**North Carolina Emergency Solutions Grants Program**  
**FY 2019-2020 Regional Application**Funding for the 2020 Program Year (January 1, 2020 – December 31, 2020)  
For submission information, refer to the NC ESG Application Instructions

# Application Summary

## CoC/Local Planning Area Lead Agency Information

|  |  |
| --- | --- |
| Legal Name of Organization:  (as it appears on your Organization’s tax return): | |
| Physical Street Address, including City, State, Zip: | Mailing Address, including City, State, Zip: |
| Telephone: | Website: |
| Choose which HMIS Lead your CoC/LPA uses: | |
| 1. Does the CoC/LPA Lead Agency have paid staff to provide administrative support as a part   of their job description?  If yes, enter the # of PT staff:  If yes, enter the # of FT staff:   * 1. If no, describe how the CoC/LPA Lead Agency will fulfill the responsibilities of CoC/LPA   Lead Agency.   |  | | --- | | Enter Response Here- Maximum 2500 Characters | | |
| * 1. Does the CoC/LPA Lead Agency provide direct services? | |
| * 1. Is the CoC/LPA Lead Agency requesting NC ESG funding? | |
| * 1. If yes, which activity type?   SO ES RRH Prevention HMIS | |

## CoC/LPA Primary Contact

Provide the following information for the person to whom all communication regarding this application should be directed.

|  |  |
| --- | --- |
| Name: | Title: |
| Organization Name: | Telephone: |
| E-mail: | |

## CoC/LPA Alternate Contact

Provide the following information for an additional person to whom all communication regarding this application should be directed.

|  |  |
| --- | --- |
| Name: | Title: |
| Organization Name: | Telephone: |
| E-mail: | |

## CoC/LPA Coordinated Entry Contact

Provide the following information for the person to whom all communication regarding Coordinated Entry should be directed.

|  |  |
| --- | --- |
| Name: | Title: |
| Organization Name: | Telephone: |
| E-mail: | |

# Fiscal Sponsor

## General Information

* 1. Has the CoC/LPA chosen to use a Fiscal Sponsor this year?
  2. Fiscal Sponsor Organization Name

|  |
| --- |
|  |

If the CoC/LPA has chosen to use a Fiscal Sponsor, by submitting this information, the CoC/LPA understands that the Fiscal Sponsor is not guaranteed approval or acceptance from the NC ESG Office. All Fiscal Sponsors **must** submit a Fiscal Sponsor Application and adhere to all guidelines. The NC ESG Office will determine if the Fiscal Sponsor is approved or denied based on the Application.

# Service Coverage

## CoC/LPA Coverage

* 1. Complete the following chart, indicating which populations can access which services in the

CoC/Local Planning Area. Include information pertaining to all programs in the CoC/LPA,

including those not currently funded by NC ESG and those that receive and/or are applying for

funds from NC ESG.

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| --- | --- | --- | --- | --- |
| **Population Type** | **SO** | **ES** | **RRH** | **PRV** |
| Single Men |  |  |  |  |
| Single Women |  |  |  |  |
| Families, female head of household |  |  |  |  |
| Families, male head of household |  |  |  |  |
| DV only |  |  |  |  |
| Unaccompanied children 17 years old and under |  |  |  |  |

* 1. Explain, any gaps (services, populations, geographic areas, etc.) that are not covered in the

CoC/LPA.

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| Enter Response Here- Maximum 2500 Characters |

* 1. What are the CoC’s/LPA’s plans and timeline to achieve full coverage?

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| Enter Response Here- Maximum 2500 Characters |

* 1. What are the barriers to achieving full coverage?

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| Enter Response Here- Maximum 2500 Characters |

* 1. Will the requested funding ensure that services will be available across the entire geographic

region of the CoC/Local Planning Area?

If no, explain:

|  |
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| Enter Response Here- Maximum 2500 Characters |

## Coordinated Entry

* 1. Do all applicants recommended for funding, fully participate in the coordinated entry process in the

CoC/LPA?

* 1. Do any applicants recommended for funding, take referrals from sources outside of the

coordinated entry system?

* 1. If yes, provide the other sources outside of the coordinated entry system, where the

organization accepts referrals. Note whether or not this exception is included in the approved

coordinated entry plan for the CoC/LPA.

