

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 2018 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 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 2018 CoC Program NOFA.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2018 CoC Program NOFA, including the General Section Technical Correction, and all requirements and criteria met.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with the instructions found on each individual screen
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps.
- 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 2018 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: 08/29/2018

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: Mid Florida Homeless Coalition, Inc.

b. Employer/Taxpayer Identification Number (EIN/TIN): 59-3800140

c. Organizational DUNS:	064486280	PLUS 4	
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d. Address

Street 1: 104 E Dampier Street

Street 2:

City: Inverness

County: Citrus

State: Florida

Country: United States

Zip / Postal Code: 34450-4242

e. Organizational Unit (optional)

Department Name:

Division Name:

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

Prefix: Mr.

First Name: Bruce

Middle Name:

Last Name: Gimbel

Suffix:

Title: Business Administrator

Organizational Affiliation: Mid Florida Homeless Coalition, Inc.

Telephone Number: (352) 860-2308

Extension:

Fax Number: (352) 600-3374

Email: mfhc11@gmail.com

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

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-6200-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): Florida
(for multiple selections hold CTRL+Key)

15. Descriptive Title of Applicant's Project: 2018 FL520 Planning Grant

16. Congressional District(s):

a. Applicant: FL-005, FL-011, FL-006

b. Project: FL-005, FL-011, FL-006

(for multiple selections hold CTRL+Key)

17. Proposed Project

a. Start Date: 11/01/2019

b. End Date: 10/31/2019

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: Mrs.

First Name: Barbara

Middle Name:

Last Name: Wheeler

Suffix:

Title: Executive Director

Telephone Number: (352) 860-2308
(Format: 123-456-7890)

Fax Number: (352) 600-3374
(Format: 123-456-7890)

Email: mfhc01@gmail.com

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

Date Signed: 08/29/2018

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - Form 2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2510-0011 (exp.11/30/2018)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Mid Florida Homeless Coalition, Inc.

Prefix: Mrs.

First Name: Barbara

Middle Name:

Last Name: Wheeler

Suffix:

Title: Executive Director

Organizational Affiliation: Mid Florida Homeless Coalition, Inc.

Telephone Number: (352) 860-2308

Extension:

Email: mfhc01@gmail.com

City: Inverness

County: Citrus

State: Florida

Country: United States

Zip/Postal Code: 34450-4242

2. Employer ID Number (EIN): 59-3800140

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received: \$34,244

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, city and state) of the project or activity: 2018 FL520 Planning Grant 104 E Dampier Street Inverness Florida

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. No

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 this information is true and complete.

I AGREE:

Name / Title of Authorized Official: Barbara Wheeler, Executive Director

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

Date Signed: 08/01/2018

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Mid Florida Homeless Coalition, Inc.

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

X

accurate.

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: Mrs.

First Name: Barbara

Middle Name

Last Name: Wheeler

Suffix:

Title: Executive Director

Telephone Number: (352) 860-2308
(Format: 123-456-7890)

Fax Number: (352) 600-3374
(Format: 123-456-7890)

Email: mfhc01@gmail.com

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

Date Signed: 08/29/2018

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: Mid Florida Homeless Coalition, Inc.

Name / Title of Authorized Official: Barbara Wheeler, Executive Director

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

Date Signed: 08/29/2018

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: Mid Florida Homeless Coalition, Inc.

Street 1: 104 E Dampier Street

Street 2:

City: Inverness

County: Citrus

State: Florida

Country: United States

Zip / Postal Code: 34450-4242

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: Mrs.

First Name: Barbara

Middle Name:

Last Name: Wheeler

Suffix:

Title: Executive Director

Telephone Number: (352) 860-2308
(Format: 123-456-7890)

Fax Number: (352) 600-3374
(Format: 123-456-7890)

Email: mfhc01@gmail.com

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

Date Signed: 08/29/2018

2A. Project Detail

1a. CoC Number and Name: FL-520 - Citrus, Hernando, Lake, Sumter Counties CoC

1b. Collaborative Applicant Name: Mid Florida Homeless Coalition, Inc.

2. Project Name: 2018 FL520 Planning Grant

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 CoC is aware of its geographical boundaries, and is not requesting funds for these tasks. Funds are being requested for all other areas in the belief that this will allow the CoC to continue to build on the job of ending homelessness. The plan is to use these funds for Coordination Activities, Project Evaluation, Project Monitoring Activities, Participation in the Consolidated Plan, CoC Application Activities, HUD Compliance Activities. Funds will be used for the Coordination Activities with the three Veteran Administration Medical offices, three mental health providers, four County Health Department offices, County jails, and County Commission offices, multiple medical health providers, as well as many other small providers throughout the four rather rural communities in this CoC. In order to ensure that HUD CoC projects are being operated in a manner that meets HUD requirements and meets the needs of those to be served, more and more time is needed to provide technical assistance and training to these providers especially when there is provider staff turnover. Thus, funding will be requested for the evaluation, monitoring, and compliance activities. The need to keep organizations involved in the planning process continues to be challenging between staff turnover and different organizations operating programs such as Health Families, Head Start, etc. We also propose to spend more time learning about best practices and programs that are successful throughout the United States, determining how to implement some of these strategies in some or all of the counties within our CoC.

