

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 2017 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 2017 CoC Program NOFA.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2017 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 2017 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: 08/24/2017

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: City of Madison

b. Employer/Taxpayer Identification Number (EIN/TIN): 39-6005507

c. Organizational DUNS:	076147909	PLUS 4	
--------------------------------	-----------	--------	--

d. Address

Street 1: 215 Martin Luther King Jr. Blvd

Street 2: Rm 225

City: Madison

County: Dane

State: Wisconsin

Country: United States

Zip / Postal Code: 53703

e. Organizational Unit (optional)

Department Name:

Division Name: Community Development

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

Prefix: Mr.

First Name: James

Middle Name:

Last Name: O'Keefe

Suffix:

Title: CD Division Director

Organizational Affiliation: City of Madison

Telephone Number: (608) 266-6520

Extension:

Fax Number: (608) 261-9661

Email: jokeefe@cityofmadison.com

1C. SF-424 Application Details

9. Type of Applicant: C. City or Township 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-6100-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): Wisconsin
(for multiple selections hold CTRL+Key)

15. Descriptive Title of Applicant's Project: WI-503 CoC Planning Application FY2017

16. Congressional District(s):

a. Applicant: WI-002
b. Project: WI-002
(for multiple selections hold CTRL+Key)

17. Proposed Project

a. Start Date: 03/10/2019
b. End Date: 03/09/2020

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: Ms.

First Name: Torrie

Middle Name:

Last Name: Kopp Mueller

Suffix:

Title: CoC Coordinator

Telephone Number: (608) 266-6254
(Format: 123-456-7890)

Fax Number: (608) 261-9661
(Format: 123-456-7890)

Email: tkoppmueller@cityofmadison.com

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

Date Signed: 08/24/2017

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: City of Madison

Prefix: Ms.

First Name: Torrie

Middle Name:

Last Name: Kopp Mueller

Suffix:

Title: CoC Coordinator

Organizational Affiliation: City of Madison

Telephone Number: (608) 266-6254

Extension:

Email: tkoppmueller@cityofmadison.com

City: Madison

County: Dane

State: Wisconsin

Country: United States

Zip/Postal Code: 53703

2. Employer ID Number (EIN): 39-6005507

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received: \$91,940

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, city and state) of the project or activity: WI-503 CoC Planning Application FY2017 215 Martin Luther King Jr. Blvd Madison Wisconsin

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
HUD	HOME/CDBG/ESG	\$2,886,653.00	Housing, neighborhood, community development

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 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	Financial Interest in Project/Activity (\$)	Financial Interest in Project/Activity (%)
N/A	N/A	N/A	\$0.00	0%

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: Torrie Kopp Mueller, CoC Coordinator

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

Date Signed: 08/17/2017

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: City of Madison

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: Ms.

First Name: Torrie

Middle Name

Last Name: Kopp Mueller

Suffix:

Title: CoC Coordinator

Telephone Number: (608) 266-6254
(Format: 123-456-7890)

Fax Number: (608) 261-9661
(Format: 123-456-7890)

Email: tkoppmueller@cityofmadison.com

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

Date Signed: 08/24/2017

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: City of Madison

Name / Title of Authorized Official: Torrie Kopp Mueller, CoC Coordinator

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

Date Signed: 08/24/2017

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: City of Madison
Street 1: 215 Martin Luther King Jr. Blvd
Street 2: Rm 225
City: Madison
County: Dane
State: Wisconsin
Country: United States
Zip / Postal Code: 53703

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.

Authorized Representative

Prefix: Ms.

First Name: Torrie

Middle Name:

Last Name: Kopp Mueller

Suffix:

Title: CoC Coordinator

Telephone Number: (608) 266-6254
(Format: 123-456-7890)

Fax Number: (608) 261-9661
(Format: 123-456-7890)

Email: tkoppmueller@cityofmadison.com

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

Date Signed: 08/24/2017

2A. Project Detail

1a. CoC Number and Name: WI-503 - Madison/Dane County CoC
1b. Collaborative Applicant Name: City of Madison

2. Project Name: WI-503 CoC Planning Application FY2017

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.

With proceeds from this planning grant the City will continue to employ 1 FTE who will undertake the following activities:

- 1) Lead a community-wide process coordinating the efforts of homeless service providers and related organizations to achieve the goals of preventing and ending homelessness.
- 2) Coordinate the CoC Homeless Assistance Grant Application process by working with agencies submitting renewals, agencies reallocating funds for new permanent housing projects, and recruiting new agencies to fill identified CoC gaps. Staff will work closely with various CoC committees to facilitate the CoC application process and ensure that the process is timely, fair and open to new participants.
- 3) Develop a systematic approach to conducting evaluations of CoC-funded programs and coordinate with City staff responsible for evaluating ESG-funded programs. Work with CoC-funded agencies to provide needed support and technical assistance as part of a focused effort to implement a crisis response, prioritized, homeless system. The City will contract for additional expertise as needed to provide some of these services.
- 4) Solicit and coordinate input from the CoC network for use in the City of Madison and Dane County Consolidated Plan processes. Provide support to City and County policy makers and elected officials in developing and monitoring community-wide objectives and strategies as part of the Community Plan to Prevent and End Homelessness in Dane County. Staff will build on efforts currently underway to ensure compatibility between the CoC's and local jurisdictions' plans.
- 5) Contract for technical assistance services and provide access to national trainings and conferences on best practices for both the CoC Coordinator and agency staff.

