**CT YHDP APPLICATION (RFP2)**

* **The YHDP Team reserves the right not to review late or incomplete applications or projects that don’t meet eligibility requirements.**
* **Applications are due by 5pm on June 19th and should be emailed to Carline Charmelus, Partnership for Strong Communities, at** [**Carline@pschousing.org**](mailto:Carline@pschousing.org) **and Katie Durand, CT Department of Housing at** [**Kathleen.durand@ct.gov**](mailto:Kathleen.durand@ct.gov)**.**
* **Please email questions regarding the RFP and application to Katie Durand at** [**Kathleen.durand@ct.gov**](mailto:Kathleen.durand@ct.gov)**.**
* **Please save your document with the following naming convention:**

**<Agency name –Program name- (D/RE)YHDP>.**

**Example: ABC Services-Home to Stay-(Div/RE)YHDP.doc**

* **This is a demonstration program – projects are encouraged to be innovative.**
* **Applicants should carefully read the RFP requirements and review the scoring sheet before drafting answers to ensure they are compliant and highlighting key areas.**

1. **Project Applicant Information:** 
   1. Name of Organization:
   2. Organization Type

Units of Local Government Non-profit 501(c)(3) PHA

State Government Other: Describe

* 1. DUNS Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Sub-Recipient Organization(s) (fill out separately for each if applicable):** 
   1. Name of Organization:
   2. Organization Type

Units of Local Government Non-profit 501(c)(3) PHA

State Government Other: Describe

* 1. DUNS Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Contact person for this application:**
   1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   2. Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   3. Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Experience of Applicant/Sponsor**

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| 1. Describe the experience of the project applicant, sub-recipients (if applicable) in performing activities similar to the activities that such organization is proposing to perform in response to this RFP. Describe ability to manage public (city, state, and/or federal) grants/contracts. Summarize ability to lead a collaborative project and coordinate and monitor multiple parties’ performance of services. |
| 1. (1) Does the applicant and/or potential subrecipients (if any) have experience administering a CoC program? yes  no   (2) Does the applicant and/or potential subrecipients (if any) currently participate in HMIS?  yes  no |
| C. Describe the basic organization and management structure of the applicant and subrecipients (if any). Include description of internal and external coordination, structures for managing basic organization operations, and an adequate financial accounting system that will be used to administer the grant (including capacity to properly isolate and track YHDP-related income and expenditures (ensuring a thorough record of expenditures can be provided for purposes of an audit), the separation of duties/functions, and tracking staff time). |
| 1. Have any of your agency’s HUD funded programs received a HUD (or other federal government agency) and/or state audit in the last 12 months? yes  no   If yes, were there any findings from the audit? yes  no  If there were finding, please describe the findings and your agency’s corrective actions to satisfy the findings and attach a copy of the corrective action plan that you submitted. |
| 1. Are there any unresolved monitoring or audit findings for any federal and/or state grants operated by the applicant or potential subrecipients (if any)? yes  no   If Yes, describe the details of unresolved monitoring or audit findings and steps that will be taken to resolve. |
| 1. Have you returned any funds to HUD (or other federal government agency) or the state on any existing grants in the last two years? yes  no   If yes, how much has been returned?  What is the reason that the funds have been returned?  What actions are you taking to ensure full spending? |
| 1. Do you have any outstanding obligation to HUD or the state that is in arrears or for which a payment schedule has not been agreed upon? yes  no   If yes, how much is owed?  What is the reason for the obligation to HUD?  What is preventing establishing a payment schedule? |
| 1. (If applicable) Have you consistently drawn down funds at least quarterly on all HUD CoC grants in the last two years? yes  no   What is the reason that the funds have not been drawn down?  What actions are you taking to ensure timely draw down? |
| 1. Have you submitted on time Annual Progress Reports (APRs) for all HUD CoC grants in the last two years? yes  no     What is the reason that APRs were late?  What actions are you taking to ensure timely submission? |
| 1. Attachments: Submit 1 copy of the applicant’s two most recent annual financial statements prepared by an Independent Certified Public Accountant, and reviewed or audited in accordance with Generally Accepted Accounting Principles (GAAP) (USA). Each copy shall include all applicable financial statements, auditor's reports, management letters, and corresponding reissued components. |

