

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;
- YHDP Renewal; and
- YHDP Replacement and Reallocation.
- 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 CoC 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 and are not ranked per the FY 2024 - FY 2025 CoC Program Competition NOFO:

- UFA Costs Project Listing;
- CoC planning Project Listing;
- YHDP Renewal Project Listing (All Rounds); and
- YHDP Replacement and Reallocation 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 or approved 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 the CoC Priority listing, please reference the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide on HUD's website.
https://www.hud.gov/program_offices/comm_planning/coc/competition.

Collaborative Applicant Name: Arizona Department of Housing

2. Reallocation

Instructions:

For guidance on completing the CoC Priority listing, please reference the CoC Priority Listing Detailed Instructions and 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 2025 into one or more new projects? No

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.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC’s Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is prioritizing.

Project Name	Date Submitted	Comp Type	Applicant Name	Budget Amount	Grant Term	PH/Reallocation	Rank	PSH/RRH	Expansion
VVS DV RRH	2024-10-18 16:55:...	PH	Arizona Department...	\$489,478	1 Year	DV Bonus	D21	RRH	
HHW Street to Hom...	2024-10-16 15:09:...	PH	Arizona Department...	\$194,269	1 Year	CoC Bonus	18	PSH	
Catholic Charitie...	2024-10-21 18:23:...	PH	Arizona Department...	\$478,976	1 Year	DV Bonus	D20	RRH	

ABC Casitas de Sa...	2024-10-22 19:32:...	PH	Arizona Departme n...	\$363,022	1 Year	CoC Bonus	17	PSH	
Mohave County PSH...	2024-10-23 11:16:...	PH	Arizona Departme n...	\$217,472	1 Year	CoC Bonus	19	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.	

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is prioritizing.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Rank	PSH/RRH	Comp Type	Consolidation Type	Expansion Type
SPC Rural	2024-09-26 14:20:...	1 Year	Arizona Department...	\$498,737	16	PSH	PH		
Casas Primeras	2024-09-26 14:17:...	1 Year	Arizona Department...	\$213,378	7	PSH	PH		
Arizona Veterans ...	2024-09-26 15:52:...	1 Year	Arizona Department...	\$392,979	2		Joint TH & PH-RRH		
Victory Place Con...	2024-09-26 15:49:...	1 Year	Arizona Department...	\$212,021	3	PSH	PH		
CBI Gila County PSH	2024-09-26 16:03:...	1 Year	Arizona Department...	\$114,598	13	PSH	PH		
Catholic Charitie..	2024-09-26 16:41:...	1 Year	Arizona Department...	\$502,708	9	PSH	PH		
Northern Sky Cons...	2024-09-26 20:04:...	1 Year	Arizona Department...	\$636,452	10	PSH	PH		
Mohave County PSH...	2024-09-26 15:11:...	1 Year	Arizona Department...	\$217,137	8	PSH	PH		
Catholic Charitie..	2024-09-26 20:02:...	1 Year	Arizona Department...	\$167,438	4	RRH	PH		
HMIS Project	2024-09-26 20:07:...	1 Year	Arizona Department...	\$213,140	1		HMIS		
Cochise County RRH	2024-09-26 15:59:...	1 Year	Arizona Department...	\$271,887	15	RRH	PH		
KAAP DV Bonus RRH	2024-09-26 20:33:...	1 Year	Arizona Department...	\$228,693	11	RRH	PH		
A New Leaf DV RRH...	2024-09-26 20:38:...	1 Year	Arizona Department...	\$283,953	14	RRH	PH		

Permane nt Housing. ..	2024-09- 26 20:30:...	1 Year	Arizona Departm en...	\$919,462	6	PSH	PH		
Sycamor e Canyon C...	2024-09- 26 20:27:...	1 Year	Arizona Departm en...	\$476,189	12	PSH	PH		
Mohave County Per...	2024-10- 10 18:49:...	1 Year	Arizona Departm en...	\$145,717	5	PSH	PH		

Continuum of Care (CoC) UFA Costs Project Listing

Instructions:

Prior to starting the CoC UFA Costs Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide, available on HUD's website.

To upload the UFA Costs 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 UFA Costs 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 UFA Costs project application can be submitted and only by the Collaborative Applicant designated by HUD as UFA (UFA designation was determined during the FY 2024 CoC Registration process) and must match the Collaborative Applicant information on the CoC Applicant Profile.

https://www.hud.gov/program_offices/comm_planning/coc/competition.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is accepting.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Accepted?
ADOH UFA Cost Pro...	2024-10-22 19:24:...	1 Year	Arizona Departmen...	\$193,691	Yes

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.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is accepting.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Accepted?
CoC Planning Proj...	2024-10-22 17:16:...	1 Year	Arizona Departmen...	\$322,818	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 projects submitted by project applicant(s) to your CoC in the e-snaps system.

You may update each of the Project 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 (if applicable) or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps. .

As stated in the FY 2024 - FY 2025 NOFO, YHDP Renewal and YHDP Replacement applications must not be ranked.
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 YHDP Renewal Project Listing.

The Collaborative Applicant certifies all renewal permanent supportive housing and rapid rehousing projects listed on the YHDP 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 YHDP renewal projects.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is accepting.

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 and YHDP Reallocation Listing

Instructions:

Prior to starting the YHDP Replacement and YHDP Reallocation 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 and YHDP Reallocation 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 projects submitted by project applicant(s) to your CoC in the e-snaps system.

You may update each of the projects simultaneously. To review a project on the YHDP Replacement and YHDP Reallocation 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 (if applicable) or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

As stated in the FY 2024 - FY 2025 NOFO, YHDP Renewal, YHDP Reallocation and YHDP Replacement applications must not be ranked.
https://www.hud.gov/program_offices/comm_planning/coc/competition.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC’s Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is accepting.

