

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Only Collaborative Applicants may apply for CoC Planning funds using this application, and only one CoC Planning application may be submitted during the FY 2019 CoC Program grant competition.
- Additional training resources can be found on the HUD Exchange at <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>
- Program policy questions and problems related to completing the application in e-snaps may be directed to HUD via the HUD Exchange Ask A Question.
- Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award management (SAM) in order to apply for funding under the Continuum of Care (CoC) Program Competition. For more information see the FY 2019 CoC Program Competition NOFA.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2019 CoC Program Competition NOFA.
- Detailed instructions can be found on the left menu within e-snaps and on the HUD Exchange. They contain comprehensive instructions and should be used in tandem with the navigational guides, which are also found on the HUD Exchange.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any new or renewal project that fails to adhere to 24 CFR Part 578 and application requirements set forth in the FY 2019 CoC Program NOFA.

1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application: CoC Planning Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 08/16/2019

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: Commonwealth of Virginia

b. Employer/Taxpayer Identification Number (EIN/TIN): 54-1083047

	c. Organizational DUNS:	809391881	PLUS 4	
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d. Address

Street 1: 600 East Main Street

Street 2: Suite 300

City: Richmond

County:

State: Virginia

Country: United States

Zip / Postal Code: 23219

e. Organizational Unit (optional)

Department Name:

Division Name: Housing

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Ms.

First Name: Andriea

Middle Name:

Last Name: Ukrop

Suffix:

Title: CoC Program Coordinator

Organizational Affiliation: Commonwealth of Virginia

Telephone Number: (804) 371-7128

Extension:

Fax Number: (804) 371-7091

Email: andriea.urkop@dhcd.virginia.gov

1C. SF-424 Application Details

9. Type of Applicant: A. State Government

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6300-N-25

Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): Virginia
(for multiple selections hold CTRL+Key)

15. Descriptive Title of Applicant's Project: BoS Planning 2019

16. Congressional District(s):

a. Applicant: VA-001, VA-002, VA-005, VA-006, VA-003, VA-004, VA-007, VA-008

b. Project: VA-001, VA-002, VA-005, VA-006, VA-003, VA-004, VA-007, VA-008
(for multiple selections hold CTRL+Key)

17. Proposed Project

a. Start Date: 07/01/2020

b. End Date: 06/30/2021

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

I AGREE: ☒

21. Authorized Representative

Prefix: Mr.

First Name: Erik

Middle Name:

Last Name: Johnston

Suffix:

Title: Director

Telephone Number: (804) 371-7077
(Format: 123-456-7890)

Fax Number: (804) 371-7091
(Format: 123-456-7890)

Email: erik.johnston@dhcd.virginia.gov

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

Date Signed: 08/16/2019

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2506-0214 (exp.02/28/2022)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Commonwealth of Virginia

Prefix: Mr.

First Name: Erik

Middle Name:

Last Name: Johnston

Suffix:

Title: Director

Organizational Affiliation: Commonwealth of Virginia

Telephone Number: (804) 371-7077

Extension:

Email: erik.johnston@dhcd.virginia.gov

City: Richmond

County:

State: Virginia

Country: United States

Zip/Postal Code: 23219

2. Employer ID Number (EIN): 54-1083047

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received: \$108,300

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, city and state) of the project or activity: BoS Planning 2019 600 East Main Street
Richmond Virginia

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
(For further information, see 24 CFR Sec. 4.3).

2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9. Yes

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/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
DHCD	HUD CoC Planning	\$110,298.00	Planning Activities
DHCD	HUD CoC HMIS	\$141,301.00	HMIS operating funds

Part III Interested Parties

You must disclose:

1. 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
2. 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			Financial Interest	Financial Interest
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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 (\$)	in Project/Activity (%)
Homeward	05-0606153	Sub-Grantee - HMIS Administrator	\$90,000.00	63%

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

I AGREE: ☒

Name / Title of Authorized Official: Erik Johnston, Director

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

Date Signed: 08/16/2019

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Commonwealth of Virginia

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.	e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
b. Establishing an on-going drug-free awareness program to inform employees --- (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted --- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;	g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.
d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;	

Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application.
Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I

X

acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Authorized Representative

Prefix: Mr.

