

No Fee

DOC # 0759567  
03/03/2010 02:04 PM Deputy: GB

OFFICIAL RECORD  
Requested By:  
DC/SOCIAL SERVICES

Assessor's Parcel Number: N/A

Date: MARCH 3, 2010

Recording Requested By:  
social Services

Name: CYNDY REDMILES, SENIOR SECRETARY

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Real Property Transfer Tax: \$ N/A

Douglas County - NV  
Karen Ellison - Recorder  
Page: 1 Of 96 Fee: 0.00  
BK-0310 PG-0702 RPTT: 0.00



GRANT AGREEMENT #2010.057  
(Title of Document)



FILED

NO. 2010.057

2010 FEB 26 PM 2:48

TED THUAN  
CLERK

Recipient: Douglas County  
Address: P.O. Box 218, Minden, Nevada 89423  
Tax Identification Number: 88-6000031  
DUNS: 010984979  
Grant Number: NV0021B9T020800  
Project Location: Scattered Sites  
Continuum of Care Number: NV-502  
Funded under Samaritan Housing Initiative? No  
Funded under Permanent Housing for Disabled Persons Component? No  
Funded under Rapid Re-housing for Families Demonstration Program? No

### 2008 Supportive Housing Program Grant Agreement – New Project

This Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and the Recipient, which is described in section 1 of Attachment A, attached hereto and made a part hereof.

The assistance which is the subject of this Grant Agreement is authorized by the McKinney-Vento Homeless Assistance Act 42 U.S.C. 11381 (hereafter "the Act"). The term "grant" or "grant funds" means the assistance provided under this Agreement. This grant agreement will be governed by the Act, the Supportive Housing rule codified at 24 CFR 583, which is attached hereto and made a part hereof as Attachment B, and the Notice of Funding Availability (NOFA), that was published in two parts. The first part was the Policy Requirements and General Section of the NOFA, which was published March 19, 2008, at 73 FR 14882, and the second part was the Continuum of Care Homeless Assistance Programs section of the NOFA, which was published July 10, 2008, at 73 FR 39840. The term "Application" means the application and technical submission (Attachment C) on the basis of which HUD, including the certifications and assurances and any information or documentation required to meet any grant award conditions, on the basis of which HUD approved a grant. The Application is incorporated herein as part of this Agreement; however, in the event of a conflict between any part of the Application and any part of the Grant Agreement, the latter shall control. The Secretary agrees, subject to the terms of the Grant Agreement, to provide the grant funds in the amount specified at section 2 of Attachment A for the approved project described in the application. The Recipient agrees, subject to the terms of the Grant Agreement, to use the grant funds for eligible activities during the term specified at section 3 of Attachment A.

The project means a structure or structures (or portions of such structure or structures) that is acquired, rehabilitated, constructed, or leased with Supportive Housing Program (SHP) funds or to which HUD provides SHP annual payments for operating costs, supportive services, or Homeless Management Information System.

The Recipient agrees to comply with all requirements of this Grant Agreement and to accept responsibility for such compliance by any entities to which it makes grant funds available.

The Recipient and project sponsor, if any, will not knowingly allow illegal activities in any unit assisted with grant funds.

The Recipient (or its sponsor(s)) agrees to pay for at least 20 percent of the project's annual eligible supportive services costs from non-SHP sources.

The Recipient (or its sponsor(s)) agrees to ensure match originate from a non-SHP source and will be documented in accordance with SHP and Federal Office of Management and Budget requirements.

Resident rents and program fees are considered Federal funds and are governed by 24 CFR Part 583 and 24 CFR Part 84 or 85, as applicable.

The Recipient agrees to have a financial management system (including fund accounting) and employee activity reporting system that meet the requirements of this grant agreement, SHP regulations, and Federal Office of Management and Budget standards and ensure its sponsors or subrecipients, as applicable, comply with the aforementioned as well.

The Recipient agrees to draw SHP funds for this project at least quarterly.

The Recipient agrees to settle final project costs within 90 days of grant expiration date.

The Recipient agrees to submit an Annual Progress Report (APR) within 90 days of the end of each operating year. For projects receiving solely SHP-assisted acquisition, rehabilitation, new construction, or a combination of them, an APR shall be submitted within 90 days of the completion of the first operating year and on September 30th of each subsequent year until the 20 year supportive housing use requirement is met. For projects that received development and term assistance but were not renewed, an APR shall be submitted on September 30th of each year until the 20 year supportive housing use requirement is met.

If funded for permanent housing, in accordance with the FY 2008 NOFA, the Recipient may serve only persons who came from the streets, emergency shelters, or transitional housing for the homeless. In addition, permanent housing projects funded under the NOFA's Samaritan Housing Initiative, serving chronic homeless individuals, must serve only people who are coming from the streets or an emergency shelter. Current participants in transitional housing for homeless are ineligible for assistance.

The Recipient agrees to participate in a local Homeless Management Information System (HMIS) when implemented.

If the Recipient is a State or other governmental entity required to assume environmental responsibility, it agrees that no costs to be paid or reimbursed with grant funds will be incurred before the completion of such responsibilities and HUD approval of any required Request for Release of Funds.

No Federal or local funds may be committed for acquisition, rehabilitation, lease (except for scattered site tenants), conversion, repair, or construction prior to our execution of the grant agreement and approval of form HUD 7015.15 or form HUD 4128.

Upon review of the Recipient's request to incur pre-agreement costs in its letter dated November 12, 2009, HUD approves the operating start date of July 1, 2009 for the following reasons:

- Douglas County makes up the largest portion of unmet transitional housing need for persons with children and funding this project would address 31 percent of this need.
- Douglas County makes up the largest portion of unmet transitional housing need for persons without children and funding this project would address five percent of this need.
- The persons served in this period and identified costs are eligible under SHP.
- The population is consistent with the application's target group.
- The persons served in this period are covered by Community Services Block Grant, and authorized source of match for SHP. As such, funding this project as of July 1, 2009, would not reduce other State or local funding for the homeless.
- Environmental clearance is not needed since the structure of this project is tenant-based, without the involvement of the County.
- Not recognizing costs as of July 1, 2009, would cause a financial hardship for the County and would negatively impact our ability to meet the intent of the McKinney Act.

If, in the application, the Recipient indicated that activities in any project will be carried out in an Empowerment Zone, an Enterprise Community, or an Enhanced Enterprise Community, as designated by HUD or the Department of Agriculture, the Recipient agrees to give priority placement in that project to eligible persons whose last known address was within the designated EZ/EC area or who are homeless persons living on the streets or in shelters within the designated areas.

HUD notifications to the Recipient shall be to the address of the Recipient as stated in the Application, unless HUD is otherwise advised in writing. Recipient notifications to HUD shall be to the HUD Field Office executing the Grant Agreement. No change may be made to the project, nor any right, benefit, or advantage of the Recipient hereunder be assigned without prior written approval of HUD.

For any project funded by this grant, which is also financed through the use of the Low Income Housing Tax Credit, the following applies:

HUD recognizes that the Recipient or the project sponsor will or has financed this project through the use of the Low-Income Housing Tax Credit. The Recipient or project sponsor shall be the general partner of a limited partnership formed for that purpose. If grant funds were used for acquisition, rehabilitation or construction, then, throughout a period of twenty years from the date of initial occupancy or the initial service provision, the Recipient or project sponsor shall continue as general partner and shall ensure that the project is operated in accordance with the requirements of this Grant Agreement, the applicable regulations and statutes. Further, the said limited partnership shall own the project site throughout that twenty-year period. If grant funds were not used for acquisition, rehabilitation or new construction, then the period shall not be twenty years, but shall be for the term of the grant agreement and any renewal thereof. Failure to comply with the terms of this paragraph shall constitute a default under the Grant Agreement.

For any project receiving funds for acquisition, construction or rehabilitation, the following applies:

The Recipient is required to execute and file for record a deed restriction, covenant running with the land or similar arrangement that will assure to HUD's satisfaction, compliance with the twenty-year term of commitment and a lien against the property, in a form to be approved by HUD, to secure HUD's interest in the repayment of the grant.

If the Recipient and/or subrecipient wishes to sell or otherwise dispose of the assisted real property, they must request and receive written approval from the Department to dispose of the real property, advertise that disposition conditions apply to the assisted property, and abide by any other terms or conditions prescribed by HUD in the approval letter.

For projects involving acquisition, compliance with the recording requirement must be documented before release of any funds other than acquisition funds. For projects involving new construction or rehabilitation activities, compliance must be documented prior to the first release of federal funds. Evidence will be an original, executed document, in a form satisfactory to HUD, accompanied by a recording receipt. Upon completion of recordation, Recipient will provide HUD with an original, executed, recorded document.

A default shall consist of any use of grant funds for a purpose other than as authorized by this Grant Agreement, failure in the Recipient's duty to provide the supportive housing for the minimum term in accordance with the requirements of the Attachment B provisions, noncompliance with the Act or Attachment B provisions, any other material breach of the Grant Agreement, or misrepresentations in the application submissions which, if known by HUD, would have resulted in this grant not being provided. Upon due notice to the Recipient of the occurrence of any such default and the provision of a reasonable opportunity to respond, HUD may take one or more of the following actions:

- (a) direct the Recipient to submit progress schedules for completing approved activities; or
- (b) issue a letter of warning advising the Recipient of the default, establishing a date by which corrective actions must be completed and putting the Recipient on notice that more serious actions will be taken if the default is not corrected or is repeated; or
- (c) direct the Recipient to establish and maintain a management plan that assigns responsibilities for carrying out remedial actions; or
- (d) direct the Recipient to suspend, discontinue or not incur costs for the affected activity; or
- (e) reduce or recapture the grant; or
- (f) direct the Recipient to reimburse the program accounts for costs inappropriately charged to the program; or
- (g) continue the grant with a substitute Recipient of HUD's choosing; or
- (h) other appropriate action including, but not limited to, any remedial action legally available, such as affirmative litigation seeking declaratory judgment, specific performance, damages, temporary or permanent injunctions and any other available remedies.

No delay or omission by HUD in exercising any right or remedy available to it under this Grant Agreement shall impair any such right or remedy or constitute a waiver or acquiescence in any Recipient default.

This Grant Agreement constitutes the entire agreement between the parties hereto, and may be amended only in writing executed by HUD and the Recipient. More specifically, the Recipient shall not change recipients, sponsors, component, location, services, or population to be served nor shift more than ten (10) percent of funds from one approved Budget Line Item (BLI) to another without the prior written approval of HUD.

The effective date of this Grant Agreement shall be the date of execution by HUD, except with prior written approval by HUD. No costs can be incurred prior to HUD's execution of the grant agreement (or amendment) without specific Field Office approval.

SIGNATURES

This Grant Agreement for Project Number NV0021B9T020800 is hereby executed as follows:

UNITED STATES OF AMERICA  
Secretary of Housing and Urban Development

By: Maria Cremer FEB 5 - 2010  
Signature and Date

Maria Cremer  
Print name of signatory

Acting Director, Community Planning and Development  
Title

RECIPIENT

Douglas County  
Name of Organization

By: Karen Goode 1/27/10  
Authorized Signature and Date

Karen Goode  
Print name of signatory

Manager, Douglas County Social Services  
Title



ATTACHMENT A

1. The Recipient is Douglas County.
2. HUD's total fund obligation for this two-year project is \$266,898, which shall be allocated as follows:
  - a. Leasing \$156,360
  - b. Supportive services \$106,296
  - c. Administration \$4,242
3. This agreement will become effective only upon the execution hereof by both parties. The term of this agreement shall run for a period of 24 months.



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FY 2008 SUPPORTIVE HOUSING PROGRAM  
ATTACHMENT B

PART 583—SUPPORTIVE HOUSING PROGRAM

Subpart A—General

- Sec
- 583.1 Purpose and scope
- 583.5 Definitions

Subpart A—General

§ 583.1 Purpose and scope.

(a) *General.* The Supportive Housing Program is authorized by title IV of the Stewart B. McKinney Homeless Assistance Act (the McKinney Act) (42 U.S.C. 11381–11389). The Supportive Housing program is designed to promote the development of supportive housing and supportive services, including innovative approaches to assist homeless persons in the transition from homelessness, and to promote the provision of supportive housing to homeless persons to enable them to live as independently as possible.

(b) *Components.* Funds under this part may be used for:

- (1) Transitional housing to facilitate the movement of homeless individuals and families to permanent housing;
- (2) Permanent housing that provides long-term housing for homeless persons with disabilities;
- (3) Housing that is, or is part of, a particularly innovative project for, or alternative methods of, meeting the immediate and long-term needs of homeless persons; or
- (4) Supportive services for homeless persons not provided in conjunction with supportive housing.

[58 FR 13871, Mar. 15, 1993, as amended at 61 FR 51175, Sept. 30, 1996]

§ 583.5 Definitions

As used in this part: *Applicant* is defined in section 422(1) of the McKinney Act (42 U.S.C 11382(1)). For purposes of this definition, governmental entities include those that have general governmental powers (such as a city or county), as well as those that have limited or special powers (such as public housing agencies).

*Consolidated plan* means the plan that a jurisdiction prepares and submits to HUD in accordance with 24 CFR part 91.

*Date of initial occupancy* means the date that the supportive housing is initially occupied by a homeless person for whom HUD provides assistance under this part. ~~If the assistance is for an existing homeless~~

Subpart B—Assistance Provided

- 583.100 Types and uses of assistance
- 583.105 Grants for acquisition and rehabilitation
- 583.110 Grants for new construction
- 583.115 Grants for leasing
- 583.120 Grants for supportive service costs
- 583.125 Grants for operating costs
- 583.130 Commitment of grant amounts for leasing, supportive services, and operating costs
- 583.135 Administrative costs
- 583.140 Technical assistance
- 583.145 Matching requirements
- 583.150 Limitations on use of assistance
- 583.155 Consolidated plan

Subpart C—Application and Grant Award Process

- 583.200 Application and grant award
- 583.230 Environmental review
- 583.235 Renewal grants

Subpart D—Program Requirements

- 583.300 General operation
- 583.305 Term of commitment; repayment of grants; prevention of undue benefits
- 583.310 Displacement, relocation, and acquisition
- 583.315 Resident rent
- 583.320 Site control
- 583.325 Nondiscrimination and equal opportunity requirements.
- 583.330 Applicability of other Federal requirements

Subpart E—Administration

- 583.400 Grant agreement
- 583.405 Program changes
- 583.410 Obligation and deobligation of funds.

AUTHORITY: 42 U.S.C. 11389 and 3535(d)  
SOURCE: 58 FR 13871, Mar. 15, 1993, unless otherwise noted

facility, the *date of initial occupancy* is the date that services are first provided to the residents of supportive housing with funding under this part.

*Date of initial service provision* means the date that supportive services are initially provided with funds under this part to homeless persons who do not reside in supportive housing. This definition applies only to projects funded under this part that do not provide supportive housing.

*Disability* is defined in section 422(2) of the McKinney Act (42 U.S.C 11382(2)).

*Homeless person* means an individual or family that is described in section 103 of the McKinney Act (42 U.S.C 11302).

*Metropolitan city* is defined in section 102(a)(4) of the Housing and Community Development Act of 1974 (42 U.S.C 5302(a)(4)). In general, metropolitan cities are those cities that are eligible for an entitlement grant under 24 CFR part 570, subpart D.

*New construction* means the building of a structure where none existed or an addition to an existing structure that increases the floor area by more than 100 percent.

*Operating costs* is defined in section 422(5) of the McKinney Act (42 U.S.C 11382(5)).

*Outpatient health services* is defined in section 422(6) of the McKinney Act (42 U.S.C. 11382(6)).

*Permanent housing for homeless persons with disabilities* is defined in section 424(c) of the McKinney Act (42 U.S.C 11384(c)).

*Private nonprofit organization* is defined in section 422(7) (A), (B), and (D) of the McKinney Act (42 U.S.C. 11382(7) (A), (B), and (D)). The organization must also have a functioning accounting system that is operated in accordance with generally accepted accounting principles, or designate an entity that will maintain a functioning accounting system for the organization in accordance with generally accepted accounting principles

*Project* is defined in sections 422(8) and 424(d) of the McKinney Act (42 U.S.C. 11382(8), 11384(d)).

*Recipient* is defined in section 422(9) of the McKinney Act (42 U.S.C. 11382(9)).

*Rehabilitation* means the improvement or repair of an existing structure or an addition to an existing structure that does not increase the floor area by more than 100

percent. Rehabilitation does not include minor or routine repairs.

*State* is defined in section 422(11) of the McKinney Act (42 U.S.C. 11382(11)).

*Supportive housing* is defined in section 424(a) of the McKinney Act (42 U.S.C. 11384(a)).

*Supportive services* is defined in section 425 of the McKinney Act (42 U.S.C 11385).

*Transitional housing* is defined in section 424(b) of the McKinney Act (42 U.S.C. 11384(b)). See also § 583.300(j).

*Tribe* is defined in section 102 of the Housing and Community Development Act of 1974 (42 U.S.C. 5302).

*Urban county* is defined in section 102(a)(6) of the Housing and Community Development Act of 1974 (42 U.S.C 5302(a)(6)). In general, urban counties are those counties that are eligible for an entitlement grant under 24 CFR part 570, subpart D.

[61 FR 51175, Sept. 30, 1996]

#### **Subpart B—Assistance Provided**

##### **§ 583.100 Types and uses of assistance.**

(a) *Grant assistance.* Assistance in the form of grants is available for acquisition of structures, rehabilitation of structures, acquisition and rehabilitation of structures, new construction, leasing, operating costs for supportive housing, and supportive services, as described in §§ 583.105 through 583.125. Applicants may apply for more than one type of assistance.

(b) *Uses of grant assistance.* Grant assistance may be used to:

(1) Establish new supportive housing facilities or new facilities to provide supportive services;

(2) Expand existing facilities in order to increase the number of homeless persons served;

(3) Bring existing facilities up to a level that meets State and local government health and safety standards;

(4) Provide additional supportive services for residents of supportive housing or for homeless persons not residing in supportive housing;

(5) Purchase HUD-owned single family properties currently leased by the applicant for use as a homeless facility under 24 CFR part 291; and

(6) Continue funding supportive housing where the recipient has received funding under this part for leasing, supportive services, or operating costs.

(c) *Structures used for multiple purposes*

Structures used to provide supportive housing or supportive services may also be used for other purposes, except that assistance under this part will be available only in proportion to the use of the structure for supportive housing or supportive services.

(d) *Technical assistance.* HUD may offer technical assistance, as described in § 583.140.

[58 FR 13871, Mar. 15, 1993, as amended at 59 FR 36891, July 19, 1994]

**§ 583.105 Grants for acquisition and rehabilitation.**

(a) *Use.* HUD will grant funds to recipients to:

(1) Pay a portion of the cost of the acquisition of real property selected by the recipients for use in the provision of supportive housing or supportive services, including the repayment of any outstanding debt on a loan made to purchase property that has not been used previously as supportive housing or for supportive services;

(2) Pay a portion of the cost of rehabilitation of structures, including cost effective energy measures, selected by the recipients to provide supportive housing or supportive services; or

(3) Pay a portion of the cost of acquisition and rehabilitation of structures, as described in paragraphs (a)(1) and (2) of this section.

(b) *Amount.* The maximum grant available for acquisition, rehabilitation, or acquisition and rehabilitation is the lower of:

(1) \$200,000; or

(2) The total cost of the acquisition, rehabilitation, or acquisition and rehabilitation minus the applicant's contribution toward the cost.

(c) *Increased amounts.* In areas determined by HUD to have high acquisition and rehabilitation costs, grants of more than \$200,000, but not more than \$400,000, may be available.

**§ 583.110 Grants for new construction.**

(a) *Use.* HUD will grant funds to recipients to pay a portion of the cost of new construction, including cost-effective energy measures and the cost of land associated with that construction, for use in the provision of supportive housing. If the grant funds are used for

new construction, the applicant must demonstrate that the costs associated with new construction are substantially less than the costs associated with rehabilitation or that there is a lack of available appropriate units that could be rehabilitated at a cost less than new construction. For purposes of this cost comparison, costs associated with rehabilitation or new construction may include the cost of real property acquisition.

(b) *Amount.* The maximum grant available for new construction is the lower of:

(1) \$400,000; or

(2) The total cost of the new construction, including the cost of land associated with that construction, minus the applicant's contribution toward the cost of same.

**§ 583.115 Grants for leasing.**

(a) *General.* HUD will provide grants to pay (as described in § 583.130 of this part) for the actual costs of leasing a structure or structures, or portions thereof, used to provide supportive housing or supportive services for up to five years.

(b)(1) *Leasing structures.* Where grants are used to pay rent for all or part of structures, the rent paid must be reasonable in relation to rents being charged in the area for comparable space. In addition, the rent paid may not exceed rents currently being charged by the same owner for comparable space.

(2) *Leasing individual units.* Where grants are used to pay rent for individual housing units, the rent paid must be reasonable in relation to rents being charged for comparable units, taking into account the location, size, type, quality, amenities, facilities, and management services. In addition, the rents may not exceed rents currently being charged by the same owner for comparable unassisted units, and the portion of rents paid with grant funds may not exceed HUD-determined fair market rents. Recipients may use grant funds in an amount up to one month's rent to pay the non-recipient landlord for any damages to leased units by homeless participants.

[58 FR 13871, Mar. 15, 1993, as amended at 59 FR 36891, July 19, 1994]

**§ 583.120 Grants for supportive services costs.**

(a) *General.* HUD will provide grants to pay (as described in § 583.130 of this part) for the actual costs of supportive services for homeless persons for up to five years. All or part of the supportive services may be

provided directly by the recipient or by arrangement with public or private service providers.

(b) *Supportive services costs.* Costs associated with providing supportive services include salaries paid to providers of supportive services and any other costs directly associated with providing such services. For a transitional housing project, supportive services costs also include the costs of services provided to former residents of transitional housing to assist their adjustment to independent living. Such services may be provided for up to six months after they leave the transitional housing facility.

[58 FR 13871, Mar. 15, 1993, as amended at 59 FR 36891, July 19, 1994]

**§ 583.125 Grants for operating costs.**

(a) *General.* HUD will provide grants to pay a portion (as described in § 583.130) of the actual operating costs of supportive housing for up to five years.

(b) *Operating costs.* Operating costs are those associated with the day-today operation of the supportive housing. They also include the actual expenses that a recipient incurs for conducting on-going assessments of the supportive services needed by residents and the availability of such services; relocation assistance under § 583.310, including payments and services; and insurance.

(c) *Recipient match requirement for operating costs.* Assistance for operating costs will be available for up to 75 percent of the total cost in each year of the grant term. The recipient must pay the percentage of the actual operating costs not funded by HUD. At the end of each operating year, the recipient must demonstrate that it has met its match requirement of the costs for that year.

[58 FR 13871, Mar. 15, 1993, as amended at 61 FR 51175, Sept. 30, 1996; 65 FR 30823, May 12, 2000]

**§ 583.130 Commitment of grant amounts for leasing, supportive services, and operating costs**

Upon execution of a grant agreement covering assistance for leasing, supportive services, or operating costs, HUD will obligate amounts for a period not to exceed five operating years. The total amount obligated will be equal to an amount necessary for the specified years of operation, less the recipient's share of operating costs.

(Approved by the Office of Management and Budget under OMB control number 2506-0112) [59 FR 36891, July 19, 1994]

**§ 583.135 Administrative costs.**

(a) *General.* Up to five percent of any grant awarded under this part may be used for the purpose of paying costs of administering the assistance.

(b) *Administrative costs.* Administrative costs include the costs associated with accounting for the use of grant funds, preparing reports for submission to HUD, obtaining program audits, similar costs related to administering the grant after the award, and staff salaries associated with these administrative costs. They do not include the costs of carrying out eligible activities under §§ 583.105 through 583.125.

[58 FR 13871, Mar. 15, 1993, as amended at 61 FR 51175, Sept. 30, 1996]

**§ 583.140 Technical assistance.**

(a) *General.* HUD may set aside funds annually to provide technical assistance, either directly by HUD staff or indirectly through third-party providers, for any supportive housing project. This technical assistance is for the purpose of promoting the development of supportive housing and supportive services as part of a continuum of care approach, including innovative approaches to assist homeless persons in the transition from homelessness, and promoting the provision of supportive housing to homeless persons to enable them to live as independently as possible.