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

All of these activities are currently taking place at least at a minimal level, and with previous Planning Funds we have been improving or expanding these activities. These funds will allow current activities to continue throughout the grant year as needed. Meetings will continue to be held to evaluate the progress of current programs, access the needs for new programs, continue to monitor and develop tasks within the plan to meet current and future needs. Monitoring and technical assistance will be increased especially for those programs that are not meeting the HUD and CoC goals. A timeline of activities will be built into the CoC plan. This plan is the cornerstone of the Governing Board and CoC to monitor the schedule, and ensure that the tasks are on target and adjust accordingly.

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

Since none of the counties in this CoC are entitlement communities for ESG funding, the HUD CoC Collaborative Applicant applies for Balance of State

funding through the Florida Office on Homelessness. The contract with the State of Florida requires the monitoring of these programs beyond the data quality and performance. With less than five percent of the ESG Administrative dollars being given to the HUD CoC Collaborative Applicant, the Planning Funds allow us to do at least annual reviews of the program providers, as well as needed technical assistance throughout the year. These funds will be used to perform at least Annual Monitoring of HUD CoC projects along with technical assistance as needed. In addition, bi-monthly meetings of the Performance Committee are held to review spending patterns, outcomes, and key indicators as found in the APR or CAPER. Bi-monthly meetings of the Coordinated Access Committee are also held to review how the process is working, challenges, recommendations for changes, as well as the outcomes of the participants being referred for service.

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

As indicated above, we are currently performing these at least at a minimal level, and we will continue advocating for the State of Florida to provide funding to continue planning activities beyond the expiration of HUD financial assistance. The Governing Board is involved in the work undertaken by this Planning Grant, and along with the Committees that have been developed, the work of planning and implementing strategies will be continued. Part of the plan is to get more funders involved in the leadership of the CoC.

3A. Governance and Operations

1. How often does the CoC conduct meetings of the full CoC membership? Bi-Monthly

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
Performance Committee	This committee is to review reports, grant monitoring documents, and score cards, ask questions, and make recommendations on how providers can be assisted in meeting the goals of their programs funded by Federal or State homeless dollars. The committee is to make reallocation recommendations to the Governing Board as needed. The committee is to keep the Governing Board and CoC updated on status of grants All organizations receiving HUD CoC and/or ESG funds or other funds through the Collaborative Applicant are invited to participate.	Bi-Monthly	Catholic Charities DOSP, Dawn Center, LifeStream Behavioral Centers, The Refuge at Jumper Creek, United Way of Citrus County, Endeavors, Hernando County BOCC, Lutheran Health Systems, Mid Florida Homeless Coalition
Coordinated Access Committee	The committee's role is the oversight of the development of the Coordinated Intake/Entry via a Centralized process throughout the CoC. This has included the determination of the model to use, the Centralized approach, the assessment tool, the advertising approach, and the access by participants. The role also includes input from organizations throughout the CoC of the ongoing process; e.g., concerns, recommendations, etc. The committee is responsible for developing policies to be presented to the CoC for approval.	Bi-Monthly	Catholic Charities DOSP, Dawn Center, Daystar Life Center, Lake Community Action Agency, LifeStream Behavioral Centers, The Refuge, United Way of Citrus County, Citrus County BOCC, FL Hospital/Waterman, Forward Paths, Hernando County BOCC, MFHC
Veterans Committee	This committee's sole focus is to end veterans' homelessness in our CoC. Once homeless veterans are identified, it is the responsibility of the committee to maintain the Master List of homeless veterans, ensure that housing is offered, and if desired, to coordinate with partners to move the veteran into permanent housing. If permanent housing is not desired, the committee must ensure that the offer of housing continues on a regular basis, and that these offers are recorded on the Master List.	Monthly	OrlandoVA Med Center, Honor Center Gainesville & JamesAHaley Hospital/Clinics Tampa, CareerSourcePasco/Hernando, Citrus, Levy, Marion, Boley, United Way of CitrusCnty, LifeStream, Endeavors, MFHC, HernandoCnty VetSvc, ASPIRE, HSNCentral FL, LakeCntyVetSvc

