Transitional Housing Program (THP) Round 7 and Housing Navigation and Maintenance Program (HNMP) Round 4

Joint Allocation Acceptance Resolution for Counties

BEFORE THE BOARD OF SUPERVISORS

COUNTY OF SANTA BARBARA, STATE OF CALIFORNIA

IN THE MATTER OF: ROUND 7 TRANSITIONAL HOUSING PROGRAM AND ROUND 4 OF THE HOUSING NAVIGATION AND MAINTENANCE PROGRAM RESOLUTION NUMBER: _____

THIS RESOLUTION AUTHORIZES AN APPLICATION FOR, AND ACCEPTANCE OF, THE COUNTY ALLOCATION AWARD UNDER ROUND 7 OF THE TRANSITIONAL HOUSING PROGRAM AND ROUND 4 OF THE HOUSING NAVIGATION AND MAINTENACE PROGRAM

WHEREAS, the State of California, Department of Housing and Community Development ("Department") issued an Allocation Acceptance Form (the "THP Allocation Acceptance Form"), dated August 19, 2025 under Round 7 of the Transitional Housing Program ("THP"), authorized by item 2240-102-0001 of section 2.00 of the Budget Act of 2025 (Chapter 4 of the Statutes of 2025) and Chapter 11.7 (commencing with Section 50807) of part 2 of Division 31 of the Health and Safety Code .
WHEREAS, the Department issued an Allocation Acceptance Form (the "HNMP Allocation Acceptance Form"), dated August 19, 2025 under Round 4 of the Housing Navigation and Maintenance Program ("HNMP") authorized by Item 2240-103-0001 of Section 2.00 of the Budget Act of 2025 (Chapter 4 of the Statutes of 2025) and Chapter 11.8 (commencing with Section 50811) of Part 2 of Division 31 of the Health and Safety Code .

The THP Allocation Acceptance Form and the HNMP Allocation Acceptance Form are collectively referred to as the "Allocation Acceptance Forms".

WHEREAS, the Allocation Acceptance Forms relate to the availability of the funds under the THP and HNMP Programs; and

WHEREAS, the County of Santa Barbara ("County") may be listed as an eligible applicant in the THP Allocation Acceptance Form, dated August 19, 2025, the County may also be listed as an eligible applicant in the HNMP Allocation Acceptance Form dated August 19, 2025.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Supervisors for the County

of Santa Barbara does determine and declare as follows:

SECTION 1. That County is hereby authorized and directed to apply for and accept County's allocation award, as detailed in the THP Allocation Acceptance Form, in the amount of $309,752 detailed and authorized in the THP Allocation Acceptance Form at the time this resolution is executed and authorized.

SECTION 2. That County hereby affirms that if THP funds remain available for allocation after the deadline for submitting a signed Allocation Acceptance Form, and if the County is eligible for an additional allocation from the remaining funds for the THP program, the County is hereby authorized and directed to accept this additional allocation of funds ("Additional THP Allocation") up to the amount authorized by Department but not to exceed $619,504.

SECTION 3. That County is hereby authorized and directed to apply for and accept County's allocation award in the amount of $144,905 as detailed in the HNMP Allocation Acceptance Form at the time this resolution is executed and authorized.

SECTION 4. That County hereby affirms that if HNMP funds remain available for allocation after the deadline for submitting a signed Allocation Acceptance Form, and if the County is eligible for an additional allocation from the remaining funds for the HNMP program, the County is hereby authorized and directed to accept this additional allocation of funds ("Additional HNMP Allocation") up to the amount authorized by Department but not to exceed $289,910.

SECTION 5. That Board of Supervisors authorizes and directs the Director or Assistant Director of the Department of Social Services, or his or her designee, is hereby authorized and directed to act on behalf of County in connection with the THP Allocation Award and any Additional THP Allocation, and to enter into, execute, and deliver any and all documents required or deemed necessary or appropriate to participate in the THP Program, including but not limited to a Standard Agreement, be awarded the THP Allocation Award, and any additional THP Allocation, and any amendments to such documents (collectively, the "THP Allocation Award Documents").

SECTION 6. That Board of Supervisors authorizes and directs the Director or Assistant Director of the Department of Social Services, or his or her designee, is hereby authorized and directed to act on behalf of County in connection with the HNMP Allocation Award and any Additional HNMP Allocation, and to enter into, execute, and deliver any and all documents required or deemed necessary or appropriate to participate in the HNMP Program, including but not limited to a Standard Agreement, be awarded the HNMP Allocation Award, and any additional HNMP Allocation, and any

amendments to such documents (collectively, the “HNMP Allocation Award Documents”).

SECTION 7. That County shall be subject to the terms and conditions that are specified in the THP and HNMP Allocation Award Documents, and that County will use the THP and HNMP Allocation Award funds, and any additional THP and HNMP Allocation funds, in accordance with the Allocation Acceptance Form, the THP and HNMP Allocation Award Documents, and any subsequent amendments or amendment thereto, as well as any and all other THP and HNMP requirements, or other applicable laws.

SECTION 8. That County affirms it has the discretion to accept any or all of the THP and HNMP program funds as detailed herein.

PASSED AND ADOPTED this _____ day of October, 2025, by the following vote:

AYES _____

NOES _____

ABSTENTIONS _____

ABSENT _____

By: _____
Chair, Board of Supervisors

ATTEST:
MONA MIYASATO, COUNTY EXECUTIVE OFFICER
CLERK OF THE BOARD

BY: _____
Deputy Clerk

APPROVED AS TO FORM:
RACHEL VAN MULLEM
COUNTY COUNSEL

BY: DocuSigned by: Paul Lee 561262F0B51A41B...
Deputy County Counsel

APPROVED AS TO FORM:
BETSY M. SCHAFFER, CPA
AUDITOR CONTROLLER

BY: Signed by: James E Munro 02BA147EF6A84DE... Deputy

STATE OF CALIFORNIA

County of Santa Barbara

I, Sheila de la Guerra, Deputy Clerk of the County of Santa Barbara, State of California, hereby certify the above and foregoing to be a full, true and correct copy of a resolution adopted by the County Board of Supervisors on this _____ day of October, 2025.

Sheila de la Guerra
Deputy Clerk of the County of Santa Barbara, State of California

By: _____

Sheila de la Guerra, Deputy Clerk
Clerk of the Board