(b) *Uses of technical assistance.* HUD may use these funds to provide technical assistance to prospective applicants, applicants, recipients, or other providers of supportive housing or services for homeless persons, for supportive housing projects. The assistance may include, but is not limited to, written information such as papers, monographs, manuals, guides, and brochures; person-to-person exchanges; and training and related costs.

(c) *Selection of providers.* From time to time, as HUD determines the need, HUD may advertise and competitively select providers to deliver technical assistance. HUD may enter into contracts, grants, or cooperative agreements, when necessary, to implement the technical assistance.

[59 FR 36892, July 19, 1994]

**§ 583.145 Matching requirements.**

(a) *General.* The recipient must match the funds provided by HUD for grants for acquisition, rehabilitation, and new construction with an equal amount of funds from other sources.

(b) *Cash resources.* The matching funds must be cash resources provided to the project by one or more of

the following: the recipient, the Federal government, State and local governments, and private resources.

(c) *Maintenance of effort.* State or local government funds used in the matching contribution are subject to the maintenance of effort requirements described at § 583.150(a).

**§ 583.150 Limitations on use of assistance.**

(a) *Maintenance of effort.* No assistance provided under this part (or any State or local government funds used to supplement this assistance) may be used to replace State or local funds previously used, or designated for use, to assist homeless persons.

(b) *Faith-based activities.* (1) Organizations that are religious or faith-based are eligible, on the same basis as any other organization, to participate in the Supportive Housing Program. Neither the Federal government nor a State or local government receiving funds under Supportive Housing programs shall discriminate against an organization on the basis of the organization's religious character or affiliation.

(2) Organizations that are directly funded under the Supportive Housing Program may not engage in inherently religious activities, such as worship, religious instruction, or proselytization as part of the programs or services funded under this part. If an organization conducts such activities, the activities must be offered separately, in time or location, from the programs or services funded under this part, and participation must be voluntary for the beneficiaries of the HUD-funded programs or services.

(3) A religious organization that participates in the Supportive Housing Program will retain its independence from Federal, State, and local governments, and may continue to carry out its mission, including the definition, practice, and expression of its religious beliefs, provided that it does not use direct Supportive Housing Program funds to support any inherently religious activities, such as worship, religious instruction, or proselytization. Among other things, faith-based organizations may use space in their facilities to provide Supportive Housing Program-funded services, without removing religious art, icons, scriptures, or other religious symbols. In addition, a Supportive Housing Program-funded religious organization retains its authority over its internal governance, and it may retain religious terms in its organization's name, select its board members on a religious basis, and include religious references in its organization's mission statements and other governing documents.

(4) An organization that participates in the Supportive Housing Program shall not, in providing program assistance, discriminate against a program beneficiary or prospective program beneficiary on the basis of religion or religious belief.

(5) Program funds may not be used for the acquisition, construction, or rehabilitation of structures to the extent that those structures are used for inherently religious activities. Program funds may be used for the acquisition, construction, or rehabilitation of structures only to the extent that those structures are used for conducting eligible activities under this part. Where a structure is used for both eligible and inherently religious activities, program funds may not exceed the cost of those portions of the acquisition, construction, or rehabilitation that are attributable to eligible activities in accordance with the cost accounting requirements applicable to Supportive Housing Program funds in this part. Sanctuaries, chapels, or other rooms that a Supportive Housing Program-funded religious congregation uses as its principal place of worship, however, are ineligible for Supportive Housing Program-funded improvements. Disposition of real property after the term of the grant, or any change in use of the property during the term of the grant, is subject to government-wide regulations governing real property disposition (*see* 24 CFR parts 84 and 85).

(6) If a State or local government voluntarily contributes its own funds to supplement federally funded activities, the State or local government has the option to segregate the Federal funds or commingle them. However, if the funds are commingled, this section applies to all of the commingled funds.

(c) *Participant control of site.* Where an applicant does not propose to have control of a site or sites but rather proposes to assist a homeless family or individual in obtaining a lease, which may include assistance with rent payments and receiving supportive services, after which time the family or individual remains in the same housing without further assistance under this part, that applicant may not request assistance for acquisition, rehabilitation, or new construction.

[58 FR 13871, Mar. 15, 1993, as amended at 59 FR 36892, July 19, 1993; 68 FR 56407, Sept. 30, 2003]

**§ 583.155 Consolidated plan.**

(a) *Applicants that are States or units of general local government.* The applicant must have a HUD-approved complete or abbreviated consolidated plan, in accordance with 24 CFR part 91, and must submit a

certification that the application for funding is consistent with the HUD-approved consolidated plan. Funded applicants must certify in a grant agreement that they are following the HUD-approved consolidated plan.

(b) *Applicants that are not States or units of general local government.* The applicant must submit a certification by the jurisdiction in which the proposed project will be located that the applicant's application for funding is consistent with the jurisdiction's HUD approved consolidated plan. The certification must be made by the unit of general local government or the State, in accordance with the consistency certification provisions of the consolidated plan regulations, 24 CFR part 91, subpart F.

(c) *Indian tribes and the Insular Areas of Guam, the U.S. Virgin Islands, American Samoa, and the Northern Mariana Islands.* These entities are not required to have a consolidated plan or to make consolidated plan certifications. An application by an Indian tribe or other applicant for a project that will be located on a reservation of an Indian tribe will not require a certification by the tribe or the State. However, where an Indian tribe is the applicant for a project that will not be located on a reservation, the requirement for a certification under paragraph (b) of this section will apply.

(d) *Timing of consolidated plan certification submissions.* Unless otherwise set forth in the NOFA, the required certification that the application for funding is consistent with the HUD-approved consolidated plan must be submitted by the funding application submission deadline announced in the NOFA.

[60 FR 16380, Mar. 30, 1995]

#### **Subpart C—Application and Grant Award Process**

##### **§ 583.200 Application and grant award**

When funds are made available for assistance, HUD will publish a notice of funding availability (NOFA) in the FEDERAL REGISTER, in accordance with the requirements of 24 CFR part 4. HUD will review and screen applications in accordance with the requirements in section 426 of the McKinney Act (42 U.S.C. 11386) and the guidelines, rating criteria, and procedures published in the NOFA.

[61 FR 51176, Sept. 30, 1996]

##### **§ 583.230 Environmental review.**

(a) Activities under this part are subject to HUD environmental regulations in part 58 of this title, except that HUD will perform an environmental review in

accordance with part 50 of this title prior to its approval of any conditionally selected applications for Fiscal Year 2000 and prior years that were received directly from private nonprofit entities and governmental entities with special or limited purpose powers. For activities under a grant that generally would be subject to review under part 58, HUD may make a finding in accordance with § 58.11(d) and may itself perform the environmental review under the provisions of part 50 of this title if the recipient objects in writing to the responsible entity's performing the review under part 58. Irrespective of whether the responsible entity in accord with part 58 (or HUD in accord with part 50) performs the environmental review, the recipient shall supply all available, relevant information necessary for the responsible entity (or HUD, if applicable) to perform for each property any environmental review required by this part. The recipient also shall carry out mitigating measures required by the responsible entity (or HUD, if applicable) or select alternate eligible property. HUD may eliminate from consideration any application that would require an Environmental Impact Statement (EIS).

(b) The recipient, its project partners and their contractors may not acquire, rehabilitate, convert, lease, repair, dispose of, demolish or construct property for a project under this part, or commit or expend HUD or local funds for such eligible activities under this part, until the responsible entity (as defined in § 58.2 of this title) has completed the environmental review procedures required by part 58 and the environmental certification and RROF have been approved or HUD has performed an environmental review under part 50 and the recipient has received HUD approval of the property. HUD will not release grant funds if the recipient or any other party commits grant funds (*i.e.*, incurs any costs or expenditures to be paid or reimbursed with such funds) before the recipient submits and HUD approves its RROF (where such submission is required).

[68 FR 56131, Sept. 29, 2003]

##### **§ 583.235 Renewal grants.**

(a) *General.* Grants made under this part, and grants made under subtitles C and D (the Supportive Housing Demonstration and SAFAH, respectively) of the Stewart B. McKinney Homeless Assistance Act as in effect before October 28, 1992, may be renewed on a noncompetitive basis to continue ongoing leasing, operations, and supportive services for additional years beyond the initial funding period. To be considered for renewal funding for leasing, operating costs, or supportive services, recipients must submit a request for

such funding in the form specified by HUD, must meet the requirements of this part, and must submit requests within the time period established by HUD.

(b) *Assistance available.* The first renewal will be for a period of time not to exceed the difference between the end of the initial funding period and ten years from the date of initial occupancy or the date of initial service provision, as applicable. Any subsequent renewal will be for a period of time not to exceed five years. Assistance during each year of the renewal period, subject to maintenance of effort requirements under § 583.150(a) may be for:

(1) Up to 50 percent of the actual operating and leasing costs in the final year of the initial funding period;

(2) Up to the amount of HUD assistance for supportive services in the final year of the initial funding period; and

(3) An allowance for cost increases.

(c) *HUD review.* (1) HUD will review the request for renewal and will evaluate the recipient's performance in previous years against the plans and goals established in the initial application for assistance, as amended. HUD will approve the request for renewal unless the recipient proposes to serve a population that is not homeless, or the recipient has not shown adequate progress as evidenced by an unacceptably slow expenditure of funds, or the recipient has been unsuccessful in assisting participants in achieving and maintaining independent living. In determining the recipient's success in assisting participants to achieve and maintain independent living, consideration will be given to the level and type of problems of participants. For recipients with a poor record of success, HUD will also consider the recipient's willingness to accept technical assistance and to make changes suggested by technical assistance providers. Other factors which will affect HUD's decision to approve a renewal request include the following: a continuing history of inadequate financial management accounting practices, indications of mismanagement on the part of the recipient, a drastic reduction in the population served by the recipient, program changes made by the recipient without prior HUD approval, and loss of project site.

(2) HUD reserves the right to reject a request from any organization with an outstanding obligation to HUD that is in arrears or for which a payment schedule has not been agreed to, or whose response to an audit finding is overdue or unsatisfactory.

(3) HUD will notify the recipient in writing that the request has been approved or disapproved.

(Approved by the Office of Management and Budget under control number 2506-0112)

#### **Subpart D—Program Requirements**

##### **§ 583.300 General operation.**

(a) *State and local requirements.* Each recipient of assistance under this part must provide housing or services that are in compliance with all applicable State and local housing codes, licensing requirements, and any other requirements in the jurisdiction in which the project is located regarding the condition of the structure and the operation of the housing or services.

(b) *Habitability standards.* Except for such variations as are proposed by the recipient and approved by HUD, supportive housing must meet the following requirements:

(1) *Structure and materials.* The structures must be structurally sound so as not to pose any threat to the health and safety of the occupants and so as to protect the residents from the elements.

(2) *Access.* The housing must be accessible and capable of being utilized without unauthorized use of other private properties. Structures must provide alternate means of egress in case of fire.

(3) *Space and security.* Each resident must be afforded adequate space and security for themselves and their belongings

Each resident must be provided an acceptable place to sleep.

(4) *Interior air quality.* Every room or space must be provided with natural or mechanical ventilation. Structures must be free of pollutants in the air at levels that threaten the health of residents.

(5) *Water supply.* The water supply must be free from contamination.

(6) *Sanitary facilities.* Residents must have access to sufficient sanitary facilities that are in proper operating condition, may be used in privacy, and are adequate for personal cleanliness and the disposal of human waste.

(7) *Thermal environment.* The housing must have adequate heating and/or cooling facilities in proper operating condition.

(8) *Illumination and electricity.* The housing must have adequate natural or artificial illumination to permit normal indoor activities and to support the health

and safety of residents. Sufficient electrical sources must be provided to permit use of essential electrical appliances while assuring safety from fire.

(9) *Food preparation and refuse disposal.* All food preparation areas must contain suitable space and equipment to store, prepare, and serve food in a sanitary manner.

(10) *Sanitary condition.* The housing and any equipment must be maintained in sanitary condition.

(11) *Fire safety.* (i) Each unit must include at least one battery-operated or hard-wired smoke detector, in proper working condition, on each occupied level of the unit. Smoke detectors must be located, to the extent practicable, in a hallway adjacent to a bedroom. If the unit is occupied by hearing-impaired persons, smoke detectors must have an alarm system designed for hearing-impaired persons in each bedroom occupied by a hearing-impaired person.

(ii) The public areas of all housing must be equipped with a sufficient number, but not less than one for each area, of battery-operated or hard-wired smoke detectors. Public areas include, but are not limited to, laundry rooms, community rooms, day care centers, hallways, stairwells, and other common areas.

(c) *Meals.* Each recipient of assistance under this part who provides supportive housing for homeless persons with disabilities must provide meals or meal preparation facilities for residents.

(d) *Ongoing assessment of supportive services.* Each recipient of assistance under this part must conduct an ongoing assessment of the supportive services required by the residents of the project and the availability of such services, and make adjustments as appropriate.

(e) *Residential supervision.* Each recipient of assistance under this part must provide residential supervision as necessary to facilitate the adequate provision of supportive services to the residents of the housing throughout the term of the commitment to operate supportive housing. Residential supervision may include the employment of a full- or part-time residential supervisor with sufficient knowledge to provide or to supervise the provision of supportive services to the residents.

(f) *Participation of homeless persons.* (1) Each recipient must provide for the participation of homeless persons as required in section 426(g) of the McKinney Act (42 U.S.C. 11386(g)). This requirement is waived if

an applicant is unable to meet it and presents a plan for HUD approval to otherwise consult with homeless or formerly homeless persons in considering and making policies and decisions. See also § 583.330(e).

(2) Each recipient of assistance under this part must, to the maximum extent practicable, involve homeless individuals and families, through employment, volunteer services, or otherwise, in constructing, rehabilitating, maintaining, and operating the project and in providing supportive services for the project.

(g) *Records and reports.* Each recipient of assistance under this part must keep any records and make any reports (including those pertaining to race, ethnicity, gender, and disability status data) that HUD may require within the timeframe required.

(h) *Confidentiality.* Each recipient that provides family violence prevention or treatment services must develop and implement procedures to ensure:

(1) The confidentiality of records pertaining to any individual services; and

(2) That the address or location of any project assisted will not be made public, except with written authorization of the person or persons responsible for the operation of the project.

(i) *Termination of housing assistance*

The recipient may terminate assistance to a participant who violates program requirements. Recipients should terminate assistance only in the most severe cases. Recipients may resume assistance to a participant whose assistance was previously terminated. In terminating assistance to a participant, the recipient must provide a formal process that recognizes the rights of individuals receiving assistance to due process of law. This process, at a minimum, must consist of:

(1) Written notice to the participant containing a clear statement of the reasons for termination;

(2) A review of the decision, in which the participant is given the opportunity to present written or oral objections before a person other than the person (or a subordinate of that person) who made or approved the termination decision; and

(3) Prompt written notice of the final decision to the participant.

(j) *Limitation of stay in transitional housing.* A homeless individual or family may remain in transitional housing for a period longer than 24 months, if permanent housing for the individual or family has not been located or if the individual or family requires additional time to



prepare for independent living. However, HUD may discontinue assistance for a transitional housing project if more than half of the homeless individuals or families remain in that project longer than 24 months.

(k) *Outpatient health services.* Outpatient health services provided by the recipient must be approved as appropriate by HUD and the Department of Health and Human Services (HHS). Upon receipt of an application that proposes the provision of outpatient health services, HUD will consult with HHS with respect to the appropriateness of the proposed services.

(l) *Annual assurances.* Recipients who receive assistance only for leasing, operating costs or supportive services costs must provide an annual assurance for each year such assistance is received that the project will be operated for the purpose specified in the application.

(Approved by the Office of Management and Budget under control number 2506-0112) [58 FR 13871, Mar. 15, 1993, as amended at 59 FR 36892, July 19, 1994; 61 FR 51176, Sept. 30, 1996]

**§ 583.305 Term of commitment; repayment of grants; prevention of undue benefits.**

(a) *Term of commitment and conversion.*

Recipients must agree to operate the housing or provide supportive services in accordance with this part and with sections 423 (b)(1) and (b)(3) of the McKinney Act (42 U.S.C. 11383(b)(1), 11383(b)(3)).

(b) *Repayment of grant and prevention of undue benefits.* In accordance with section 423(c) of the McKinney Act (42 U.S.C. 11383(c)), HUD will require recipients to repay the grant unless HUD has authorized conversion of the project under section 423(b)(3) of the McKinney Act (42 U.S.C. 11383(b)(3)).

[61 FR 51176, Sept. 30, 1996]

**§ 583.310 Displacement, relocation, and acquisition.**

(a) *Minimizing displacement.* Consistent with the other goals and objectives of this part, recipients must assure that they have taken all reasonable steps to minimize the displacement of persons (families, individuals, businesses, nonprofit organizations, and farms) as a result of supportive housing assisted under this part.

(b) *Relocation assistance for displaced persons.* A displaced person (defined in paragraph (f) of this section) must be provided relocation assistance at the levels described in, and in accordance with, the requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (URA)

(42 U.S.C. 4601-4655) and implementing regulations at 49 CFR part 24.

(c) *Real property acquisition requirements*

The acquisition of real property for supportive housing is subject to the URA and the requirements described in 49 CFR part 24, subpart B.

(d) *Responsibility of recipient.* (1) The recipient must certify (*i.e.*, provide assurance of compliance) that it will comply with the URA, the regulations at 49 CFR part 24, and the requirements of this section, and must ensure such compliance notwithstanding any third party's contractual obligation to the recipient to comply with these provisions.

(2) The cost of required relocation assistance is an eligible project cost in the same manner and to the same extent as other project costs. Such costs also may be paid for with local public funds or funds available from other sources.

(3) The recipient must maintain records in sufficient detail to demonstrate compliance with provisions of this section.

(e) *Appeals.* A person who disagrees with the recipient's determination concerning whether the person qualifies as a "displaced person," or the amount of relocation assistance for which the person is eligible, may file a written appeal of that determination with the recipient. A low-income person who is dissatisfied with the recipient's determination on his or her appeal may submit a written request for review of that determination to the HUD field office.

(f) *Definition of displaced person.* (1) For purposes of this section, the term "displaced person" means a person (family, individual, business, nonprofit organization, or farm) that moves from real property, or moves personal property from real property permanently as a direct result of acquisition, rehabilitation, or demolition for supportive housing projects assisted under this part. The term "displaced person" includes, but may not be limited to:

(i) A person that moves permanently from the real property after the property owner (or person in control of the site) issues a vacate notice, or refuses to renew an expiring lease in order to evade the responsibility to provide relocation assistance, if the move occurs on or after the date the recipient submits to HUD the application or application amendment designating the project site.

(ii) Any person, including a person who moves before the date described in paragraph (f)(1)(i) of this section, if the recipient or HUD determines that the displacement resulted directly from acquisition, rehabilitation, or demolition for the assisted project.

(iii) A tenant-occupant of a dwelling unit who moves permanently from the building/complex on or after the date of the "initiation of negotiations" (see paragraph (g) of this section) if the move occurs before the tenant has been provided written notice offering him or her the opportunity to lease and occupy a suitable, decent, safe and sanitary dwelling in the same building/complex, under reasonable terms and conditions, upon completion of the project. Such reasonable terms and conditions must include a monthly rent and estimated average monthly utility costs that do not exceed the greater of:

(A) The tenant's monthly rent before the initiation of negotiations and estimated average utility costs, or

(B) 30 percent of gross household income. If the initial rent is at or near the maximum, there must be a reasonable basis for concluding at the time the project is initiated that future rent increases will be modest.

(iv) A tenant of a dwelling who is required to relocate temporarily, but does not return to the building/complex, if either:

(A) A tenant is not offered payment for all reasonable out-of-pocket expenses incurred in connection with the temporary relocation, or

(B) Other conditions of the temporary relocation are not reasonable.

(v) A tenant of a dwelling who moves from the building/complex permanently after he or she has been required to move to another unit in the same building/complex, if either:

(A) The tenant is not offered reimbursement for all reasonable out-of-pocket expenses incurred in connection with the move; or

(B) Other conditions of the move are not reasonable.

(2) Notwithstanding the provisions of paragraph (f)(1) of this section, a person does not qualify as a "displaced person" (and is not eligible for relocation assistance under the URA or this section), if:

(i) The person has been evicted for serious or repeated violation of the terms and conditions of the lease or occupancy agreement, violation of applicable

Federal, State, or local or tribal law, or other good cause, and HUD determines that the eviction was not undertaken for the purpose of evading the obligation to provide relocation assistance;

(ii) The person moved into the property after the submission of the application and, before signing a lease and commencing occupancy, was provided written notice of the project, its possible impact on the person (e.g., the person may be displaced, temporarily relocated, or suffer a rent increase) and the fact that the person would not qualify as a "displaced person" (or for any assistance provided under this section), if the project is approved;

(iii) The person is ineligible under 49 CFR 24.2(g)(2); or

(iv) HUD determines that the person was not displaced as a direct result of acquisition, rehabilitation, or demolition for the project.

(3) The recipient may request, at any time, HUD's determination of whether a displacement is or would be covered under this section.

(g) *Definition of initiation of negotiations.* For purposes of determining the formula for computing the replacement housing assistance to be provided to a residential tenant displaced as a direct result of privately undertaken rehabilitation, demolition, or acquisition of the real property, the term "initiation of negotiations" means the execution of the agreement between the recipient and HUD.

(h) *Definition of project.* For purposes of this section, the term "project" means an undertaking paid for in whole or in part with assistance under this part. Two or more activities that are integrally related, each essential to the others, are considered a single project, whether or not all component activities receive assistance under this part.

[58 FR 13871, Mar. 15, 1993, as amended at 59 FR 36892, July 19, 1994]

#### § 583.315 Resident rent.

(a) *Calculation of resident rent.* Each resident of supportive housing may be required to pay as rent an amount determined by the recipient which may not exceed the highest of:

(1) 30 percent of the family's monthly adjusted income (adjustment factors include the number of people in the family, age of family members, medical expenses and child care expenses). The calculation of the family's monthly adjusted income must include the expense

deductions provided in 24 CFR 5.611(a), and for persons with disabilities, the calculation of the family's monthly adjusted income also must include the disallowance of earned income as provided in 24 CFR 5.617, if applicable;

(2) 10 percent of the family's monthly gross income; or

(3) If the family is receiving payments for welfare assistance from a public agency and a part of the payments, adjusted in accordance with the family's actual housing costs, is specifically designated by the agency to meet the family's housing costs, the portion of the payment that is designated for housing costs.

(b) *Use of rent.* Resident rent may be used in the operation of the project or may be reserved, in whole or in part, to assist residents of transitional housing in moving to permanent housing.

(c) *Fees.* In addition to resident rent, recipients may charge residents reasonable fees for services not paid with grant funds.

[58 FR 13871, Mar. 15, 1993, as amended at 59 FR 36892, July 19, 1994; 66 FR 6225, Jan. 19, 2001]

#### § 583.320 Site control.

(a) *Site control.* (1) Where grant funds will be used for acquisition, rehabilitation, or new construction to provide supportive housing or supportive services, or where grant funds will be used for operating costs of supportive housing, or where grant funds will be used to provide supportive services except where an applicant will provide services at sites not operated by the applicant, an applicant must demonstrate site control before HUD will execute a grant agreement (*e.g.*, through a deed, lease, executed contract of sale). If such site control is not demonstrated within one year after initial notification of the award of assistance under this part, the grant will be deobligated as provided in paragraph (c) of this section.

(2) Where grant funds will be used to lease all or part of a structure to provide supportive housing or supportive services, or where grant funds will be used to lease individual housing units for homeless persons who will eventually control the units, site control need not be demonstrated.

(b) *Site change.* (1) A recipient may obtain ownership or control of a suitable site different from the one specified in its application. Retention of an assistance award is subject to the new site's meeting all requirements under this part for suitable sites.

(2) If the acquisition, rehabilitation, acquisition and rehabilitation, or new construction costs for the substitute site are greater than the amount of the grant awarded for the site specified in the application, the recipient must provide for all additional costs. If the recipient is unable to demonstrate to HUD that it is able to provide for the difference in costs, HUD may deobligate the award of assistance.

(c) *Failure to obtain site control within one year.* HUD will recapture or deobligate any award for assistance under this part if the recipient is not in control of a suitable site before the expiration of one year after initial notification of an award.