<p>Planning Committee</p>	<p>This committee is to stay apprised of the homeless environment throughout the CoC, and make recommendation to the CoC for appropriate changes to the CoC Strategic Plan. This includes the progress, challenges, delays to current programs or projects, as well as current trends, changes, and newly identified gaps in the communities. The committee will also review and discuss best practices and how they can be integrated into the local plan, encourage organizations to discuss creative concepts, and reach out to other CoC Lead Agencies to learn about projects/programs that have been successful.</p>	<p>Quarterly</p>	<p>Dawn Center, The Refuge at Jumper Creek, Lake Community Action Agency, Florida Hospital Waterman, Habitat for Humanity of Citrus County, Hernando County BOCC, Lutheran Health Systems, Sanctuary Mission, Sumter Sunshine Community Foundation, MFHC</p>
<p>CoC Stakeholders</p>	<p>The CoC Stakeholder Committee is the main committee of this CoC. Its role is making CoC decisions based on input from the Governing Board and standing committees. The Stakeholders are to meet at least bi-monthly to receive reports from Point in Time, Planning, Coordinated Intake, Performance Measures, Veteran's and Affordable Housing Committees. The Governing Board and the committees bring policy recommendations to the table, and the CoC vote on the proposed policies, approve funding priorities and the Strategic Plan.</p>	<p>Bi-Monthly</p>	<p>CASA CathChr DawnCt Daystar Lake&MidFLComm LifeStream Refuge UW, BeFreeLake, BlessedSac, Citrus Hernando & Lake BOCC, LegalSvcMidFL, FamEnd, FL DeptHealth, FL HospitalWaterman, ForwardPaths, Habitat, Jericho LuthHealthSys PHP Sanctuary SumterSun MFHC</p>

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:	\$8,561
Total Value of In-Kind Commitments:	\$0
Total Value of All Commitments:	\$8,561

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	State of Florida	07/01/2018	\$8,561

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: State of Florida
(Be as specific as possible and include the office or grant program as applicable)

5. Date of Written Commitment: 07/01/2018

6. Value of Written Commitment: \$8,561

4B. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 30, 2020? Yes

2. Does this project propose to allocate funds according to an indirect cost 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	217 hours to meet with organizations in four counties to discuss the current coordination efforts, identify weak areas, determine changes to be made, document distribute information.	\$5,624
2. Project Evaluation	74 hours a year for the evaluation of HUD CoC projects and at least six ESG projects. CoC Lead Agency applies for Balance of State funding which includes creating an RFP for member organizations to complete, educating organizations about RFP, working with Committee to review and score, and write ESG grant application.	\$1,915
3. Project Monitoring Activities	288 hours to travel throughout the four counties and meet with ESG & CoC funded organizations, review files to determine if CoC policies are being met and appropriate documents are being collected and maintained, and discuss issues and recommendations.	\$7,453
4. Participation in the Consolidated Plan	36 hours to meet with CoC Planning Committee and Governing Board to review plan, determine progress or obstacles, discuss options, present ideas, document and distribute policies, procedures, and updated plan.	\$932
5. CoC Application Activities	240 hours to meet with Governing Board, CoC Stakeholders to review NOFA requirements and application, determine priorities and schedule, as well as complete CoC application. Distribute information to CoC Stakeholders regarding NOFA, deadlines, and educate all interested organizations about potential projects.	\$6,210
6. Determining Geographical Area to Be Served by the CoC		\$0
7. Developing a CoC System	180 hours to meet with Governing Board and Committees to discuss how the system is progressing, the gaps in services, the development of policies and procedures, as well as the implementation of the policies and procedures. This will also include meeting with new Stakeholders to identify how they can become part of the system.	\$4,658
8. HUD Compliance Activities	288 hours to work with Stakeholders to educate organizations on meeting HUD requirements; e.g., the point-in-time count, housing inventory count, coordinated intake, annual homeless assessment report	\$7,452
Total Costs Requested		\$34,244
Cash Match		\$8,561
In-Kind Match		\$0
Total Match		\$8,561
Total Budget		\$42,805

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		
2. Other Attachment(s)	No		

Attachment Details

Document Description:

Attachment Details

Document Description:

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: Barbara Wheeler

Date: 08/29/2018

Title: Executive Director

Applicant Organization: Mid Florida Homeless Coalition, Inc.

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)	08/02/2018
1E. SF-424 Compliance	08/02/2018
1F. SF-424 Declaration	08/02/2018
1G. HUD 2880	08/02/2018
1H. HUD 50070	08/02/2018
1I. Cert. Lobbying	08/02/2018
1J. SF-LLL	08/02/2018
2A. Project Detail	08/02/2018

2B. Description	08/29/2018
3A. Governance and Operations	08/21/2018
3B. Committees	08/29/2018
4A. Match	08/29/2018
4B. Funding Request	08/21/2018
5A. Attachment(s)	No Input Required
5B. Certification	08/21/2018