

California Emergency Solutions and Housing (CESH) Program

2018 Application



**State of California
Governor Edmund G. Brown Jr.**

**Alexis Podesta, Secretary
Business, Consumer Services and Housing Agency**

**Ben Metcalf, Director
Department of Housing and Community Development**

NOFA Section, CESH Program
2020 West El Camino Avenue, Suite 650, Sacramento, CA 95833
CESH Program Email: CESH@hcd.ca.gov

**Final Filing Date for November 2018 Award: 9/27/2018 at 5:00 p.m.
Final Filing Date: 10/15/2018 at 5:00 p.m.**

Overview - Applicant Information					Rev. 8/14/18
Instructions					
This application is subject to the California Emergency Solutions and Housing (CESH) program requirements of Health and Safety Code (HSC) Part 2 of Division 31 Chapter 2.8, commencing with §50490 and including §50490.1, 50490.2, 50490.3, 50490.4, and 50490.5, and the 2018 CESH Notice of Funding Availability (NOFA).					
A. Download and review the 2018 NOFA for the CESH Program and Section 4 of SB 850 (Chapter 48, Statutes of 2018)					
B. Application Submittal: Submit one original (hard copy) application with wet, original signatures in a 3-ring binder with pockets, and one CD or USB flash drive that includes a copy of the application with signatures with all files uploaded. Applicants are required to submit the Application Forms in this Excel Workbook as instructed on each form.					
C. Application forms for the CESH Program are available at http://www.hcd.ca.gov/grants-funding/active-funding/cesh.shtml					
D. All application forms from applicants that wish to receive an award by November 5, 2018 must be postmarked or received no later than 5 p.m. Pacific Standard Time (PST) on September 27, 2018 as set forth in the NOFA Section I(B).					
E. All other application forms must be postmarked or received no later than 5 p.m. PST on October 15, 2018 . Application forms not submitted by the deadline will result in a denial of funds to your CoC Service Area. AEs are responsible for ensuring that all required materials are submitted by the deadline as set forth in the NOFA Section I(B).					
General Application Requirements §50490.3					
File Name:	Administrative Entity (AE) Certification from CoC	Attach certification from the CoC documenting that the AE has been designated by the CoC to administer CESH funds per §50490(a)	Attached and uploaded?	Yes	
AE and Authorized Representative (Per Board Resolution)		Entity Name County of Shasta			
Applicant Type	Unit of general purpose local government.				
Address	1450 Court Street	City	Redding	State	CA
Zip	96001				
Auth Rep Name	Laura Burch	Title	Director	Authorized Rep. Email	lburch@co.shasta.ca.us
Phone	530-225-5182				
Federal Tax ID Number (FEIN)	94-600035	Data Universal Numbering System (DUNS)			
Address	1450 Court Street	City	Redding	State	CA
Zip	96001				
Administrative Fiscal Representative (i.e., CFO, Accountant/Bookkeeper)					
Name	Torri Cardilino	Title	Program Manager	Authorized Rep. Email	tcardilino@co.shasta.ca.us
Phone	530-245-6431				
Contact Name	Tonya Willock	Title	SSA I/II	Contact Email	twillock@co.shasta.ca.us
Contact Phone	530-245-6432				
Address	1450 Court Street, Suite 108	City	Redding	State	CA
Zip	96001				
Continuum of Care (CoC)					
CoC Service Area	Redding/Shasta, Siskiyou, Lassen, Plumas, Del Norte, Modoc, Sierra Counties CoC				
CoC Name	NorCal CoC				
Address	1450 Court Street, Suite 108	City	Redding	State	CA
Zip	96001				
Rep Name	Torri Cardilino	Title	Program Manager	Authorized Rep. Email	tcardilino@co.shasta.ca.us
Phone	530-245-6431				
Contact Name		Title		Contact Email	
Contact Phone					
Address	1450 Court Street, Suite 108	City	Redding	State	CA
Zip	96001				
Application requests an allocation in order to carry out one or more eligible activity within the CoC service area §50490.3(a)(1)? (See Estimated Budget and Goals Worksheet)					
					Yes