Project Name	Date Submitted	Applicant Name	Budget Amount	Comp Type	Grant Term	Funding Type	Accepted?
This list contains no items							

Funding Summary

Instructions

This page provides the total budget summaries for each of the project listings after you approved and ranked or rejected new and renewal 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 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
CoC Renewal Amount	\$5,494,489
New CoC Bonus and CoC Reallocation Amount	\$774,763
New DV Bonus Amount	\$968,454
New DV Reallocation Amount	\$0
CoC Planning Amount	\$322,818
UFA Costs Amount	\$193,691
YHDP Renewal and Replacement Amount	\$0
YHDP Reallocation Amount	
Rejected Amount	\$0
TOTAL CoC REQUEST	\$7,754,215

Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan (HUD-2991)	Yes	AZBOSCOC 2024 Cer...	10/19/2024
Other	No		
Other	No		
Project Rating and Ranking Tool (optional)	No	AZBOSCOC 2024 ren...	10/19/2024

Attachment Details

Document Description: AZBOSCOC 2024 Certifications of Consistency

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: AZBOSCOC 2024 renewal and bonus ranking tools

Submission Summary

WARNING: The FY 2024 - FY 2025 CoC Consolidated Application requires submissions of CoC Priority Listings AND the CoC Application.

As stated in the FY 2024 - FY 2025 CoC and YHDP Program NOFO, for FY 2024 funding, CoCs must submit the FY 2024 - 2025 CoC Application and the FY 2024 Priority Listing by the FY 2024 Application Submission Deadline.

WARNING: The FY 2024 - FY 2025 CoC Consolidated Application requires submissions of CoC Priority Listings AND the CoC Application.

As stated in the FY 2024 - FY 2025 CoC and YHDP Program NOFO, for FY 2024 funding, CoCs must submit the FY 2024 - 2025 CoC Application and the FY 2024 Priority Listing by the FY 2024 Application Submission Deadline.

Page	Last Updated
Before Starting	No Input Required
1A. Identification	09/26/2024
2. Reallocation	09/26/2024
5A. CoC New Project Listing	10/23/2024
5B. CoC Renewal Project Listing	10/21/2024
5C. UFA Costs Project Listing	10/22/2024
5D. CoC Planning Project Listing	10/22/2024

5E. YHDP Renewal Project Listing	No Input Required
5F. YHDP Replacement and YHDP Reallocation Project Listing	No Input Required
Funding Summary	No Input Required
Attachments	10/19/2024
Submission Summary	No Input Required



**Arizona Department of Housing as
United Funding Agency and Collaborative Applicant
Arizona Balance of State Continuum of Care (AZBOSCO)
2024 Projects included in Collaborative Application--**

The Arizona Department of Housing completes a consolidated plan for the entirety of Arizona. In addition, some of the AZBOSCO projects are located in areas that complete a local jurisdiction consolidated plan. This packet includes both the statewide certifications and the local jurisdiction certifications.

Agency	Project Name	Renewal or Bonus	County	Location	Jurisdiction of local certifications if applicable
A New Leaf	A New Leaf DV-RRH	Renewal	Pinal	Scattered Site	Casa Grande, Pinal County
AZ Behavioral Health Corporation	Casitas de Salud-PSH	Bonus	Pinal	Scattered Site	Casa Grande, Pinal County
Achieve Human Services	Perm Housing Yuma Consolidated	Renewal	Yuma and La Paz	Scattered Site	City of Yuma
Catholic Charities Community Service (CCCS)	Aspen DV RRH	Bonus	Apache, Navajo, Coconino, Yavapai, Mohave	Scattered Site	Flagstaff, Prescott
Catholic Charities Community Service (CCCS)	Catholic Charities Skypointe Consolidated	Renewal	Coconino and Yavapai	Scattered Site	Flagstaff, Prescott
Catholic Charities Community Service (CCCS)	Sycamore Canyon Consolidated	Renewal	Coconino, and Yavapai	Scattered Site	Flagstaff, Prescott
Catholic Charities Community Service (CCCS)	Northern Sky Consolidated	Renewal	Coconino and Yavapai	Scattered Site	Flagstaff, Prescott
Catholic Charities Community Service (CCCS)	Yellow Pine Consolidated-PSH	Renewal	Apache and Navajo	Scattered Site	NA
Community Bridges, Inc. (CBI)	Cochise County RRH	Renewal	Cochise	Scattered Site	Sierra Vista, Douglas
Community Bridges, Inc., (CBI)	CBI Gila County PSH	Renewal	Gila	Scattered Site	NA
CPSA	Casa Primeras	Renewal	Cochise	Scattered Site	Sierra Vista, Douglas
CPSA	SPC Rural	Renewal	Cochise, Santa Cruz, Graham, Greenlee	Scattered Site	Sierra Vista, Douglas
Horizon Health and Wellness	Street to Home PSH	Bonus	Yuma	Scattered Site	City of Yuma
Kingman Aid to Abused People (KAAP)	KAAP DV Bonus RRH	Renewal	Mohave	Scattered Site	NA
Mohave County	Mohave County PSH 2011 Fresh Start	Renewal	Mohave	Scattered Site	NA



Agency	Project Name	Renewal or Bonus	County	Location	Jurisdiction of local certifications if applicable
Mohave County)	Bridging Northern Arizona	Renewal	Mohave	Scattered Site	NA
Mohave County	Mohave County PSH 2024	Bonus	Mohave	Scattered Site	NA
United States Veterans Initiative	Veterans In Progress	Renewal	Yavapai	1040 Whipple St., Prescott, AZ 86305 and Scattered Site	Prescott
United States Veterans Initiative	Victory Place Consolidated	Renewal	Yavapai	323 Pleasant St., Prescott, AZ 86301 218 S. McCormick St., Prescott, AZ 86301 333 S. Alarcon, Prescott, AZ 86303 1040 Whipple St., Prescott, AZ 86305	Prescott
Verde Valley Sanctuary	VVS DV-RRH 2024	Bonus	Yavapai	Scattered Site	NA
Arizona Department of Housing	HMIS Project	Renewal	All 13 counties in BOS	NA	NA
Arizona Department of Housing	Planning	Request	All 13 counties in BOS	NA	NA
Arizona Department of Housing	UFA related funds	Request	All 13 counties in BOS	NA	NA