First Name: Erik

Middle Name

Last Name: Johnston

Suffix:

Title: Director

Telephone Number: (804) 371-7077
(Format: 123-456-7890)

Fax Number: (804) 371-7091
(Format: 123-456-7890)

Email: erik.johnston@dhcd.virginia.gov

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

Date Signed: 08/16/2019

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file

the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: Commonwealth of Virginia

Name / Title of Authorized Official: Erik Johnston, Director

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

Date Signed: 08/16/2019

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.

Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. The requirement related to lobbying as explained in the SF-LLL instructions states: "The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action."

Answer "No" if your organization is NOT engaged in lobbying.

Does the recipient or subrecipient of this CoC grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program? No

Legal Name: Commonwealth of Virginia

Street 1: 600 East Main Street

Street 2: Suite 300

City: Richmond

County: City of Richmond

State: Virginia

Country: United States

Zip / Postal Code: 23219

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

X

Authorized Representative

Prefix: Mr.

First Name: Erik

Middle Name:

Last Name: Johnston

Suffix:

Title: Director

Telephone Number: (804) 371-7077
(Format: 123-456-7890)

Fax Number: (804) 371-7091
(Format: 123-456-7890)

Email: erik.johnston@dhcd.virginia.gov

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

Date Signed: 08/16/2019

2A. Project Detail

1a. CoC Number and Name: VA-521 - Virginia Balance of State CoC
1b. Collaborative Applicant Name: Commonwealth of Virginia-Virginia Department of Housing and Community Development

2. Project Name: BoS Planning 2019

3. Component Type: CoC Planning Project Application

2B. Project Description

1. Provide a description that addresses the entire scope of the proposed project and how the Collaborative Applicant will use grant funds to comply with the provisions of 24 CFR 578.7.

The grant funds are used to support CoC planning activities for the Balance of State (BoS), which covers 73 counties and cities. The BoS uses a regional approach with 12 geographically defined local planning groups. With the support and guidance of the Rural and BoS Community of Practice and Built for Zero, the CoC will undertake an evaluation of the current governance structures, projects, and procedures. Then, LPGs will identify high impact ideas, test them using rapid action cycles, and strengthen the system for ending homeless across the BoS. To support data driven decisions, the CoC collaborative applicant (CA) provides data analysis and training to the LPGs. The CA continues to participate in state level workgroups including ending veteran homelessness, youth and family homelessness, and chronic homelessness. Additionally, the CA participates in initiatives to coordinate homeless services with healthcare services, jails/prisons, DV providers, human trafficking advocates, and the education system.

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

During the FY2019 grant year (July 1, 2020-June 30, 2021), the CoC program coordinator will provide technical support and CoC level planning to the 12 LPGs that comprise the BoS CoC. This position works to strengthen the homeless crisis system across the BoS. During the current grant year, the program coordinator will be working with the steering committee to update the BoS Action Plan and using the USICH promising practices document: Strengthening Systems for Rural Homelessness as a guide for identifying solutions to engagement, governance capacity, outreach, coordinated entry, and permanent housing. The goal is to have a new plan in place during the current planning year (June 30, 2020) and be prepared to implement and test new strategies during the 2019 fiscal year (beginning July 1, 2020). In addition, the CoC program coordinator helps advance initiatives approved by the Governor's Coordinating Council on Homelessness (GCCH) by providing TA and new, promising practices.

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

BoS Planning funds support staff, travel, and meeting needs required to monitor and evaluate CoC and ESG projects and to submit annual reports to HUD. The CoC program coordinator works with the Steering Committee to establish annual outcomes of all CoC and ESG funded projects. These expectations are laid out in the CoC system level procedures. The CoC program coordinator then monitors and evaluates all CoC projects and works collaboratively with program

administrators at DHCD (CA) who monitor and evaluate ESG projects. DHCD (CA) administers ESG projects through the Virginia Homeless Solutions Program (VHSP). VHSP is combination of federal and state dollars use to ensure there is a coordinated emergency crisis response system. This structure provides a unique opportunity for the CoC program coordinator to monitor and ensure all ESG projects are incorporated into the BoS coordinated assessment, meet service standards, and adhere to Housing First practices. All recipients of both CoC funds and ESG funds are required to use HMIS and all aggregate reports are ran from HMIS in order to report APRs, CAPERS, etc. to HUD.

