**Western PA Continuum of Care (PA-601)**

**Preliminary Application for DV Bonus: Rapid Re-Housing**

**Instructions:**

* This document is a “Form”. Before you begin to respond to questions, save the document. Once saved you can complete the Form.
* To enter text, Click or tap here to enter text. and begin typing. To indicate a check a response, click inside the shaded box  and an “X” will appear within the box - .
* All applications must be returned to [westerncoc@pennsylvaniacoc.org](mailto:westerncoc@pennsylvaniacoc.org) and [housing@pcadv.org](mailto:housing@pcadv.org) by COB on August 17 using e-mail subject line DV Bonus RRH Application – **YOUR AGENCY NAME**.

|  |  |
| --- | --- |
| **Agency Name** | Click or tap here to enter text. |
| **Contact Person** | Click or tap here to enter text. |
| **Phone number** | Click or tap here to enter text. |
| **Email address** | Click or tap here to enter text. |
| **County/ies your organization serves** | Click or tap here to enter text. |

**1) Does the geography of the proposed project cover:**

single county  multiple counties  RHAB  all 20 counties in Western PA CoC

**2) Specifically, which county/ies do you intend to cover?** Check all that apply:

Armstrong

Butler

Cameron

Clarion

Clearfield

Crawford

Elk

Fayette

Forest

Greene

Indiana

Jefferson

Lawrence

McKean

Mercer

Potter

Venango

Warren

Washington

Westmoreland

**3) Describe your organization’s experience providing housing – emergency-based, transitional**

**or permanent – to individuals and families fleeing domestic violence.**

* Response: Click or tap here to enter text.

**4) Does your organization have experience (either currently or previously) operating projects**

**funded through homeless assistance grants – ESG or CoC?**  Yes  No

* If yes, please describe: Click or tap here to enter text.

**5) Describe the need for a DV Rapid Re-Housing project within the proposed geographic area.**

**Within your response, please include: the # of Households currently served per year, the #**

**of Households that left any housing project (safe home, transitional, or permanent) to**

**stable housing, and the # of Households you plan to serve through this project.**

* Response: Click or tap here to enter text.

**6) Do individuals and families receiving services from your organization have access to Rapid**

**Re-Housing assistance, either through your organization, a community partner,**

**Coordinated Entry, other?**  Yes  No

* If yes, how are these services currently accessed: Click or tap here to enter text.
* If no, why not: Click or tap here to enter text.

**7) What is your current relationship with the Western PA CoC? Please check any of the**

**following ways you participate in the CoC:**

Operate a Domestic Violence Assessment Center

Refer clients you serve to the CoC’s Coordinated Entry System

Attend SW RHAB or NW provider meetings

Attend CoC meetings (twice per year)

Participate on a Committee/Sub-Committee. Which: Click or tap here to enter text.

Participate in the planning of the annual point-in-time count

Provide data for the annual point-in-time count

Other. Please describe: Click or tap here to enter text.

**8) Describe the project you want funded. Include a project description and capacity to**

**implement in your service area. Include information about the expected program**

**participant to staff ratio, your agencies ability to work with landlords to house program**

**participants in the community, and your agencies ability to perform required activities**

**such as:**

* **determination and documentation of client eligibility;**
* **administration of rental assistance, which includes processing rent checks and conducting inspections;**
* **documentation of costs billed to the grant;**
* **documentation of in-kind match provided;**
* **data entry into the HMIS comparable database;**
* **and tenancy supports to ensure client is able to maintain housing.**

**Note: Technical assistance from PCADV is available regarding performance of required activities and other program development. Please identify if this assistance is needed and know that lack of current implementation does not disqualify your organization.**

* Response: Click or tap here to enter text.

**9) How will your organization maximize client choice for and autonomy regarding housing**

**and services while ensuring safety and confidentially? If you are working with a**

**community partner, please include the partner organization’s role as well.**

* Response: Click or tap here to enter text.

**10) Describe your organization’s philosophy or approach to case management services and**

**how your organization has or will implement a DV Housing First philosophy, which**

**includes providing trauma-informed, victim-centered and culturally competent services.**

**Please reference any policies, training, relevant experience, etc.**

**Note: Technical assistance from PCADV is available regarding DVHF implantation. Please**

**identify if this assistance is needed, and know that lack of current implementation does**

**not disqualify your organization.**

* Response: Click or tap here to enter text.

**11) Does your organization have any unresolved monitoring or audit findings for**

**any HUD grants (including ESG) or PCADV grants?** Yes  No.

* If yes, please explain. Click or tap here to enter text.