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number: 2501-0044
Expiration Date: 2/28/2027

Public Reporting Burden Statement: This collection of information is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of the requested information. Comments regarding the accuracy of this burden estimate and any suggestions for reducing this burden can be sent to: U.S. Department of Housing and Urban Development, Office of the Chief Data Officer, R, 451 7th St SW, Room 8210, Washington, DC 20410-5000. Do not send completed forms to this address. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid OMB control number. This agency is authorized to collect this information under Section 102 of the Department of Housing and Urban Development Reform Act of 1989. The information you provide will enable HUD to carry out its responsibilities under this Act and ensure greater accountability and integrity in the provision of certain types of assistance administered by HUD. This information is required to obtain the benefit sought in the grant program. Failure to provide any required information may delay the processing of your application and may result in sanctions and penalties including of the administrative and civil money penalties specified under 24 CFR §4.38. This information will not be held confidential and may be made available to the public in accordance with the Freedom of Information Act (5 U.S.C. §552). The information contained on the form is not retrieved by a personal identifier, therefore it does not meet the threshold for a Privacy Act Statement.

I/We, the undersigned, also certify under penalty of perjury that the information provided below is true, correct, and accurate. 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, 1014; 31 U.S.C. § 3729, 3802; 24 CFR § 28.10(b)(iii)).

I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: Arizona Department of Housing

Project Name: AZ Balance of State Continuum of Care Renewal, Bonus, UFA, Planning Projects (see attached list)

Location of the Project: Apache, Cochise, Coconino, Gila, Graham, Greenlee, La Paz, Mohave, Navajo, Pinal, Santa Cruz, Yavapai, Yuma

Name of the Federal Program to which the applicant is applying:

U.S. Department of Housing and Urban Development NOFO FR-6800-N-25

Name of Certifying Jurisdiction: Arizona Department of Housing

Certifying Official of the Jurisdiction
Name: Joan Serviss

Title: Director

Signature: **Joan Serviss**

Digitally signed by Joan Serviss
Date: 2024.10.16 10:53:51 -07'00'

Date: 10/16/2024

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
with the Consolidated Plan
for the Continuum of Care
Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: A New Leaf, Inc.


Project Name: A New Leaf DV RRH Pinal

Location of the Project: 879 N Plaza Dr #101D, Apache Junction 85120

Name of
Certifying Jurisdiction: City of Casa Grande

Certifying Official
of the Jurisdiction Name: Craig McFarland

Title: Mayor

Signature: 

Date: 9-30-24

Public reporting burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, completing the form, attaching a list of projects if submitting one form per jurisdiction, obtaining local jurisdiction's signature, and uploading to the electronic e-snaps CoC Consolidated Application. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

Privacy Act Statement. This form does not collect SSN information. The Department of Housing and Urban Development (HUD) is authorized to collect all the information required by this form under 24 CFR part 91, 24 CFR Part 578, and is authorized by the McKinney-Vento Act, as amended by S. 896 The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 (42 U.S.C. 11371 et seq.). HUD considers the completion of this form, including the local jurisdiction(s) authorizing official's signature, as confirmation the project application(s) proposed activities submitted to HUD in the CoC Program Competition are consistent with the jurisdiction's Consolidated Plan and, if the project applicant is a state or unit of local government, that the jurisdiction is following its Consolidated Plan per the requirement of 24 CFR part 91. Failure to either submit one form per project or one form with a listing of project information for each field (i.e., name of applicant, name of project, location of project) will result in a technical deficiency notification that must be corrected within the number of days designated by HUD, and further failure to provide missing or incomplete information will result in project application removal from the review process and rejection in the competitive process.

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
with the Consolidated Plan
for the Continuum of Care
Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: A New Leaf, Inc.

Project Name: A New Leaf DV RRH Pinal

Location of the Project: 879 N Plaza Dr #101D, Apache Junction 85120

Name of
Certifying Jurisdiction: Pinal County

Certifying Official
of the Jurisdiction Name: Heather Patel

Title: Grants Manager

Signature: 

Date: 9/12/22

Public reporting burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, completing the form, attaching a list of projects if submitting one form per jurisdiction, obtaining local jurisdiction's signature, and uploading to the electronic e-snaps CoC Consolidated Application. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

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Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number: 2501-0044
Expiration Date: 2/28/2027

Public Reporting Burden Statement: This collection of information is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of the requested information. Comments regarding the accuracy of this burden estimate and any suggestions for reducing this burden can be sent to: U.S. Department of Housing and Urban Development, Office of the Chief Data Officer, R, 451 7th St SW, Room 8210, Washington, DC 20410-5000. Do not send completed forms to this address. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid OMB control number. This agency is authorized to collect this information under Section 102 of the Department of Housing and Urban Development Reform Act of 1989. The information you provide will enable HUD to carry out its responsibilities under this Act and ensure greater accountability and integrity in the provision of certain types of assistance administered by HUD. This information is required to obtain the benefit sought in the grant program. Failure to provide any required information may delay the processing of your application and may result in sanctions and penalties including of the administrative and civil money penalties specified under 24 CFR §4.38. This information will not be held confidential and may be made available to the public in accordance with the Freedom of Information Act (5 U.S.C. §552). The information contained on the form is not retrieved by a personal identifier, therefore it does not meet the threshold for a Privacy Act Statement.

