California Emergency Solutions and Housing (CESH) Program

2018 Application



State of California Governor Edmund G. Brown Jr.

Alexis Podesta, Secretary
Business, Consumer Services and Housing Agency

Ben Metcalf, Director
Department of Housing and Community Development

NOFA Section, CESH Program
2020 West El Camino Avenue, Suite 650, Sacramento, CA 95833
CESH Program Email: CESH@hcd.ca.gov

Final Filing Date for November 2018 Award: 9/27/2018 at 5:00 p.m. Final Filing Date: 10/15/2018 at 5:00 p.m.

Overview - Applicant Information Rev. 8/1									
Instructions									
This application is subject to the California Emergency Solutions and Housing (CESH) program requirements of Health and Safety Code (HSC) Part 2 of Division 31 Chapter 2.8, commencing with §50490 and including §50490.1, 50490.2, 50490.3, 50490.4, and 50490.5, and the 2018 CESH Notice of Funding Availability (NOFA).									
A. Download and review the 2018 NOFA for the CESH Program and Section 4 of SB 850 (Chapter 48, Statutes of 2018)									
B. <u>Application Submittal:</u> Submit one original (hard copy) application with wet, original signatures in a 3-ring binder with pockets, and one CD or USB flash drive that includes a copy of the application with signatures with all files uploaded. Applicants are required to submit the Application Forms in this Excel Workbook as instructed on each form.									
C. Application forms for the CESH Program are available at https://www.hcd.ca.gov/grants-funding/active-funding/cesh.shtml									
D. All application forms from applicants that wish to recieve an award by November 5, 2018 must be postmarked or received no later than 5 p.m. Pacific Standard Time (PST) on September 27, 2018 as set forth in the NOFA Section I(B).									
			ber 15 2018 Application forms not submitted	hy the dead	dline will result in a denial	of			
E. All other application forms must be postmarked or received no later than 5 p.m. PST on October 15, 2018. Application forms not submitted by the deadline will result in a denial of funds to your CoC Service Area. AEs are responsible for ensuring that all required materials are submitted by the deadline as set forth in the NOFA Section I(B).									
General Application Requirements §50490.3									
File Name:	Administrative Entity (AE) Certification from CoC	Attach certification from the CoC documenting that the AE has been designated by the CoC to administer CESH funds per §50490(a) Attached and upload							
Applicant Type	rized Representative (Per Board Unit of general purpose local		Name County of Santa Barbara Housing and Co	mmunity [Development Division	Maria de la compania			
	E. Anapamu St., Second Floor	government.	City Santa Barbara	Ctata	ICA 1 1004	0.4			
Auth Rep Nam		Title Deputy Director	Authorized Rep. Email dlockhart@co.santa	State					
	Number (FEIN): 95-6002833	Title Deputy Director	Data Universal Numbering System (DUNS):			-568-3523			
Address 123	E. Anapamu St., Second Floor		City Santa Barbara	State		01			
	e Fiscal Representative (i.e., CFC), Accountant/Bookkeeper)	Jony Journal Darbura	Lotate	Zib 931				
Name	Ryder Bailey	Title CFO	Authorized Rep. Email rbailey@co.santa-ba	arbara.ca.u	Phone 805	-568-3526			
Contact Name	Steven Fung	Title Accountant	Contact Email sfung@co.santa-barbara		Contact Phone 805-568-				
Address 123	E. Anapamu St., Second Floor	STATE OF THE PROPERTY.	City Santa Barbara	State					
Continuum of	, , ,		1 - 1,9		Zipjoot				
CoC Service A	rea Santa Maria/Santa Barbara (County CoC		N. Const.					
CoC Name	CA-603 Santa Maria/Santa Barba	a CoC							
Address 123	E. Anapamu St., Second Floor		City Santa Barbara	State	CA Zip 931	01			
Rep Name	Kimberlee Albers	Title Homeless Asst. Prog. Manage							
	Miriam Moreno	Title Housing Program Specialst I	Contact Email mmoreno@co.santa-bart						
	E. Anapamu St., Second Floor		City Santa Barbara	State	CA Zin 931				
