

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2023 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Unique Entity Identifier (UEI) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2023 Continuum of Care (CoC) Program Competition. For more information see FY 2023 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2023 CoC Program NOFO and the FY 2023 General Section NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- New projects may only be submitted as either Reallocated, Bonus Projects, Reallocated + Bonus or DV Bonus. These funding methods are determined in collaboration with local CoC and it is critical that applicants indicate the correct funding method. Project applicants must communicate with their CoC to make sure that the CoC submissions reflect the same funding method.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any new project that fails to adhere to (24 CFR part 578 and application requirements set forth in FY 2023 CoC Program Competition NOFO.

1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application: New Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 09/06/2023

4. Applicant Identifier:

a. Federal Entity Identifier:

5. Federal Award Identifier:

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

- a. Legal Name:** Homes for Good
- b. Employer/Taxpayer Identification Number (EIN/TIN):** 93-6002480
- c. Unique Entity Identifier:** P21QY69GGRU7

d. Address

Street 1: 100 W 13th Ave
Street 2:
City: Eugene
County: Lane
State: Oregon
Country: United States
Zip / Postal Code: 97401

e. Organizational Unit (optional)

Department Name: Public Housing Authority
Division Name:

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Ms.
First Name: Rebecca
Middle Name:
Last Name: Murphy Lyons
Suffix:
Title: Programs and Grants Specialist
Organizational Affiliation: Homes for Good
Telephone Number: (541) 682-2536
Extension:

Fax Number: (541) 682-3411

Email: rmurphy@homesforgood.org

1C. SF-424 Application Details

9. Type of Applicant: La. Public Housing Authority

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program
CFDA Number: 14.267

12. Funding Opportunity Number: FR-6700-N-25
Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:
Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): Oregon
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: Bridges on Broadway

16. Congressional District(s):

16a. Applicant: OR-004

16b. Project: OR-004
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 01/01/2025

b. End Date: 12/31/2025

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

I AGREE:

21. Authorized Representative

Prefix: Mr.

First Name: Jacob

Middle Name:

Last Name: Fox

Suffix:

Title: Executive Director

Telephone Number: (541) 682-2527
(Format: 123-456-7890)

Fax Number: (541) 682-3411
(Format: 123-456-7890)

Email: jfox@homesforgood.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 09/06/2023

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2501-0017 (exp. 1/31/2026)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Homes for Good

Prefix: Mr.

First Name: Jacob

Middle Name:

Last Name: Fox

Suffix:

Title: Executive Director

Organizational Affiliation: Homes for Good

Telephone Number: (541) 682-2527

Extension:

Email: jfox@homesforgood.org

City: Eugene

County: Lane

State: Oregon

Country: United States

Zip/Postal Code: 97401

2. Employer ID Number (EIN): 93-6002480

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received: \$200,385.00

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, City and State) of the project or activity.

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
 (For further information, see 24 CFR Sec. 4.3).

2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
ShelterCare, 499 W. 4th Ave, Eugene, OR 97401	Guarantee - MOU	\$96,000.00	In-Kind
Laurel Hill, 2145 Centennial Plaza, Eugene, OR 97401	Guarantee - MOU	\$4,700.00	In Kind
Laurel Hill 2145 Centennial Plaza, Eugene, OR 97401	Guarentee- MOU	\$59,000.00	Cash
Homes for Good 100 W 13th Ave, Eugene, OR 97401	Co-Applicant	\$75,000.00	Cash

Note: If additional sources of Government Assistance, please use the "Other Attachments" screen of the project applicant profile.

Part III Interested Parties

Do you need to disclose interested parties for this grant according to the criteria below? No

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional non-disclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I/We, the undersigned, certify under penalty of perjury that the information provided above is true, correct, and accurate. Warning: If you knowingly make a false statement on this form, you may be subject to criminal and/or civil penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

X

Name / Title of Authorized Official: Jacob Fox, Executive Director

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 09/06/2023

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Homes for Good
Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
<p>a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.</p>	<p>e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;</p>
<p>b. Establishing an on-going drug-free awareness program to inform employees — (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.</p>	<p>f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted — (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;</p>
<p>c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;</p>	<p>g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.</p>
<p>d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will — (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;</p>	

2. Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application. Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

X

WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Authorized Representative

Prefix: Mr.

First Name: Jacob

Middle Name

Last Name: Fox

Suffix:

Title: Executive Director

Telephone Number: (541) 682-2527
(Format: 123-456-7890)

Fax Number: (541) 682-3411
(Format: 123-456-7890)

Email: jfox@homesforgood.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 09/06/2023

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: Homes for Good

Name / Title of Authorized Official: Jacob Fox, Executive Director

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 09/06/2023

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES

**Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.
Approved by OMB0348-0046**

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. The requirement related to lobbying as explained in the SF-LLL instructions states: "The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action."