#### § 583.325 Nondiscrimination and equal opportunity requirements.

(a) *General.* Notwithstanding the permissibility of proposals that serve designated populations of disabled homeless persons, recipients serving a designated population of disabled homeless persons are required, within the designated population, to comply with these requirements for nondiscrimination on the basis of race, color, religion, sex, national origin, age, familial status, and disability.

(b) *Nondiscrimination and equal opportunity requirements.* The nondiscrimination and equal opportunity requirements set forth at part 5 of this title apply to this program. The Indian Civil Rights Act (25 U.S.C. 1301 et seq.) applies to tribes when they exercise their powers of self-government, and to Indian housing authorities (IHAs) when established by the exercise of such powers. When an IHA is established under State law, the applicability of the Indian Civil Rights Act will be determined on a case-by-case basis. Projects subject to the Indian Civil Rights Act must be developed and operated in compliance with its provisions and all implementing HUD requirements, instead of title VI and the Fair Housing Act and their implementing regulations.

(c) *Procedures.* (1) If the procedures that the recipient intends to use to make known the availability of the supportive housing are unlikely to reach persons of any particular race, color, religion, sex, age, national origin, familial status, or handicap who may qualify for admission to the housing, the recipient must establish additional procedures that will ensure that such persons can obtain information concerning availability of the housing.

(2) The recipient must adopt procedures to make available information on the existence and locations of

facilities and services that are accessible to persons with a handicap and maintain evidence of implementation of the procedures.

(d) *Accessibility requirements.* The recipient must comply with the new construction accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, and the reasonable accommodation and rehabilitation accessibility requirements of section 504 as follows:

(1) All new construction must meet the accessibility requirements of 24 CFR 8.22 and, as applicable, 24 CFR 100.205.

(2) Projects in which costs of rehabilitation are 75 percent or more of the replacement cost of the building must meet the requirements of 24 CFR 8.23(a). Other rehabilitation must meet the requirements of 24 CFR 8.23(b).

[58 FR 13871, Mar. 15, 1993, as amended at 59 FR 33894, June 30, 1994; 61 FR 5210, Feb. 9, 1996; 61 FR 51176, Sept. 30, 1996]

#### **§ 583.330 Applicability of other Federal requirements**

In addition to the requirements set forth in 24 CFR part 5, use of assistance provided under this part must comply with the following Federal requirements:

(a) *Flood insurance.* (1) The Flood Disaster Protection Act of 1973 (42 U.S.C. 4001–4128) prohibits the approval of applications for assistance for acquisition or construction (including rehabilitation) for supportive housing located in an area identified by the Federal Emergency Management Agency (FEMA) as having special flood hazards, unless:

(i) The community in which the area is situated is participating in the National Flood Insurance Program (see 44 CFR parts 59 through 79), or less than a year has passed since FEMA notification regarding such hazards; and

(ii) Flood insurance is obtained as a condition of approval of the application.

(2) Applicants with supportive housing located in an area identified by FEMA as having special flood hazards and receiving assistance for acquisition or construction (including rehabilitation) are responsible for assuring that flood insurance under the National Flood Insurance Program is obtained and maintained.

(b) The Coastal Barrier Resources Act of 1982 (16 U.S.C. 3501 *et seq.*) may apply to proposals under this part, depending on the assistance requested.

(c) *Applicability of OMB Circulars.* The policies, guidelines, and requirements of OMB Circular No. A–87 (Cost Principles Applicable to Grants, Contracts and Other Agreements with State and Local Governments) and 24 CFR part 85 apply to the award, acceptance, and use of assistance under the program by governmental entities, and OMB Circular Nos. A–110 (Grants and Cooperative Agreements with Institutions of Higher Education, Hospitals, and Other Nonprofit Organizations) and A–122 (Cost Principles Applicable to Grants, Contracts and Other Agreements with Nonprofit Institutions) apply to the acceptance and use of assistance by private nonprofit organizations, except where inconsistent with the provisions of the McKinney Act, other Federal statutes, or this part. (Copies of OMB Circulars may be obtained from E.O.P. Publications, room 2200, New Executive Office Building, Washington, DC 20503, telephone (202) 395–7332. (This is not a toll-free number.) There is a limit of two free copies.

(d) *Lead-based paint.* The Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4821–4846), the Residential Lead-Based Paint Hazard Reduction Act of 1992 (42 U.S.C. 4851–4856), and implementing regulations at part 35, subparts A, B, J, K, and R of this title apply to activities under this program.

(e) *Conflicts of interest.* (1) In addition to the conflict of interest requirements in 24 CFR part 85, no person who is an employee, agent, consultant, officer, or elected or appointed official of the recipient and who exercises or has exercised any functions or responsibilities with respect to assisted activities, or who is in a position to participate in a decisionmaking process or gain inside information with regard to such activities, may obtain a personal or financial interest or benefit from the activity, or have an interest in any contract, subcontract, or agreement with respect thereto, or the proceeds thereunder, either for himself or herself or for those with whom he or she has family or business ties, during his or her tenure or for one year thereafter. Participation by homeless individuals who also are participants under the program in policy or decisionmaking under § 583.300(f) does not constitute a conflict of interest.

(2) Upon the written request of the recipient, HUD may grant an exception to the provisions of paragraph (e)(1) of this section on a case-by-case basis when it determines that the exception will serve to further the purposes of the program and the effective and efficient administration of the recipient's project. An

exception may be considered only after the recipient has provided the following:

(i) For States and other governmental entities, a disclosure of the nature of the conflict, accompanied by an assurance that there has been public disclosure of the conflict and a description of how the public disclosure was made; and

(ii) For all recipients, an opinion of the recipient's attorney that the interest for which the exception is sought would not violate State or local law.

(3) In determining whether to grant a requested exception after the recipient has satisfactorily met the requirement of paragraph (e)(2) of this section, HUD will consider the cumulative effect of the following factors, where applicable:

(i) Whether the exception would provide a significant cost benefit or an essential degree of expertise to the project which would otherwise not be available;

(ii) Whether the person affected is a member of a group or class of eligible persons and the exception will permit such person to receive generally the same interests or benefits as are being made available or provided to the group or class;

(iii) Whether the affected person has withdrawn from his or her functions or responsibilities, or the decisionmaking process with respect to the specific assisted activity in question;

(iv) Whether the interest or benefit was present before the affected person was in a position as described in paragraph (e)(1) of this section;

(v) Whether undue hardship will result either to the recipient or the person affected when weighed against the public interest served by avoiding the prohibited conflict; and

(vi) Any other relevant considerations.

(f) *Audit.* The financial management systems used by recipients under this program must provide for audits in accordance with 24 CFR part 44 or part 45, as applicable. HUD may perform or require additional audits as it finds necessary or appropriate.

(g) *Davis-Bacon Act.* The provisions of the Davis-Bacon Act do not apply to this program.

[58 FR 13871, Mar. 15, 1993, as amended at 61 FR 5211, Feb. 9, 1996; 64 FR 50226, Sept. 15, 1999]

#### Subpart E—Administration

#### § 583.400 Grant agreement.

(a) *General.* The duty to provide supportive housing or supportive services in accordance with the requirements of this part will be incorporated in a grant agreement executed by HUD and the recipient.

(b) *Enforcement.* HUD will enforce the obligations in the grant agreement through such action as may be appropriate, including repayment of funds that have already been disbursed to the recipient.

#### § 583.405 Program changes.

(a) *HUD approval.* (1) A recipient may not make any significant changes to an approved program without prior HUD approval. Significant changes include, but are not limited to, a change in the recipient, a change in the project site, additions or deletions in the types of activities listed in § 583.100 of this part approved for the program or a shift of more than 10 percent of funds from one approved type of activity to another, and a change in the category of participants to be served. Depending on the nature of the change, HUD may require a new certification of consistency with the consolidated plan (see § 583.155).

(2) Approval for changes is contingent upon the application ranking remaining high enough after the approved change to have been competitively selected for funding in the year the application was selected.

(b) *Documentation of other changes.* Any changes to an approved program that do not require prior HUD approval must be fully documented in the recipient's records.

[58 FR 13871, Mar. 15, 1993, as amended at 61 FR 51176, Sept. 30, 1996]

#### § 583.410 Obligation and deobligation of funds.

(a) *Obligation of funds.* When HUD and the applicant execute a grant agreement, funds are obligated to cover the amount of the approved assistance under subpart B of this part. The recipient will be expected to carry out the supportive housing or supportive services activities as proposed in the application.

(b) *Increases.* After the initial obligation of funds, HUD will not make revisions to increase the amount obligated.

(c) *Deobligation.* (1) HUD may deobligate all or parts of grants for acquisition, rehabilitation, acquisition and rehabilitation, or new construction:

(i) If the actual total cost of acquisition, rehabilitation, acquisition and rehabilitation, or new construction is less than the total cost anticipated in the application; or

(ii) If proposed activities for which funding was approved are not begun within three months or residents do not begin to occupy the facility within nine months after grant execution.

(2) HUD may deobligate the amounts for annual leasing costs, operating costs or supportive services in any year:

(i) If the actual leasing costs, operating costs or supportive services for that year are less than the total cost anticipated in the application; or

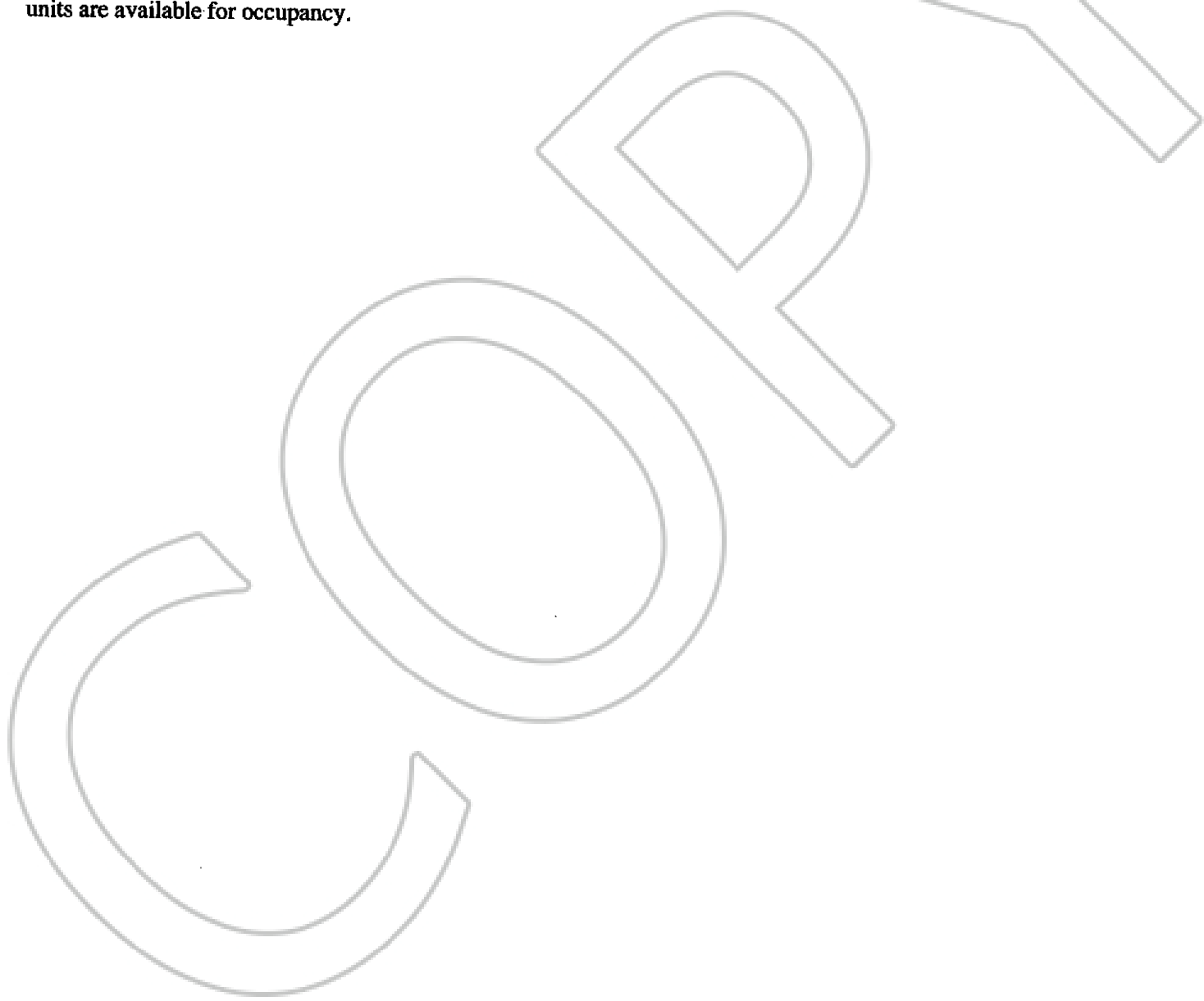
(ii) If the proposed supportive housing operations are not begun within three months after the units are available for occupancy.

(3) The grant agreement may set forth in detail other circumstances under which funds may be deobligated, and other sanctions may be imposed.

(4) HUD may:

(i) Readvertise the availability of funds that have been deobligated under this section in a notice of fund availability under § 583.200, or

(ii) Award deobligated funds to applications previously submitted in response to the most recently published notice of fund availability, and in accordance with subpart C of this part.





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03/03/2010

*Attachment  
(replacement copy)*

**SOCIAL SERVICES**

1133 Spruce Street, Gardnerville, NV 89410  
(775) 782-9825 \* Fax (775) 782-9874

**FACSIMILE TRANSMITTAL**

The document being faxed is intended only for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential and exempt from disclosure under state and federal law. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering the message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of the communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the faxed message to us.

**DATE:** 1/11/2009

**TO:** Connie Casto, HUD Community Planning

**FAX NUMBER:** 415 489-6601

**FROM:** Karen Goode, Manager

**RE:** Level of Environmental Review Determination  
**NUMBER OF SHEETS (incl. Cover Sheet):** 2

**COMMENTS:**



**LEVEL OF ENVIRONMENTAL REVIEW DETERMINATION: (2004)**

**Project Name / Description:** Douglas County Social Services Tenant-Based Rental Assistance for scattered rental units in Douglas County. Maximum # of grants - 1. Maximum amount \$266,898; \$156,360 Supported Housing Program Rental Assistance, \$106,292 Support Services/Case Management.

**Level of Environmental Review (cite regulation):**

**Administration 58.34(a)(3) Tenant-Based Rental Assistance 58.35(b)(1)**

(Exempt per 24 CFR 58.34, Categorically excluded not subject to statutes per § 58.35(b), Categorically excluded subject to statutes per § 58.35(a), Environmental Assessment per § 58.36, or EIS per 40 CFR 1500)

**STATUTES and REGULATIONS listed at 24 CFR 58.6**

**FLOOD INSURANCE / FLOOD DISASTER PROTECTION ACT**

1. Does the project involve the acquisition, construction or rehabilitation of structures, buildings or mobile homes?  
 No; flood insurance is not required. The review of this factor is completed.  
 Yes; continue.

2. Is the structure or part of the structure located in a FEMA designated Special Flood Hazard Area?  
 No. Source Document (FEMA/FIRM floodplain zone designation, panel number, date):  
 Yes. Source Document (FEMA/FIRM floodplain zone designation, panel number, date): (Factor review completed).

3. Is the community participating in the National Insurance Program (or has less than one year passed since FEMA notification of Special Flood Hazards)?  
 Yes - Flood Insurance under the National Flood Insurance Program must be obtained and maintained for the economic life of the project, in the amount of the total project cost. A copy of the flood insurance policy declaration must be kept in the Environmental Review Record.  
 No (Federal assistance may not be used in the Special Flood Hazards Area). (Continue review).

**COASTAL BARRIERS RESOURCES ACT**

1. Is the project located in a coastal barrier resource area? (See www.fema.gov/nfip/cobra.shtm).  
 No; Cite Source Documentation: The Coastal Barriers Resources Act, US Code Title 16-Conservation-Chapter 55, CBR Section 3501(a)(1), designates no coastal barrier islands on the West Coast. Therefore, all leasing activity in the West Coast is in compliance with the CBRA prohibition of federal assistance in the coastal barrier islands system.

(This element is completed).

Yes - Federal assistance may not be used in such an area.

**AIRPORT RUNWAY CLEAR ZONES AND CLEAR ZONES DISCLOSURES**

1. Does the project involve the sale or acquisition of existing property within a Civil Airport's Runway Clear Zone, Approach Protection Zone or a Military Installation's Clear Zone?  
 No; cite Source Document, page:

Douglas County Runway Protection Zone Map for the Minden-Tahoe Airport dated 7/2/08  
Project complies with 24 CFR 51.303(a)(3).

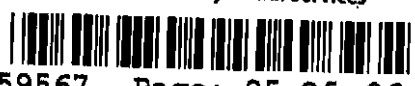
Yes; Disclosure statement must be provided to buyer and a copy of the signed disclosure statement must be maintained in this Environmental Review Record.

Karen Goode, Manager January 11, 2010

Preparer Signature / Name / Date

Karen Goode, Manager  
Responsible Entity Official Signature / Title / Date





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PG- 726

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AT 11/3/09  
CONNIE

### SOCIAL SERVICES

1133 Spruce Street, Gardnerville, NV 89410  
(775) 782-9825 \* Fax (775) 782-9874

## FACSIMILE TRANSMITTAL

The document being faxed is intended only for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential and exempt from disclosure under state and federal law. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering the message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of the communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the faxed message to us.

DATE: 11/3/2009

TO: Angelo Tom

FAX NUMBER: 415 489-6601

FROM: Karen Goode, Manager

RE: Requested documents for Technical Submission

NUMBER OF SHEETS (incl. Cover Sheet): 12

COMMENTS:

Mr. Tom,  
Attached please find the additional documents you requested during our telephone meeting on 11/2/09. If you should need anything further please don't hesitate to contact me.  
Thank you,  
Karen Goode

OMB Approval No. 2506-0183 (exp. 4/30/2012)

**Technical  
Submission**

**Project Number:** NV0021B9T020800

**Project Identifier:** NV 502

**Exhibit 7: Administration**  
(all new projects requesting administration funds)

The selectee should work in partnership with its project sponsor(s) (if a different organization than the selectee) in responding to Section A, and provide a narrative description of how this was done in Section B.

Up to 5% of each project award may be used for administrative costs. Eligible administrative costs include accounting for the use of the grant funds, preparing HUD reports, obtaining audits and similar administrative costs (see the SHP rule at Section 583.135).

For projects in which the project sponsor is not the same organization as the grantee, the project sponsor performs administrative functions necessary for the proper management of the grant. For example, though a grantee is responsible for ensuring the completion and submission of an Annual Progress Report to HUD, the project sponsor will, in many cases, complete the report itself. It is prudent, therefore, for the grantee to pass-through administrative funds to the project sponsor to cover the reporting costs.

As required by the Congressional committees' report accompanying the FY2003 HUD Appropriations Act, if SHP funds for administrative costs are awarded to a State or unit of local government where the projects will be operated by nonprofit organizations, some of these funds must be passed on to the nonprofit organization(s). These funds should be split with the nonprofit organization(s) in proportion to the administrative burden borne by them for the SHP project(s). HUD will consider States and units of general local government that pass on at least 50 percent of the administrative funds as having met this Congressionally-mandated requirement.

OMB Approval No. 2506-0183 (exp. 4/30/2012)

Technical Submission (cont.)

Project Number: NV0021B9T020800
Project Identifier: NV 502
Exhibit 7: Administration
(all new projects requesting administration funds)

A. Administrative Costs

Please complete the chart below for the administrative costs budget. If the selectee will also be the project sponsor, complete Lines 1 through 6. If the selectee and a different organization will be the project sponsor, complete lines 1 through 8.

In the first column, fill in the administrative activity to be paid for using SHP funds. In the Year 1 column, enter the amount of SHP funds to be used to pay administrative costs in the first year. If the grant is multi-year, enter the amount of SHP funds to be used for Year 2, and if applicable, Year 3. In the last column, (d), total the amount of SHP funds requested for the full grant term. Please ensure that the total requested for administrative costs for the entire grant term, Line 6, column (d), matches the amount entered in the project's Summary Budget in Exhibit 1.

Table with 5 columns: Administrative Costs, Year 1 (a), Year 2 (b), Year 3 (c), Total (d). Rows include administrative activities and totals for SHP request and project sponsor amounts.

B. Plan for Distribution of Administration Funds

If the selectee is not the same organization as the project sponsor, attach a description of the selectee's plan for distributing its administrative funding to address all, or a portion of the project sponsor's administrative needs. Include a description of how the project sponsor was consulted in formulating the plan.



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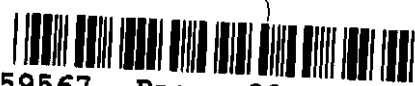
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# Applicant's Code of Conduct Attachment Detail

## Document Description:

COPY

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 03/03/2010

**Codes of Conduct NV  
 Updated April 30, 2008**

**CARSON CITY HUMAN SERVICES**  
 3303 Buttl Way, #1  
 Carson City, NV 89701

**RURAL CLINICS COMMUNITY MENTAL HEALTH CENTERS**  
 503 N. Division Street  
 Carson City, NV 89703

**DUCKWATER SHOSHONE TRIBE**  
 P.O. Box 140068  
 Duckwater, NV 89314

**CHURCHILL COUNTY SOCIAL SERVICES**  
 485 West B Street, Ste 105  
 Fallon, NV 89406

**DOUGLAS COUNTY**  
 1133 Spruce Street  
 Gardnerville, NV 89410

**WASHOE TRIBE OF NEVADA & CALIFORNIA**  
 919 Highway 395 South  
 Gardnerville, NV 89401

**ACORN TENANT UNION TENANT ORGANIZING PROJECT**  
 915 Charleston Blvd  
 Las Vegas, NV 891041513

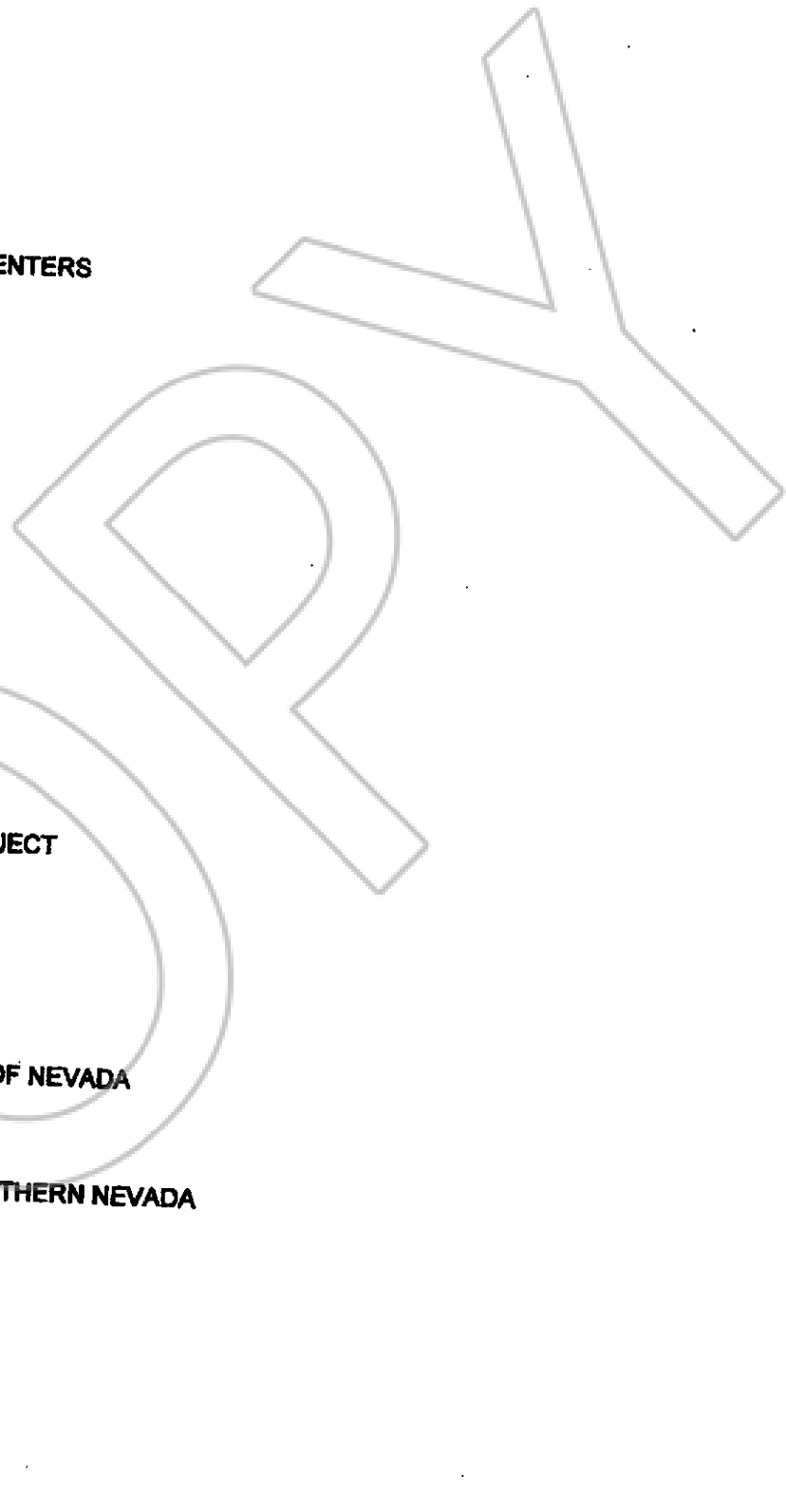
**CENTER FOR INDEPENDENT LIVING**  
 1417 Las Vegas Blvd, North  
 Las Vegas, NV 89101