**12) Proposed budget (enter budget information in the below templates)**

For a list and description of eligible cost, please refer to the Continuum of Care

regulations at 24 CFR Part 578, Subpart D – Program Components & Eligible Costs

**HOUSING COSTS:** Rental Assistance

**Complete the below chart for each County included in this project.**

**\* To find Fair Market Rents (FMR) in your community, please reference the attached chart, which reflects 2017 Fair Market Rent levels. This is what is used within HUD’s FY2018 New Project Application.**

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| **COUNTY:** Click or tap here to enter text. | | | | | | | |
| **Size of Units** | **# of Units** |  | **Fair Market Rent\*** |  | **12 months** |  | **Request** |
| SRO | # | x | enter $ | x | 12 | = | $ enter $ |
| 0 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 1 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 2 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 3 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 4 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 5 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| **TOTAL** | | | | | | **$** enter $ | |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **COUNTY 2 (if needed):** Click or tap here to enter text. | | | | | | | |
| **Size of Units** | **# of Units** |  | **Fair Market Rent\*** |  | **12 months** |  | **Request** |
| SRO | # | x | enter $ | x | 12 | = | $ enter $ |
| 0 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 1 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 2 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 3 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 4 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 5 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| **TOTAL** | | | | | | **$** enter $ | |

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| **COUNTY 3 (if needed):** Click or tap here to enter text. | | | | | | | |
| **Size of Units** | **# of Units** |  | **Fair Market Rent\*** |  | **12 months** |  | **Request** |
| SRO | # | x | enter $ | x | 12 | = | $ enter $ |
| 0 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 1 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 2 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 3 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 4 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 5 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| **TOTAL** | | | | | | **$** enter $ | |
| **COUNTY 4 (if needed):** Click or tap here to enter text. | | | | | | | |
| **Size of Units** | **# of Units** |  | **Fair Market Rent\*** |  | **12 months** |  | **Request** |
| SRO | # | x | enter $ | x | 12 | = | $ enter $ |
| 0 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 1 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 2 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 3 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 4 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 5 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| **TOTAL** | | | | | | **$** enter $ | |

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| **COUNTY 5 (if needed):** Click or tap here to enter text. | | | | | | | |
| **Size of Units** | **# of Units** |  | **Fair Market Rent\*** |  | **12 months** |  | **Request** |
| SRO | # | x | enter $ | x | 12 | = | $ enter $ |
| 0 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 1 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 2 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 3 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 4 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 5 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| **TOTAL** | | | | | | **$** enter $ | |

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| **COUNTY 6 (if needed):** Click or tap here to enter text. | | | | | | | |
| **Size of Units** | **# of Units** |  | **Fair Market Rent\*** |  | **12 months** |  | **Request** |
| SRO | # | x | enter $ | x | 12 | = | $ enter $ |
| 0 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 1 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 2 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 3 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 4 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 5 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| **TOTAL** | | | | | | **$** enter $ | |

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| **COUNTY 7 (if needed):** Click or tap here to enter text. | | | | | | | |
| **Size of Units** | **# of Units** |  | **Fair Market Rent\*** |  | **12 months** |  | **Request** |
| SRO | # | x | enter $ | x | 12 | = | $ enter $ |
| 0 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 1 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 2 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 3 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 4 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 5 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| **TOTAL** | | | | | | **$** enter $ | |
| **COUNTY 8 (if needed):** Click or tap here to enter text. | | | | | | | |
| **Size of Units** | **# of Units** |  | **Fair Market Rent\*** |  | **12 months** |  | **Request** |
| SRO | # | x | enter $ | x | 12 | = | $ enter $ |
| 0 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 1 Bedroom | # | x | enter $ | x | 12 | = | $ enter $ |
| 2 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 3 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 4 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| 5 Bedrooms | # | x | enter $ | x | 12 | = | $ enter $ |
| **TOTAL** | | | | | | **$** enter $ | |

**SUPPORTIVE SERVICES COSTS**

Please review 24 CFR § 578.53 Supportive services, for a description of eligible supportive service costs.

|  |  |  |
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| **PROGRAM COMPONENT** | **REQUESTED BUDGET** | **DESCRIPTION OF USE** |
| Annual Assessment of Service Needs | $ enter $ | Click or tap here to enter text. |
| Assistance with moving costs | $ enter $ | Click or tap here to enter text. |
| Case management | $ enter $ | Click or tap here to enter text. |
| Housing search and counseling services | $ enter $ | Click or tap here to enter text. |
| Outreach services | $ enter $ | Click or tap here to enter text. |
| Transportation | $ enter $ | Click or tap here to enter text. |
| Utility deposits | $ enter $ | Click or tap here to enter text. |
| Direct provision of services | $ enter $ | Click or tap here to enter text. |
| \*\*Child care | $ enter $ | Click or tap here to enter text. |
| \*\*Education services | $ enter $ | Click or tap here to enter text. |
| \*\*Employment assistance and job training | $ enter $ | Click or tap here to enter text. |
| \*\*Food | $ enter $ | Click or tap here to enter text. |
| \*\*Legal services | $ enter $ | Click or tap here to enter text. |
| \*\*Life skills training | $ enter $ | Click or tap here to enter text. |
| \*\*Mental health services | $ enter $ | Click or tap here to enter text. |
| \*\*Outpatient health services | $ enter $ | Click or tap here to enter text. |
| \*\*Substance abuse treatment services | $ enter $ | Click or tap here to enter text. |
| **Supportive Services Total** | **$ enter $** | |

\*\*If supportive service dollars are requested for child care, education services, employment assistance and job training, food, legal services, life skills training, outpatient health services, or substance abuse treatment services, please indicate why these services cannot be leveraged. If leveraged through a MOU, these services can count towards your required match commitment. Click or tap here to enter text.

