Salt Lake County Continuum of Care

Application for Housing Renewal Projects without an APR

Annual Continuum of Care NOFO

END UTAH HOMELESSNESS
Salt Lake Valley

Applicant Organization:

Project Name:

Project Type:

Total Amount Requested:

What type of Renewal project are you applying for?

☐ Permanent Housing – Permanent Supportive Housing

☐ Permanent Housing – Rapid Re-housing

Budget

CoC Project Budget	HUD CoC Dollars	Match
Capital Costs		
Leasing		
Rental Assistance		
Supportive Services		
Operating Costs		
HMIS		
Administration		
Total		

Budget & Project Description Narrative

Capacity

1. **Has your agency had any audit or monitoring findings or concerns (fiscal or program) from funders or independent auditors within the past three years? If so, please describe.**
2. **Describe your agency's grant management system for complying with government grant requirements.**

3.	Describe your agency's involvement in the local homeless housing & services system and the Salt Lake Valley Coalition to End Homelessness OR your experience with the local low-income housing and services system

4.	Describe your agency's experience with effectively administering government funded housing programs for homeless persons. Please reference utilization rate, budget expenditure, and eligibility record keeping.

Need

5.	Provide a summary of activities carried out with this funding since awarded. If operating year has not yet started, provide a proposed summary of activities.

6.	What population will this project target (household composition, disabilities, location prior to entering program)?

7.	**How will this project utilize the Housing First model?**

8.	**Demonstrate community need using data from most recent HIC & PIT information**

9.	How will this program increase community performance on HUD system performance measures including promoting racial equity? Please be specific.

10.	What will be timeline for project implementation? When will it be running at full capacity?

11.	What is the plan to fully expend HUD dollars

12.	Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs.

13. **Describe how clients will be assisted to increase employment and/or income and to maximize their ability to live independently.**