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I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: Arizona Behavioral Health Corporation

Project Name: Casitas De Salud

Location of the Project: Scattered Sites PSH (ABC corporate office: 501 E Thomas Rd, Phoenix, AZ 85012)

Name of the Federal Program to which the applicant is applying:

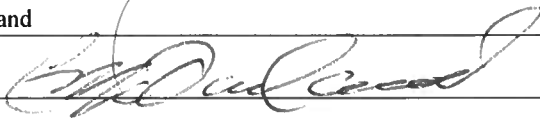
HUD Continuum of Care Program

Name of Certifying Jurisdiction: City of Casa Grande

Certifying Official of the Jurisdiction

Name: Craig McFarland

Title: Mayor



Signature:

Date: 10-14-2024

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number: 2501-0044
Expiration Date: 2/28/2027

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I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: Arizona Behavioral Health Corporation

Project Name: Casitas De Salud

Location of the Project: Scattered Sites PSH (ABC corporate office: 501 E Thomas Rd, Phoenix, AZ 85012)

Name of the Federal Program to which the applicant is applying:

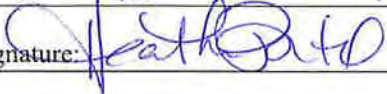
HUD Continuum of Care Program

Name of Certifying Jurisdiction:

Certifying Official of the Jurisdiction

Name: HEATHER PATEL

Title: GRANTS MANAGER

Signature: 

Date: 10/11/24

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number: 2501-0044
Expiration Date: 2/28/2027

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I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: Achieve Human Services

Project Name: Permanent Housing Yuma Consolidated

Location of the Project: Yuma County, Arizona

Name of the Federal Program to which the applicant is applying:


PSH

Name of Certifying Jurisdiction: City of Yuma

Certifying Official of the Jurisdiction

Name: John D. Simonton

Title: Acting City Administrator

Signature: 

Date: 09-26-2024

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number: 2501-0044
Expiration Date: 2/28/2027

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I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: Catholic Charities Community Services, Inc

Project Name: Bonus Project-Aspen

Location of the Project: 2101 N. 4th Street Flagstaff AZ, 86004

Name of the Federal Program to which the applicant is applying:

HUD COC

Name of Certifying Jurisdiction: City of Flagstaff

Certifying Official of the Jurisdiction

Name: Greg Clifton

Title: City Manager



Greg Clifton
2024.10.15 11:53:08 -0700

Signature:

Date:

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number: 2501-0044
Expiration Date: 2/28/2027

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I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: Catholic Charities Community Services, Inc

Project Name: Northern Sky, Sycamore Canyon, Skypointe, Yellow Pine

Location of the Project: 2101 N. 4th Street Flagstaff AZ, 86004

Name of the Federal Program to which the applicant is applying:

HUD COC

Name of Certifying Jurisdiction: City of Flagstaff

Certifying Official of the Jurisdiction

Name: Greg Clifton

Title: City Manager

Signature:



Digitally signed by Greg Clifton

Date: 2024.09.16 13:44:13

07'00'

Date:

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number: 2501-0044
Expiration Date: 2/28/2027

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I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: Catholic Charities Community Services, Inc

Project Name: Northern Sky, Sycamore Canyon, Skypointe, Yellow Pine

Location of the Project: 434 W. Gurley St. Prescott AZ, 86301

Name of the Federal Program to which the applicant is applying:

HUD COC

Name of Certifying Jurisdiction: City of Prescott

Certifying Official of the Jurisdiction

Name: Dallin Kimble

Title: City Manager

Signature:



Date:

10/11/2024

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number: 2501-0044
Expiration Date: 2/28/2027

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I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: Catholic Charities Community Services, Inc

Project Name: Bonus Project Aspen

Location of the Project: 434 W. Gurley St. Prescott AZ, 86301


Name of the Federal Program to which the applicant is applying:

HUD COC

Name of Certifying Jurisdiction: City of Prescott

Certifying Official of the Jurisdiction
Name: Dallin Kimble

Title: City Manager

Signature: 

Date: 10/11/24

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: Community Bridges, Inc.

Project Name: Cochise County RRH (DV Combined)

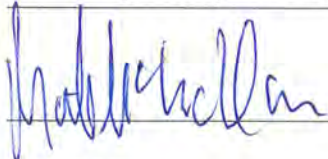
Location of the Project: Cochise County

Name of the Federal Program to which the applicant is applying: HUD Balance of State CoC NOFO 2024

Name of Certifying Jurisdiction: City of Sierra Vista

Certifying Official of the Jurisdiction Name: Matt McLachlan

Title: Community Development Director

Signature: 

Date: 8/19/2024

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: Community Bridges, Inc.

Project Name: Cochise County RRH (DV Combined)


Location of the Project: Cochise County

Name of the Federal Program to which the applicant is applying: HUD Balance of State CoC NOFO 2024

Name of Certifying Jurisdiction: City of Douglas

Certifying Official of the Jurisdiction Name: Xenia Gonzalez

Title: Neighborhood Resources & Grants Director

Signature: 

Date: 08/23/2024

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number: 2501-0044
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I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: Community Partnership of Southern Arizona

Project Name: Casas Primeras

Location of the Project: Cochise County

Name of the Federal Program to which the applicant is applying:

HUD-ADOH-BOS

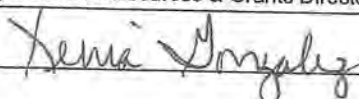
Name of Certifying Jurisdiction: City of Douglas

Certifying Official of the Jurisdiction

Name: Xenia Gonzalez

Title: Neighborhood Resources & Grants Director

Signature:



Date: October 1, 2024

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number: 2501-0044
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I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: Community Partnership of Southern Arizona

Project Name: Shelter Plus Care Rural

Location of the Project: Cochise County, Graham County, Greenlee County, and Santa Cruz County

Name of the Federal Program to which the applicant is applying:

HUD-ADOH-BOS

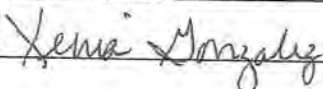
Name of Certifying Jurisdiction: City of Douglas