Applicant has prior experience administering the eligible activities described in the application or has partnered with one or more local governments or other entities with in the relevant CoC service area that have the necessary prior experience to administer the requested funds §50490.3(a)(2)(A&B)? (See Estimated Budget and Goals Worksheet)					
					Yes
Does CoC service area have a functioning CES and HMIS that meet the applicable HUD requirements, as set forth in the NOFA Section II(e)(3) per §50490.3(a)(3)(A)?					
					No
File Name:	HUD Coordinated Entry Process Self-Assessment	Attach HUD Coordinated Entry Process Self-Assessment documenting that CES meets at a minimum the required aspects of coordinated entry	Attached and uploaded?	Yes	
If self-assessment is not attached, application documents that a minimum of 20 percent of the allocation to the CoC service area will be used to implement or update its systems to comply with the applicable HUD requirements §50490.3(a)(3)(B)? (See Estimated Budget and Goals Worksheet)					
					No
File Name:	Local Program or Project Selection Process Documentation	Attach documentation, if available, demonstrating that local program or project selection process anticipated to be used to allocate available funds to subrecipients qualified to carry out the eligible activities is consistent with §50490.3(a)(4)	Attached and uploaded?	Yes	
If local program or project selection process documentation not attached, describe how the local program or project selection process to allocate available funds to subrecipients is consistent with §50490.3(a)(4):					
§50490.3(a)(4) The application describes or provides documentation of the local program or project selection process anticipated to be used to allocate available funds to subrecipients qualified to carry out the eligible activities. In order to satisfy the requirements of this subdivision, the applicant's proposed program or project selection process shall avoid conflicts of interest in program or project selection and shall be easily accessible to the public.					
An internal RFF was released on August 21, 2018 to the general CoC memberships and partnering agencies. Requests were received back on September 5, 2018. A rating and ranking committee rated and ranked applications according to the number of people the agency proposed to serve and the type of assistance requested. All applications were funded in part or in whole depending on the dollars available.					
Current Plan Addressing Actions to be Taken with in the Continuum of Care Service Area §50490.3(b)?					
File Name:	Current Homelessness Plan	If yes, attach the most current plan addressing actions to be taken within the Continuum of Care	Attached and uploaded?	No	
If not, funding requested to develop a homelessness plan §50490.3(b)? (See Estimated Budget and Goals Worksheet)					
Other Documents					
File Name:	STD-204	Applicants that are not a government agency must submit a Payee Data Record (STD-204)	Attached and uploaded?	Yes	
File Name:	Government TIN Form	Applicants that are a government agency must submit a Government TIN Form	Attached and uploaded?	Yes	
File Name:	Resolution	Resolutions (Refer to Resolution Instructions and Sample Resolution on CESH Program website)	Attached and uploaded?	Yes	
Certifications					
On behalf of the entity identified below, I certify that: The information, statements and attachments included in this application are, to the best of my knowledge and belief, true and correct and I possess the legal authority to submit this application on behalf of the entity identified in the signature block.					
Laura Burch, Director					
Printed Name and Title of Signatory		Signature		Date	
Entity name:	County of Shasta	Phone Number:		530-225-5160	
Entity Address	1450 Court Street, Suite 108	City	Redding	State	CA
Zip	96001				