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

Planning grant funds are leveraged with state funds to provide ongoing planning and coordination to end homelessness in the Commonwealth of Virginia.

3A. Governance and Operations

1. How often does the CoC conduct meetings of the full CoC membership? Annually

2. Does the CoC include membership of a homeless or formerly homeless person? Yes

2a. For members who are homeless or formerly homeless, what role do they play in the CoC membership? (Select all that apply)

Participates in CoC meetings:	<input checked="" type="checkbox"/>
Votes, including electing Coc Board:	<input checked="" type="checkbox"/>
Sits on CoC Board:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

3. Does the CoC's governance charter incorporate written policies and procedures for each of the following

a. Written agendas of CoC meetings? Yes

b. Coordinated Entry? (Also known as centralized or coordinated assessment) Yes

c. Process for monitoring outcomes of ESG recipients? Yes

d. CoC policies and procedures? Yes

e. Written process for board selection? Yes

f. Code of Conduct for board members that includes a recusal process? Yes

g. Written standards for administering assistance? Yes

4. Were there any written complaints received by the CoC in relation to project review, project selection, or other items related to 24 CFR 578.7 or 578.9 within the past 12 months? No

3B. Committees

Provide information for up to five of the most active CoC-wide planning committees, subcommittees and/or workgroups, to address homeless needs in the CoC's geographic area that recommend and set policy priorities for the CoC, including a brief description of the role and the frequency of the meetings. Only include committees, subcommittees and/or workgroups, that are directly involved in CoC-wide planning and not the regular delivery of services.

Name of Group	Role of the Group (max 750 characters)	Meeting Frequency	Name of Individuals and/or Organizations Represented
Steering Committee	The CoC Steering Committee is the lead decision-making body and board responsible for planning of the homeless crisis emergency response system	Bi-Monthly	Reps from each of the 12 LPGs; 1 HMIS admin. rep.; state dept. of veteran services; state SOAR coordinator; state DV action alliance; youth action board facilitator, 1 rep. w/ lived experience; 1 rep. from DHCD for ESG coord.
HMIS, Data, and Performance	Responsibilities include review of HMIS policies and procedures; development, assessment, and monitoring of performance measures; data quality review; PIT, HIC, and system measures reporting	Quarterly	Each of the 12 LPGs has the opportunity to elect one rep. Current composition includes nonprofit providers, community action agencies, local planning districts, and the HMIS lead
Coordinated Assessment/Service	Responsibilities include development and review of coordinated assessment system and the development and evaluation of system level procedures and service standards	Quarterly	Each of the 12 LPGs has the opportunity to elect one rep. Current composition includes nonprofit providers, community action agencies, DSS, public housing authority, community development office
Monitoring and Selection	Annually evaluating the renewal projects; and reviewing, scoring, and ranking submitted new and renewal CoC projects	Annually	Each of the 12 LPGs has the opportunity to elect one rep. Current composition includes nonprofit providers, planning district commission, advocate, United Way, and the Dept. of Housing and Comm. Dev

4A. Sources of Match

The following list summarizes the funds that will be used as Match for the project. To add a Matching source to the list, select the  icon. To view or update a Matching source already listed, select the  icon.