Certifying Official of the Jurisdiction

Name: Xenia Gonzalez

Title: Neighborhood Resources & Grants Director

Signature:



Date: October 1, 2024

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I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: Community Partnership of Southern Arizona

Project Name: Shelter Plus Care Rural

Location of the Project: Cochise County, Graham County, Greenlee County, and Santa Cruz County

Name of the Federal Program to which the applicant is applying:

HUD-ADOH-BOS

Name of Certifying Jurisdiction: City of Sierra Vista

Certifying Official of the Jurisdiction

Name: Charles Potucek

Title: City Manager

Signature:



Date:

10/1/24

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number: 2501-0044
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Applicant Name: Community Partnership of Southern Arizona

Project Name: Casas Primas

Location of the Project: Cochise County

Name of the Federal Program to which the applicant is applying:

HUD-ADOH-BOS

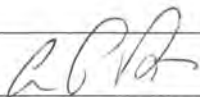
Name of Certifying Jurisdiction: City of Sierra Vista

Certifying Official of the Jurisdiction

Name: Charels Potucek

Title: City Manager

Signature:



Date:

10/1/24

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number: 2501-0044
Expiration Date: 2/28/2027

Public Reporting Burden Statement: This collection of information is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of the requested information. Comments regarding the accuracy of this burden estimate and any suggestions for reducing this burden can be sent to: U.S. Department of Housing and Urban Development, Office of the Chief Data Officer, R, 451 7th St SW, Room 8210, Washington, DC 20410-5000. Do not send completed forms to this address. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid OMB control number. This agency is authorized to collect this information under Section 102 of the Department of Housing and Urban Development Reform Act of 1989. The information you provide will enable HUD to carry out its responsibilities under this Act and ensure greater accountability and integrity in the provision of certain types of assistance administered by HUD. This information is required to obtain the benefit sought in the grant program. Failure to provide any required information may delay the processing of your application and may result in sanctions and penalties including of the administrative and civil money penalties specified under 24 CFR §4.38. This information will not be held confidential and may be made available to the public in accordance with the Freedom of Information Act (5 U.S.C. §552). The information contained on the form is not retrieved by a personal identifier, therefore it does not meet the threshold for a Privacy Act Statement.

I/We, the undersigned, also certify under penalty of perjury that the information provided below is true, correct, and accurate.
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, 1014; 31 U.S.C. § 3729, 3802; 24 CFR § 28.10(b)(iii)).

I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: Horizon Health and Wellness

Project Name: HHW Street to Home

Location of the Project: Yuma, Arizona

Name of the Federal Program to which the applicant is applying:

HUD Arizona Balance of State Continuum of Care

Name of Certifying Jurisdiction: City of Yuma

Certifying Official of the Jurisdiction

Name: Jay Simonton

Title: City Administrator

Signature:



Date:

10/10/2024

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I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: United States Veterans Initiative (U.S.VETS Prescott)

Project Name: Veterans In Progress - TH/RRH

Location of the Project: U.S.VETS Prescott 1040 Whipple Street, Bld 400, Prescott, AZ 86305

Name of the Federal Program to which the applicant is applying:

City of Prescott

Name of Certifying Jurisdiction:

Certifying Official of the Jurisdiction
Name: Michael McInnes

Title: City of Prescott HUD CPD Administrator

Signature: Michael McInnes Digitally signed by Michael McInnes
Date: 2024.09.26 08:14:45 -07'00' Date:

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number: 2501-0044
Expiration Date: 2/28/2027

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I/We, the undersigned, also certify under penalty of perjury that the information provided below is true, correct, and accurate. 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, 1014; 31 U.S.C. § 3729, 3802; 24 CFR § 28.10(b)(iii)).

I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: United States Veterans Initiative (U.S.VETS Prescott)

Project Name: Victory Place - PH

Location of the Project: U.S.VETS Prescott 1040 Whipple Street, Bld 400, Prescott, AZ 86305

Name of the Federal Program to which the applicant is applying:

City of Prescott

Name of Certifying Jurisdiction:

Certifying Official of the Jurisdiction

Name: Michael McInnes

Title: City of Prescott HUD CPD Administrator

Signature: Michael McInnes

Digitally signed by Michael McInnes
Date: 2024.09.26 08:16:32 -07'00'

Date:

**Arizona Department of Housing
Collaborative Applicant and United Funding Agency
For
Arizona Balance of State Continuum of Care
AZ-500
Attachments in Response to
FR-6800-N-25-CoC NOFO FY 2024
1E-2. Local Competition Scoring Tool(s)**

The following documents are attached:

- **Scoring Tool for Renewal Projects**
- **Scoring Tool for Bonus Projects**

<p>Note--for all attributes that indicate APR--either the project APR was used or a comparable database report</p>	
<p>10</p>	<p>6</p>
<p>1. Conditions--APR Q13a1-Max Points 10</p>	<p>2. Length of time between intake and Housing Move in no more than 90 days for those who move in-APR Q22c-Max Points-6</p>
<p>Scale PSH 90% or more-10 pts. 70%-89% 8 pts. 60%-79%-6 pts. 50-59%-4 pts. Less than 49%-0 pts</p> <p>RRH 40% or more-10 pts. 30%-39% 8 pts. 25%-29%-6 pts. 20%-24%-4 pts Less than 20%-0 pts</p>	<p>No new move ins--5 points 60% or more of households move in within 90 days-6 points 51%-59% move in within 100 days-4 points 40%-50% move in within 100 days-2 points 39% or less move in within 100 days--0 points</p>

8
<p>3. All adults who had some sort of earned or other income at start and annual assessment/exit status Total number of adults (at annual assessment/leavers) divided by total number of adults who had assessment or left) -APR Q18-Max points 8</p>
<p>PSH 40%+ of adults had some sort of income—8 pts 30%-39% of adults had some sort of income—6 pts 20%-29% of adults had some sort of income-4 pts 10%-19% of adults had some sort of income-2 pts Less than 10% of adults had some sort of income—0 pts</p> <p>RRH 60%+ of adults had some sort of income—8 pts 50%-59% of adults had some sort of income—6 pts 40%-49% of adults had some sort of income-4 pts 30%-39% of adults had some sort of income-2 pts Less than 29% of adults had some sort of income—0 pts</p>