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

The CoC Coordinator (1 FTE) position was filled on February 20, 2017. The City received planning grants in the last two NOFA processes to support this position.

This employee is hired as a limited term employee with the hope that the position can be sustained with future HUD planning dollars. The current grant request is

intended to provide third year funding for the CoC Coordinator. The CoC Coordinator works closely with the Dane County Continuum of Care (CoC) and its Board of Directors, playing a lead role in helping to coordinate the efforts of homeless service providers, funders, policy makers and related organizations in order to achieve the goals of preventing and ending homelessness. (45% of FTE - General Coordination) The CoC Coordinator plays a lead role in

coordinating the development of grant applications, on behalf of the CoC, for available federal, state and other funding (25% of FTE - CoC Application Activities). The Coordinator is developing a systematic approach to conducting program evaluations for activities undertaken by CoC agencies with federal and/or state financial support, and coordinating with City staff responsible for evaluating activities supported with City-administered federal dollars. Monitoring will begin after completion of this NOFA process. They provide needed technical assistance to CoC agencies where possible and, when necessary, arrange for outside expertise capable of providing such assistance (25% of FTE - Project Evaluation). The Coordinator will solicit and coordinates input from the CoC network for use in the City of Madison and Dane County Consolidated Plan processes. They provide support to City and County policy makers and elected officials in developing and monitoring community-wide objectives and strategies as part of the Community Plan to Prevent and End Homelessness in Dane County. (5% of FTE - Participation in the Consolidated Plan). The position is placed in the City's Community Development Division, with daily supervision provided by the CDBG Supervisor. A Memorandum of Understanding between the City of Madison and the CoC Board of Director's governs the management of the Coordinator's work priorities. Monthly reports will be made to the CoC Board of Directors in an effort to assure effective and timely completion of work.

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

Program evaluation is currently handled through: 1) a spreadsheet populated with HMIS data on project performance which is reviewed quarterly by the Data and Performance Review Committees and 2) scheduled monitoring visits by the HUD Field Office. The CoC Coordinator is developing a process for evaluating CoC-funded and ESG-funded programs that will provide an additional and important layer of coverage that goes beyond compliance with regulations, ensuring evaluation of the way homeless persons are accessing programs, identifying those who might otherwise be screened out and ensuring compliance with Written Standards. The fact that the CoC Coordinator is located in the offices of the City's Community Development Division, an ESG recipient, significantly increases opportunities for effective coordination with and feedback to City staff involved in homeless-related efforts. It is expected that results will include improved performance outcomes and enhanced consistency between the jurisdiction's Consolidated Plan and the various efforts of the CoC.

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

Continuation of the CoC Coordinator position is a high priority for the City as well as local homeless service and housing providers. Support to the CoC from HUD in the form of planning funds needed to undertake the many tasks required by the HEARTH Act are key to our ability to maintain this position. If HUD funds are not available for this work, the City will collaborate with CoC organizations in an effort to identify and secure alternate sources of funding for

the position.

3A. Governance and Operations

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

Committee Name	Role of the Committee (max 750 characters)	Meeting Frequency	Name of Individuals and/or Organizations Represented
Performance Review	conduct peer reviews of CoC/ESG programs using HMIS data providing information to the Application Review Committee to inform their recommendations to the Board	Monthly	CACSCW, Porchlight, YWCA, Salvation Army, The Road Home, Tenant Resource Center, HMIS Lead, CoC Coordinator
Written Standards	Review end edit Written Standards that affect how CoC/ESG programs operate	Monthly	Madison, YWCA, Salvation Army, The Road Home, Tenant Resource Center, Porchlight, CACSCW, HMIS Lead, Madison, CoC Coordinator
Point In Time Committee	Coordinate efforts to implement the semi-annual sheltered and unsheltered counts; advise the Board on issues related to HUD requirements for PIT counts, provide results to CoC	Bi-Monthly	Madison, Briarpatch, Tellurian, VAMC, HMIS Lead, Porchlight, Operation Welcome Home, Hmls Advocates, Tenant Resource Center
Coordinated Entry Committee	Advise Board on issues related to planning, implementing & evaluating CES, identify & document gaps in system, implement HUD requirements for CE	Monthly	Madison, CoC Coordinator, Dane County, YWCA, Salvation Army, Tenant Resource Center, CACSCW, Porchlight, Tellurian, Operation Welcome Home, United Way, Hmls Advocates, DAIS
HUD Homeless Assistance Application Committee	Remain informed on HUD priorities, Know eligibility and requirements for CoC and ESG funds, implement strategies outlined in submitted applications, review application scores and take action for improvement	Monthly	CoC Coordinator, Madison, Dane County, United Way, Tellurian, Porchlight, CACSCW, Tenant Resource Center, YWCA, Salvation Army, The Road Home, HII, Legal Action, Briarpatch