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| Enter Response Here- Maximum 2000 Characters |

* 1. Does the Coordinated Entry System operate 24 hours a day for 7 days a week?
  2. If no, describe how households gain access to the homeless crisis response system

when coordinated entry is not operating.

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| Enter Response Here- Maximum 2500 Characters |

* 1. When does the CoC/LPA anticipate that 24/7 access will be available?

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| Enter Response Here- Maximum 2500 Characters |

* 1. Explain the annual evaluation process for the Coordinated Entry System.

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| Enter Response Here- Maximum 2500 Characters |

## Written Standards

* 1. Do any of the organizations recommended for funding fail to adhere to the CoC’s Written

Standards?

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| Enter Response Here- Maximum 2500 Characters |

* 1. If yes, list which organizations and which Written Standards.

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| Enter Response Here- Maximum 2500 Characters |

* 1. How are providers included in the decision making about Written Standards?

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| Enter Response Here- Maximum 2500 Characters |

# Application & Selection Process

**CoCs/LPAs must inform applicants of their funding decision by September 27, 2019** and allow for an appeal process for applicants.

## Solicitation

* 1. The CoC/LPA is required to solicit interest in ESG through no less than three of the following ways.

Indicate below, how the CoC/ solicited interest in ESG.

|  |  |
| --- | --- |
| Request for Proposals/Request for Applications | Mail |
| LPA meetings (Continuum of Care/LPA) | Advertising in a local paper |
| Website | Advertising on the radio or television |
| Email | Social Media (Twitter, Facebook, etc.) |
| Other: | |

## Selection Process

* 1. Select the appropriate response(s) that demonstrate the criteria the CoC/LPA used to rank and

select project applications:

Used objective criteria for review, rating and ranking

Evaluated applicant’s ability to spend award, including past spending performance

Evaluated applicant’s ability to meet goals and outcomes

Evaluated applicant’s ability to reduce barriers to services and serve the most vulnerable

* 1. Describe the review process implemented by the Selection Committee to choose applications for

funding. Include meeting dates.

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| Enter Response Here- Maximum 2500 Characters |

* 1. What tools were used to aid the Selection Committee’s evaluation of project applications?

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| Enter Response Here- Maximum 2500 Characters |

## Selection Committee

* 1. List all members of the selection committee for ESG funding below. Note: representatives from

applicant agencies cannot be on the selection committee.

|  |  |
| --- | --- |
| Name | Affiliation/Organization |
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* 1. Are any of these members on any of the applicant organization’s Board?
  2. Are any of these members related to any of the applicant organization’s staff or Board members?

* 1. Do any of these members have any other shared financial interest with any applicant

organization?

* 1. Does the LPA have an established Selection Committee Code of Conduct that covers conflict of

interest and confidentiality?

## Project Applications

* 1. List the organizations that submitted project applications to the CoC/LPA for review. Indicate

submitted applications for the ESG activity in the “S” column. Indicate approved activity

applications in the “A” column.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Agency | Emergency Shelter | | Street Outreach | | Rapid Rehousing | | Prevention | | HMIS | |
| S | A | S | A | S | A | S | A | S | A |
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* 1. Has each Organization been notified of the decision?
  2. If no, explain.

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| Enter Response Here- Maximum 2500 Characters |

* 1. Provide any other additional information regarding application process, if needed.

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| Enter Response Here- Maximum 2500 Characters |

## Notification & Appeals

* 1. Have any applicant organizations filed an appeal?
  2. If appeals have been filed, provide a list of the organizations that filed appeals, the applicable

ESG activity the organization applied for (e.g. emergency shelter, rapid rehousing), and the

appeal resolution.

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| Enter Response Here- Maximum 2500 Characters |

## Additional Requirements

* 1. Is the CoC/LPA Lead Agency or Selection Committee imposing any additional requirements beyond the ESG contract requirements on one or more of the project applicants?
  2. If yes, explain the additional requirements and how the CoC/LPA will ensure compliance.

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| Enter Response Here- Maximum 2500 Characters |

* 1. Explain how the mix of funds and the choice of project applicants for this application will help

reduce the number of people who are homeless over the next year.

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| Enter Response Here- Maximum 2500 Characters |

* 1. Optional: What additional information not covered elsewhere in this application would be helpful,

regarding the LPA or LPA Lead Agency?