Summary for Match

Total Value of Cash Commitments:	\$27,075
Total Value of In-Kind Commitments:	\$0
Total Value of All Commitments:	\$27,075

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

Match	Type	Source	Contributor	Date of Commitment	Value of Commitments
Yes	Cash	Government	VHSP -state funds	08/07/2019	\$27,075

Sources of Match Details

- 1. Will this commitment be used towards Match?** Yes
- 2. Type of commitment:** Cash
- 3. Type of source:** Government
- 4. Name the source of the commitment:** VHSP -state funds
(Be as specific as possible and include the office or grant program as applicable)
- 5. Date of Written Commitment:** 08/07/2019
- 6. Value of Written Commitment:** \$27,075

4B. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 30, 2021? Yes

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

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

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

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

Administering Department/Agency	Indirect Cost Rate	Direct Cost Base
HUD	54.13%	\$1,308,582.00

b. Has this rate been approved by your cognizant agency? Yes

c. Do you plan to use the 10% de minimis rate? No

3. Select a grant term: 1 Year

A description must be entered for Quantity. Any costs without a Quantity description will be removed from the budget.

Eligible Costs:	Quantity AND Description (max 400 characters)	Annual Assistance Requested (Applicant)
1. Coordination Activities	Salary and Indirect for CoC Coordinator (18% FTE) \$30,000, travel conference fees for Built for Zero and NAEH, NHSDC, and travel associated costs \$5,000	\$35,000
2. Project Evaluation	Salary and Indirect for CoC Coordinator (5% FTE) \$7,000	\$7,000
3. Project Monitoring Activities	Salary and Indirect for CoC Coordinator (6% FTE) \$8,000	\$8,000

4. Participation in the Consolidated Plan	Salary and Indirect for CoC Coordinator (5% FTE) \$5,000	\$5,000
5. CoC Application Activities	Salary and Indirect for CoC Coordinator (10% FTE) \$12,000	\$11,500
6. Determining Geographical Area to Be Served by the CoC		\$0
7. Developing a CoC System	Salary and Indirect for CoC Coordinator (18% FTE) \$25,500	\$25,500
8. HUD Compliance Activities	Salary and Indirect Program Administrator (12% FTE) 12,000; travel expense to monitor BoS and ESG projects, NAEH Conf., NHSDC and Built for Zero Conf. and associated travel costs 4,300	\$16,300
Total Costs Requested		\$108,300
Cash Match		\$27,075
In-Kind Match		\$0
Total Match		\$27,075
Total Budget		\$135,375

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

5A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1. Other Attachment(s)	No	Planning Match	08/08/2019
2. Other Attachment(s)	No	Indirect cost plan	08/16/2019

Attachment Details

Document Description: Planning Match

Attachment Details

Document Description: Indirect cost plan

5B. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or

disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance.

It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

1-Year Operation Rule.

For applicants receiving assistance for CoC planning: the project will be operated for the purpose specified in the application for any year for which such assistance is provided.

D. Explanation.

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall attach an explanation behind this page.

Name of Authorized Certifying Official: Erik Johnston

Date: 08/16/2019

Title: Director

Applicant Organization: Commonwealth of Virginia

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

X

6A. Submission Summary

Page	Last Updated
1A. SF-424 Application Type	No Input Required
1B. SF-424 Legal Applicant	No Input Required
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	08/05/2019
1E. SF-424 Compliance	08/05/2019
1F. SF-424 Declaration	08/05/2019
1G. HUD 2880	08/05/2019
1H. HUD 50070	08/05/2019
1I. Cert. Lobbying	08/05/2019
1J. SF-LLL	08/05/2019
2A. Project Detail	08/05/2019

2B. Description	08/16/2019
3A. Governance and Operations	08/05/2019
3B. Committees	08/05/2019
4A. Match	08/08/2019
4B. Funding Request	08/08/2019
5A. Attachment(s)	08/16/2019
5B. Certification	08/05/2019



Ralph S. Northam
Governor

R. Brian Ball
Secretary of
Commerce and Trade

COMMONWEALTH of VIRGINIA

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

Erik C. Johnston
Director

August 7, 2019

Virginia Balance of State CoC,

Through the Virginia Homeless Solutions Program (VHSP), Virginia Balance of State grantees will receive a minimum of \$27,075 to support CoC Planning eligible activities. Planning eligible activities include coordination activities; project evaluation, monitoring and compliance; CoC application activities; participation with the consolidated plan, and developing a CoC system. These funds can be used to match the Virginia BoS HUD CoC Planning grant.

Sincerely,

A handwritten signature in dark ink, appearing to read "Pamela G. Kestner".