Estimated Budget and Goals §50490.3(a)(5)										CoC Service Area Allocation requested §50490.2:				\$857,130				
Activity #1	Rental assistance, housing relocation & stabilization services to ensure housing affordability to individuals experiencing homelessness or who are at risk of homelessness.									Projected administrative costs §50490.2(b):				\$42,856				
Activity #2	Operating subsidies in the form of 15-year capitalized operating reserves for new and existing affordable permanent housing units for homeless individuals and/or families.									Instructions: Complete the following chart by listing the anticipated estimated amounts to be used for the specific eligible activities the AE and/or local partner will carry out with the allocation requested above. Describe each activity and the experience the AE or local partner has administering it. Identify numerical goals and performance measures to be used to evaluate success in implementing each eligible activity. Certify that each activity will be administered consistent with Housing First as described in §II.G of the NOFA.								
Activity #3	Flexible housing subsidy funds for local programs that establish or support the provision of rental subsidies in permanent housing to assist homeless individuals & families.																	
Activity #4	Operating support for emergency housing interventions including but not limited to: navigation centers, street outreach, and shelter diversion.																	
Activity #5	Systems support for activities necessary to maintain a comprehensive homeless services and housing delivery system, including Coordinated Entry System (CES) data, and Homeless Management Information System (HMIS) reporting, and homelessness planning activities.																	
Activity #6a	Develop or update a CES, if the CoC does not have a system in place that meets the applicable HUD requirements, as set forth in Section II.E.3.A of the NOFA.																	
Activity #6b	Development of a plan addressing actions to be taken within the CoC service area if no such plan exists.																	
Eligible Activities §50490.4(a)			Prior Experience §50490.3(a)(2)(A&B)				Projected Performance Measures §50490.3(a)(5)									Housing First §50490.4(d,e)		
Activity	Estimated amount for eligible activity	Activity as a % of Allocation amount requested	Describe Activity and prior AE experience administering Activity		If no relevant experience, describe activity and prior experience of local government or other entity in CoC service area that AE will partner with to administer activity		(A) Number of homeless persons served	(B1) Number of unsheltered homeless persons served	(B2) Average length of time spent as homeless before entry into program or project	(C) Number of homeless persons exiting the program or project into permanent housing	(D) Number of persons that return to homelessness after exiting the program or project	Other applicant identified performance measure #1	Numerical goal (#)	Other applicant identified performance measure #2	Numerical goal (#)	Other applicant identified performance measure #3	Numerical goal (#)	AE or subrecipient will administer activity consistent with Housing First NOFA §II.G?
Activity #1	\$372,000	43.4%	Rental Assistance - using ESG funds, HSP funds, HDAP funds, Section 8 Voucher Program and HOME funds. Rental assistance will allow for those who are homeless to have the ability to choose their location of the rental unit.				650	600	12 months	125	100	homeless persons		homeless persons	6	homeless persons	125	Yes
Activity #5	\$145,848	17.0%	A/E currently administers CoC HMIS/CES systems in house since 2009. All reporting, training, and contract management is overseen by CAA program manager				N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Activity #4	\$125,000	14.6%	Using MDT'S established in each community, street outreach will occur to the areas of greatest need in the rural areas of each county to engage homeless persons who are not engaged in services.				285	285	60 months	140	145	homeless persons	285	homeless persons	140	homeless persons	140	Yes
Activity #6a	\$85,713	10.0%	The Continuum of Care has draft CES policies and procedures. After receiving T/A from ABT Associates, the guidelines need to be modified to be able to have policies and procedures that will be fluent across all 7 counties. The A/E may procure a subcontractor to finish the policies and procedures for submission and approval to HCD.				N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Activity #6b	\$85,713	10.0%	The Continuum of Care is working on a draft homeless plan at this time. It is not yet complete. The A/E may procure a subcontractor to finish the plan for submission and approval to HCD.				N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Total:	\$857,130																	

CoC Certification of AE Designation to Administer Funds

By signing below, the CoC Representative certifies
CoC to administer 2018 CESH funds.

Shasta County Department of Housing and Community Action Programs

is designated by the

Certification of AE Designation to Administer Funds

Melissa Janulewicz

Printed Name of CoC Authorized Representative

CoC Executive Board Chair

Title

CoC Authorized Representative Signature

9/7/2018

DATE