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| Enter Response Here- Maximum 2500 Characters |

## Authorized Signature

**To the best of my knowledge and belief, all information in this application is true and correct.**

|  |  |
| --- | --- |
| Name of CoC/LPA Lead Agency Organization | |
| Name of Authorized Official | |
| Title | Telephone: |
| E-mail: |  |
| Signature | Date |

# Regional Application Required Documents Checklist

Each CoC/LPA must submit one regional application and one project application for each agency recommended for funding. The following chart outlines the required documents for the regional application.

|  |  |  |
| --- | --- | --- |
| **TAB** | **Document** |  |
| **1** | Signed, completed Regional Application (Word document) | **** |
| **2** | Fiscal Sponsor application (if applicable) |  |
| **3** | Regional Budget Worksheet (Excel spreadsheet) | **** |
| **4** | CoC Policies (in order): |  |
| * Written Standards, including appendix A as a cover page | **** |
| * Coordinated Entry, including appendix B as a cover page | **** |
| * Most recent annual evaluation of coordinated entry process (findings & outcomes) | **** |
| * Violence Against Women Act Policies, (Emergency Transfer Plan) including appendix C as a cover page | **** |
| * Nondiscrimination Policy | **** |
| **5** | Public notices to solicit ESG project applications | **** |
| **6** | Materials used to evaluate ESG project applications | **** |
| **7** | Funding notifications to project applicants | **** |
| **8** | If applicable, any appeals received and outcome of appeal | **** |

# APPENDIX A: WRITTEN STANDARDS COVER PAGE

**Include this page with the completed Regional Application under Tab 4.** In the table below, enter the page number of the CoC’s Written Standards where the corresponding requirements can be found.

|  |  |
| --- | --- |
| **ALL PROGRAM REQUIREMENTS** | **POLICY PAGE NUMBER** |
| Standards include the area of service where assistance shall be offered. |  |
| Standards include all type(s) of assistance that will be offered through the ESG program. |  |
| Standards summarize the procedure in place that defines how program participants will be evaluated for eligibility of assistance under the ESG program. (Note: DV shelters must follow the requirements of the Violence Against Women Act and the Family Violence Prevention and Services Act which prohibits agencies from making its shelter or housing conditional on the participant’s acceptance of service) |  |
| Standards include procedures describing the coordination (coordinated entry) emergency shelter providers, essential services providers, homelessness prevention, and rapid re-housing assistance providers, other homeless assistance providers, and mainstream service and housing providers. |  |
| Standards include a list of available programs that program participants will be referred, including all programs reflected in 576.400 (b) and (c) such as Shelter + Care, VASH Voucher, Section 8, Emergency Food and Shelter program, etc. if available to program participants in the agency’s area of service. |  |
| Standards describe the formal termination process established by the agency that recognizes the rights of individuals affected. The agency must exercise judgment and examine all extenuating circumstances in determining when violations warrant termination so that a program participant’s assistance is terminated only in the most severe cases. |  |
| Standards describe the program participant’s formal grievance process. Included shall be the right for the participant to contact the agency’s Director, the Housing Division or HUD. |  |
| Standards include summaries regarding the requirement that clients served and activities provided with ESG funds will be entered into HMIS (or comparable database if a DV shelter), the timeframe for data to be entered, and the process for ensuring confidentiality of client records. |  |
| Standards include steps used to ensure clients receiving ESG assistance are provided all applicable HMIS releases, forms, client complaint process, etc. as required by HMIS regulations. |  |