Pamela G. Kestner
Deputy Director
Division of Housing



Virginia Department of Housing and Community Development | Partners for Better Communities
Main Street Centre | 600 East Main Street, Suite 300 Richmond, VA 23219
www.dhcd.virginia.gov | Phone (804) 371-7000 | Fax (804) 371-7090 | Virginia Relay 7-1-1



DEPARTMENT OF HEALTH & HUMAN SERVICES

Program Support Center
Financial Management Portfolio
Cost Allocation Services

1301 Young Street, Room 732
Dallas, TX 75202
PHONE: (214) 767-3261
FAX: (214) 767-3264
EMAIL: CAS-Dallas@psc.hhs.gov

March 21, 2019

Mr. Erik Johnston
Director
Virginia Department of Housing & Community Development
600 East Main Street, Ste. 300
Richmond, VA 23219

Dear Mr. Erik Johnston:

A copy of an indirect cost rate agreement is being sent to you for signature. This agreement is issued on behalf of your organization's cognizant agency, Department of Housing and Urban Development. It reflects an understanding reached between your organization and a member of my staff concerning the rate(s) that may be used to support your claim for indirect costs on grants and contracts with the Federal Government.

Please have the agreement signed by an authorized representative of your organization and return within ten business days of receipt. The signed agreement can be sent to me by email or fax, while retaining the copy for your files. Only when the signed agreement is returned, will we then reproduce and distribute the agreement to the appropriate awarding organizations of the Federal Government for their use.

An indirect cost proposal, together with the supporting information, is required to substantiate your claim for indirect costs under grants and contracts awarded by the Federal Government. Thus, your next proposal based on actual costs for the fiscal year ending 06/30/19, should be submitted by 12/31/19 to:

Department of Housing and Urban Development
Attention: Lisa Abell
451 7th Street, SW, Room 7236
Washington, DC 20410
Lisa.S.Abell@hud.gov

Thank you for your cooperation. If you have any questions, please call Wanda Rayfield at (214) 767-5249.

Sincerely,
Darryl W.
Mayes -S
Darryl W. Mayes
Deputy Director
Cost Allocation Services

Digitally signed by Darryl W. Mayes -S
(DN: cn=Darryl W. Mayes -S, o=Government,
ou=HHS, ou=PS, ou=PM, email=Darryl.W.Mayes-S,
c=US, email=Darryl.W.Mayes-S, o=Government,
ou=HHS, ou=PS, ou=PM, email=Darryl.W.Mayes-S,
c=US)

Enclosure

STATE AND LOCAL GOVERNMENTS RATE AGREEMENT

EIN: 54-1083047

DATE: 03/21/2019

ORGANIZATION:

Virginia Department of Housing and
Community Development

600 East Main Street, Ste 300
Richmond, VA 23219

FILING REF.: The preceding
agreement was dated
02/28/2018

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: INDIRECT COST RATES

RATE TYPES: FIXED FINAL PROV. (PROVISIONAL) PRED. (PREDETERMINED)

EFFECTIVE PERIOD

<u>TYPE</u>	<u>FROM</u>	<u>TO</u>	<u>RATE(%)</u>	<u>LOCATION</u>	<u>APPLICABLE TO</u>
FINAL	07/01/2017	06/30/2018	41.50	On Site	Comm Local Gov
FINAL	07/01/2017	06/30/2018	62.17	On Site	Div of Comm Development
FINAL	07/01/2017	06/30/2018	54.13	On Site	Division of Housing
PROV.	07/01/2018	06/30/2020			Use same rates and conditions as those cited for fiscal year ending June 30, 2018.

*BASE

Direct salaries and wages excluding all fringe benefits.

ORGANIZATION: Virginia Department of Housing and Community
Development

AGREEMENT DATE: 3/21/2019

SECTION II: SPECIAL REMARKS

TREATMENT OF FRINGE BENEFITS:

The fringe benefits are specifically identified to each employee and are charged individually as direct costs. The directly claimed fringe benefits are listed below.