1	5	4
4. Adults in households included survivors of domestic violence-APR 14A- Max points-1	5. # of participants that have at least 1 source of health insurance (includes stayers)--based on children and adults- APR Q21- max 5 points	6. % of households being served that came from Coordinated Entry process-- subrecipient scored-Max score 4 points
yes--adult survivors were served-1pt no--adult survivors were not served-0pt	80%-100%--5 pts. 70%- 79%--4 pts. 60-69%-3 pts 50%-59%-2 pts 49% or less -0	80%-100%--4 pts. 60%- 79%--3 pts. 50-69%- 2 pts 40%-49%-1 pts less than 40% 0

10	10	4
<p>7. The number of households that did not return to a place not meant for human habitation during the project year. (Either the household remained in the project, or if the household left, they went to a temporary or other permanent setting ---APR Q23-max score 10 points</p>	<p>8. % of head of households served who met the definition of CH—PSH at entry For RRH—the standard is % of head households who met the definition of CH at entry --Max points 10 APR Q26a APR Q26a APR Q14a</p>	<p>9. Utilization of Funds Contract Specialists scored-max points 4</p>
<p>No households left-8 points</p> <p>--90% -100% of households who left and went to a permanent or safe bridge/temporary setting.—10 points</p> <p>--80% -89% of households who left and went to a permanent or safe bridge/temporary setting.—8 points</p> <p>--70% -79% of households who left and went to a permanent or safe bridge/temporary setting.—6 points</p> <p>--60% -69% of households who left and went to a permanent or safe bridge/temporary setting.—4 points</p> <p>--50%-59% of households who left and went to a permanent or safe bridge/temporary setting—2 points</p> <p>--49% or less of households who left and went to a permanent or safe bridge/temporary setting-0 points</p>	<p>PSH</p> <p>80%-100%--10 pts.</p> <p>79-79%-8 pts</p> <p>60-69%-6 pts</p> <p>50-59%-4pts</p> <p>40-49%-2pts</p> <p>less than 40% -0</p> <p>RRH</p> <p>20% or more-10 pts.</p> <p>15-19%-8pts</p> <p>11-14%-6pts</p> <p>5-10%-4 pts</p> <p>4%-2pts</p> <p>less than 4% 0</p>	<p>95%-100% expended-4 pts</p> <p>85%-94% expended-2 pts</p> <p>84% or less expended-0 pts</p>

2	3	3
10. Timely drawdown of funds-Contract Specialists scored-max points-2	11. RFP are submitted within deadlines and are accurate. (Does not include items for discussion)-max points 3 Contract Specialists scored (Incorrect includes errors in math, missing attachments, incorrect forms or other preventable errors)	12. HMIS data quality, Contract Specialists scored-max point 3
75% of funds drawn down by Q3-2pts 50%-74% of funds drawn down by Q3-1 pt 49% and less of funds drawn down by Q3- 0 pts	No errors--3 pts 1 or 2 errors--2 pts 3 or more errors-0 pts	98%-100%-3 pts 95%-97.99% - 1 pts 94.99% or less-0

3	7	3
13. Housing First Implementation- Contract Specialists scored-max points - 3	14. Project served 100% of households based on 2023 CoC contract. Contract Specialists scored-max points 7	15. Agency is low risk related to ability to manage CoC contracts, Contract Specialists scored based on ASRAT tool- max points 3
Green--3 pts Yellow-1 pt Red-0 pt	95%-100%-7 pts 94% or less-0 pts	Green--3 pts Yellow-1 pt Red-0 pt

2	3	2	86
16. Code of Conduct complies with HUD Requirements--max points 2	17. LCEH and Meetings Attendance. Member of project agency staff attends LCEH meetings-from LCEH RFI-max points 3	18. Agency demonstrates equity in staff composition-and demonstrates by policy that addresses culture, disparity, equity. Agency includes individuals with lived experience in decision making.-max points 2	
Code of Conduct complies-2 pts Code of Conduct does not comply-0 pts	LCEH Meetings Attendance 80% or more-3 pts 60%-79%-2pts 59% or less-0 pts	Policy demonstrates promotion of culture, disparity, equity. 1 pt Individuals with Lived Experience involved in decision making-1 pt. No documentation-0 pts	

2024 Balance of State Continuum of Care Application
Bonus Project Scoring Worksheet for Reviewers
(Please complete one scoring worksheet for each application)
Approval by the Governance Advisory Board August 26, 2024

Note— Scoring can be completed in this Word document or by hand and scanned back— whatever is easier for you.

Name of Agency _____ Project Name _____

Type of application

CoC Bonus—PSH CoC Bonus-RRH DV Bonus-RRH DV Bonus-SSO-CE

Area	Criteria	Scale	Score
Threshold- Q1, Q1a	<p>Applicant met initial threshold requirements including no unresolved monitoring findings, is good legal standing related to non-profit status, and completes an annual audit.</p> <p><i>Guidance: Non-Profit operating within AZBOSCOG geographic boundaries for no less than one year. Has a current audit with no outstanding concerns or findings.</i></p> <p><i>ADOH will complete a threshold review as well prior to including the project in the application.</i></p>	<ul style="list-style-type: none"> All criteria are met---3 points Not all criteria are met—0 points 	
Notes:			
Involvement in the LCEH Q2, Q3, Q4	<p>Applicant is actively involved in the LCEH including attending meetings and participating in the Unsheltered Point In Time Count</p>	<ul style="list-style-type: none"> Applicant participates in LCEH meetings and participated in Unsheltered Point in Time Count- 2 points Applicant participated in meetings or the Unsheltered Point in Time Count—but not both—1 point Applicant is not involved in LCEH activities-0 point 	
Notes			
HMIS/ alternative that meet HUD standards Q5	<p>Applicant explained how they will use HMIS or if a DV provider, use a comparable database.</p> <p><i>Guidance: If potential new provider, is explanation sufficient to know there is an understanding of HMIS/comparable database ?</i></p>	<ul style="list-style-type: none"> Applicant use of HMIS or comparable database description was complete and clear—4 points Applicant use of HMIS use or comparable database description was adequate—2 points Agency did not provide sufficient information to indicate competent use of a client level database— 0 points 	
Notes			