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| **STREET OUTREACH AND EMERGENCY SHELTER REQUIREMENTS** | |
| Standards include a summary of how agency staff will target and provide services related to street outreach. |  |
| Standards include steps for admission, diversion, referral, and discharge by emergency shelters assisted under ESG, including standards regarding length of stay limits, if any, and safeguards to meet the safety and shelter needs of special populations, such as victims of domestic violence, sexual assault, etc. |  |
| Standards include steps for admission, diversion, referral and discharge by emergency shelters assisted under ESG for individuals and families who have the highest barriers to housing and are likely to be homeless the longest. |  |
| Standards include assessing, prioritizing, and reassessing individuals and families’ needs for essential services related to emergency shelter. |  |
| **HOMELESS PREVENTION AND RAPID RE-HOUSING REQUIREMENTS** | |
| Standards shall include definitions of who is considered to be homeless and at-risk of homelessness, as defined in 576.2. |  |
| Standards include a process for determining and prioritizing which eligible families and individuals will receive homeless prevention or rapid re-housing assistance. |  |
| Standards include standards for determining what percentage or amount of rent and utilities costs each program participant must pay while receiving homelessness prevention or rapid re- housing assistance. |  |
| Standards include process for evaluating and documenting income eligibility since program participant’s income must be below 30% of area median income as established by HUD for the area in which the participant lives when entering the program. Agencies must follow guidelines found under 24 CFR 5.609 when calculating income. |  |
| Standards include the steps to determine the eligibility of rental assistance, including steps to determine that rent + utilities do not exceed Fair Market Rents for the area of service. |  |
| Standards include how agency staff will document FMR and rent reasonableness standards, lead based paint inspections, and housing inspections. Included shall be procedures to verify and document the age of the units built before 1978 may contain lead-based paint. |  |
| Standards include steps for determining how long a program participant will be provided rental assistance and whether or not (and how) the amount of that assistance will be adjusted over time, if applicable. |  |
| Standards include steps for determining the type, amount, and duration of housing stabilization and/or relocation services to provide to a program participant, including the limits, if any, on the homelessness prevention or rapid re-housing assistance that each program participant may receive, such as the maximum amount of assistance, the maximum number of months the program participant receives assistance, or the maximum number of times the program participant may receive assistance. |  |

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| --- | --- |
| Standards that includes the requirements of program participants to meet with a case manager not less than once per month to assist the program participant in ensuring long-term housing stability (and be documented in client case file and HMIS). Included shall be the agency’s plan to assist the program participant to retain permanent housing after the ESG assistance ends, taking into account all relevant considerations such as the program participant’s current or expected income and expenses, other public or private assistance for with the program participant will be eligible and likely to receive, and the relative affordability of available housing in the area. (Note DV shelters must follow the requirements of the Violence Against Women Act or the Family Violence Prevention and Services Act which prohibits agencies from making its shelter or housing conditional on the participants acceptance of service.) |  |
| Standards include requirements that clients will be re-evaluated for program eligibility and the types and amounts of assistance the program participant needs. This re-evaluation process shall be conducted not less than once every 3 months for program participants receiving homelessness prevention assistance and not less than once annually for program participants receiving rapid re-housing assistance. Income limits shall not exceed 30% of AMI; the participants still lack the resources and support networks necessary to retain housing. |  |
| Standards shall include any requirements the agency may have regarding the requirement of the program participant to notify the agency of any change in income, stability, support circumstances that would affect the program participant’s need for assistance under the ESG program. If applicable, when notified of the relevant change, the agency shall include steps to re-evaluate the program participant’s eligibility and amount and types of assistance the program participant needs. |  |
| If the program participant receives rental assistance or housing relocation and stabilization services, the Standards shall include the formal process for terminating a program participant that includes: 1) Written notice to the program 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 who made or approved the termination decision; and 3) prompt written notice of the final decision to the program participant. Included shall be language stating that termination does not bar the program participant from receiving assistance at a later date if the issue that caused the termination is resolved. |  |

# APPENDIX B COORDINATED ENTRY POLICY COVER PAGE

**Include this page with the completed Regional Application under Tab 4.** In the table below, enter the page number of the CoC’s Coordinated Entry Policy where the corresponding requirements can be found.

|  |  |
| --- | --- |
| **COORDINATED ENTRY POLICY REQUIREMENTS** | **POLICY PAGE NUMBER** |
| CES covers the entire geographic area claimed by the CoC. |  |
| CES is easily accessed by individuals and families seeking housing or services. |  |
| CES is well-advertised. |  |
| CES includes a comprehensive and standardized assessment tool(s). |  |
| CES includes a comprehensive and standardized assessment tool(s). |  |
| CES provides an initial, comprehensive assessment of individuals and families for housing and services. |  |
| CES includes a specific policy to guide the operation of the centralized or coordinated assessment system to address the needs of individuals and families who are fleeing, or attempting to flee, Domestic Violence / Victim Service Provider, dating violence, sexual assault, or stalking, but who are seeking shelter or services from non-victim specific providers. |  |

# APPENDIX C VAWA EMERGENCY TRANSFER PLAN COVER PAGE

**Include this page with the completed Regional Application under Tab 4.** In the table below, enter the page number of the CoC’s VAWA/Emergency Transfer Plan Policy where the corresponding requirements can be found.