**COMMUNITY DEVELOPMENT PROGRAMS CENTER OF NEVADA**  
 2009 Alta Drive  
 Las Vegas, NV 89106

**CONSUMER CREDIT COUNSELING SERVICE OF SOUTHERN NEVADA**  
 3660 South Decatur Blvd., Ste 30  
 Las Vegas, NV 89103

**EOB COMMUNITY ACTION PARTNERSHIP**  
 P.O. Box 2070880  
 Las Vegas, NV 89127

**HELP LAS VEGAS HOUSING CORPORATION II**  
 500 Pilot Road, Ste 300  
 Las Vegas, NV 89119



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HOUSING AUTHORITY CLARK COUNTY, NV  
5930 East Flamingo Road  
Las Vegas, NV 89122

HOUSING AUTHORITY OF THE CITY OF LAS VEGAS  
340 North 11th Street  
Las Vegas, NV 89101

HOUSING AUTHORITY OF THE COUNTY OF CLARK, NEVADA  
5390 E. Flamingo Road  
Las Vegas, NV 89122

NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES  
6161 W. Charleston Blvd  
Las Vegas, NV 89146

SOUTHERN NEVADA AREA HEALTH EDUCATION CENTER  
1094 E Sahara Avenue  
Las Vegas, NV 89104

ST. VINCENT HELP, INC.  
1501 Las Vegas Blvd. N  
Las Vegas, NV 89101

STATE OF NEVADA  
6161 W. Charleston Blvd.  
Las Vegas, NV 89146

THE SALVATION ARMY, A CALIFORNIA CORPORATION  
2900 Palamino Lane  
Las Vegas, NV 89107

UNITED STATES VETERANS INITIATIVE  
525 E Bonanza Blvd.  
Las Vegas, NV 89101

WOMEN'S DEVELOPMENT CENTER  
953 E. Sahara Avenue, Ste. 201  
Las Vegas, NV 89104

MOAPA BAND OF PAIUTES  
P.O. Box 340  
Moapa, NV 89025

NORTHERN NEVADA COMMUNITY RESOURCE BOARD  
P.O. Box 189  
Reno, NV 89504

RENO HOUSING AUTHORITY  
1525 East Ninth St.  
Reno, NV 09512

RESTART INC.  
190 Mill Street  
Reno, NV 89502



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**SILVER STATE FAIR HOUSING COUNCIL**  
855 E. Fourth St., Ste E  
Reno, NV 89512

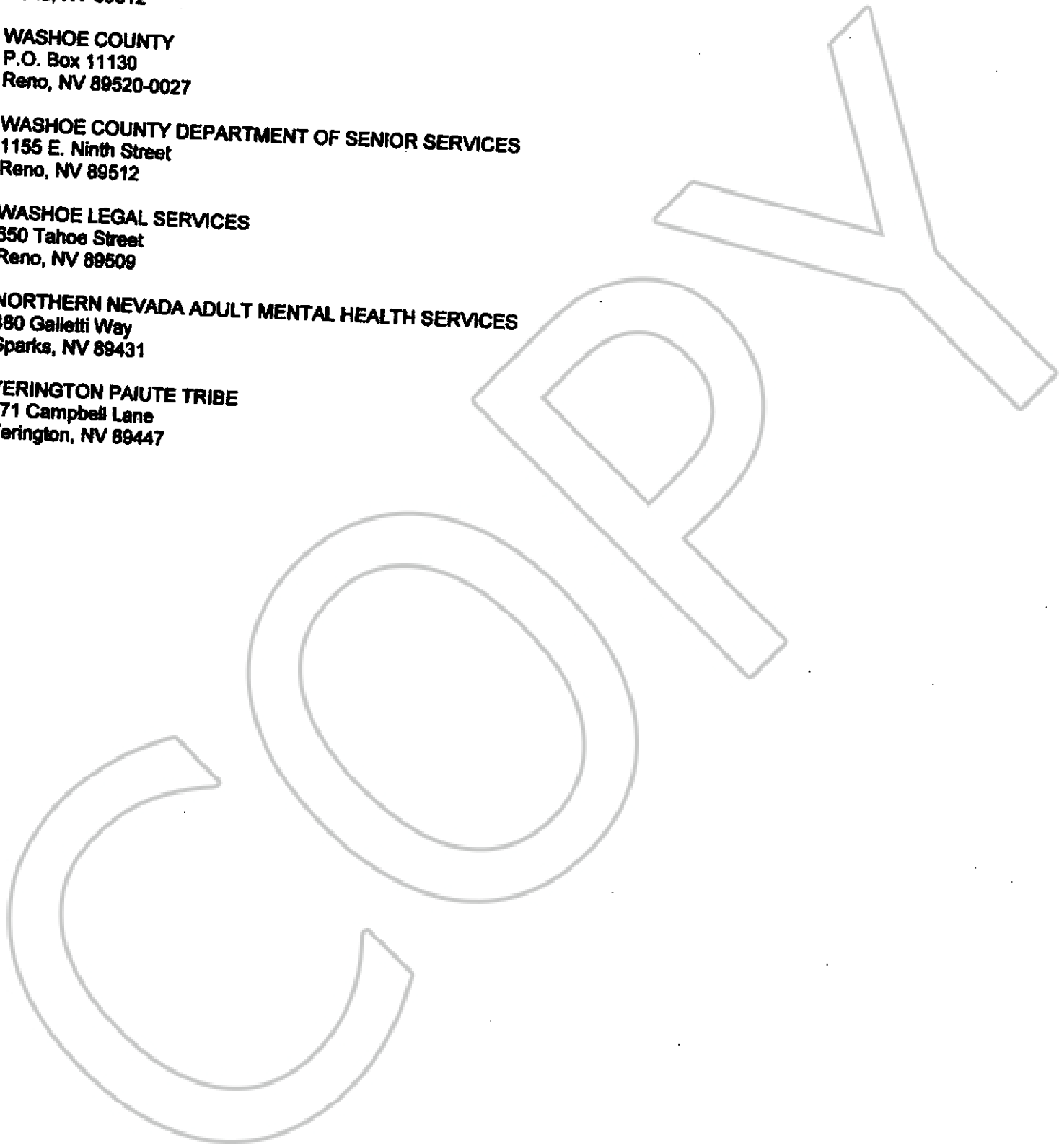
**WASHOE COUNTY**  
P.O. Box 11130  
Reno, NV 89520-0027

**WASHOE COUNTY DEPARTMENT OF SENIOR SERVICES**  
1155 E. Ninth Street  
Reno, NV 89512

**WASHOE LEGAL SERVICES**  
650 Tahoe Street  
Reno, NV 89509

**NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES**  
480 Galletti Way  
Sparks, NV 89431

**YERINGTON PAIUTE TRIBE**  
171 Campbell Lane  
Yerington, NV 89447



## **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 Form to Report Lobbying," 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:

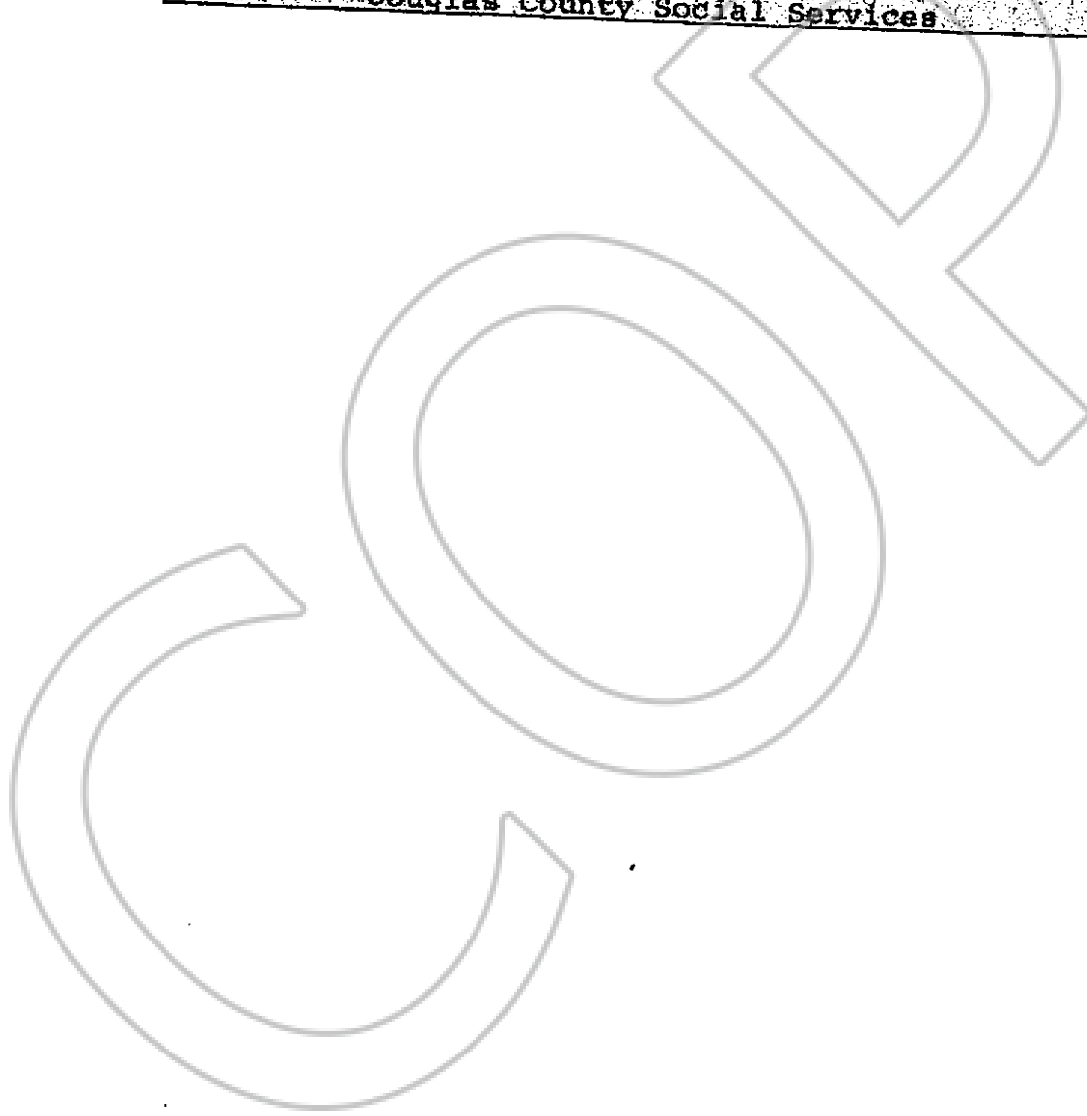
If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of





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 Form to Report Lobbying," 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.

Signature	<i>Karen Hooper</i>
Title	Manager
Organization	Douglas County Social Services





# Applicant/Recipient Disclosure/Update Report

U.S. Department of Housing and Urban Development

OMB Approval No. 2510-0011 (exp. 8/31/2009)

Instructions. (See Public Reporting Statement and Privacy Act Statement and detailed instructions on page 2.)

## Applicant/Recipient Information

Indicate whether this is an Initial Report  or an Update Report

1. Applicant/Recipient Name, Address, and Phone (include area code): Douglas County Social Services 1133 Spruce Street P.O. Box 218		2. Social Security Number or Employer ID Number: 886-00-0031
3. HUD Program Name Douglas County Transitional Housing Program		4. Amount of HUD Assistance Requested/Received \$266,898.00
5. State the name and location (street address, City and State) of the project or activity: 1133 Spruce Street, Gardnerville, NV 89410		

## Part I Threshold Determinations

- Are you applying for assistance for a specific project or activity? These items do not include formula grants, such as public housing operating subsidy or CDBG block grants. (For further information see 24 CFR Sec. 4.3).  
 Yes  No
- Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.8.  
 Yes  No

If you answered "No" to either question 1 or 2, Stop! You do not need to complete the remainder of this form. However, you must sign the certification at the end of the report.

## Part II Other Government Assistance Provided or Requested / Expected Sources and Use of Funds.

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/State/Local Agency Name and Address	Type of Assistance	Amount Requested/Provided	Expected Uses of the Funds
(Note: Use Additional pages if necessary.)			

## Part III Interested Parties. You must disclose:

- All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
- any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation in Project/Activity	Financial Interest in Project/Activity (\$ and %)
(Note: Use Additional pages if necessary.)			

## 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 non-disclosure, is subject to civil money penalty not to exceed \$10,000 for each violation. I certify that this information is true and complete.

Signature: x Karen Goods Date: (mm/dd/yyyy) 11/2/09

Karen Goods, Social Service Manager LASW



OMB Approval No. 2506-0183 (exp. 4/30/2012)

Technical Submission

Project Number: NV0021B9T020800  
Project Identifier: NV 502  
Exhibit 4: Supportive Services  
(all new projects requesting service funds)

**D. Documentation of Match for Year 1 (Attachment III)**

A selectee must currently have firm commitments for its cash resources for Year 1 and must submit documentation of those resources as an attachment to this Exhibit. These firm commitments must be documented on letterhead stationery, signed and dated by an authorized representative, and attached to this Exhibit. Each letter must, at a minimum, contain the following elements:

1. The name of the organization providing the cash resource;
2. The amount;
3. The type of activity for which the funds will be used (e.g., case management, child care, education);
4. The name of the project sponsor organization to which the cash will be contributed and/or the name of the project; and
5. The date the funds will be available.

**E. Certification of Match for Year 2 and Year 3, if applicable**

The following certification must be completed for Year 2, and Year 3 if applicable, of the grant term to certify that non-SHP cash resources will be used to meet the supportive services match requirement in each of these years. The amount specified in this certification must match the amount shown in Chart 4A, Line 10, of this Exhibit. No other documentation regarding the supportive services match requirement for Year 2 and Year 3 of the grant term is required at this time. However, match commitment for Years 2 and 3 will be identified at time of submission of Annual Progress Reports for those years.

The Douglas County Social Services (selectee organization) certifies that it will provide cash resources in the amount of \$ 35,000 from non-SHP funding sources for Year(s) 1 & 2 of this grant term to be used to provide services to homeless persons under HUD's grant number (No. grant number has been assigned at this time) NV0021B9T020800.

Signature of authorized representative: Karen Goode

Name (Print): Karen Goode, LASW

Title: Social Services Manager

Date: 8/2/09



# Submission Summary

Part	Last Updated
<b>COC Representative SF424</b>	Please Complete
<b>Application Type Applicant</b>	No Input Required 8/14/08 1:06 PM
<b>Application Details Nonprofit Document</b>	8/14/08 1:07 PM
<b>Project</b>	No Input Required
<b>Funding</b>	No Input Required
<b>Compliance</b>	No Input Required
<b>Declaration</b>	8/14/08 1:12 PM
<b>Additional Information</b>	8/14/08 1:14 PM
<b>Code of Conduct</b>	8/14/08 1:21 PM
<b>Survey on Ensuring Equal Opportunities for Applicants (SF-424 Supp)</b>	No Input Required
<b>Disclosure of Lobbying Activities (SF-LLL)</b>	No Input Required
<b>Certification of Consistency</b>	No Input Required
<b>Applicant/Recipient Disclosure/Update Report (HUD 2880)</b>	No Input Required
<b>Grant Applicant Survey (HUD-2994-A) HUD-40090-4</b>	No Input Required
<b>Applicant Certification</b>	No Input Required
	8/14/08 1:24 PM

**Notes:**

Applicant Contact List list must include at least 1 item(s).



**Technical  
 Submission**

**Project Number: NV0021B9T020800**

**Project Identifier: NV 502**

**Cover Page**

Recipient's Name: Homeward Bound Transitional Housing	HUD Project Number: NV0021B9T020800
--	--

Check the program component/type that classifies the project:

- Transitional Housing (TH)
- Permanent Housing for Homeless Persons with Disabilities (PH)
- Supportive Services Only (SSO)
- Safe Haven (SH)
- Homeless Management Information System (HMIS)
- Innovative Supportive Housing (ISH)

**Table Of Contents**

(Enter the page number for each Exhibit in the space provided below.)

- 7-11 Exhibit 1 Project Summary (Attachment I)
- N/A Exhibit 2 Acquisition, Rehabilitation, New Construction, and Project Feasibility
- 17-19 Exhibit 3 Real Property Leasing
- 21-23 Exhibit 4 Supportive Services (Attachment II & III)
- N/A Exhibit 5 Operating Budget
- N/A Exhibit 6 Homeless Management Information System
- 33 Exhibit 7 Administration
- 34 Exhibit 8 Leveraging (Attachment IV)

09 AUG 13 PM 5:05  
 REGION 1A HUD  
 OFFICE OF C.F.O.

**Certification:**

Name & Title of the Person who can answer questions about this document: Karen Goode, Social Services Manager LASW Christine Murphy, Caseworker	Phone (include area code): 775-782-9825
Address: Mailing: P. O. Box 218 Minden, NV 89423 Physical: 1133 Spruce Gardnerville, NV 89410	

I hereby certify that all the information stated herein 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)

Name & Title of Authorized Official: Karen Goode, Social Services Manager LASW	Signature & Date: <i>Karen Goode</i> , 8-7-09
---	--

OMB Approval No. 2506-0183 (exp. 4/30/2012)

Technical  
Submission

Project Number: NV0021B9T020800

Project Identifier: NV 502

**Exhibit 1: Project Summary**

Exhibit 1 consists of Sections A-D which request selectee and sponsor information, project budget and milestones, program goals, and number of beds, participants and supportive services.

**A. Selectee, and Sponsor Information** - Fill in the information requested below. Fill in the HMIS Lead for HMIS projects. When the selectee is the same organization as the project sponsor, complete only the selectee information.

Selectee Name		Sponsor Name	
Contact Person	Karen Goode	Contact Person	
Phone	775-782-9825	Phone	
FAX Number	775-782-9874	FAX Number	
E-Mail Address	kgoode@co.douglas.nv.us	E-Mail Address	
Street Address	1133 Spruce Street	Street Address	
City, State, Zip	Gardnerville, NV	City, State, Zip	
<b>HMIS Lead</b>		Contact Person	
Street Address		Phone	
City, State, Zip		E-Mail Address	

**B. Project Budget and Milestones** - This section must be completed by all new selectees.

1. Chart 1 - Summary Project Budget

To complete Chart 1, Summary Project Budget, enter the amount of SHP funds requested by line-item in the first column. For leasing, supportive services, and operations, the amount entered should be for the SHP grant term selected. In the second column, enter the amount of other cash that will be contributed to the project. This amount plus the SHP request must equal the total budget amount for the project. Enter the amounts for all structures in the project. Each line-item amount in this chart should match the amounts shown in Exhibits 2 through 8, as appropriate.

Requested grant term (1, 2, or 3 years): Years 1 & 2

**Chart 1 - Summary Project Budget**

	SHP Request	Applicant Cash	Total Project Budget
1. Acquisition	0	0	0
2. Rehabilitation	0	0	0
3. New Construction	0	0	0
4. Subtotal (lines 1 thru 3)*	0	0	0
5. Real Property Leasing	156,360.	0	0
6. Supportive Services**	106,296	60,118	166,414
7. Operations***	0	0	0
8. HMIS**	0	0	0
9. SHP Request (subtotal lines 4 thru 8)	262,656	60,118	166,414
10. Administration (up to 5% of line 9)	4,242	0	4,242
11. Total SHP Request (total lines 9 and 10)	266,898	60,118	327,016

\* By law SHP request for these activities cannot be more than 50% of the total acquisition, rehabilitation, and new construction budget.

\*\* By law, SHP funds can be no more than 80% of the total supportive services or total HMIS budget.

\*\*\* By law, SHP can pay no more than 75% of the total operating budget.

OK

OMB Approval No. 2506-0183 (exp. 4/30/2012)

**Technical  
Submission**

**Project Number:** NV0021B9T02080

**Project Identifier:** NV 502

**Exhibit 1: Project Summary**

**2. Chart 2 - Project Milestones**

To complete Chart 2, Project Milestones, enter the number of days from the execution of the grant agreement that each of the following milestones will occur, for each structure in the project. If the project has only one structure or no structures, complete only column A. Enter "N/A" if the event is not applicable.

Please note that the milestones entered will become part of the selectee's grant agreement and, therefore, it is important that the milestones are appropriate given the scope of the project and achievable by the SHP prescribed timeframes in the regulation at Section 583.410 and timeliness standards listed on page 39854 of the 2008 NOFA published on July 10, 2008.

Establish the major milestones for implementation of the HMIS project and enter the number of days from execution of the grant that each milestone will occur.

**Chart 2 - Project Milestones**

	Days from Execution of Grant Agreement Structure			
	A	B	C	D
1. Closing on purchase of land, structure, or execution of lease	n/a	n/a	n/a	n/a
2. Last unit leased, if leasing scattered units	120	n/a	n/a	n/a
3. Rehabilitation started	n/a	n/a	n/a	n/a
4. Rehabilitation completed	n/a	n/a	n/a	n/a
5. New construction started	n/a	n/a	n/a	n/a
6. New construction completed	n/a	n/a	n/a	n/a
7. Operations staff hired	n/a	n/a	n/a	n/a
8. Residents begin to occupy	*1	n/a	n/a	n/a
9. Supportive services begin	1	n/a	n/a	n/a
10. Facility near 100% occupied	n/a	n/a	n/a	n/a
11. Enrollment in supportive services near 100% capacity	120	n/a	n/a	n/a
12. Implementation of the HMIS project	n/a	n/a	n/a	n/a

\* Since we expected the grant to begin 7/1/2009 we had households ready to enroll into Program

**C. Program Goals** - The goals for SHP are to help program participants (a) obtain and remain in permanent housing, (b) increase their skills and/or income, and (c) achieve greater self-determination. In order to meet these program goals, each project should develop specific performance measures. Performance measures have three major components. First, the goals must relate to the outcomes (e.g., the program participant will successfully complete substance abuse treatment), rather than inputs (e.g., the program participant will attend 25 substance abuse sessions). Second, the goals must have a time frame for achievement and, third, they must have a percentage/number indicating a level of achievement. (Attachment I)

In a separate narrative, which should be submitted as an attachment to this Exhibit, please describe the performance measures that will be used for each of the SHP goals and how success in meeting each of the goals will be measured. Please include both housing and services in the discussion. At least one performance measure for the skills/income goal must address accessing mainstream health and human service programs. Success in meeting the program's performance measures must be reported in the Annual Progress Report.

Examples of performance measures for each of the SHP goals are:

- Goal: Obtain and remain in permanent housing
  - 70% of those families entering the program will receive Section 8 certificates when exiting the program.
- Goal: Increase skills and income
  - 80% of the participants who receive no benefits upon entry will receive entitlement benefits within 6 months.
- Goal: Achieve greater self-determination
  - 85% of clients will meet at least one goal on their Individual Service Plan.