Area	Criteria	Scale	Score
Organization Overview and Project Description Q6, Q7	<p>Applicant provided a complete and clear description about the project and target population?</p> <p><i>Guidance: Is it clear what service activities will be provided and by whom? Were the methods of outreach reasonable for the service area? Is there a strategy for targeting those most at need?</i></p>	<ul style="list-style-type: none"> Organization overview and project description was complete and clear-8 points Organization overview and project description was adequate-4 points Organization overview and project description was insufficient and did not provide a full overview—0 points 	
Notes			
Project specifically leverages other housing and/or health resources with commitment of signed MOU – Q7a	<p>Applicant must demonstrate that at least 25% of the project’s total units must be supported by other housing or healthcare funding and that the Applicant committed to provided signed MOU documenting the leverage.</p>	<ul style="list-style-type: none"> Applicant demonstrated leverage of housing resources at 25% of units.- 3 points Applicant demonstrated leverage of healthcare resources at 25% of funding requested Applicant demonstrated leverage of both housing and health care resources in the amount of 25% of units for housing and 25% of funding requested for healthcare resources—6 points 	
Notes			
Need for project Q8	<p>Applicant provided clear description about how the project will fill gaps in service and what need will be addressed through the project. The applicant cited local data to demonstrate the need. The applicant described how LCEH members were consulted.</p> <p><i>Guidance: Is data stated recent? Does it relate to services being proposed? Is it logical?</i></p>	<ul style="list-style-type: none"> Applicant provided information about need that was complete and compelling—4 points Applicant provided information about need that was adequate –2 points Applicant did not provide a compelling reason for the project—0 points 	
Notes			
Focus—Project is in community unserved/ Underserved Q8a	<p>The applicant included information that the project will serve a county where there are currently no CoC PSH/RRH projects. OR</p> <p>The applicant included information that the project will serve a county that has insufficient PSH/RRH units and documented how the county is underserved related to PSH/RRH.</p>	<ul style="list-style-type: none"> Applicant demonstrated that the project will be located in an unserved county—6 points Applicant demonstrated that the project will be located in an underserved county—3 points. Project will not be located in a county that is unserved or underserved.-0 points 	
Notes			
Coordinated Entry for Bonus, DV Bonus Or Bonus SSO-CE 9, 9a	<p>Applicant provided complete information about how they (or will) participate in Coordinated Entry including use of the Vi-SPDAT, matching participants to housing and participation in the local coordinated entry process.</p> <p>OR</p> <p>For SSO-CE Applicant demonstrated understanding of how the Coordinated Process must include adaptations to effectively serve survivors of domestic violence</p>	<ul style="list-style-type: none"> CE/CC activity were clearly articulated or for SSO-CE applicant clearly demonstrated understanding of CE in relationship to survivors of DV—8 points CE/CC activity description was adequate or for SSO-CE applicant demonstrated and adequate understanding of CE in relationship to survivors of DV—4 points 	

Area	Criteria	Scale	Score
	<p><i>Guidance: How is the applicant involved in the local Coordinated Entry System? Is an explanation more than a statement on attending meetings? Is there demonstrated comprehension of CE?</i></p>	<ul style="list-style-type: none"> • CE/CC activities description was incomplete or for SSO-CE clear understanding was not articulated—0 points 	
Notes			
<p>Move to safe, affordable permanent housing-Q9b</p>	<p>Applicant provided a clear description about how households will be quickly moved into safe, affordable housing. Or If SSO-CE project, applicant provided a clear description about how the project will support organizations with housing placement.</p> <p><i>Guidance: Does the applicant have experience in this work? Is plan for outreach, services and moving into housing comprehensive? If SSO-CE does the applicant know who the service organizations are and work with them currently?</i></p>	<ul style="list-style-type: none"> • Applicant demonstrated clear understanding about housing placement-4 points • Applicant did not demonstrate a clear understand about housing placement-0 points 	
Notes			
<p>Housing Affordability Q12, Q13, Q13a, Q13b, Q14</p>	<p>Applicant provided information that demonstrates their understanding of the rental markets in the community (ies) they propose to serve. Applicants demonstrate they participate in housing affordability efforts in the communities they serve.</p> <p><i>Guidance: How are units identified? Is the proposed number of units reasonable for the described rental market? Not applicable to SSO-CE</i></p>	<ul style="list-style-type: none"> • Applicant demonstrated clear plans to implement strategies to ensure the community has units that have reasonable rents. 4 points • Applicant demonstrated basic plans to provide minimal support to ensure community has units that have reasonable rents. 2 points • Applicant demonstrated no understanding about how to contribute to the community to promote reasonable rents-0 	
Notes			
<p>Landlord Collaboration, Q14a, Q14b</p>	<p>Applicant provided information that demonstrates they have active relationships or have plans to establish collaborations related to promoting the use of units for participants and have relationship that results in problem solving if issues come up.</p> <p><i>Guidance: Did the applicant identify strategies related to recruiting landlords? Not applicable to SSO-CE</i></p>	<ul style="list-style-type: none"> • Applicant demonstrated clear collaborations and partnerships-4 points • Applicant demonstrated basic minimal partnerships and collaborations 2 points • Applicant demonstrated partnerships or collaborations 	
Notes			
<p>Housing First/Low Barrier Q15, Q16, Q17, Q18, Q18a, Q19</p>	<p>Applicant demonstrated an understanding of Housing First principles and how they will be implemented through the project including attributes such as</p> <ul style="list-style-type: none"> • No barriers to entry • No preconditions • Does not terminate program participants for lack of participation in services beyond normal tenancy rules. • Supportive services participation is voluntary. 	<ul style="list-style-type: none"> • Applicant demonstrated clear understanding of Housing First and strategies to implement—8 points • Applicant demonstrated basic of understanding of Housing First and will need support for implementation—4 points • Applicant demonstrated no understanding of Housing First and related attributes –0 points 	
Notes			