Application req	uests an allocation in order to carry	out one or more eligible activity within the CoC s	ervice area §50490.3(a)(1)? (See Estimated Bu	dget and C	Poals Worksheet)	Voc			
Applicant has p	prior experience administering the e	ligible activities described in the application or has	s partnered with one or more local governments	or other e	ntities with in the relevant	CoC			
sevice area tha	at have the necessary prior experien	nce to administer the requested funds §50490.3(a	a)(2)(A&B)? (See Estimated Budget and Goals)	Norksheet')	Yes			
Does CoC sen	≀ice area have a functioning CES a	nd HMIS that meet the applicable HUD requireme	ents, as set forth in the NOFA Section II(e)(3) pe	er 850490 3	3(a)(3)(A)?	Yes			
File Name:	HUD Coordinated Entry Process Self-Assessment	Attach HUD Coordinated Entry Process Self-Assessment documenting that CES meets at a minimum the required aspects of coordinated entry Attached and uploaded? Yes							
If self-assessm	nent is not attached, application doc	uments that a minimum of 20 percent of the alloc	ation to the CoC service area will be used to im	plement or	update its systems to cor	nply			
with the applica	Local Program or Project	(3)(3)(B)? (See Estimated Budget and Goals Work		200	Γ	100			
File Name: Local Program or Project Selection Process Documentation Attach documentation, if available, demonstrating that local program or project selection process anticipated to be used to allocate available funds to subrecipients qualified to carry out the eligible activities is consistent with §50490.3(a)(4) Attached and upload						ed? Yes			
If local progra		ocumentation not attached, describe how the	local program or project selection process	to allocate	available funds to sub-	rociniento io			
consistent wit	th §50490.3(a)(4):	and the second s	rocal program or project selection process	to anocate	avaliable fullus to subi	ecipients is			
§50490.3(a)(4) The application describes or provides documentation of the local program or project selection process anticipated to be used to allocate available funds to subrecipients qualified to									
carry out the eligible activities. In order to satisfy the requirements of this subdivision, the applicant's proposed program or project selection process shall avoid conflicts of interest in program or									
project selection and shall be easily accessible to the public.									
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and the first of									
Active Street									
		n the Continuum of Care Service Area §50490.3(I				No			
File Name:	Current Homelessness Plan	If yes, attach the most current plan addressing	actions to be taken within the Continuum of Ca	re service	Attached and uploade				
If not, funding r	equested to develop a homelessne	ss plan §50490.3(b)? (See Estimated Budget and	d Goals Worksheet)		· ·	Yes			
Other Documents									
File Name:	STD-204	Applicants that are not a govenrment agency r	nust submit a Payee Data Record (STD-204)		Attached and uploade	ed? Yes			
File Name:	Government TIN Form	Applicants that are a government agency must	t submit a Government TIN Form		Attached and uploade	ed? Yes			
File Name:	Resolution	Resolutions (Refer to Resolution Instructions a	ind Sample Resolution on CESH Program webs	ite)	Attached and uploade				
Certifications									
On behalf of the entity identified below, I certify that: The information, statements and attachments included in this application are, to the best of my knowledge and belief, true and correct and I possess the legal authority to submit this application on behalf of the entity identified in the signature block.									
METERS AND STATE				14 4 11 1	· 大大大大大大大	eller op 100			
Dinah Lockhart, Deputy Director, Housing and Community Development Division									
	Printed Name and Ti	tle of Signatory	Signati	ure		Date			
Entity name: County of Santa Barbara Housing and Community Development Div Phone Number: 805-568-3523									
Entity Address			City Santa Barbara	State	CA Zip 930	01			
			10.0,1		Zip 300				