## Attachment I

### Year 1 -

#### **Goal 1: Obtain skills, sustainable income and other resources needed to obtain and maintain self-sufficiency**

- 100% of households entering the program will receive on going case management for wrap around services ie: Section 8, Medicaid, Medicare, Food Stamps, SSI, etc.
- 100 % of households entering the program will move from the streets and shelters into Transitional Housing for 6 months or more
- 25% of households entering the program that are unemployed and under employed will attend employment enhancement classes

#### **Goal 2: B4 Promote Decent Affordable housing**

- 75% of households entering the program will attend at least one budgeting class and will apply for credit report and be given information about available training

#### **Goal 3: D: 1 Ensure Equal Opportunity in Housing**

- 25% of households entering the program will be provided information and referrals to Nevada Legal Services and/or Silver State Housing Council for legal advice on housing discrimination

### Year 2 -

#### **Goal 1: Secure permanent or permanent supportive housing**

- 100% of households entering the program will receive case management
- 87.5 % of households entering the program will move to permanent housing or permanent supportive housing for 6 months

#### **Goal 2: Increase homeownership opportunities**

- 25% of households entering the program will be given information on homeownerships





Technical N/A  
Submission

Project Number: NV0021B9T020800

Project Identifier: NV 502

**Exhibit 1: Project Summary**

**D. Type and Scale of Housing**

The housing type(s) was entered in the original application submitted in e-snaps. If there has been a change in the type of housing in the project, identify the changes in this Exhibit and indicate the specific address of each site. Scattered-site project applicants only need to fill out one box for each housing type in the project. Indicate only those sites being funded using SHP funds awarded for this project. **This page may be duplicated if there are more than three types of housing.**

Housing type (select one)	<input type="checkbox"/> Barracks <input type="checkbox"/> Dormitory <input type="checkbox"/> Shared Housing <input type="checkbox"/> SRO Units		
	<input type="checkbox"/> Clustered Housing <input type="checkbox"/> Scattered-site Apartments <input type="checkbox"/> Single Family Homes/ Townhomes /Duplexes		
Address:			
Identify the units, bedrooms and beds for the type of housing listed above.			
Units			
Bedrooms			
Beds			

Housing type (select one)	<input type="checkbox"/> Barracks <input type="checkbox"/> Dormitory <input type="checkbox"/> Shared Housing <input type="checkbox"/> SRO Units		
	<input type="checkbox"/> Clustered Housing <input type="checkbox"/> Scattered-site Apartments <input type="checkbox"/> Single Family Homes/ Townhomes /Duplexes		
Address:			
Identify the units, bedrooms and beds for the type of housing listed above.			
Units			
Bedrooms			
Beds			

Housing type (select one)	<input type="checkbox"/> Barracks <input type="checkbox"/> Dormitory <input type="checkbox"/> Shared Housing <input type="checkbox"/> SRO Units		
	<input type="checkbox"/> Clustered Housing <input type="checkbox"/> Scattered-site Apartments <input type="checkbox"/> Single Family Homes/ Townhomes /Duplexes		
Address:			
Identify the units, bedrooms and beds for the type of housing listed above.			
Units			
Bedrooms			
Beds			

Technical  
 Submission

Project Number: NV0021B9T020800

Project Identifier: NV 502

Exhibit 1: Project Summary

**D.1. Households in the Project -- with Dependents (Children)**

The purpose of this form is to capture the total number of homeless persons the organization has committed to serve as indicated in the e-snaps application or as modified by the field office (i.e., change due to funds being reduced), as well as the subpopulations/disabilities for each household member. If the project is not serving households with dependent children, enter "0" in the "Total Number of Households" field. Enter the same information that was entered into esnaps in the original application or use this form to indicate any changes since the project was conditionally-selected.

Total Number of Households	6
----------------------------	---

	Total Persons	Severely Mentally Ill	Chronic Substance Abuse	Veterans	Persons with HIV/AIDS	Victims of Domestic Violence
Disabled Adults	3	0	1	0	0	3
Non-Disabled Adults	3		0	0		2
Disabled Children	1	0	0		0	0
Non-Disabled Children	11		0			11
<b>Total Persons</b>	<b>18</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>16</b>
Total Number of Adults	6					
Total Number of Children	12					

Technical  
 Submission

Project Number: NV0021B9T020800

Project Identifier: NV 502

Exhibit 1: Project Summary (continued)

**D.2. Households in the Project – without Dependents (Children)**

The purpose of this form is to capture the total number of homeless persons the organization has committed to serve as indicated in the e-snaps application or as modified by the field office (i.e., change due to funds being reduced), as well as the subpopulations/disabilities for each household member. If the project is not serving households without dependent children, enter "0" in the "Total Number of Households" field. Enter the same information that was entered into e-snaps in the original application or use this form to indicate any changes since the project was conditionally-selected.

<b>Total Number of Households</b>	2
-----------------------------------	---

	<b>Total Persons</b>	<b>Chronically Homeless</b>	<b>Severely Mentally Ill</b>	<b>Chronic Substance Abuse</b>	<b>Veterans</b>	<b>Persons with HIV/AIDS</b>	<b>Victims of Domestic Violence</b>
<b>Disabled Adults</b>	1	1	0	1	0	0	0
<b>Non-Disabled Adults</b>	1			0	0		1
<b>Disabled Unaccompanied Youth</b>	0		0	0		0	0
<b>Non-Disabled Unaccompanied Youth</b>	0			0			0
<b>Total Persons</b>	2	1	0	1	0	0	1
<b>Total Number of Adults</b>	2						
<b>Total Number of Children</b>	0						

Technical Submission N/A

Project Number: \_\_\_\_\_  
Project Identifier: \_\_\_\_\_  
**Exhibit 2: Acquisition, Rehabilitation, New Construction, and Project Feasibility (new or expansion projects only)**

Exhibit 2 consists of Sections A-G which request information on the structure address, cost, site control, zoning, and total amount of cash needed for SHP- funded acquisition, rehabilitation, or new construction. Please complete a separate Exhibit 2 for each SHP-funded structure to be assisted within the project. In addition, for Section E.4.b., attach a narrative describing in-kind contributions (if any) directly related to the rehabilitation or new construction.

Please note that all projects requesting funding for acquisition, rehabilitation, and/or new construction activities are subject to environmental review requirements (see General Instructions).

**A. Address of Structure**  
Street \_\_\_\_\_  
City \_\_\_\_\_  
State/Zip \_\_\_\_\_

Is this the same address provided in the original application to HUD?  Yes  No

If "No," attach a narrative describing why a different structure is proposed, including any implications for acquisition, rehabilitation, or new construction costs.

**B. Site Control**

A project sponsor must have control of any structure that will receive SHP funding for acquisition for supportive housing or a supportive services facility, or new construction for supportive housing.

- Does the project sponsor have site control at this time?  
 Yes (complete question 2)  
 No (The project sponsor has one year from the date of HUD's letter to the selectee notifying it that it was conditionally selected to gain site control.)
- Check the appropriate box below to indicate the form of site control that the project sponsor has now and attach a copy of the document. These are the acceptable forms of site control:  
 Deed or other proof of ownership       Executed lease agreement  
 Executed contract of sale                       Executed option to purchase or lease

**C. Zoning**

Attach one of the following sources of zoning documentation:

- A statement on letterhead stationery from the unit of general local government (in which the structure is located) indicating that the proposed use of the structure is permissible under the applicable zoning ordinances and regulations; or
- If the structure is zoned for a use other than that intended by the project, submit documentation that the zoning will be changed within one year from the date of HUD's letter to the selectee notifying it of its conditionally selectee status; or
- Documentation that a lawsuit or a HUD complaint related to the proposed site has been filed, or a commitment that it will be filed three months (of initial notification of award), challenging the legality of the current zoning ordinance or regulations under the Fair Housing Act.

Technical N/A  
Submission

Project Number: \_\_\_\_\_  
Project Identifier: \_\_\_\_\_  
Exhibit 2: Acquisition, Rehabilitation, New Construction, and  
Project Feasibility (new or expansion projects only)

**D. Acquisition  
Cost**

If requesting SHP funds to acquire real property (land and/or a structure), enter the total acquisition cost in the applicable line below. Attach a photograph of the property.

1. Cost of real property is to be acquired from a person or entity other than the project sponsor.  
\$ \_\_\_\_\_ or
2. Cost of paying off the project sponsor's outstanding debt on a loan on real property to be used in the SHP project. Please note that SHP funds may only pay debt on property not currently used as supportive housing or for supportive services for homeless persons.
3. \$ \_\_\_\_\_
  - a. Attach to this Exhibit documentation indicating the balance owned on the loan, mortgage or deed of trust.
  - b. To avoid potential conflict of interest (see the SHP rule at Section 583.330(e)), describe in a narrative the current owner's proposed involvement in the SHP project.

**E. Rehabilitation  
and New  
Construction  
Cost**

If requesting SHP funds for rehabilitation or new construction of a structure, provide the following information:

1. Attach a thorough description of the nature, scope and square footage of the proposed work.
2. If new construction is proposed, attach a narrative describing how the costs associated with the construction are substantially less than rehabilitating the structure and/or that there is a lack of available structures to rehabilitate at a cost less than new construction.
3. Attach a cost estimate prepared by a qualified person in the field (such as an architect, contractor or engineer) that describes the labor and materials costs by major trade headings (such as plumbing, electrical and landscaping), and indicates all fees, taxes, builder's overhead and profit, contingency amounts and other items appropriate for the work to be completed. Please note that SHP funds cannot be used to pay developer's fees or to establish working capital or operating deficit funds.
4.
  - a. The total rehabilitation or construction cost for the structure based on the cost estimate: \$ \_\_\_\_\_
  - b. The total in-kind contributions (non-cash) to be made towards the rehabilitation or construction of the structure (such as materials, labor):  
\$ \_\_\_\_\_
  - c. The total cash needed for rehabilitating or constructing the structure (4a minus 4b). \$ \_\_\_\_\_

Technical N/A  
Submission

**Project Number:** \_\_\_\_\_  
**Project Identifier:** \_\_\_\_\_  
**Exhibit 2: Acquisition, Rehabilitation, New Construction, and Project Feasibility (new or expansion projects only)**

**F. SHP Funding Request**

1. Enter the total SHP request for acquisition, rehabilitation and new construction for the structure:  
 \$ \_\_\_\_\_ (Please ensure that this amount matches project summary budget amounts in Exhibit 1, Chart B.1., for these activities.)

**G. Project Feasibility**

By completing Exhibit 2 a project sponsor will demonstrate that it has enough documented cash resources to carry out these activities and meet the SHP match requirement, and that the resources will be available to meet the structure milestones schedule in Exhibit 1.

**a. Cash Requirements**

Enter the total cash needed to complete acquisition, rehabilitation, and/or new construction of all structures in the project. (Total of all structures in Ex. 2)  
 \$ \_\_\_\_\_

**b. Cash Resources**

Fill in the following table with new cash resources to be used for acquisition, rehabilitation or new construction. Do not include the cost of non-cash contributions or enter cash resources already committed to existing projects. Cash resources may be provided by the project sponsor, Federal, State and local governments, or private sources.

	Sources of Cash for Acquisition/ Rehabilitation/New Construction	Page Nos. of Documentation	Amount \$	
	1.			
	2.			
	3.			
	4.			
	5.			
	6.			
	7.			
<b>c. Total Cash</b>	Total cash resources excluding SHP request (add Lines 1 thru 7 above)			
<b>d. SHP Request</b>	SHP request (line a. minus line c.) (SHP request may not be greater than line c.)			

**e. Documentation of Feasibility**

Cash resources listed above in Part b. must be documented on letterhead stationery, signed and dated by an authorized representative, and attached to this Exhibit. Each letter must, at a minimum, contain the following elements:

1. The name of the organization providing the cash resource;
2. The amount;
3. The type of activity for which the funds will be used (e.g., acquisition, rehabilitation, or new construction);
4. The name of the project sponsor organization that the resource will be contributed to and/or the name of the project; and
5. The date the funds will be available.



OMB Approval No. 2506-0183 (exp. 4/30/2012)

**Technical  
Submission**

**Project Number:** NV0021B9T020800

**Project Identifier:** NV 502

**Exhibit 3: Real Property Leasing**

(all new projects requesting leasing funds)

SHP funds may be used to lease space for supportive housing or supportive services. If requesting SHP leasing funds, fill out the appropriate tables that follow. Housing and service space may be in the form of scattered-site leased units, or within a structure. The structures to be leased may be structures currently configured for, or structures to be converted to provide supportive housing and/or supportive services. Under no circumstances may SHP leasing funds be used to lease units or structures owned by the project sponsor, the selectee, or their parent organizations. This includes organizations which are members of a general partnership where the general partnership owns the structure.

Chart A should be filled out only if leasing units or structures that are currently configured for housing and/or services and, therefore, a FMR or actual rent can be used. If a negotiated actual rent (s) is lower than the area's FMR, use that amount instead of the FMR. Please note that FMR's are gross rent amounts that include shelter rent and the cost of utilities, except telephone. Therefore, if an actual rent amount, is used include a utility allowance. The local Public Housing Authority should be contacted for a schedule of utility allowances. The actual rent plus utility allowance may not exceed the FMR. Fill out Chart B only if leasing a structure that will be converted into space for housing and/or services and for which an FMR is not applicable. The Chart in Section C is a summary of the total SHP request for each year of the grant term for all units and/or structures in the project.



OMB Approval No. 2506-0183 (exp. 4/30/2012)

Technical  
 Submission

Project Number: NV0021B9T020800  
 Project Identifier: NV 502  
 Exhibit 3: Real Property Leasing  
 (all new projects requesting leasing funds)

**A. Leased Unit(s) or Structure(s) Configured for Housing and/or Services**

If proposing to lease units or structures in more than one metropolitan or non-metropolitan area, fill in the appropriate number of tables for each area with a different FMR or actual rent. Please reproduce this Exhibit as needed to accommodate projects using more than one FMR or actual rent.

Enter the number of unit(s)/structure(s) by the bedroom size to be leased and the lower of the actual rent or the FMR as published in the Federal Register on September 29, 2008. The space to be leased may be scattered-site (e.g., one-bedroom apartments in five different apartment complexes) or contained within a structure (e.g., a group home with six bedrooms).

Multiply the number of units/structures by the FMR or actual rent, whichever is lower, by 12 months (# of units x FMR or actual rent x 12) and enter the result in the Year 1 column and the total column. If a multi-year lease (e.g., the grant term is for 2 or 3 years), enter the Years 2 and 3 costs, as applicable, and then total.

Please note that the FMR for a single room occupancy (SRO) unit is equal to 75% (0.75) of the 0-bedroom FMR. The FMRs for unit sizes larger than 4-bedrooms are calculated by adding 15% to the 4-bedroom FMR for each extra bedroom. For example, the FMR for a 5-bedroom unit is 1.15 times the 4-bedroom FMR, and the FMR for a 6-bedroom unit is 1.30 times the 4-bedroom FMR.

FMRs may be found at the following WEB site:

<http://www.huduser.org/datasets/fmr.html>

FY 2008 FMR OK

Chart A:  
 Name of metropolitan or non-metropolitan FMR area:  
Douglas County, NV

Address (if scattered site, indicate so):

Scattered site through out Douglas County

Size of units	No. of units/ structures	FMR or HUD rent paid	No. of Mos.	Year 1 (a)	Year 2 (b)	Year 3 (c)	Total (d)
1. SRO	x	x	12 =				
2. 0 bdrm	2x	\$640 x 2 = \$1280	12 =	15,360.	15,360		\$
3. 1 bdrm	3x	\$788 x 3 = \$2364	12 =	28,368.	<del>28,360</del> 368		\$ 30,720 OK
4. 2 bdrm	3x	\$957 x 3 = \$2871	12 =	34,452	34,452		\$ 56,736 OK
5. 3 bdrm	x	x	12 =				\$ 68,904 OK
6. 4 bdrm	x	x	12 =				\$
7. 5 bdrm	x	x	12 =				\$
8. 6 bdrm	x	x	12 =				\$
9. Other	x	x	12 =				\$
10. Totals	8	\$ 6515		\$ 78,180	\$ 78,180	\$	\$ 156,360. OK

OK OK OK OK

**Technical  
Submission**

**Project Number: NV0021B9T020800**  
**Project Identifier: NV 502**  
**Exhibit 3: Real Property Leasing**  
 (all new projects requesting leasing funds)

**B. Leased Unit(s) Structure(s) – No Applicable FMR**

If leasing a structure or portion of a structure that will be converted into space for housing and/or services, fill out Chart B below using a monthly leasing cost that is comparable to and no more than the rents being charged for similar space in the area. If the project has more than one structure, reproduce Chart B and fill it out starting with structure 2.

Multiply the monthly leasing costs by 12 months and enter the result in the Year 1 column. If a multi-year lease (e.g., the grant term is for 2 or 3 years), enter the Years 2 and 3 costs, as applicable, and then total.

**Chart B:**

Structure 1	Monthly Leasing Cost	No. of Mos.	Year 1 (a)	Year 2 (b)	Year 3 (c)	Total (d)
	\$ x	12 =	\$	\$	\$	\$

Address:

	Year 1 (a)	Year 2 (b)	Year 3 (c)	Total (d)
Totals	\$	\$	\$	\$

**C. SHP Leasing Request**

Transfer the Year 1, 2, 3, (as applicable, depending on the grant term) and total figures from Tables A and/or B to the chart below.

	Year 1 (a)	Year 2 (b)	Year 3 (c)	Total (d)
1. Total Budget	\$ 78,180	\$ 78,180	\$	\$156,360
2. SHP Request	\$ 78,180	\$ 78,180	\$	\$156,360

Please ensure that the dollar amounts entered in 1(d) and 2(d) match those entered in the project Summary Budget in Exhibit 1, as applicable.



**Technical  
Submission**

**Project Number: NV0021B9T020800**  
**Project Identifier: NV 502**  
**Exhibit 3: Real Property Leasing**  
**(all new projects requesting leasing funds)**

**D. Site Control**

A project sponsor is not required to document site control if: (1) during the grant term, the lease will be given to the project participants (e.g., the homeless persons will eventually control the units); and/or (2) the SHP request is just for leasing (e.g., the request is not also for other SHP-related activities for which site control is needed). If one or both of these situations is applicable to the project, check the "N/A" (i.e., not applicable) box in #1 below and proceed to the next Exhibit.

1. Does the project sponsor have site control at this time?  Yes  No  N/A

If the answer to this question is "yes", complete question 2 below.

If the answer to this question is "no", the project sponsor has one year from the date of HUD's conditional award letter to the selectee to obtain site control.

2. Check the appropriate box below to indicate the form of site control that the project sponsor has now and attach a copy of the document. These are the acceptable forms of site control:

- Executed lease agreement
- Executed option to lease

**Technical  
Submission**

**Project Number:** NV0021B9T020800

**Project Identifier:** NV 502

**Exhibit 4: Supportive Services**  
(all new projects requesting service funds)

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Supportive services are designed to address the special needs of the homeless persons to be served by the project. Services may be provided directly by the project sponsor and/or through arrangement with public or private service providers, including the selectee. SHP supportive service funds may be used to pay for the actual costs of supportive services and other costs directly associated with providing such services (see SHP rule at Section 583.120).

By law, SHP funds may be used to pay for up to 80% of the total supportive services budget for each year of the grant term. This means that the selectee must make a cash payment for 20% of the project's total supportive services budget annually. For Year 1 of the grant term, documentation of firm commitments of the cash resources must be submitted as an attachment to Exhibit 4. The form and content requirements of these commitments are explained in Section D of this Exhibit. For Years 2 and 3, a selectee needs only to certify that cash resources will be provided using the certification in Section E of this Exhibit. This certification must be completed and submitted as an attachment to this Exhibit. Please note that, although selectees are not required to have the firm commitment for the cash resources for Year 2 and Year 3 at this time, the match requirement for Year 2 and Year 3 must be met by the end of each of those years and identified at the time of submission of the APRs for those years.

OMB Approval No. 2506-0183 (exp. 4/30/2012)

Technical  
 Submission

Project Number: NV0021B9T020800  
 Project Identifier: NV 502  
 Exhibit 4: Supportive Services

**A. Supportive Services Budget**

Please complete the chart below for the project's total supportive services budget. If additional is space is needed to indicate more services, reproduce this chart and label it Exhibit 4A.

In the first column, fill in the supportive service expenses. For staff positions, please include the job title and quantity (or FTE-full time equivalent); for supportive services, such as transportation services, please include the type (e.g., bus tokens) and quantity. In the Year 1 column, enter the amount needed to pay for the service in the first year. If the grant is multi-year, enter the funds needed for Year 2, and if applicable, Year 3. In the last column, total the amount of funds needed for the full grant term. Please ensure that the total supportive services request on Line 11, column (d) below, matches the amount entered in the project's Summary Budget in Exhibit 1 of this document.

Example:

Supportive Service Expense	Year 1 (a)	Year 2 (b)	Year 3 (c)	Total (d)
Service Activity: Mental Health Counseling Quantity: 0.25 FTE	\$10,000	\$10,300	\$10,609	\$30,909
Service Activity: Transportation (Bus Tokens) Quantity: 500/mo. @\$2.00 ea.	12,000	12,360	12,731	37,091
<b>SHP Request</b>	17,600	18,128	18,672	54,400
<b>Total Supportive Services Costs</b>	<b>\$22,000</b>	<b>\$22,660</b>	<b>\$23,340</b>	<b>\$68,000</b>

**Chart 4A:**

Supportive Service Expense	Year 1 (a)	Year 2 (b)	Year 3 (c)	Total (d)
1. Service Activity: Case Management Quantity: 85% wages and fringe benefits	50,490	55,806		106,296
2. Service Activity: Quantity:				
3. Service Activity: Quantity:				
4. Service Activity: Quantity:				
5. Service Activity Quantity:				
6. Service Activity Quantity:				
7. Service Activity: Quantity:				
8. Service Activity: Quantity:				
9. <b>SHP REQUEST*</b>	50,490	55,806		106,296
10. <b>Selectee's Match (Line 11 minus Line 9)</b>	31,559	28,559		60,118
11. <b>Total Supportive Services Budget</b>	<b>82,049</b>	<b>84,365</b>		<b>166,414</b>

\*The SHP request cannot be more than 80% of the total supportive services budget in Line 11.

OMB Approval No. 2506-0183 (exp. 4/30/2012)

**Technical  
Submission**

**Project Number:** NV0021B9T020800  
**Project Identifier:** NV 502  
**Exhibit 4: Supportive Services**  
(all new projects requesting service funds)

**B. Job Descriptions (Attachment II)**

Attach to Exhibit 4 narrative statement(s) indicating the job title(s) for each position to be funded. For each position describe the job responsibilities as they relate to the project.

**C. Site Control**

A project sponsor must have site control when SHP funds are requested for supportive services at a site operated by the project sponsor. If the project sponsor does not operate this site (e.g., another organization does), check the "N/A" (i.e., not applicable) box in #1 below and proceed to the next applicable Exhibit.

1. Does the project sponsor have site control at this time?  Yes  No  N/A

If the answer to this question is "yes", complete question 2.

If the answer to this question is "no", the project sponsor has one year from the date of HUD's conditional award letter to the selectee to obtain site control.

2. Check the appropriate box below to indicate the form of site control that the project sponsor has now and attach a copy of the document. These are the acceptable forms of site control;

- |   |   |
|---|---|
| <input type="checkbox"/> Executed lease agreement             | <input type="checkbox"/> Deed or other proof of ownership |
| <input type="checkbox"/> Executed option to purchase or lease | <input type="checkbox"/> Executed contract of sale        |



Attachment II



**JOB DESCRIPTION**



**COPY**

**JOB TITLE:** Caseworker

**JOB CODE:** 1430

**DEPARTMENT:** Community Services/Social Services

**FLSA STATUS:** Non-Exempt

**REPORTS TO:** Manager of Social Services

**SUMMARY OF JOB PURPOSE**

Interviews applicants and/or recipients to determine eligibility for one of the following Programs: Transitional Housing, Family Mentoring or Employment Training through interactive interviews and fact gathering; provides guidance and counseling to clients regarding the most efficient use of program services and managing aid funds.