Area	Criteria	Scale	Score
Justice, Equity, Diversity, Inclusion processes – services Q20, Q20a, Q20b, Q20c, Q20d, Q20e, Q21, Q21a, Q22	<p>The applicant described how strategies to implement justice, equity, diversity and inclusion will be implemented as a part of the program?</p> <ul style="list-style-type: none"> • Use of appropriate assessments • How outreach and referral will take place with to ensure racial equity • How individuals coming from the justice system (i.e., jail or corrections) or other institutions will be served through the program. <p><i>Guidance: Is there a clear understanding of barriers to participation (e.g. lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local population of individuals experiencing homelessness?</i></p>	<ul style="list-style-type: none"> • Applicant clearly explained and proposed activities that will promote justice, equity, diversity and inclusion –10 points • Applicant sufficiently explained and proposed activities that will promote justice, equity, diversity and inclusion –8 points • Applicant demonstrated basic understanding of implementing services through a social justice and racial equity lens but will need additional support for implementation –6 points • Applicant demonstrated no understanding of how to implement strategies through a justice, equity, diversity, inclusion lens –0 points 	
Notes			
Permanent Housing Q25	<p>Applicant described how program participants will be supported in remaining or obtaining permanent housing?</p> <p><i>Guidance: Did applicant articulate communication with participants and how there is connection to resources?</i></p>	<ul style="list-style-type: none"> • Description articulated clearly how connections to permanent housing will be implemented--8 points • Description was adequate –4 points • Description was incomplete –0 points 	
Notes			
Mainstream Resources Q26, Q26a	<p>Applicant described how coordination takes place with other organizations and how the program participant will be connected to mainstream resources including SSI, SSDI, Food Stamps, Veteran Benefits and others.</p>	<ul style="list-style-type: none"> • Description articulated clearly about coordination with other organization and how connections to mainstream resources will be implemented--4 points • Description was adequate –2 points • Description was incomplete –0 points 	
Notes			
Education Q 26a	<p>Applicant described how the agency works with homeless school liaisons or help clients/tenants in enrolling in education activities?</p>	<ul style="list-style-type: none"> • Description articulated clearly how connections to education will be implemented--4 points • Description was adequate –2 points • Description was incomplete –0 points 	
Notes			
Employment Q26a	<p>Applicant described how the program participant would be connected to employment support and what types of employment support are provided?</p>	<ul style="list-style-type: none"> • Description articulated clearly how connections to employment will be implemented--4 points • Description was adequate –2 points • Description was incomplete –0 points 	
Notes			
Insurance SSDI/SOAR Q27a, 27b, 27c, 27d, 27e, 27f	<p>Applicant described how clients/tenant are connected to insurance and social security (SSI/SSDI) benefits or a SOAR trained individual to apply for benefits?</p>	<ul style="list-style-type: none"> • Description articulated clearly how individuals are connected--4 points • Description was adequate –2 points • Description was incomplete –0 points 	

Area	Criteria	Scale	Score
	<p><i>Guidance: Does the agency have SOAR trained staff? If no staff, is there a clearly defined relationship detailing how applicant will work with entity that has SOAR trained staff?</i></p>		
Notes			
<p>Survivors of Domestic Violence Q28, Q29, Q30</p>	<p>Applicant explained how they will provide services in alignment with HUD/VAWA guidelines related to survivors of domestic violence</p> <p><i>Guidance: Did the applicant articulate an understanding of VAWA and strategies related to the delivery of supportive services, strategies related to sustainable housing stability, and addressing safety?</i></p>	<ul style="list-style-type: none"> • Applicant demonstrated clear plans to meeting program participants service needs-6 points • Applicant demonstrated basic plans to provide minimal support to program participant service needs 4 points • Applicant demonstrated no understanding of how to provide support services to program participants-0 points 	
Notes			
<p>Fair Housing Q32</p>	<p>Applicant demonstrated an understanding of fair housing and indicated training attendance.</p>	<ul style="list-style-type: none"> • Applicant demonstrated clear understanding of fair housing tenets and implementation -4 points • Applicant demonstrated basic understanding of fair housing tenets and implementation and will need support to fully implement -2 points • Applicant demonstrated no understanding of fair housing tenets and implementation. -0 points 	
Notes:			
Total Score			

Summary Comments:

Summary Scoring Matrix

Question	Maximum Points For Bonus Projects or DV Bonus Projects	Maximum Points for DV Bonus SSO-CE
Threshold	3	3
Involvement in LCEH	2	2
HMIS and Comparable Database	4	4
Organization Overview and Project Description	8	8
Project Description-Leverage of Housing and/or Healthcare Resources	6	NA
Need for the project	4	4
Project Description unserved/underserved area	6	6
Coordinated Entry/Case Conferencing	8	8
Move to safe, affordable housing	4	4
Housing Affordability not applicable to SSO-CE	4	NA
Landlord/Property Management	4	NA
Housing First	8	8
Justice, Equity, Inclusion, Diversity	10	10
Permanent Housing	8	8
Mainstream Resources	4	4
Education	4	4
Employment	4	4
Insurance/SSDI/SOAR	4	4
Survivors of Domestic Violence	6	6
Fair Housing	4	4
Total	105	91