

## Tucson Pima Collaboration to End Homelessness

### Department of Housing and Urban Development Continuum of Care Program (CoC) Competition FY 2017

#### Expanded projects through Reallocation Request For Proposals (RFP)

- A. TPOCH is requesting proposals to expand projects that are high performing and align with priorities of community needs: projects dedicated to serving youth, projects dedicated to families, and Safe Haven.

The top performing projects that have applied for expansion funds by August 18, 2017 at 11:59:59 am Arizona Time in these categories can qualify for reallocated funds for expansion. Top performers are defined as those applicants who scored at least 80.00% on the FY 2017 TPOCH rating tool. The TPOCH Board will award expansion dollars based on score and amount requested until all available funds have been reallocated.

To break a tie or ties, the Board will use the following criteria:

- First, the percent of exits to permanent housing destinations as reported on the TPOCH 2017 Rating Tool, Part 2.1 Housing Stability Outcome.
- Second, the higher percentage of grant utilization as reported on the TPOCH 2017 Rating Tool, Part 3.1 Award Utilization/Funds Expended.
- Third, the higher score on data quality as reported on the TPOCH 2017 Rating Tool Part 3.2 HMIS Data Quality

- B. This notice is a guide to the requirements for this application. For a full description of all HUD requirements for this project, please reference the NOFA at:

<https://www.hudexchange.info/resources/documents/FY-2017-CoC-Program-Competition-NOFA.pdf>

- C. Information and Deadlines

1. Organizations wishing to apply for reallocation project funds must submit the written application and a completed FY 2017 TPOCH rating tool to [NOFA2017@communitypartnersinc.org](mailto:NOFA2017@communitypartnersinc.org) and the application in *e-snaps* no later than **Friday August 18th, 2017, 11:59:59 AM Arizona Time.**
2. Applications will be reviewed, scored, selected, and ranked by the Board of Directors. Only Board members with no conflict of interest will be able to participate in this process. Results of TPOCH's internal review of applications will be announced on **August 23<sup>rd</sup>, 2017, 11:59:59 AM Arizona Time.**

3. All questions regarding this Expansion Application Form should be directed to the community email at [NOFA2017@communitypartnersinc.org](mailto:NOFA2017@communitypartnersinc.org) or call the Collaborative Applicant Sasha Hawman at 520.901.6818.

#### D. Project Overview

New in the FY 2017 CoC Program Competition, HUD will allow project applicants to apply for a new expansion project under the reallocation process or permanent housing bonus in order to expand existing eligible renewal projects that will increase the number of units in the project, or allow the recipient to serve additional persons. Project applicants that intend to submit a new reallocation for the purposes of expanding an eligible renewal project must:

- a. provide the eligible renewal grant number that the project applicant requests to expand on the new project application;
- b. indicate how the new project application will expand units, beds, services, persons served,
- c. and ensure the funding request for the new expansion project is within the funding parameters allowed under the reallocation process.

Please provide the following information in your response to the request for proposals.

1. Name of Organization.
2. Contact Persons (minimum 2).
  - a. Email for each contact person
  - b. Phone Number for each contact person
3. Organization DUNS and SAM #s
4. Project Name.
5. All project subrecipients, if any.
6. Type of Project (must meet criteria in Part A above).
7. Target Subpopulation.
8. Proposed number of units for households with children.
9. Proposed number of units for households without children.

E. Budget

Please provide a budget for your EXPANDED project on the categories below.

Instructions Regarding The Project Budget

1. Administrative expenses above 10.00% are not allowed.
2. Match as defined in 24 CFR 578.73 totaling 25.00% is required.
3. Leverage totaling 150.00% of the total project budget (including matching funds and admin costs) is required.
4. Matching funds cannot also be used towards meeting the 150.00% leverage requirement.
5. Budget must match the *e-snaps* application submitted to the Collaborative Applicant.

<b>Project Budget</b>	
<b>Line Item</b>	<b>Amount</b>
Operations	
Supportive Services	
Rental Assistance	
Leasing	
Administration	
Matching Funds	
Leverage	
<b>Total Funding Request</b>	

F. Budget Justification

1. Provide a justification for all line items requested in your budget.
2. Describe the source of your matching funds. See 24 CFR 578.73 for details of eligible matching funds.
3. Describe the source of your leverage.

G. Project Description

Provide a description your organization’s proposed project. Please make sure this description includes the population or sub-population your project will serve, and the type of housing and services that will be provided.

## H. Project Quality Threshold Requirements

To assure your proposed expansion project meets these threshold requirements please respond to the following questions. **If your project leaves any questions unanswered, it will be considered non-responsive and ineligible. Applications must answer parts (a) through (c).**

- (a) Whether the type of housing and number and configuration of units will fit the needs of the program participants (e.g., 2 or more bedrooms for families).
- (b) Whether the type of the supportive services that will be offered to program participants will ensure successful retention or help to obtain permanent housing—this includes all supportive services, regardless of funding source (e.g., child care for families with children, case management, life skills, drug counseling). Project applicants must clearly articulate the part of the project that is being expanded. Additionally, the project applicants must clearly demonstrate that they are not replacing other funds.
- (c) Whether the specific plan for ensuring that program participants will be individually assisted to obtain the benefits of the mainstream health, social, and employment programs or which they are eligible to apply meets the needs of the program participants (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, and early childhood education).

## I. Application

All applicants must complete the renewal application in *e-snaps* with their approved budget and also must submit the written expansion application and a completed FY 2017 TPCP rating tool to the [NOFA2017@communitypartnersinc.org](mailto:NOFA2017@communitypartnersinc.org) no later than **Friday August 18th, 2017, 11:59:59 AM Arizona Time.**