**HMIS COSTS -** If your organization has not yet added the HMIS Program enhancements to your ETO site, this cost can be included under the HMIS Budget Line Item.

**Requested HMIS funding:** $ enter $

**ADMINISTRATIVE COSTS -** Please review 24 CFR § 578.59 for a description of eligible administrative costs.

**Requested Administrative funding:** (cannot exceed 5% of total grant)$ enter $

**MATCH - A match of 25% is required. Match can be in-kind or cash.**

**Please indicate your anticipated amount and source(s) of matching funds:** Click or tap here to enter text.

**13) Please indicate which of the following requirements you commit to follow:**

Use a Housing First approach

Comply with all CoC policies and HUD regulations and notices. This includes

compliance with Fair Housing; Prohibition against involuntary family separation;

designate a staff person to ensure children are engaged with educational

programming (for projects that serve families); HUD’s Equal Access to Housing Rule

and Equal Access in Accordance with Gender Identity Final Rule; and any other

terms and conditions within the NOFA.

Participate in the Western PA Coordinated Entry System

Follow the CoC’s written standards for providing assistance, once completed

Enter data into HMIS comparable database

Participate in and attend meetings of the RHAB and CoC

**Name/ Signature and Title of Responsible Party:** Click or tap here to enter text.

**Western PA CoC: Final FY2017 Fair Market Rent (FMR)**

(2017 FMR is to be used within the FY2018 New Project Application)

|  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  | |  | |  | |  | |
| **Locality Name** | **SRO** | **Efficiency/**  **0 bedroom** | | **One-Bedroom** | | **Two-Bedroom** | | **Three-Bedroom** | | **Four-Bedroom** |
| [Armstrong County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4200599999&year=2017&selection_type=county&fmrtype=Final) | $366 | $488 | | $527 | | $681 | | $870 | | $939 |
| [Butler County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4201999999&year=2017&selection_type=county&fmrtype=Final) | $425 | $566 | | $657 | | $822 | | $1,028 | | $1,133 |
| [Cameron County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4202399999&year=2017&selection_type=county&fmrtype=Final) | $388 | $517 | | $590 | | $681 | | $932 | | $1,141 |
| [Clarion County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4203199999&year=2017&selection_type=county&fmrtype=Final) | $388 | $517 | | $590 | | $681 | | $852 | | $939 |
| [Clearfield County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4203399999&year=2017&selection_type=county&fmrtype=Final) | $412 | $549 | | $665 | | $796 | | $1,063 | | $1,182 |
| [Crawford County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4203999999&year=2017&selection_type=county&fmrtype=Final) | $435 | $580 | | $607 | | $760 | | $951 | | $1,063 |
| [Elk County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4204799999&year=2017&selection_type=county&fmrtype=Final) | $382 | $509 | | $512 | | $681 | | $852 | | $939 |
| [Fayette County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4205199999&year=2017&selection_type=county&fmrtype=Final) | $425 | $566 | | $657 | | $822 | | $1,028 | | $1,133 |
| [Forest County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4205399999&year=2017&selection_type=county&fmrtype=Final) | $403 | $537 | | $541 | | $719 | | $900 | | $1,267 |
| [Greene County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4205999999&year=2017&selection_type=county&fmrtype=Final) | $422 | $563 | | $576 | | $682 | | $854 | | $940 |
| [Indiana County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4206399999&year=2017&selection_type=county&fmrtype=Final) | $450 | $600 | | $629 | | $726 | | $913 | | $1,001 |
| [Jefferson County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4206599999&year=2017&selection_type=county&fmrtype=Final) | $407 | $543 | | $546 | | $681 | | $859 | | $939 |
| [Lawrence County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4207399999&year=2017&selection_type=county&fmrtype=Final) | $335 | $447 | | $544 | | $701 | | $898 | | $966 |
| [McKean County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4208399999&year=2017&selection_type=county&fmrtype=Final) | $329 | $439 | | $541 | | $692 | | $866 | | $954 |
| [Mercer County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4208599999&year=2017&selection_type=county&fmrtype=Final) | $386 | $514 | | $546 | | $713 | | $892 | | $1,014 |
| [Potter County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4210599999&year=2017&selection_type=county&fmrtype=Final) | $388 | $517 | | $576 | | $681 | | $852 | | $1,063 |
| [Venango County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4212199999&year=2017&selection_type=county&fmrtype=Final) | $401 | $535 | | $569 | | $681 | | $852 | | $977 |
| [Warren County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4212399999&year=2017&selection_type=county&fmrtype=Final) | $419 | $558 | | $586 | | $681 | | $903 | | $951 |
| [Washington County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4212599999&year=2017&selection_type=county&fmrtype=Final) | $425 | $566 | | $657 | | $822 | | $1,028 | | $1,133 |
| [Westmoreland County](https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn?fips=4212999999&year=2017&selection_type=county&fmrtype=Final) | $425 | $566 | | $657 | | $822 | | $1,028 | | $1,133 |