kind Match MOU

## 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

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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 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.

For 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.

#### 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. For Rental Assistance Only.

#### Supportive Services.

It will make available supportive services appropriate to the needs of the population served and equal in value to the aggregate amount of rental assistance funded by HUD for the full term of the rental assistance.

## 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: Michele Kellogg

**Date:** 09/18/2017

Title: Executive Director

Applicant Organization: Yolo Community Care Continuum

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, ficticious, or fraudulent statements or claims may subject me to



Applicant: Yolo Community Care Continuum	14818
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criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

## **6A. Submission Summary**

Last Updated
No Input Required
No Input Required
No Input Required
09/18/2017
09/18/2017
09/18/2017
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2A. Project Detail	09/18/2017
2B. Description	09/18/2017
3A. Governance and Operations	09/18/2017
3B. Committees	09/18/2017
4A. Match	09/18/2017
4B. Funding Request	09/18/2017
5A. Attachment(s)	No Input Required
5A. In-Kind MOU Attachment	09/18/2017
5B. Certification	09/18/2017

## FY 2017 Continuum of Care Planning Project Memorandum of Understanding between Yolo Community Care Continuum and the Yolo County Health and Human Services Agency

#### Section 1: Purpose

The purpose of this Memorandum of Understanding (MOU) is to confirm agreements between Yolo Community Care Continuum (hereafter known as YCCC) and the Yolo County Health and Human Services Agency (hereafter known as HHSA) regarding the execution and implementation of the FY 2017 Continuum of Care (CoC) Planning Project (hereafter known as the Planning Project).

#### Section 2: Background

Pursuant to the Davis/Woodland/Yolo County CoC's FY 2017 Program Registration, YCCC will serve as the Collaborative Applicant. As such, YCCC will serve as the CoC's Planning Project grantee.

#### Section 3: General Understandings

While YCCC will serve as the Planning Project grantee, the CoC agrees that much of the required work is best suited for HHSA's Homeless Program Manager and Homeless Program Coordinator. This is because many of their duties and responsibilities already fall within the purview of eligible Planning Project tasks such as designing coordinated entry processes and evaluating system performance. Thus, YCCC, in collaboration with HHSA's Manager and Coordinator, will oversee the implementation and execution of the FY 2017 Planning Project.

YCCC and HHSA share a common interest in serving the homeless population and those at risk of becoming homeless. Through a more coordinated Planning Project execution, this MOU hopes to improve service delivery, better inform systems planning and public policy decisions, as well as encourage more effective resource allocation.

Given these general understandings, HHSA expects no monetary compensation for assisting YCCC with the Planning Project. Rather, HHSA will provide in-kind match to YCCC through the assistance of its Manager and Coordinator. For FY 2017, this in-kind, third-party match equates to \$3,685.

#### Section 4: Duties and Responsibilities

During the term of this MOU, YCCC shall perform the following:

- 1. Sign a Planning Project grant agreement with the federal government
- 2. Oversee all financial aspects of the Planning Project such as drawdowns and invoice processing

During the term of this MOU, HHSA shall perform the following:

- 1. Work in collaboration with YCCC and the CoC to identify a Planning Project focus
- 2. Work in collaboration with YCCC and the CoC with completing the Planning Project application including writing narrative responses to required fields
- 3. Work in collaboration with YCCC and the CoC to identify and select Planning Project contractors/consultants as necessary

- 4. Serve as the primary Planning Project liaison between YCCC, the CoC, and the contractors/consultants including developing a scope of work
- 5. Implement recommendations related to Planning Project activities
- 6. Continue serving as staff to the Davis/Woodland/Yolo County CoC including providing system-level coordination and overseeing the local funding competitions

During the term of this MOU, all parties shall perform the following:

1. Consult and collaborate as needed in order to ensure the successful implementation and execution of the Planning Project.

#### Section 5: Term and Termination

The term of this MOU shall begin on July 1, 2017 and remain effective until YCCC expends all FY 2017 Planning Project funds, unless otherwise terminated. Any party may terminate this MOU within ninety (90) days by providing written notice to the other parties.

#### Section 6: Signatures

Upon signing, the parties agree that this MOU constitutes the entire agreement and supersedes all prior negotiations, representations, or agreements, whether written or oral.

Yolo Community Care Continuum  By	9/9/17
Michele Kellogg, Executive Director, Yolo Community Care Continuum	Date
Yolo County Health and Human Services Agency  By  Karen Larsen, Director, Yolo County Health and Human Services Agency	9/11/17 Date