|  |  |
| --- | --- |
| **EMERGENCY TRANSFER PLAN REQUIREMENTS** | **POLICY PAGE NUMBER** |
| Definition of Internal Emergency Transfer |  |
| Definition of External Emergency Transfer |  |
| Definition of Safe Unit |  |
| A tenant receiving rental assistance through, or residing in a unit subsidized under, a covered housing program who is a victim of domestic violence, dating violence, sexual assault, or stalking qualifies for an emergency transfer if:   * The tenant expressly requests the transfer; and * The tenant reasonably believes there is a threat of imminent harm from further violence if the tenant remains within the same dwelling unit that the tenant is currently occupying; or * In the case of a tenant who is a victim of sexual assault, either the tenant reasonably believes there is a threat of imminent harm from further violence if the tenant remains within the same dwelling unit that the tenant is currently occupying, or the sexual assault occurred on the premises during the 90-calendar-day period preceding the date of the request for transfer. |  |
| The plan must detail the measure of any priority given to tenants who qualify for an emergency transfer under VAWA in relation to other categories of tenants seeking transfers and individuals seeking placement on waiting lists.   * Tenant Selection Plans (TSPs) should be amended to include any VAWA preference (this does not require HUD approval). |  |
| The plan must incorporate strict confidentiality measures to ensure that the housing provider does not disclose the location of the dwelling unit of the tenant to a person who committed or threatened to commit an act of domestic violence, dating violence, sexual assault, or stalking against the tenant. |  |
| The plan must allow a tenant to make an internal emergency transfer under VAWA when a safe unit is immediately available.  The plan should define the term “immediately available.” For example, “a vacant unit, ready for move-in with a reasonable period of time.”   * Include time frames, possible internal transfer locations, and priority status relative to other tenants seeking an internal transfer. |  |
| The plan must describe policies for assisting a tenant in making an internal emergency transfer under VAWA when a safe unit is not immediately available, and these policies must ensure that requests for internal emergency transfers receive, at a minimum, any applicable additional priority that housing providers may already provide to other types of emergency transfer requests (e.g., transfers based on disability). |  |
| The plan must describe reasonable efforts the housing provider will take to assist a tenant who wishes to make an external emergency transfer when a safe unit is not immediately available. The plan must include policies for assisting a tenant who is seeking an external emergency transfer under VAWA out of the housing provider’s program or project, and a tenant who is seeking an external emergency transfer under VAWA into the housing provider’s program or project. These policies may include:   * Arrangements, including memoranda of understanding, with other housing providers to facilitate moves (such documents should be attached to the plan); and * Outreach activities to organizations that assist or provide resources to victims of domestic violence, dating violence, sexual assault, or stalking. |  |
| Nothing may preclude a tenant from seeking an internal emergency transfer and an external emergency transfer concurrently if a safe unit is not immediately available. It is recommended that this policy be clearly stated in the plan. |  |
| The plan should state that a request does not guarantee continued assistance or an external transfer to other HUD housing. |  |
| Where applicable, the plan must describe policies for a tenant who has tenant-based rental assistance (e.g., voucher) and who meets the requirements of #1 above to move quickly with that assistance.  Housing providers should coordinate with local providers of the tenant-based assistance (e.g., local PHA). |  |
| The plan may require documentation from a tenant seeking an emergency transfer, provided that:   * The tenant’s submission of a written request to the housing provider, where the tenant certifies that they meet the eligibility requirements to request a VAWA transfer, shall be sufficient documentation of the requirements necessary to request an emergency transfer; * The housing provider may, at its discretion, ask an individual seeking an emergency transfer to document the occurrence of domestic violence, dating violence, sexual assault, or stalking, in accordance with 24 CFR §5.2007, for which the individual is seeking the emergency transfer, if the individual has not already provided documentation of that occurrence; and * No other documentation is required to qualify the tenant for an emergency transfer. |  |
| The housing provider must make its emergency transfer plan available upon request and, when feasible, must make the plan publicly available. |  |
| The housing provider must keep a record of all emergency transfers requested under its plan, and the outcomes of such requests, and retain these records for a period of three years, or for a time period as specified in program regulations. Requests and outcomes of such requests must be reported to HUD annually. |  |

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