TREATMENT OF PAID ABSENCES

Vacation, holiday, sick leave pay and other paid absences are included in salaries and wages and are claimed on grants, contracts and other agreements as part of the normal cost for salaries and wages. Separate claims are not made for the cost of these paid absences.

Fringe Benefits -

Retirement
Short Term/Long Term
Deferred Compensation
Employee Assistance Program
Flexible Spending Accountants
Paid Leave
Wellness Program
Health Insurance
Telework
Long Term Care
Educational Assistance
Optional Life Insurance
Group Life Insurance
12 Paid Holidays

Equipment means article of nonexpendable, tangible personal property having a useful life of more than 1 year(s) and an acquisition cost of \$5,000 or more per unit.

This Rate Agreement is issued in accordance with the Customer Service Agreement (CSA) between DHHS/CAS and Housing and Urban Development.

Your next proposal based on actual costs for the fiscal year ending 06/30/19 is due by 12/31/19. All proposals should be submitted to HUD.

ORGANIZATION: Virginia Department of Housing and Community Development

AGREEMENT DATE: 3/21/2019

SECTION III: GENERAL

A. LIMITATIONS:

The rates in this Agreement are subject to any statutory or administrative limitations and apply to a given grant, contract or other agreement only to the extent that funds are available. Acceptance of the rates is subject to the following conditions: (1) Only costs incurred by the organization were included in its indirect cost pool as finally accepted; such costs are legal obligations of the organization and are allowable under the governing cost principles; (2) The same costs that have been treated as indirect costs are not claimed as direct costs; (3) Similar types of costs have been accorded consistent accounting treatment; and (4) The information provided by the organization which was used to establish the rates is not later found to be materially incomplete or inaccurate by the Federal Government. In such situations the rate(s) would be subject to renegotiation at the discretion of the Federal Government.

B. ACCOUNTING CHANGES:

This Agreement is based on the accounting system purported by the organization to be in effect during the Agreement period. Changes to the method of accounting for costs which affect the amount of reimbursement resulting from the use of this Agreement require prior approval of the authorized representative of the cognizant agency. Such changes include, but are not limited to, changes in the charging of a particular type of cost from indirect to direct. Failure to obtain approval may result in cost disallowances.

C. FIXED RATES:

If a fixed rate is in this Agreement, it is based on an estimate of the costs for the period covered by the rate. When the actual costs for this period are determined, an adjustment will be made to a rate of a future year(s) to compensate for the difference between the costs used to establish the fixed rate and actual costs.

D. USE BY OTHER FEDERAL AGENCIES:

The rates in this Agreement were approved in accordance with the authority in Title 2 of the Code of Federal Regulations, Part 200 (2 CFR 200), and should be applied to grants, contracts and other agreements covered by 2 CFR 200, subject to any limitations in A above. The organization may provide copies of the Agreement to other Federal Agencies to give them early notification of the Agreement.

E. OTHER:

If any Federal contract, grant or other agreement is reimbursing indirect costs by a means other than the approved rate(s) in this Agreement, the organization should (1) credit such costs to the affected programs, and (2) apply the approved rate(s) to the appropriate base to identify the proper amount of indirect costs allocable to these programs.

BY THE INSTITUTION:

Virginia Department of Housing and Community Development

(INSTITUTION)

Erik C. Johnston

(SIGNATURE)

Erik Johnston

(NAME)

Director

(TITLE)

3/26/2019

(DATE)

ON BEHALF OF THE FEDERAL GOVERNMENT:

DEPARTMENT OF HEALTH AND HUMAN SERVICES

(AGENCY)

Darryl W. Mayes -S

Digitally signed by Darryl W. Mayes -S
DN: cn=U.S. Government, ou=HHS, ou=PSC,
ou=People, o=U.S. Government, ou=1.1=2000131668,
cn=Darryl W. Mayes -S
Date: 2019.03.25 15:17:53 -0400

(SIGNATURE)

for **Arif Karim**

(NAME)

Director, Cost Allocation Services

(TITLE)

3/21/2019

(DATE) 7310

HHS REPRESENTATIVE: **Wanda Rayfield**

Telephone: **(214) 767-3261**