**ESSENTIAL FUNCTIONS (All Areas)**

1. Assists the general public, customers, and/or county employees in person, by telephone and/or e-mail answering inquiries related to department services, programs, and records; receives complaints and attempts to resolve them; explains rules, policies, and procedures; researches questions, when appropriate, to provide accurate information; resolves issues and/or directs customers to the appropriate department for resolution.
2. Interviews clients to obtain information, determine eligibility for these Programs; interprets and explains rules and regulations governing eligibility and grants; maintains all aspects of confidentiality.
3. Assists clients in completing applications; provides factual information regarding various program regulations and procedures; identifies need for social services, and makes referrals to various agencies and community resources available; may act as an advocate for the client with other organizations; acts as liaison between other social service agencies, school districts, mental health agencies, and drug and alcohol agencies.
4. Initiates procedures to grant, modify, deny, or terminate eligibility and grants for the specific Program
5. Provides ongoing case management to families; meets with program participants on a regular basis to ensure eligibility and compliance.
6. Seeks and participates in continuing education opportunities regarding changes in mainstream services, new programs and resources, and changing trends in the welfare/social services area.
7. Creates and maintains case files; maintains accurate logs and compiles records of work performed; prepares regular and special reports as required, and submits individual recommendations for consideration by supervisor; performs a variety of other clerical duties including data entry, copying and assembling materials, collecting and distributing mail, answering phones, faxing documents, and other related tasks.

This job description indicates, in general, the nature and levels of work, knowledge, skills, abilities and other essential functions (as covered under the Americans with Disabilities Act) expected of the incumbent. It is not designed to cover or contain a comprehensive listing of activities, duties or responsibilities required of the incumbent. Incumbent may be asked to perform other duties as required.



### JOB DESCRIPTION

**Caseworker**

- 8. Researches, writes, monitors and implements State and Federal grants for continuation and/or expansion of the Programs; develops and maintains recordkeeping systems to meet the requirements of each grant; tracks expenses from each grant and for each family assisted; participates in legislative and planning meetings as required and appropriate.
- 9. Travels by car to surrounding counties to evaluate client services, participate in meetings, conferences and training programs. Transports program participants to meetings, appointments, jobs, interviews, program interviews, and social opportunities as necessary

#### ESSENTIAL FUNCTIONS (Transitional Housing)

- 1. Researches, writes and implements various housing assistance grants to support the program and position.
- 2. Initiates contact with property owners and managers to secure housing for the Transitional Housing Program participants; facilitates the transition of applicants from homelessness to permanent housing.
- 3. Interviews clients to obtain information, determine eligibility for the Transitional Housing Program, and assess the appropriateness of referral to other community assistance, medical or social service agencies; interprets and explains rules and regulations governing eligibility and grants, methods of payment, and legal rights to applicant or recipient; maintains all aspects of confidentiality; visits homes, and evaluates compliance and functioning of recipients to determine continuing eligibility, prepares case notes of such home visits.
- 4. Obtains and verifies income, assets, insurance and related information; contacts employers, banks, social security, veterans' administration and other public and private sources as necessary; records and evaluates personal and financial data obtained from applicant or recipient to determine initial or continuing eligibility, according to departmental directives.

#### ESSENTIAL FUNCTIONS (Areas of Family Mentoring)

- 1. Engage the community to convene and participate in a Family Mentoring Program which is intended to assist families to transition out and stay out of poverty.
- 2. Interviews and assesses applicants to determine eligibility for the Family Mentoring Program. Interprets and explains rules and regulations governing eligibility, methods of payment, and legal rights to applicants and recipients of the Family Mentoring Program.
- 3. Recruit, train, and maintain working relations with community members and leaders to actively engage in the group support and mentoring of those families involved in the program. Facilitates the development of supportive relationships between members of all spheres of the community and the identified families to build sustained, healthy and productive life skills and habits.
- 4. Acts as lead in developing and maintaining a supportive, empowering culture for diverse members of the community committed to transitioning people out of poverty. Makes arrangements for childcare, meals, meeting room and transportation for weekly Leadership meetings, monthly support meetings, coalition meetings and other meetings as needed.

Last Updated: June, 2009

This job description indicates, in general, the nature and levels of work, knowledge, skills, and other essential functions (as covered under the Americans with Disabilities Act) expected of the incumbent. It is not designed to cover or contain a comprehensive listing of activities, duties or responsibilities required of the incumbent. Incumbent may be asked to perform other duties as required.





## JOB DESCRIPTION

**Caseworker**

5. Meets with program participants on a regular basis to ensure compliance and continued eligibility, visits homes and sites in the community to evaluate functioning and assist with problem solving/conflict resolution.

### ESSENTIAL FUNCTIONS (Areas of Employment Training)

1. Initiates contact with employers, educators and placement agencies to secure training and job placement for Employment Training and Job Development participants. Interviews and assesses applicants to determine eligibility for the Employment Training and Job Development Program.
2. Interprets, explains rules and regulations governing eligibility, methods of payment, and legal rights to applicants and recipients. Facilitates the transition of applicants from unemployment or underemployment to gainful, steady employment.
3. Develops and maintains ongoing working relationships with other social service agencies, employers, training and education programs. Plays a lead role in the Business Advisory Group developed to support the Employment Training and Job Development Program. Acts as liaison between the program participants and other social services agencies, employers and support agencies.
4. Meets with program participants on a regular basis to ensure compliance and continued eligibility, visits job sites and evaluates performance for continued program eligibility.

### QUALIFICATIONS

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

### EDUCATION and/or EXPERIENCE

High School Diploma, or equivalent, and three (3) year's related experience performing case management and/or training; a Bachelor's Degree in Social Work, Social Sciences, Counseling, Public Administration or other closely related field is preferred.

### LANGUAGE SKILLS

Ability to read, analyze, and interpret general business periodicals, technical procedures, and/or governmental regulations; write reports and business correspondence; effectively present information and respond to questions from groups of managers, clients, co-workers, and the general public.

### MATHEMATICAL SKILLS

Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals; ability to compute rate, ratio, and percent and to create and interpret bar graphs.

### REASONING ABILITY

Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists; interpret a variety of instructions furnished in written, oral, diagram, or schedule form.

This job description indicates, in general, the nature and levels of work, knowledge, skills, abilities and other essential functions ~~to be performed under the supervision of the incumbent.~~ It is not designed to cover or contain a comprehensive listing of activities, duties or responsibilities required of the incumbent. Incumbent may be asked to perform other duties as required.



### JOB DESCRIPTION

**Caseworker**

#### **OTHER KNOWLEDGE, SKILLS, & ABILITIES**

Knowledge of interviewing techniques involving application of regulations and community resources; technical and social service clerical functions, business correspondence, recordable systems, and office systems; accounting and advanced clerical skills.

Ability to perform technical and professional tasks involving the use of judgment and requiring accuracy, to provide guidance and evaluate appropriate referrals; maintain confidentiality, and understand, interpret and apply appropriate rules, regulations and written directions; evaluate demands on time and arrange schedule accordingly; apply sound judgment in contacts with officials and members of the public; establish and maintain effective working relationships with public, social service agencies and government officials.

Intermediate proficiency level utilizing Microsoft Office applications including Excel, Word, and Outlook, and the ability to operate other standard office equipment, including telephones, calculators, copiers, FAX machines, etc. is required.

#### **CERTIFICATES, LICENSES, REGISTRATIONS**

Valid Driver's License with an acceptable driving record.

#### **PHYSICAL DEMANDS**

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly required to stand, walk, sit, and drive; use hands to finger, handle, or feel; reach with hands and arms; talk and hear. The employee occasionally is required to climb, balance and stoop, kneel, crouch, or crawl and must frequently lift and/or carry up to 10 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception, and ability to adjust focus.

#### **WORKING ENVIRONMENT**

Work is performed in an office environment where the physical demands require sitting for extended periods of time; frequent use of computers and standard office equipment; may work under stress of deadlines. Work is also routinely provided in the community, private homes, motels, and shelters where clients may or may not be aware ahead of time the Case Manager's intent to visit. Client situations may include active domestic violence, substance abuse, illness and crisis.

I have read and understand the contents of this Job Description, and I have received a copy of this Job Description for my records.

PRINT NAME: Christine K. Murphy

SIGNATURE: Christine K. Murphy

DATE: 6/26/09

This job description indicates, in general, the nature and levels of work knowledge, skills, and other essential functions (as covered under the Americans with Disabilities Act) expected of the incumbent. It is not designed to cover or contain a comprehensive listing of activities, duties or responsibilities required of the incumbent. Incumbent may be asked to perform other duties as required.

**Technical  
Submission**

**Project Number: NV0021B9T020800**  
**Project Identifier: NV 502**  
**Exhibit 4: Supportive Services**  
**(all new projects requesting service funds)**

**D. Documentation of Match for Year 1 (Attachment III)**

A selectee must currently have firm commitments for its cash resources for Year 1 and must submit documentation of those resources as an attachment to this Exhibit. These firm commitments must be documented on letterhead stationery, signed and dated by an authorized representative, and attached to this Exhibit. Each letter must, at a minimum, contain the following elements:

1. The name of the organization providing the cash resource;
2. The amount;
3. The type of activity for which the funds will be used (e.g., case management, child care, education);
4. The name of the project sponsor organization to which the cash will be contributed and/or the name of the project; and
5. The date the funds will be available.

**E. Certification of Match for Year 2 and Year 3, if applicable**

The following certification must be completed for Year 2, and Year 3 if applicable, of the grant term to certify that non-SHP cash resources will be used to meet the supportive services match requirement in each of these years. The amount specified in this certification must match the amount shown in Chart 4A, Line 10, of this Exhibit. No other documentation regarding the supportive services match requirement for Year 2 and Year 3 of the grant term is required at this time. However, match commitment for Years 2 and 3 will be identified at time of submission of Annual Progress Reports for those years.

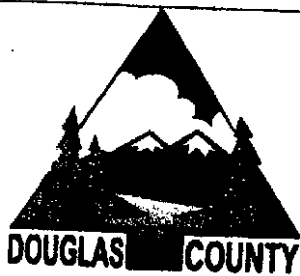
The Douglas County Social Services (selectee organization) certifies that it will provide cash resources in the amount of \$ 35,000 from non-SHP funding sources for Year(s) 1 & 2 of this grant term to be used to provide services to homeless persons under HUD's grant number (No grant number has been assigned at this time) NV0021B9T020800.

Signature of authorized representative: \_\_\_\_\_

Name (Print): Karen Goode, LASW

Title: Social Services Manager

Date: \_\_\_\_\_



## SOCIAL SERVICES

1133 Spruce Street, Gardnerville, NV 89410  
(775) 782-9825 \* Fax (775) 782-9874

Attachment III

### Memorandum

TO: Christy Murphy, Case Worker  
FROM: Karen Goode, Social Services Manager *K. Goode*  
DATE: September 2, 2008  
RE: Letter of Support

This is a letter of agreement between Douglas County Social Services and Douglas County Homeward Bound Transitional Housing Program. It is understood that the sole use of this letter is as evidence of community cooperation in the agency's grant request to HUD.

Based upon past experience Douglas County Social Services' budget allows for costs associated with the operating of the HUD grant. Such costs include office rent, equipment, cell phone and travel/vehicle usage. Based on last year's program operation, an estimated annual amount of \$12,559.00 will be contributed by Douglas County Social Services a total of \$25,118 for the two year period.

We will be also be budgeting \$19,000 for the first year and \$16,000 from our Community Services Block grant for Douglas County Transitional Housing.

= \$35,000

**Project Number:** \_\_\_\_\_**Technical** N/A**Project Identifier:** \_\_\_\_\_**Submission****Exhibit 5: Operations**

(all new projects requesting operating funds)

Operating costs are those costs associated with the day-to-day operation of supportive housing and for which cash payment is needed. Operating costs differ from supportive service costs in that operating costs support the function and the operation of the housing project.

If requesting SHP operating funds, only the portion of the costs directly related to the operation of the housing project are eligible. For example, if a project sponsor's executive director will spend 10% of his/her time providing management to the housing project, then (up to) 10% of his/her salary can be charged as an SHP operating expense. Additionally, for example, in cases of shared utilities, SHP operating funds may only pay for the portion of the utilities associated with the housing project based on the square footage of the project's space. If the housing project occupies 25% of the building's space, then (up to) 25% of the monthly utility bill can be paid for using SHP operating funds. If the building to be used is new, the project sponsor should contact its local utility company for an estimate of the monthly bill.

Relocation expenses are also eligible SHP operating costs. Because relocation requirements are complex, selectees should contact their local HUD Field Office as soon as possible to determine if the relocation requirements are triggered and if so, the procedures to follow and the cost of the relocation assistance.

SHP operating funds may not be used to pay for the following costs:

- a. Operating costs of a supportive services only facility;
- b. Administrative expenses such as audits and preparing HUD reports (see Exhibit 7: Administration);
- c. Rent of space for supportive housing and/or supportive services (see Exhibit 3: Real Property Leasing);
- d. The payment of principal and interest on a loan on a facility not currently being used as supportive housing and/or for the delivery of services (see Exhibit 2: Acquisition, Rehabilitation, New Construction, and Project Feasibility); and
- e. Depreciation because it does not constitute an incurred cost that requires a cash outlay.

SHP funds can be used to pay up to 75% of the total operations budget for the housing project in Years 1, 2 and 3. This means that the project sponsor must make a cash payment for 25% of the project's operating budget annually. For Year 1 of the grant term, documentation of firm commitments of the cash resources must be submitted as an attachment to this Exhibit. The form and content requirements of these commitments are explained in Section D of this Exhibit. However, if there is more than one year in the grant term, a selectee needs only to certify that cash resources will be provided in Year 2 and Year 3 using the certification in Section E of this Exhibit. This certification must be completed and submitted as an attachment to this Exhibit. Please note that, although selectees are not required to have the firm commitment for the cash resources for Year 2 and Year 3 at this time, the match requirement for Year 2 and Year 3 must be met by the end of each of those years.

As part of the grantee's annual progress report, a project sponsor must report the amount of SHP operating funds received during the operating year and the sources of project sponsor cash used during the year to meet the match requirement. The operating year begins after development activities of acquisition, rehabilitation and new construction are complete. An operating start date should be established by the grantee in LOCCS\* when the first draw down is made for leasing, supportive services, or operating costs. The operating start date should be the date costs are first incurred for one of these activities. The operating start date may NOT precede the SHP grant agreement execution date.

\*Line of Credit Control System: the HUD accounting system from which SHP grantees withdraw awarded funds.

OMB Approval No. 2506-0183 (exp. 4/30/2012)

Technical N/A  
 Submission  
 (cont.)

Project Number: \_\_\_\_\_  
 Project Identifier: \_\_\_\_\_  
 Exhibit 5: Operations  
 (all new projects requesting operating funds)

**A. Operations Budget**

Complete the chart below or reproduce it using available spreadsheet software. Only operating expenses for which a cash payment will be required for this project may be entered. Do not include the value of non-cash contributions, such as donated supplies.

In the first column under operating costs, enter the requested information including type of expense and other information where indicated (see example in chart below). In the Year 1 column, enter the total amount of funds to be used to pay for the expense the first year. If the grant is multi-year, enter the total funds to be used for the second and third years. In the last column, total the amount of funds needed to help pay for the identified operating expense for the grant term. Please ensure that the total operations request on Line 13, column (d) below, matches the amount entered in the project's Summary Budget in Exhibit 1.

Operating Costs	Year 1 (a)	Year 2 (b)	Year 3 (c)	Total (d)
<b>EXAMPLE: Grounds maintenance contract; \$75/mos, x no. of mos.</b>				
1. Maintenance/Repair				
2. Staff (position, 85 % time, fringe benefits, salary)				
3. Utilities				
4. Equipment (lease/buy)				
5. Supplies (quantity)				
6. Insurance				
7. Furnishings (quantity)				
8. Relocation (no. of persons)				
9. Food (perishable/non-perishable, quantity)				
10. Other Operating Costs (amounts/quantities)				
<b>11. SHP REQUEST**</b>				
<b>12. Selectee's Match *** (Line 13 minus line 11)</b>				
<b>13. Total Operating Budget</b>				

\*\* The SHP request for Years 1, 2, and 3 cannot be more than 75% of the total operating budget for those years.

\*\*\*See page 33 for information regarding documenting match.

Technical  
Submission N/A  
(cont.)

Project Number: \_\_\_\_\_

Project Identifier: \_\_\_\_\_

Exhibit 5: Operations  
(all new projects requesting operating funds)

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**B. Job Descriptions**

Attach to this Exhibit narrative statement(s) indicating the job title(s) for each position to be funded. For each position describe the job responsibilities as they relate to the project for each position.

**C. Site Control**

A project sponsor must have site control when SHP funds are requested for operating costs for supportive housing. If already responded to site control requirements in Exhibits 2, 3, and/or 4, skip this section and proceed to the next Exhibit.

1. Does the project sponsor have site control at this time?  Yes  No

If the answer to this question is "yes", complete question 2.

If the answer to this question is "no", the project sponsor has one year from the date of HUD's conditional award letter to the selectee to obtain site control.

2. Check the appropriate box below to indicate the form of site control that the project sponsor has now and attach a copy of the document. These are the acceptable forms of site control:

- |   |   |
|---|---|
| <input type="checkbox"/> Executed lease agreement             | <input type="checkbox"/> Deed or other proof of ownership |
| <input type="checkbox"/> Executed option to purchase or lease | <input type="checkbox"/> Executed contract of sale        |

**Technical N/A**  
**Submission**  
**(cont.)**

**Project Number:** \_\_\_\_\_  
**Project Identifier:** \_\_\_\_\_  
**Exhibit 5: Operations**  
**(all new projects requesting operating funds)**

**D. Documentation of Match for Year 1**

A selectee must currently have firm commitments for its cash resources for Year 1 and must submit documentation of those resources as an attachment to this Exhibit. These firm commitments must be documented on letterhead stationery, signed and dated by an authorized representative, and attached to this Exhibit. Each letter must, at a minimum, contain the following elements:

1. The name of the organization providing the cash resource;
2. The amount;
3. The type of activity for which the funds will be used (e.g., case management, child care, education);
4. The name of the project sponsor organization to which the cash will be contributed and/or the name of the project; and
5. The date the funds will be available.

**E. Certification of Match for Year 2 and Year 3, if applicable**

The following certification must be completed for Year 2, and Year 3 if applicable, of the grant term to certify that non-SHP cash resources will be used to meet the operating costs match requirement in each of these years. The amount specified in this certification must match the amount shown in Section A, Line 12, of this Exhibit. No other documentation regarding the operating costs match requirement for Year 2 and Year 3 of the grant term is required at this time. However, match commitment for Years 2 and 3 will be identified at time of submission of Annual Progress Reports for those years.

The \_\_\_\_\_ (selectee organization) certifies that it will provide cash resources in the amount of \$ \_\_\_\_\_ from non-SHP funding sources for Year(s) \_\_\_\_\_ of this grant term to be used for operating costs of housing for homeless persons under HUD's Project grant number \_\_\_\_\_

Signature of authorized representative: \_\_\_\_\_

Name (Print): \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_



**Technical N/A  
Submission**

**Project Number:** \_\_\_\_\_

**Project Identifier:** \_\_\_\_\_

**Exhibit 6: HMIS Dedicated Projects  
(all new HMIS dedicated projects)**

SHP funds may be used to pay for up to 80% of the total HMIS budget for each year of the grant term. This means that the selectee must make a cash payment for 20% of the project's total HMIS budget annually. For Year 1 of the grant term, documentation of firm commitments of the cash resources must be submitted as an attachment to this Exhibit. The format and requirements for these commitments are explained in Section B of this Exhibit. For Years 2 and 3, if applicable, a selectee needs only to certify that cash resources will be provided using the certification in Section C of this Exhibit. This certification must be completed and submitted as an attachment to this Exhibit. Please note that, although selectees are not required to have the firm commitment for the cash resources for Years 2 and 3 at this time, the cash match requirement for Years 2 and 3 must be met by the end of each of those years and identified at time of submission of Annual Reports for those years.

The 2001 HUD Appropriations Act added homeless management information systems as a new eligible activity. Section 423 (a)(7) of the McKinney-Vento Act provides that HUD may make .... "a grant for the costs of implementing and operating management information systems for purposes of collecting unduplicated counts of homeless people and analyzing patterns of use of assistance funded under this Act." The Technical Submission breaks these costs into 5 major cost categories: Equipment, Software, Services, Personnel, and Space/Operations.

If a project sponsor's staff will perform an HMIS function, only the staff time directly related to the delivery of that HMIS function for the project is eligible for SHP funding. For example, the project sponsor - Harmony House - will use 25% of 1 FTE staff for a HMIS task and the remainder of the staff's time will be spent conducting non-HMIS tasks. Using this example, only 25% of the staff's salary may be paid for with SHP HMIS funds. Likewise, where the HMIS system serves non-homeless clients and provides reporting on those clients, a proration of costs must be made.

**A. HMIS Dedicated Project: Narratives and Budget Chart**

**1. List of Continuum of Care Shelter Resources and Schedule for Participation**

List by category all emergency and transitional shelters and McKinney-Vento-assisted permanent housing projects that were identified in the 2008 Exhibit 1 Continuum of Care Plan. Shelters not included in the Continuum of Care Plan may also be included. Indicate next to each shelter or site:

1. The beds/unit capacity.
2. Schedule of participation in the HMIS. If shelter or site is currently participating, list as (C), if planned enter (P-1/08), or if it does not plan on entering the system use (NP) and state the reason.

**2. HMIS Software**

List the name/vendor of the software program, system type (i.e., web-based client/server, other), and types of activities that can be performed. Potential types of activities include: Intake and Exit (IE); Assessment and Goals Setting (AS); Service Planning (SP); Tracking Supportive Services and Outcomes (TS); Information & Referral (IR); Outreach (OU).

Technical N/A  
Submission  
(cont.)

Project Number: \_\_\_\_\_  
Project Identifier: \_\_\_\_\_  
**Exhibit 6: HMIS Dedicated Project**  
(all new HMIS dedicated projects)

**3. HMIS Budget Narrative**

Briefly describe each category of costs that apply to the project. Applicants may benefit from reviewing a HUD-funded Technical Assistance document entitled, Homeless Management Information Systems (HMIS) Cost Estimation Guidelines: Cost Framework and Submission Recommendations. The document can be viewed and down loaded from: <http://www.hud.gov/offices/cpd/homeless/hmis/index.cfm>

Please complete the HMIS Budget Chart on the next page for the project's *total* HMIS budget. Include both SHP funds and selectee's match when completing HMIS Budget.

In the first column, fill in the HMIS expenses (Cost Item) that apply to the project. In the Year 1 column, enter the amount needed to pay for the HMIS in the first year. If the grant is multi-year, enter the funds needed for Year 2, and if applicable, Year 3. In the last column, total the amount of funds needed for the full grant term. Please ensure that the Total SHP Request from the chart on the next page is equal to the amount entered in the project's Summary Budget in Exhibit. (This is identified by asterisks on the chart.)

Please note that the selectee's match for the first year of the grant term must be documented as described in the introduction to this Exhibit; for projects with grant terms exceeding one year, the certification at Section C of this Exhibit must be completed for Year 2 and Year 3 of the grant term.

OMB Approval No. 2506-0183 (exp. 4/30/2012)

Technical Submission N/A Project Number: \_\_\_\_\_  
 Project Identifier: \_\_\_\_\_  
**Exhibit 6: HMIS Dedicated and Shared Projects**  
 (all new HMIS Dedicated and Shared projects)

Cost Item	Year 1	Year 2	Year 3	Total
<b>Equipment</b>				
Central Server(s)				
Personal Computers and Printers				
Networking				
Security				
<b>Subtotal</b>				
<b>Software</b>				
Software / User Licensing				
Software Installation				
Support and Maintenance				
Supporting Software Tools				
<b>Subtotal</b>				
<b>Services</b>				
Training by Third Parties				
Hosting / Technical Services				
Programming: Customization				
Programming: System Interface				
Programming: Data Conversion				
Security Assessment and Setup				
On-line Connectivity (Internet Access)				
Facilitation				
Disaster and Recovery				
<b>Subtotal</b>				
<b>Personnel</b>				
Project Management / Coordination				
Data Analysis				
Programming				
Technical Assistance and Training				
Administrative Support Staff				
<b>Subtotal</b>				
<b>HMIS Space and Operations</b>				
Space Costs				
Operational Costs				
<b>Subtotal</b>				
<b>SHP Request*</b>				
<b>Selectee's Match</b>				
<b>Total HMIS Budget</b>				

\*The SHP request cannot be more than 80% of the Total HMIS Budget.