1. **Project Description**

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| 1. Describe how the applicant shall, directly or indirectly through community partners or subcontractors, perform the “Administrator role” activities required by the RFP. Include in this description the titles (and names if already hired) of proposed personnel key to the success of the proposed program and the hours and percentages of time dedicated to this project. Describe their roles and responsibilities. |
| 1. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of work (quick inspections and payment processing). This should include a plan for **rapid implementation** of the program. Provide a summary of relevant contracts and agreements (e.g., with local providers, housing quality inspectors, other partner organizations) needed for the achievement of project operation. |

1. **Continuous Quality Improvement**

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| * 1. Describe the applicant and subrecipient quality assurance and improvement process. Explain how data review will be involved in this process. |

**7. Budget**

1. Proposed Total Project Budget (based on two year term with DOH cash match included – approximately $725,000 total). *Applicants should strive to keep the Grant Administrative costs and Program Administrator costs (including any indirect costs) under 18% of the budget.*

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| **Budget Activities** | **Eligible Costs/Quantity Description**  Detail expenses, including but not limited to staff salaries and fringe. Staffing should match with the staffing described in program description. | **Two Year Budget Request** |
| **Rental Assistance (security deposit/first month rent)** | *Example:* an average of $1,600/client x 312 clients | *Example:* $500,000 |
| **Other Diversion/RE subsidies (e.g. utility deposits, moving costs, relocation assistance, food, etc.)** |  |  |
| **Program Administrator costs** (Rental Assistance Admin/Financial Assistance Adminsuch as HQS, processing payments to landlords, etc.) | Example: .5 FTE Housing Inspector: (annual salary x .5) = total salary + (% Fringe) = (salary & fringe) |  |
| **Grant Administrative Costs (up to 7%) see details below** |  |  |
| **Total Budget** |  | **$725,000** |

As outlined in 24 CFR 578.59, Grant Administrative Costs Include:

(1) General management, oversight, and coordination. Costs of overall program management, coordination, monitoring, and evaluation. These costs include, but are not limited to, necessary expenditures for the following:

(i) Salaries, wages, and related costs of the recipient‘s staff, the staff of subrecipients, or other staff engaged in program administration. In charging costs to this category, the recipient may include the entire salary, wages, and related costs allocable to the program of each person whose primary responsibilities with regard to the program involve program administration assignments, or the pro rata share of the salary, wages, and related costs of each person whose job includes any program administration assignments. The recipient may use only one of these methods for each fiscal year grant.

Program administration assignments include the following:

(A) Preparing program budgets and schedules, and amendments to those budgets and schedules;

(B) Developing systems for assuring compliance with program requirements;

(C)Developing agreements with subrecipients and contractors to carry out program activities;

(D)Monitoring program activities for progress and compliance with program requirements;

(E) Preparing reports and other documents directly related to the program for submission to HUD;

(F) Coordinating the resolution of audit and monitoring findings;

(G)Evaluating program results against stated objectives; and

(H)Managing or supervising persons whose primary responsibilities with regard to the program include such assignments as those described in paragraph (a)(1)(i)(A) through (G) of this section.

(ii) Travel costs incurred for monitoring of subrecipients;

(iii) Administrative services performed under third-party contracts or agreements, including general legal services, accounting services, and audit services; and

(iv) Other costs for goods and services required for administration of the program, including rental or purchase of equipment, insurance, utilities, office supplies, and rental and maintenance (but not purchase) of office space.

(2) Training on Continuum of Care requirements. Costs of providing training on Continuum of Care requirements and attending HUD-sponsored Continuum of Care trainings.

(3) Environmental review. Costs of carrying out the environmental review responsibilities under § 578.31.

B. If providing leveraged resources, describe below.