Estimated Budget and Goals §50490.3(a)(5)						CoC Service Area Allocation requested §50490.2:					14,745				
Activity #1 Rental assistance, housing relocation & stabilization services to ensure housing affordability to individuals experiencing homelessness or who are at risk of homelessness.							Inc	Projected administrative costs §50490.2(b): \$45,73						45,737	
Activity #2 Operating subsidies in the form of 15-year capitalized operating reserves for new and existing affordable permanent housing units for homeless individuals and/or families. Activity #3 Flexible housing subsidy funds for local programs that establish or support the provision of rental subsidies in permanent housing to assist homeless individuals & families. Complete the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts to be used for the following chart by listing the anticipated estimated amounts															
Activity #4 Operating support for emergency housing interventions including but not limited to: navigation centers, street outreach, and shelter diversion.															
Activity #5 Inlaming activities Lightly formula activities recessary to maintain a comprehensive homeiess services and nousing derivery system, including coordinated Entry System (LES) data, and nomeiess warragement information System (LES) data, and not								ss in							
Activity	Astivity #5 a Dovelor or undate a CES, if the CoC does not have a cyclem in place that most the applicable ALI ID requirements, as set forth in Section II E 3 A of the NOEA									nsistent with					
Activity #6b Development of a plan addressing actions to be taken within the CoC service area if no such plan exists.															
Eligible Activities						Proj							Housing First §50490.4(d,e)		
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	Estimated amount for eligible activity	of unt			nele	r of homeless ved	Ith o	mele ne st int	Son:	sure	_	sure		-	AE or
	mor vity	% t			f ho	of ed ed	leng s hor into roje	r of home diting the r project i	r of perso to ss after program	mea	al (#	ant mea	al (#	<u>a</u>	subrecipient
	ed a acti	as a			serv	red	Average length spent as homel re entry into gram or project	or p or p	nn to nness ness	ther applicant Jentified erformance me	erical goal (#)	plica	erical goal (#) sr applicant tified	erical goal (#)	will administer activity
vity	mate ble	vity		If no velocent ourseless of least receive and velocent receives of least recomment	lumk	Num nelte	Avel spel re er	lumk ons ram ram	Number at return t amlessnes iting the poject	er ap tifiec	erica	ner app ntified forman	erica er ap tified	eric	consistent with
Activity	Estil	Activity as a % c Allocation amou requested	Describe Activity and prior AE experience administering Activity	If no relevant experience, describe activity and prior experience of local government or other entity in CoC service area that AE will partner with to administer activity	(A) Number of ho persons served	(B1) Num unshelte persons	(B2) Aver time sper before en program	(C) Number of hom persons exiting the program or project permanent housing	(D) N that hom exiti proj	Othe iden perf	E I	Othe iden perf #2	Numer Other identif	Wum #3	Housing First NOFA §II.G?
		-	The Co. of Santa Barbara, Div. of Housing and Com. Dev. (HCD) has administered CoC, ESG, and												
			HPRP funding for emergency housing interventions for 10 years. HCD is the lead agency, collaborative applicant, and HMIS lead agency for the local CoC. HCD conducts procurement processes, reviews							95% of recipients will					
Activity #4	\$365,898	40.0%	expense and match documentation, monitors program performance, and conducts program and fiscal monitoring. These funds will be used for homlessness prevention activities an identified community		40 at ris	sk 0	0	39	1	retain housing for 1 year after					Yes
			need. HCD will contract with experienced HP sub-recipients. HCD conducts training on issues related							assistance			-		
L 15			to administering rental assistance/housing stablization programs that cover housing quality standards and housing retention strategies.							ends.					
			The funding requested will be used to provide systems support for the Continuum of Care coordinated												
			by HCD through planning activities, Point in Time count consultant support, HMIS Staffing and HMIS User and License Fees. 1 FTE HMIS staffing to set up new programs. enhance user training and data												
Activity #5	\$493,110	53.9%	quality. User license fees for between up to 50 users will bring new providers into the system for more comprehensive coverage. PIT Count support and data- driven planning will facilitate accurate tracking							Reduction in PIT Count over		New agencies and projects in	15		Yes
, , , , , ,			of the homeless population and support system performance. CESH funds will be leveraged with other							5 year period.		HMIS.			
			Federal, State and local funds.							7-1-1					
			HCD will be completing a new Plan to End Homelessness during the grant term, and will conduct an												
			extensive community engagement processes involving a range of stakeholders countywide. HCD has experience in this area through the completion of a prior 10-Year Plan to Address Homelessness in									Minimum			
Activity	\$10,000	1.1%	2006, and through managing the HUD-required five-year Consolidated Plans and annual Action Plans.							Completed Comprehensive	1	number of community	4		Yes
#6b	\$10,000	,	HCD has contracted an experienced firm to draft plan and facilitate community support, Homebase (a HUD approved Technical Assistance porvider). CESH funds will be leveraged with other local funds.							Homeless Plan		engagement events			
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						1,14,75									= 7
Total	\$914 745									7 - 5					
i otal.	Total: \$914,745														

CoC Certification of AE Designation to Administer Funds

By signing below, the CoC Representative certifies CoC to administer 2018 CESH funds.	County of Santa Barbara	Community Services Dept., Housing & Community Dev.	is designated by the
	Certification of AE Designa	tion to Administer Funds	
Sylvia Barnard Printed Name of CcC Authorized Representative	Chair, Sta Maria/Sta Barbara CoC Title	CoC Authorized Representative Signature	8/28/2018 DATE