Technical N/A  
Submission

Project Number: \_\_\_\_\_

Project Identifier: \_\_\_\_\_

**Exhibit 6: HMIS Dedicated and Shared Projects**  
(all new HMIS Dedicated and Shared projects)

**A. Documentation of Match for Year 1**

A selectee must currently have firm commitments for its cash resources for Year 1 and must submit documentation of those resources as an attachment to this Exhibit. These firm commitments must be documented on letterhead stationery, signed and dated by an authorized representative, and attached to this Exhibit. Each letter must, at a minimum, contain the following elements:

1. The name of the organization providing the cash resource;
2. The amount;
3. The type of activity for which the funds will be used (e.g., equipment, software, services, personnel and HMIS space and operations);
4. The name of the project sponsor organization to which the cash will be contributed and/or the name of the project; and
5. The date the funds will be available.

**B. Certification of Match for Year 2 and Year 3, if applicable**

The following certification must be completed for Year 2 and Year 3, if applicable, of the grant term to certify that non-SHP cash resources will be used to meet the supportive services match requirement in each of these years. The amount specified in this certification must match the amount shown in the selectee's match on page 28 of this Exhibit. No other documentation regarding the supportive services match requirement for Years 2 and 3 of the grant term is required at this time. However, match commitment for Years 2 and 3 will be identified at time of submission of Annual Progress Reports for those years.

The \_\_\_\_\_ (selectee organization) certifies that it will provide cash resources in the amount of \$ \_\_\_\_\_ from non-SHP funding sources for Year(s) \_\_\_\_\_ of this grant term to be used to provide services to homeless persons under HUD's grant number \_\_\_\_\_.

Signature of authorized representative: \_\_\_\_\_

Name (Print): \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

OMB Approval No. 2506-0183 (exp. 4/30/2012)

**Technical  
Submission**

**Project Number:** NV0021B9T020800  
**Project Identifier:** NV 502  
**Exhibit 8: Leveraging**

If this project was identified as a project that will leverage resources (outside of SHP) in the selectee's original application to HUD, the selectee is required to submit documentation of the leveraged commitment(s) during the Technical Submission phase. As described in the NOFA, page 39851, project leveraging includes funds requested under the 2008 NOFA with other resources, including private, other public and mainstream services, and housing programs for proposed projects and ongoing efforts. Please submit a copy of the written leveraging agreement in place at the time of application submission. The agreement must indicate:

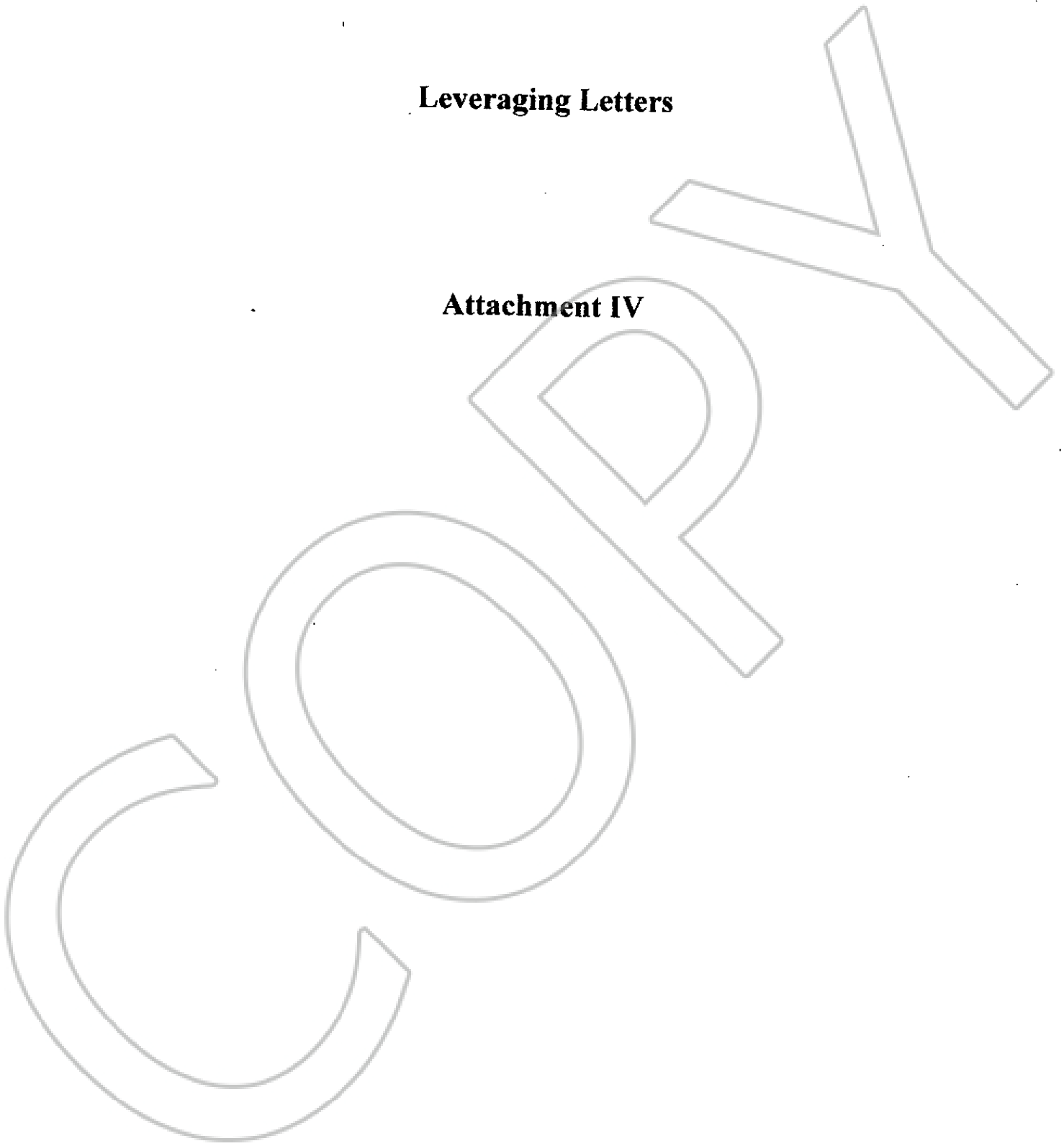
If this project was identified as a project that will leverage resources, please submit: (Attachment IV)

- a) copy of a written leveraging agreement in place at the time of application submission that indicates:
- b) the type and value of the contribution;
- c) the name of the project sponsor organization and;
- d) the name of the project for which the resource will be contributed.

Acceptable documentation includes signed and dated letters, memorandums of agreement and similar documents.

**Leveraging Letters**

**Attachment IV**



STATE OF NEVADA

JIM GIBBONS  
Governor

MICHAEL J. WILLDEN  
Director



RICHARD WHITLEY, MS  
Administrator

MARY GUINAN, MD, PhD  
Acting State Health Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
HEALTH DIVISION

4150 Technology Way, Suite 300  
Carson City, Nevada 89706  
Telephone: (775) 684-4200 · Fax: (775) 684-4211

Douglas County  
Social Services

MAY 23 2008

May 12, 2008

MEMORANDUM

To: Amy Roukie, MBA, Administrative Services Officer IV  
Nevada State Health Division

From: Pam Graham, BS, RN, LNC, Director  
Frontier and Rural Public Health Program

Re: Letter of Agreement

This is a letter of agreement between Douglas County Community Health Nurse and Douglas County Social Services. It is understood that the sole use of this letter is as evidence of community cooperation in the agency's grant request to HUD. This letter is a prediction, based on past experience, of how much money Douglas County Community Health Nurse will contribute to the clients who are eligible for our services. It tells HUD that they are not the only organization that will be supporting these clients.

We predict that for the clients of the Homeward Bound Transitional Housing Program, our agency, Douglas County Community Health Nurse, will provide services in the amount of \$5,025.

Signed:

Date:

5/13/08

Amy Roukie, MBA, Administrative Services Officer IV



# Heart To God ★ Hand To Man

Carson City • Douglas County

661 Colorado Street • P.O. Box 956 • Carson City, Nevada • 89702-0956 • [www.tsatoday.org](http://www.tsatoday.org)  
Phone: (775) 887-9120 • FAX: (775) 887-9173

**May 12<sup>th</sup>, 2008**

Dear Christy,

Our records indicate that for the year of 2007-2008 The Salvation Army Share Program allotted Douglas County Social Services the amount of \$3,800.00 to help needy families. This will be the same for year 2008-2009. If you should have any questions please call me at (775) 887-9120.

Sincerely,

Kaysha Turner  
Social Services Director  
The Salvation Army

THE SALVATION ARMY  
P.O. BOX 956  
CARSON CITY, NV 89702

Douglas County  
Social Services

MAY 13 2008





T A H O E  
**YOUTH & FAMILY**  
S E R V I C E S

0759567 Page: 73 Of 96 03/03/2010  
BK- 0310  
PG- 774

1021 Fremont Avenue  
South Lake Tahoe, CA 96150  
530-541-2441  
775-782-4202  
www.tahoeyouth.org

24-hour crisis line 1-800-870-8937

May 27, 2008

Christy Murphy, Housing Caseworker  
Douglas County Social Services  
P.O. 218  
Minden, NV 89423

Douglas County  
Social Services

JUN 02 2008

**Letter of Agreement**

This is a Letter of Agreement between Tahoe Youth & Family Services and Douglas County Social Services. It is understood that the sole use of this letter is as evidence of community cooperation in the agency's grant request to HUD.

This letter is a prediction, based on past experience of how much money Tahoe Youth & Family Services will contribute to the clients who are eligible for crisis, individual, family and group counseling services. It tells HUD that they are not the only organization that will be supporting these clients.

We predict that for the clients in the Homeward Bound Transitional Housing Program, Tahoe Youth & Family Services will provide services in the amount of \$4,500.

Sincerely,

Alissa Nourse  
Executive Director



JIM GIBBONS  
Governor

STATE OF NEVADA  
DEPARTMENT OF BUSINESS & INDUSTRY  
HOUSING DIVISION

1535 Old Hot Springs Road, Suite 50  
Carson City, Nevada 89706  
Phone: (775) 687-2040 or (800) 227-4960  
Fax: (775) 687-4040  
[www.nvhousing.state.nv.us](http://www.nvhousing.state.nv.us)

DIANNE CORNWALL  
Director

CHARLES L. HORSEY, III  
Administrator

August 20, 2008

Christy Murphy  
Douglas County Social Services  
P O Box 218  
Minden NV 89423

Re: Leveraging/Match Letter of Support

Dear Ms. Murphy,

This is a letter of agreement between the Nevada Housing Division (Division) and Douglas County Social Services (County). It is understood that the sole use of this letter is used as evidence of community cooperation in the agency's grant request to the U.S. Department of Housing and Urban Development (HUD).

This letter is a prediction, based on past experience, of how much money the Division will contribute to the County for clients who are eligible for services. It tells HUD that they are not the only organization what will be supporting these clients.

We predict, for the clients of the Homeward Bound Transitional Housing Program, the Division will provide a total of approximately \$50,548.00 in Emergency Shelter Grant Program funds to the County for use in their homeless program for the next two years. In addition, the Division estimates an allocation of approximately \$37,000.00 of Low-Income Housing Welfare Set-Aside Program funds that may be used for temporary (emergency) housing activities if needed for that same time period.

Thank you.

Sincerely,

Soni L. Bigler  
Grants and Projects Analyst  
Nevada Housing Division



JIM GIBBONS  
Governor

STATE OF NEVADA  
DEPARTMENT OF HEALTH & HUMAN SERVICES  
DIVISION OF WELFARE & SUPPORTIVE SERVICES  
1470 College Parkway  
Carson City, NV 89706  
(775) 684-0500

MICHAEL J. WILLDEN  
Director

NANCY KATHRYN FORD  
Administrator

May 15, 2008

Douglas County  
Social Services

MAY 27 2008

Christy Murphy  
Douglas County Social Services  
1133 Spruce Street  
Gardnerville NV 89410

Dear Ms. Goode:

This is a letter of understanding from the Nevada State Division of Welfare and Supportive Services (DWSS) to Douglas County Social Services. It is understood this letter will be used as evidence of community cooperation in the agencies' grant requests to the U.S. Department of Housing and Urban Development.

DWSS agrees to provide social services support to state welfare-eligible clients accessing Douglas County Social Services' services. The annual costs for the services is estimated as follows based on state fiscal year 2007 statistics:

TANF	\$4,041.41 per family	x 6 = \$24,248.26
Food Stamps	\$2,615.32 per family	x 8 = \$20,922.56
Child Care	\$2,563.00 per child	x 12 = \$30,756
Energy Assistance	\$ 840.00 per family	x 8 = \$6,720

Services will be available to eligible clients over the life of the annual renewal grants for the agency.

Sincerely,

Nancy Kathryn Ford  
Administrator



Douglas County Social Services  
MAY 14 2008

May 9, 2008

**Board of Directors**

- John Amundson
- Karen Goode
- Mark Jackson
- Richard Kale
- Keith Logan
- Jim Norton
- Vicky Sauer-Lamb
- Sherese Settlemeyer
- Laura Strong
- Carly Strauss
- JoJo Townsell

Christy Murphy  
Douglas County Social Services  
PO Box 218  
Minden, NV 89423

Dear Ms. Murphy:

I am writing in behalf of the ten-member Partnership Board of Directors in support of the Douglas County Social Services to assist the homeless population in the county through the HUD Transitional Housing Program.

Let this letter serve as a letter of agreement between Douglas County Social Services and the Partnership of Community Resources. It is understood that the sole use of this letter is as evidence of community cooperation in the agency's grant request to HUD.

This letter is a prediction, based on past experience of how many resources the Partnership of Community Resources will contribute to the clients who are eligible for the Community Emergency Fund and alcohol, tobacco, and suicide prevention and advocacy programs we administer. As you are aware, our agency provides education, prevention and refers youths for intervention services. These are often the same youths whose parents are served by Douglas County Social Services and other organizations in our community.

I predict that for the clients in the Homeward Bound Transitional Housing Program, the Partnership of Community Resources will provide services in the amount of \$12,000 annually.

**Advisors**

- Tom Embree
- Lloyd Higuera
- Pete Nelson

In Remembrance 10-33A 8/22/08

- Alicia Smalley
- Connie Wennhold

Sincerely,  
*Cheryl Bricker*  
Cheryl Bricker  
Executive Director  
*per sub at the partnership we may double that amount for 2 yrs.*  
*CKM*  
*(34,000)*

"Connecting for a Caring Community"

Physical Address: 1528 Highway 395 Suite 100  
Gardnerville, NV 89410

Mailing Address: P.O. Box 651  
Minden, NV 89423

Phone: 775-782-8611 Fax: 775-782-1011

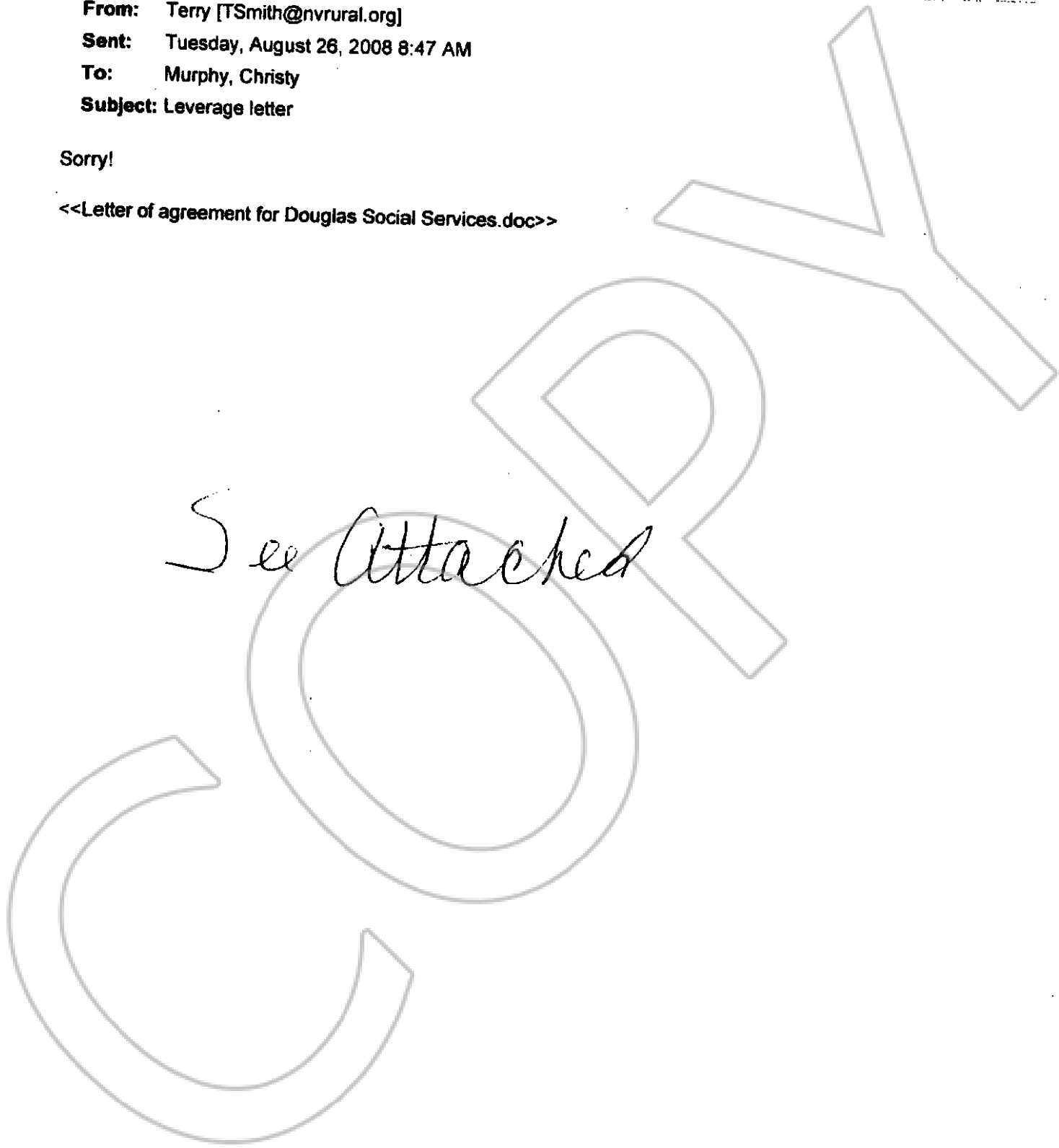
**Murphy, Christy**

**From:** Terry [TSmith@nvrural.org]  
**Sent:** Tuesday, August 26, 2008 8:47 AM  
**To:** Murphy, Christy  
**Subject:** Leverage letter

Sorry!

<<Letter of agreement for Douglas Social Services.doc>>

*See Attached*



*2/11/10*

# **NRHAD**

**NEVADA RURAL HOUSING AUTHORITY**



3695 Desatoya Drive, Carson City, NV 89701  
(775) 887-1795 • (775) 887-1798 Fax  
TDD 800-545-1833 ext.545



**Letter of Agreement between  
Nevada Rural Housing Authority  
And  
Douglas Social Services**

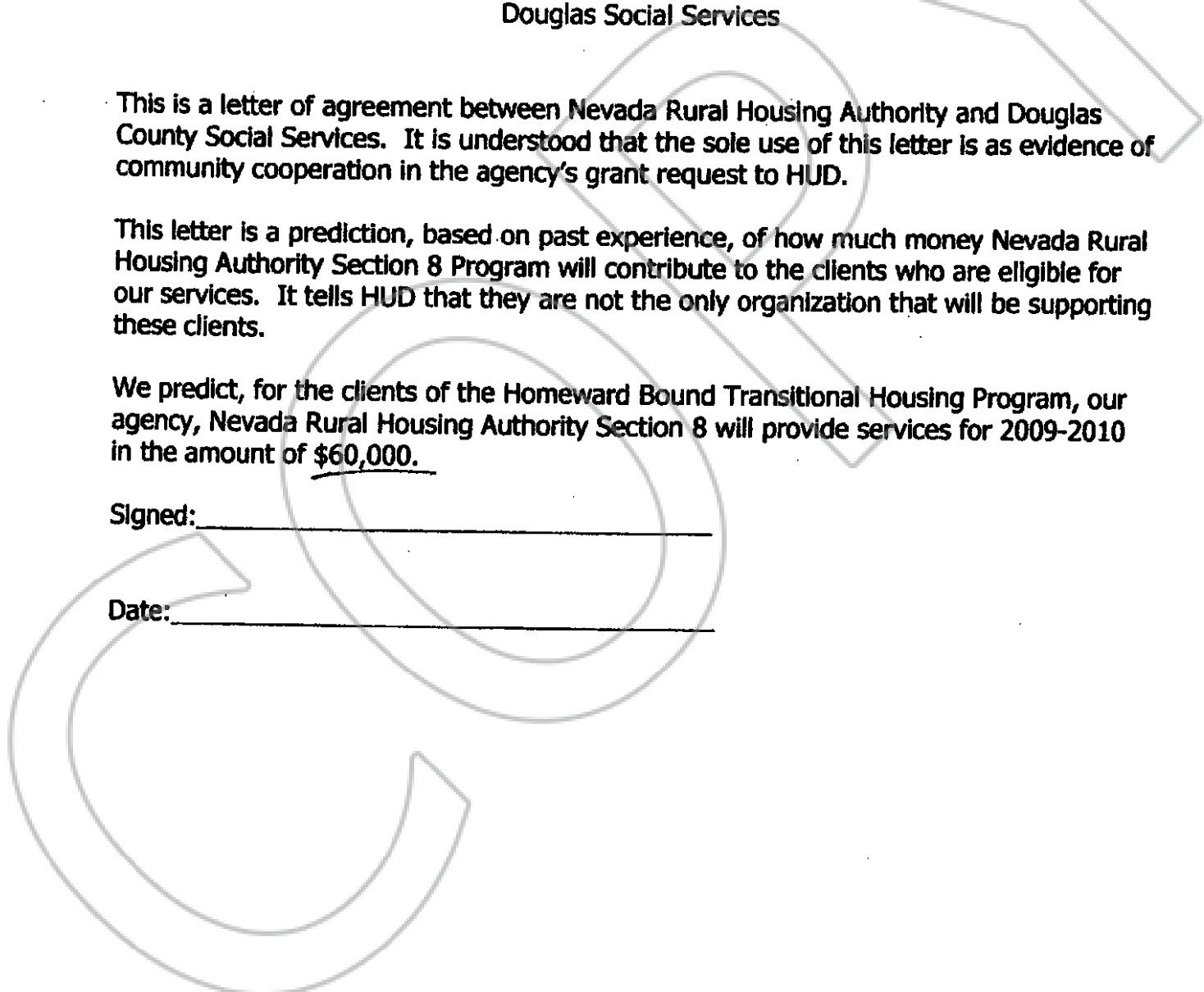
This is a letter of agreement between Nevada Rural Housing Authority and Douglas County Social Services. It is understood that the sole use of this letter is as evidence of community cooperation in the agency's grant request to HUD.

This letter is a prediction, based on past experience, of how much money Nevada Rural Housing Authority Section 8 Program will contribute to the clients who are eligible for our services. It tells HUD that they are not the only organization that will be supporting these clients.

We predict, for the clients of the Homeward Bound Transitional Housing Program, our agency, Nevada Rural Housing Authority Section 8 will provide services for 2009-2010 in the amount of \$60,000.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_



**Murphy, Christy**

**From:** Terry [TSmith@nvrural.org]  
**Sent:** Tuesday, August 26, 2008 7:51 AM  
**To:** Murphy, Christy  
**Subject:** RE: Leveraging

Is this what you need lady!

-----Original Message-----

**From:** Murphy, Christy [mailto:CMurphy@co.douglas.nv.us]  
**Sent:** Monday, August 25, 2008 10:05 AM  
**To:** Terry  
**Subject:** Leveraging

Terry,  
I am doing the Transitioning Housing grant for 2 years, would you please email me leveraging for 2 years instead on one?

Thank you

Douglas County Social Services  
1133 Spruce Street P.O. Box 218  
Gardnerville, NV 89410 Minden, NV 89423  
775-782-9825 Fax 775-782-9874

# **NRHA**

**NEVADA RURAL HOUSING AUTHORITY**



3695 Desatoya Drive, Carson City, NV 89701  
(775) 887-1795 • (775) 887-1798 Fax  
TDD 800-545-1833 ext.54



May 8, 2008

Douglas County  
P O Box 218  
Minden, Nevada 89423

Attn: Christy Murphy

Enclosed is the agreement that Nevada Rural Housing Authority supports the Homeward Transitional Housing Program by providing continual services for the future.

