

HPRP Application  
Chattanooga Regional Homeless Coalition

**DUE BY Monday, July 27, 2009 at 12:00 PM (NOON) – No applications will be accepted after 12:00 PM**

Return Applications (in person) to:

The Chattanooga Regional Homeless Coalition Office  
801 N. Holtzclaw Ave. Bld. B  
Chattanooga, TN 37404

Include 3 copies of the following:

- 1) Application on subsequent pages,
- 2) 1 (one) page agency history, mission, and description of current programs,
- 3) 1 (one) page description of HPRP plan,
- 4) Certification that agency currently participates in HMIS or is willing to participate in HMIS.

**Failure to include the above items will result in disqualification of application.**

# DRAFT

## Exhibit 1: Applicant Information

Legal Applicant:		
Executive Director/CEO:		
Street Address:	City:	Zip Code:
Telephone:	Fax:	E-Mail:
Applicant Federal Tax ID Number:		
DUNS Number:	CCR Number:	
Application Preparer/Contact:		
Telephone:	Fax:	E-Mail:

## HPRP Budget Summary:

HPRP Activities	Homelessness Prevention	Rapid Re-Housing	Total
Financial Assistance			
Housing Relocation and Stabilization Services			
Subtotal			
Data Collection and Evaluation			
Administrative Costs (up to 3% of total request)			
<b>Total HPRP Budget</b>			

### Certification:

To the best of my knowledge and belief, the information contained in this application is true and correct. This document has been duly authorized by the governing body of the \_\_\_\_\_ Continuum of Care to comply with the required assurances if the application is approved.

\_\_\_\_\_  
Certifying Representative Signature

\_\_\_\_\_  
Typed Name and Title of Certifying Representative

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## **Exhibit 2: Certifications**

Non-profit organizations and units of local government are eligible to apply for HPRP funds to provide homelessness prevention and rapid re-housing for their Service Area. Please submit the requested information depending on whether you are a non-profit organization or unit of local government.

***Submit the following information if the applicant is a non-profit organization.***

Immediately after this page, insert evidence of 501 (c) (3) status and a copy of the agency's Articles of Incorporation in the state of Tennessee.

Also, include an original signed statement on letterhead from the local cognizant elected public official in the city where the applicant's primary administrative offices are located stating that they support the submission of this application to THDA.

***Submit the following information if the applicant is a unit of local government.***

Immediately after this page, include an original signed statement on letterhead from the cognizant local elected official or designee stating that they are applying for HPRP funds on behalf of the applicable service area

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## Exhibit 4: Estimated Sub-recipient Agreements

THDA recognizes the scale and complexities involved in providing homeless prevention and rapid re-housing services in large and diverse Service Areas covering multiple counties. Based on the need for collaboration among agencies providing those services, sub-recipient agreements will be permitted between the sub-grantee and other organizations for the administration of HPRP. The Applicant must submit an executed copy of any and all sub-recipient agreements(s) to THDA before the contract start date (10/01/09.) List all sub-recipient contract agreements anticipated as of the date of this application.

<b>Sub-recipient</b>	
County(s) Served:	
Agency Name:	
CEO Name/Title:	
Address:	
City, State, Zip:	
Contact Person:	
Telephone:	
E-Mail:	
<b>Sub-recipient</b>	
County(s) Served:	
Agency Name:	
CEO Name/Title:	
Address:	
City, State, Zip:	
Contact Person:	
Telephone:	
E-Mail:	
<b>Sub-recipient</b>	
County(s) Served:	
Agency Name:	
CEO Name/Title:	
Address:	
City, State, Zip:	
Contact Person:	
Telephone:	
E-Mail:	
<b>Sub-recipient</b>	
County(s) Served:	
Agency Name:	
CEO Name/Title:	
Address:	
City, State, Zip:	
Contact Person:	
Telephone:	
E-Mail:	

Please attach additional sheets if necessary

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## **Exhibit 5: Position Descriptions:**

Following this page list position descriptions for all staff to be paid (either partially or fully) with HPRP funds through this contract. Please include:

Position title

Essential duties and responsibilities

Full Time Equivalent (FTE) Status

Is this a new position funded by HPRP

If existing position, the FTE above should represent the amount funded through HPRP

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Exhibit 9A: Budget/Outcomes Summary

HPRP Activities	HPRP Funds	Projected Number of Unduplicated Households Served	Projected Number of Unduplicated Persons Served
<i>(Homelessness Prevention)</i> Financial Assistance			
<i>(Homelessness Prevention)</i> Housing Relocation Stabilization Services			
<i>(Rapid Re-Housing)</i> Financial Assistance			
<i>(Rapid Re-Housing)</i> Housing Relocation Stabilization Services			
<i>Data Collection and Evaluation</i>			
<i>Administrative Costs (limited to 3% of total)</i>			
<b>Total</b>			



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## Exhibit 9B: (Homelessness Prevention) Financial Assistance

Non-Staff Expenses	HPRP Request
Short-term rental expenses	
Medium-term rental expenses	
Security Deposits	
Utility Deposits	
Utility Payments	
Moving Cost Assistance	
Motel Vouchers	
Housing Inspection Costs	
Total Financial Assistance (Homelessness Prevention)	



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## Exhibit 9D: (*Rapid Re-Housing*) Financial Assistance

Non-Personnel Costs	HPRP Request
Short-term rental expenses	
Medium-term rental expenses	
Security Deposits	
Utility Deposits	
Utility Payments	
Moving Cost Assistance	
Motel Vouchers	
Housing Inspection Costs	
Total Financial Assistance (Rapid Re-Housing)	



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## **Exhibit 9F: Data Collection and Evaluation**

The U.S. Department of Housing and Urban Development (HUD) requires that grantees providing HPRP assistance/services must report client-level data into the CoC's HMIS (unless prohibited by local, state or federal law). At this time, HPRP reporting requires that all Universal Data Elements (including newly added homeless status) and some Program-Specific Data Elements (including income and sources, non-cash benefits, destination at exit, and newly added, financial assistance provided, and housing relocation and stabilization services provided) be entered into HMIS. THDA will provide additional HMIS-related guidance/requirements as they are released by HUD.

THDA realizes the costs associated with HMIS compliance vary widely among Continua. HPRP funds may be used to pay reasonable, clearly defined, and justified costs associated with data collection, data entry, data analysis, reporting and participation in evaluation of HPRP. Contract agencies should realistically budget for existing and future HPRP HMIS costs.

### **Questions:**

- a) Describe the current HMIS in place and the operational aspects that assure that all required data is entered in a timely manner, that the information meets data quality standards, and steps to date to assure that information needed for future reporting is produced by the HMIS data; and
- b) Estimate the number of new local participation agreements in your service area where HMIS service fees will be charged to participating agencies or charged to the HPRP Grant.