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:	\$0
Total Value of In-Kind Commitments:	\$22,985
Total Value of All Commitments:	\$22,985

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

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Match	Type	Source	Contributor	Date of Commitment	Value of Commitments
Yes	In-Kind	Government	City of Madison C...	08/17/2017	\$22,985

Sources of Match Details

- 1. Will this commitment be used towards Match?** Yes
- 2. Type of commitment:** In-Kind
- 3. Type of source:** Government
- 4. Name the source of the commitment:** City of Madison Community Development Division
(Be as specific as possible and include the office or grant program as applicable)
- 5. Date of Written Commitment:** 08/17/2017
- 6. Value of Written Commitment:** \$22,985

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

4B. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 30, 2019? 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	904 hrs/\$36.09 salary & benefits	\$32,625
2. Project Evaluation	503 hrs/\$36.09 salary & benefits	\$18,153
3. Project Monitoring Activities		
4. Participation in the Consolidated Plan	100 hrs/\$36.09 salary & benefits	\$3,609
5. CoC Application Activities	503 hrs/\$36.09 salary & benefits	\$18,153
6. Determining Geographical Area to Be Served by the CoC		
7. Developing a CoC System	Travel and Registration fees for national conferences/trainings for CoC Coordinator and CoC-fudned agencies, including NAEH, CSH, Midwest Harm Reduction, Pathways to Housing	\$12,182
8. HUD Compliance Activities	200 hrs/\$3609 salary & benefits	\$7,218
Total Costs Requested		\$91,940
Cash Match		\$0
In-Kind Match		\$22,985
Total Match		\$22,985
Total Budget		\$114,925

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:

5A. In-Kind MOU Attachment

Document Type	Required?	Document Description	Date Attached
In-Kind Match MOU	No	In Kind Match	08/24/2017

Attachment Details

Document Description: In Kind Match

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.

Additional for Rental Assistance Projects:

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

B. For non-Rental Assistance Projects Only.

20-Year Operation Rule.

For applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 20 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

1-Year Operation Rule.

For applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provided.

C. For Rental Assistance Only.

Supportive Services.

It will make available supportive services appropriate to the needs of the population served and equal in value to the aggregate amount of rental assistance funded by HUD for the full term of the rental assistance.

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: Torrie Kopp Mueller

Date: 08/24/2017

Title: CoC Coordinator

Applicant Organization: City of Madison

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).**

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)	08/17/2017
1E. SF-424 Compliance	08/02/2017
1F. SF-424 Declaration	08/17/2017
1G. HUD 2880	08/17/2017
1H. HUD 50070	08/02/2017
1I. Cert. Lobbying	08/02/2017
1J. SF-LLL	08/17/2017

2A. Project Detail	08/17/2017
2B. Description	08/17/2017
3A. Governance and Operations	08/17/2017
3B. Committees	08/17/2017
4A. Match	08/24/2017
4B. Funding Request	08/24/2017
5A. Attachment(s)	No Input Required
5A. In-Kind MOU Attachment	08/24/2017
5B. Certification	Please Complete



Department of Planning and Community & Economic Development

Community Development Division

Madison Municipal Building, Suite 225
215 Martin Luther King, Jr. Boulevard
P.O. Box 2627
Madison, Wisconsin 53701-2627
Phone: (608) 266-6520
Fax: (608) 261-9626
www.cityofmadison.com

**Child Care
Community Resources
Community Development Block Grant
Madison Senior Center**

August 17, 2017

To Whom It May Concern:

The City of Madison's Community Development Division is providing an in-kind contribution in the total amount of \$22,985, which represents a portion of a Community Development Specialist's salary and benefits. This staff person will be providing oversight of the CoC Coordinator.

The source of this match amount is federal CDBG funds, covering the period from 1/1/2017 through 12/31/2018. These funds are being used as match for the FY2017 Madison/Dane County WI-503 CoC Planning Application, for which the City of Madison, as Collaborative Agent on behalf of the Madison Homeless Services Consortium, is the Applicant.

Sincerely,

R. Hardy Garrison
Systems and Finance Coordinator

cc: Torrie Kopp Mueller
Linette Rhodes
Susan Morrison