Terry Smith  
  
Section Director

**Douglas County  
Social Services**

**MAY 12 2008**



# NRHA

NEVADA RURAL HOUSING AUTHORITY



3695 Desatoya Drive, Carson City, NV 89701  
(775) 887-1795 • (775) 887-1798 Fax  
TDD 800-545-1833 ext.545



Letter of Agreement between  
Nevada Rural Housing Authority  
And  
Douglas Social Services

This is a letter of agreement between Nevada Rural Housing Authority and Douglas County Social Services. It is understood that the sole use of this letter is as evidence of community cooperation in the agency's grant request to HUD.

This letter is a prediction, based on past experience, of how much money Nevada Rural Housing Authority Section 8 Program will contribute to the clients who are eligible for our services. It tells HUD that they are not the only organization that will be supporting these clients.

We predict, for the clients of the Homeward Bound Transitional Housing Program, our agency, Nevada Rural Housing Authority Section 8 will provide services in the amount of \$30,000.

Signed: *Leung Smith*

Date: 5-8-08



1005 Terminal Way, Suite 202  
 Reno, Nevada 89502  
 PHONE: (775) 785-6106  
 FAX: (775) 785-7850 • www.join.org

Job Opportunities In Nevada

**BRANCH OFFICES**

Carson City  
 1925 N. Carson Street  
 Carson City, NV 89701  
 Phone: 884-0400  
 Fax: 884-0466

Elko  
 1050 Chilton Way  
 Elko, NV 89801  
 Phone: (775) 738-8095  
 Fax: 738-4900

Ely  
 457 Fifth Street  
 Ely, NV 89301  
 Phone: (775) 289-3061  
 Fax: 289-3069

Fallon  
 121 Industrial Way  
 Fallon, NV 89406  
 Phone: (775) 423-6162  
 Fax: 423-0672

Sparks  
 Sparks JobConnect  
 1675 E. Prater Way  
 Suite 103  
 Sparks, NV 89434-8970  
 Phone: (775) 338-5480  
 Fax: 338-5455

Reno  
 Reno JobConnect  
 4001 S. Virginia St.  
 Reno, NV 89502  
 Phone: (775) 834-1970  
 Fax: 834-1984

Winnemucca  
 705 E. 4<sup>th</sup> Street  
 Winnemucca, NV 89445  
 Phone: (775) 623-6218  
 Fax: 623-6219

**PRONET OFFICE**

ProNet  
 Sparks JobConnect  
 1675 E. Prater Way  
 Suite 103  
 Sparks, NV 89434-8970  
 Phone: (775) 338-5480  
 Fax: 338-3233

May 12, 2008

Ms. Christy Murphy  
 Douglas County Human Services  
 1133 Spruce Street  
 Gardnerville, NV 89410

Dear Christy,

Pursuant to your request, JOIN will provide Life Skills and Employment Preparation Workshops for DCHS. Based on the going rate of \$75.00 per workshop. JOIN will also provide Computer Software training at \$325.00 per month and GED preparation classes at \$425.00 per month.

Clients, who are eligible and appropriate for Workforce Investment Act services, will receive these and other WIA services at no charge. Based on past experience we estimate JOIN could provide services totaling approximately \$8738.00.

It is understood that all referrals must be registered with the Nevada Job Connect system to apply for our services.

Sincerely,

Don Costa-Branch Manger  
 Carson City JOIN

Douglas County  
 Social Services

MAY 13 2008



# HELPING HANDS ANTIQUE THRIFT SHOP

1418 A Industrial Way, Gardnerville NV 89410

(775) 782-9410 Fax (775) 783-8601

Linda Ellis - Manager

July 17, 2008

Douglas County Community Services  
Social Services Division  
P O Box 218  
Minden NV 89423

## Letter of Agreement

This is a letter of agreement between Helping Hands Antique Thrift Shop and Douglas County Social Services. It is understood that the sole use of this letter is as evidence of community cooperation in the agency's grant request to HUD.

This letter is a prediction; based on past experience, of how much money Helping Hands ATS will contribute to the clients who are eligible for our services. It tells HUD that they are not the only organization that will be supporting these clients.

We predict, for the clients of the Homeward Bound Transitional Housing Program, that Helping Hands ATS will provide services in the amount of \$20,000 in supplies only from Helping Hands ATS.

Linda Ellis, Manager

Date: 7/17/08

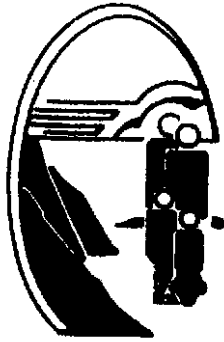
Douglas County  
Social Services

JUL 25 2008

0759567 Page: 83 Of 96 03/03/2010



BK- 0310  
Pg- 784



# Family Support Council of Douglas County

P.O. Box 810 • Minden, Nevada 89423  
1255 Waterloo Lane • Suite A • Gardnerville, Nevada 89410

August 18, 2008

## LETTER OF AGREEMENT

This letter is to confirm Family Support Council's participation with Douglas County Social Services Homeward Bound Transitional Housing program during the 2008-2009 and 2009-2010 fiscal years. Through its provision of transitional housing services, Douglas County Social Services helps our clients, victims of domestic violence, re-establish themselves in safe environments within our community. Without the availability of these services, many of our clients would have few, if any, viable housing options after their stay in our short-term emergency shelter ends. These victims would be placed in the position of choosing between living in substandard conditions such as weekly motels, returning to their abuser, or becoming homeless. The Transitional Housing program provides the support necessary for these victims to continue on their path to safety and independence.

Each year the Family Support Council provides emergency housing in its domestic violence shelter to an average of twelve unduplicated victims and their minor children. The average cost to Family Support Council to house one victim and her children in our shelter, including the costs of lay counseling, utilities, transportation, medical costs and food, is \$2,500. Additionally, the Family Support Council spends upwards of \$750 annually providing victims with one-night stays in local motels when our shelter is full or when other circumstances warrant such a placement.

Based on our previous experience, four to five of our shelter clients will be in need of transitional housing services each year. Because of this, Family Support Council predicts that it will spend \$12,500 annually (\$25,000 over the two-year period) providing short-term emergency shelter to individuals who will become candidates for the Homeward Bound Transitional Housing program.

The Family Support Council depends tremendously on the transitional housing services provided by Douglas County Social Services. The program provides a bridge to self-sufficiency and permanency that our victims desperately need in order to maintain the safety of their families.

Sincerely,

A handwritten signature in black ink, appearing to read 'Kristie M. Traver', is written over a large, faint circular watermark.

Kristie M. Traver  
Executive Director

Douglas County  
Social Services

AUG 18 2008



JIM GIBBONS  
Governor

MICHAEL J. WILLDEN  
Director  
Department of Health & Human Services

Division of  
Mental Health and Developmental Services

RURAL CLINICS  
COMMUNITY OUTPATIENT SERVICES

ADMINISTRATIVE OFFICE  
4126 Technology Way, Ste 102  
Carson City, Nevada 89706  
Telephone No: (775) 687-7500  
Fax No. (775) 687-7513  
Fax No. (775) 687-7544

- Carson Mental Health Center
- Douglas Mental Health Center  
Lake Tahoe Mental Health  
Yerington Mental Health
- Elko Mental Health Center  
Wendover Mental Health
- Ely Mental Health Center
- Fallon Mental Health Center  
Hawthorne Mental Health
- Laughlin Mental Health Center
- Lyon Mental Health Center  
Dayton Mental Health  
Fernley Mental Health  
Silver Springs Mental Health
- Mesquite Mental Health Center  
Caliente Mental Health  
Moapa Mental Health
- Pahrump Mental Health Center  
Tonopah Mental Health
- Winnemucca Mental Health Center  
Battle Mountain Mental Health  
Lovelock Mental Health

Douglas County  
Social Services

AUG 26 2008

August 25, 2008

Letter of Agreement

This is a letter of agreement between Douglas Mental Health and Douglas County Social Services. It is understood that the sole use of this letter is as evidence of community cooperation in the agency's grant request to HUD.

This letter is a prediction, based on past experience, of how much money Douglas Mental Health will contribute to the clients who are eligible for our services. It tells HUD that they are not the only organization that will be supporting these clients.

We predict, for the clients of the Homeward Bound Transitional Housing program, our agency; Douglas Mental Health will provide services in the amount of \$96,000.00.

Tracy Cassity, LCSW, Clinic Director

8/26/08

Date



**JIM GIBBONS**  
Governor

**MICHAEL J. WILLDEN**  
Director  
Department of Human Resources

Division of  
Mental Health and Development Services

RURAL CLINICS  
COMMUNITY OUTPATIENT SERVICES

**DOUGLAS MENTAL HEALTH  
CENTER**

1538 Highway 395 North  
Gardnerville, Nevada 89410-1509  
P.O. Box 1509  
Minden, Nevada 89423-1509  
Telephone No: (775) 782-3671  
Fax No. (775) 782-6639

- Carson Mental Health Center
- Douglas Mental Health Center
- Elko Mental Health Center  
Wendover
- Ely Mental Health Center
- Fallon Mental Health Center  
Hawthorne  
Lovelock
- Lyon Mental Health Center  
Dayton  
Fernley  
Silver Springs  
Yerington
- Mesquite Mental Health Center  
Caliente
- Pahrump Mental Health Center  
Tonopah
- Winnemucca Mental Health Center  
Battle Mountain

Administration Office  
503 N. Division Street  
Carson City, Nevada 89703-4104  
Telephone No.: (775) 687-1000  
Fax No.: (775) 687 3544

May 01, 2008

**Letter of Agreement**

This is a letter of agreement between Douglas Mental Health and Douglas County Social Services. It is understood that the sole use of this letter is as evidence of community cooperation in the agency's grant request to HUD.

This letter is a prediction, based on past experience, of how much money Douglas mental health will contribute to the clients who are eligible for our services. It tells HUD that they are not the only organization that will be supporting these clients.

We predict, for the clients of the Homeward Bound Transitional Housing program, our agency, Douglas mental health will provide services in the amount of 48000.00.

  
Tracy Cassity, Clinic Director

Date

5/9/08

Douglas County  
Social Services

MAY 12 2008



**DOUGLAS COUNTY  
COMMUNITY SERVICES/  
PARKS & RECREATION**

DIRECTOR: Scott Morgan

▲ Parks  
1325 Waterloo Lane  
Gardnerville, NV 89410  
(775) 782-9835  
FAX: (775) 782-5799

▲ Recreation  
1327 Waterloo Lane  
Gardnerville, NV 89410  
(775) 782-9828  
FAX: (775) 782-9844

▲ Lake Tahoe  
Kahle Community C  
236 Kingsbury Gra  
Stateline, NV 89444  
(775) 586-7271  
FAX: (775) 586-7273

MAIL: P.O. Box 218, Minden, NV 89

May 7, 2008

Karen Goode  
Douglas County Social Services  
P.O. Box 218  
Minden, Nevada 89423

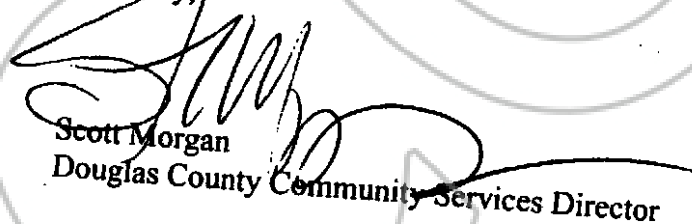
### Letter of Agreement

This is a Letter of Agreement between Douglas County Senior Services and Douglas County Social Services. It is understood that the sole use of this letter is as evidence of community cooperation in the agency's grant request to HUD.

This letter is a prediction, based on past experience of how much money Douglas County Senior Services will contribute to the clients who are eligible for lunches and transportation. It tells HUD that they are not the only organization that will be supporting these clients.

We predict that for the clients in the Homeward Bound Transitional Housing Program, our agency, Douglas County Senior Services, will provide services in the amount of \$3,500.

Sincerely,

  
Scott Morgan  
Douglas County Community Services Director

Douglas County  
Social Services

MAY 09 2008

Carson Valley Community Food Closet  
P.O. Box 2911  
Gardnerville, Nevada 89410  
Phone: 782-3711 Fax: 782-4452


### Letter of Agreement

September 2, 2008

This is a letter of agreement between Carson Valley Community Food Closet and Douglas County Social Services. It is understood that the sole use of this letter is as evidenced of community cooperation in the agencies granted request to HUD.

This letter is a prediction, based on past experience of how much money Carson Valley Community Food Closet will contribute to the clients who are eligible for our services. It tells HUD that they are not the only organization that will be supporting these clients.

We predict that for the clients in the Homeward Bound Transitional Housing Program, our agency Carson Valley Community Food Closet will provide services in the amount of \$88,920.00 for the year of 2010/2011 and an additional 20% for 2011/2012 for the total of \$106,704.

Signed: 

Eileen Boettiger, Managing Director





**CARSON CITY, NEVADA**  
CONSOLIDATED MUNICIPALITY AND STATE CAPITAL

July 25, 2008

Douglas County Social Services  
Christy Murphy, Housing Caseworker  
P.O. Box 218  
Minden, Nevada 89423

Re: Letter of Agreement

Dear Christy,

As requested I am submitting this Letter of Agreement in support of the Homeward Bound Transitional Housing Program in Douglas County. This Letter of Agreement shall provide evidence that the Women, Infants, and Children (WIC) Program and Douglas County Homeward Bound Transitional Housing Program are working in cooperation to provide services to the community as stipulated in the agency's grant request to Housing and Urban Development (HUD).

Based on past experience and program historical data it is estimated that Women, Infants, and Children (WIC) will contribute \$7,800.00 to the clients who are eligible to receive services from the Homeward Bound Transitional Housing Program during the upcoming grant period.

Sincerely,

Kathy Wolfe, Carson City Human Services/WIC  
Program Manager

**Carson City Health & Human Services**  
900 E. Long Street • Carson City, Nevada 89706

Community Health  
(775) 887-2190  
Fax: (775) 887-2248

Preventative Health  
(775) 887-2195  
Fax: (775) 887-2192

Human Services  
(775) 887-2110  
Fax: (775) 887-2248

Code Enforcement  
(775) 887-2248  
Fax: (775) 887-2248

Animal Services  
(775) 887-2371  
Fax: (775) 887-2128



**Letter of Agreement**

This is a letter of agreement between Consumer Credit Affiliates, a division of Consumer Credit Counseling Service of Southern Nevada, and Douglas County Social Services. It is understood that the sole use of this letter is as evidence of community cooperation in the agency's grant request to Housing and Urban Development (HUD).

This letter is a prediction, based on past experience, of how much money Consumer Credit Affiliates will contribute to the clients who are eligible for our services. It tells HUD that they are not the only organization supporting these clients.

We predict, for the clients of the Transitional Housing Program, our agency, Consumer Credit Affiliates will provide services in the amount of \$20,000 over two years.

Signed:

Jill Perry  
Northern Nevada Director

Dated: May 12, 2008

**Douglas County  
Social Services**

**AUG 28 2008**





**Barton Memorial**  
**HOSPITAL**  
Hospice Of The Lake/Valley

May 22, 2008

Douglas County  
Social Services

MAY 23 2008

Christy Murphy  
Housing Coordinator  
Douglas County Social Services  
P.O. Box 218  
Minden, NV 89423

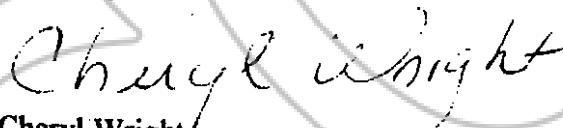
Dear Ms. Murphy,

As requested in your letter of May 5, 2008, this represents a Letter of Agreement between Barton Hospice Thrift Store and Douglas County Social Services, Homeward Bound Transitional Housing Program. It is understood that the sole use of this letter is as evidence of community cooperation in the agency's grant request to Housing and Urban Development (HUD).

Barton Hospice Thrift Store will contribute to one client eligible for this service up to \$30.00 in merchandise per week for a total of \$1,440.00 for the year. Items the client can obtain are clothing and household goods that are essential.

Please contact me if you have any questions.

Sincerely,



Cheryl Wright  
Barton Hospice Thrift Store Manager

CW/ilb





A Non-Profit Corporation of Professional Counselors  
205 S. Pratt St. • Carson City, Nevada 89701  
(775) 882-3945 • Fax (775) 882-6126

Mary K. Bryan  
Administrator  
**Board of Directors**  
Barbara Singer  
Edward J. Lynn, M.D.  
Ursula B. Carlson, Ph. D.  
Thomas Perkins  
Mary Pierczynski, Ed.D.  
Ian Curley  
Scott Shick  
Noel S. Waters  
**Advisory Board**  
Barbara Allison  
Roger Williams  
Charlie Abowd  
Father Jerry Hanley

Douglas County  
Social Services  
MAY 13 2008

May 9, 2008

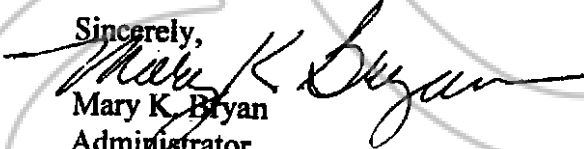
Douglas County Social Services  
Box 218  
Minden, NV 89423

**Letter of Agreement**

This is a letter of agreement between Community Counseling Center (CCC) and Douglas County Social Services. It is understood that the sole use of this letter is as evidence of community cooperation in the agency's grant request to HUD.

This letter is a prediction, based on past experience, of how much money CCC will contribute to the clients who are eligible for our services.

We predict, for the clients of Homeward Bound Transitional Housing Program, our agency, Community Counseling Center will provide services in the amount of between \$2500 and \$20,000.

Sincerely,  
  
Mary K. Bryan  
Administrator





0759567 Page: 93 Of 96 03/03/2010  
BK- 0310  
PG- 794

**LEVEL OF ENVIRONMENTAL REVIEW DETERMINATION (2004)**

**Project Name / Description:**

**Level of Environmental Review:**

**Tenant based rental assistance is Categorically excluded subject to statutes per § 58.35(a)**

(Exempt per 24 CFR 58.34, Categorically excluded not subject to statutes per § 58.35(b), Categorically excluded subject to statutes per § 58.35(a), Environmental Assessment per § 58.36, or EIS per 40 CFR 1500)

**STATUTES and REGULATIONS listed at 24 CFR 58.6**

**FLOOD INSURANCE / FLOOD DISASTER PROTECTION ACT**

1. Does the project involve the acquisition, construction or rehabilitation of structures, buildings or mobile homes?

( ) No; flood insurance is not required. The review of this factor is completed.

( ) Yes; continue.

2. Is the structure or part of the structure located in a FEMA designated Special Flood Hazard Area?

( ) No. Source Document (FEMA/FIRM floodplain zone designation, panel number, date):

(Factor review completed).

( ) Yes. Source Document (FEMA/FIRM floodplain zone designation, panel number, date):

(Continue review).

3. Is the community participating in the National Insurance Program (or has less than one year passed since FEMA notification of Special Flood Hazards)?

( ) Yes - Flood Insurance under the National Flood Insurance Program must be obtained and maintained for the economic life of the project, in the amount of the total project cost. A copy of the flood insurance policy declaration must be kept in the Environmental Review Record.

( ) No (Federal assistance may not be used in the Special Flood Hazards Area).

**COASTAL BARRIERS RESOURCES ACT**

1. Is the project located in a coastal barrier resource area? (See www.fema.gov/nfip/cobra.shtml).

( ) No; Cite Source Documentation:

(This element is completed).

( ) Yes - Federal assistance may not be used in such an area.

**AIRPORT RUNWAY CLEAR ZONES AND CLEAR ZONES DISCLOSURES**

1. Does the project involve the sale or acquisition of existing property within a Civil Airport's Runway Clear Zone, Approach Protection Zone or a Military Installation's Clear Zone?

( ) No; cite SD, page:

Project complies with 24 CFR 51.303(a)(3).

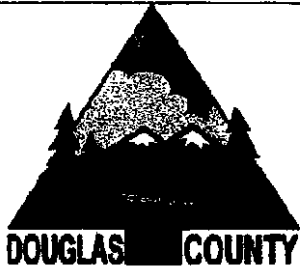
( ) Yes; Disclosure statement must be provided to buyer and a copy of the signed disclosure statement must be maintained in this Environmental Review Record.

See Revised Submission 1/11/2010

*Karen Goode*  
Preparer Signature / Name / Date

Karen Goode, 8/31/2009

Responsible Entity Official Signature / Title/ Date



**SOCIAL SERVICES**

1133 Spruce Street, Gardnerville, NV 89410  
Mailing address: P.O. Box 218; Minden, NV 89423  
(775) 782-9825 \* Fax (775) 782-9874

December 4, 2009

Connie Castro  
Community Planning and Development Representative  
U.S. Department of Housing and Urban Development  
600 Harrison Street, 3rd Floor  
San Francisco, CA 94107-1300

09 DEC 10 PM 5:10  
OFFICE OF SOCIAL SERVICES

Dear Connie:

This is to certify that non-disabled graduates of SHP-funded transitional housing will not receive SHP-funded supportive services for more than six months after leaving transitional housing. Documentation will be maintained on the length of time eligible graduates receive services. ✓

If you should have any questions, need any additional forms completed or require additional information, please let me know at your earliest convenience.

Sincerely,

Karen Goode, LASW  
Manager

KG/clr





Jrban  
Development  
San Francisco Regional Office - Region IX  
600 Harrison Street  
San Francisco, California 94107-1387  
www.hud.gov  
espanol.hud.gov

**LEVEL OF ENVIRONMENTAL REVIEW DETERMINATION:** (2004)

**Project Name / Description:** Douglas County Social Services SHP2008  
Tenant-Based Rental Assistance for scattered rental units in Douglas Coun  
Maximum # of grants-1. Maximum amount \$266,898. Period-7/1/09-6/31/11.

**Level of Environmental Review (cite regulation):**

Administration 58.34(a)(3) Tenant Based Rental Assistance 38.35(b)(1)  
(Exempt per 24 CFR 58.34, Categorically excluded not subject to statutes per § 58.35(b), Categorically excluded subject to statutes per § 58.35(a), Environmental Assessment per § 58.36, or EIS per 40 CFR 1500)

**STATUTES and REGULATIONS listed at 24 CFR 58.6**

**FLOOD INSURANCE / FLOOD DISASTER PROTECTION ACT**

1. Does the project involve the acquisition, construction or rehabilitation of structures, buildings or mobile homes?

( ) No; flood insurance is not required. The review of this factor is completed.

( ) Yes; continue.

2. Is the structure or part of the structure located in a FEMA designated Special Flood Hazard Area?

( ) No. Source Document (FEMA/FIRM floodplain zone designation, panel number, date):

(Factor review completed).

( ) Yes. Source Document (FEMA/FIRM floodplain zone designation, panel number, date):

(Continue review).

3. Is the community participating in the National Insurance Program (or has less than one year passed since FEMA notification of Special Flood Hazards)?

( ) Yes - Flood Insurance under the National Flood Insurance Program must be obtained and maintained for the economic life of the project, in the amount of the total project cost. A copy of the flood insurance policy declaration must be kept in the Environmental Review Record.

( ) No (Federal assistance may not be used in the Special Flood Hazards Area).

**COASTAL BARRIERS RESOURCES ACT**

1. Is the project located in a coastal barrier resource area? (See www.fema.gov/nfip/cobra.shtml).

( ) No; Cite Source Documentation:

(This element is completed).

( ) Yes - Federal assistance may not be used in such an area.

See revised  
Submission  
1/11/2010

**AIRPORT RUNWAY CLEAR ZONES AND CLEAR ZONES DISCLOSURES**

1. Does the project involve the sale or acquisition of existing property within a Civil Airport's Runway Clear Zone, Approach Protection Zone or a Military Installation's Clear Zone?

( ) No; cite Source Document, page:

Project complies with 24 CFR 51.303(a)(3).

( ) Yes; Disclosure statement must be provided to buyer and a copy of the signed disclosure statement must be maintained in this Environmental Review Record.

Preparer Signature / Name / Date

*Karen Goode* Karen Goode, Manager December 4, 2009

Responsible Entity Official Signature / Title / Date

COPY

**CERTIFIED COPY**

The document to which this certificate is attached is a full, true and correct copy of the original on file and on record in my office.

DATE: Mar 3 2010  
Wren Clerk of the 924 Judicial District Court  
of the State of Nebraska in and for the County of Douglas.

By Chad M. Haddock Deputy