Answer "No" if your organization is NOT engaged in lobbying.

Does the recipient or subrecipient of this CoC grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program? No

Legal Name: Homes for Good

Street 1: 100 W 13th Ave

Street 2:

City: Eugene

County: Lane

State: Oregon

Country: United States

Zip / Postal Code: 97401

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

Authorized Representative

Prefix: Mr.

First Name: Jacob

Middle Name:

Last Name: Fox

Suffix:

Title: Executive Director

Telephone Number: (541) 682-2527
(Format: 123-456-7890)

Fax Number: (541) 682-3411
(Format: 123-456-7890)

Email: jfox@homesforgood.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 09/06/2023

IK. SF-424B

(SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007
Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|----|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |

- | | |
|-----|--|
| 9. | Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327~333), regarding labor standards for federally-assisted construction subagreements. |
| 10. | Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more. |
| 11. | Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93~205). |
| 12. | Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system. |
| 13. | Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.). |
| 14. | Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance. |
| 15. | Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance. |
| 16. | Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures. |
| 17. | Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations." |
| 18. | Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program. |
| 19. | Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award. |

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: Homes for Good
Prefix: Mr.
First Name: Jacob

Middle Name:

Last Name: Fox

Suffix:

Title: Executive Director

Signature of Authorized Certifying Official: Considered signed upon submission in e-snaps.

Date Signed: 09/06/2023

1L. SF-424D

Are you requesting CoC Program funds for No
construction costs in this application?

No SF-424D is required. Select "Save and Next" to move to the next screen.

2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards: \$0

Organization	Type	Sub-Award Amount
This list contains no items		

2B. Experience of Applicant, Subrecipient(s), and Other Partners

1. Describe your organization’s (and subrecipient(s) if applicable) experience in effectively utilizing federal funds and performing the activities proposed in the application.

Homes for Good Housing Agency is the Public Housing Authority (PHA) for Lane County and the second largest PHA in Oregon. Homes for Good believes that housing is a human right, and we feel strongly that our resources should be used to support those with the highest barriers to stable housing. To achieve this mission, Homes for Good provides rental assistance vouchers for more than 3,000 Lane County residents; administers a Family Self Sufficiency Program, operates over 850 units of Public and Assisted housing, 600 units of Tax Credit and Rural Development housing, and 150 units of unsubsidized affordable housing. Homes for Good is fortunate to partner with over 30 community organizations to provide a variety of supports for residents living in affordable housing.

Homes for Good currently receives and operates an array of local, state and federal grant programs including Continuum of Care, Family Self-Sufficiency (FSS) and Resident Opportunity and Self-Sufficiency (ROSS). We have been a HUD Continuum of Care recipient for over 10 years and have recently merged our two programs into one Consolidated SPC/Madrone grant that has an annual award of \$829,000. We have been recipients for our HUD FSS and ROSS grants for over 10 years as well with annual award of \$228,117 for the FSS program and a three-year award of \$225,000 for the ROSS program.

Additionally, we have been recipients of OHCS services grants for The Nel and The Keystone for the past two years with annual awards of \$450,000 and \$150,000 respectfully. We have never had funding terminated or been put on a corrective action plan for any of these awards.

Homes for Good Resident Services currently completes data entry and reporting for various federal grants including Continuum of Care, Family Self-Sufficiency and Resident Opportunity and Self-Sufficiency. Our team is familiar with various systems including HMIS, SAGE, Family Metrics, ELOCCS and others. Our team completes data entry in HMIS for The Commons on MLK, the SPC/Madrone Program and the Bridges on Broadway temporary shelter. Our team is familiar with the PSH data entry workflow and running reports for data quality and performance outcomes. The supervisor for Bridges on Broadway is already an HMIS Agency Administrator and will be poised to support and train staff on HMIS data standards.

2. Describe your organization’s (and subrecipient(s) if applicable) experience in leveraging Federal, State, local and private sector funds.

Homes for Good has extensive experience in building funding layering packages to develop new affordable and permanent supportive housing including an array of federal, state, local and private funds. Recent Permanent Supportive Housing developments have effectively leveraged Project Based Voucher rental assistance, state PSH funds, tax credits and health care investments to create sustainable housing for those experiencing chronic homelessness. For this project, Homes for Good has received confirmation of capital and some services funding from Oregon Housing and Community Services and Oregon Health Authority, as well as 57 units of Project Based Voucher funding.

3. Describe your organization’s (and subrecipient(s) if applicable) financial management structure.

Homes for Good has a robust Finance Management structure. The Finance Team is comprised of 7 FTE: A Finance Director, a Finance Manager, a Senior Accounting Technician, a Real Estate Accounting Administrator and three Accounting Technicians. This team is responsible for full cycle accounting and financial reporting for an organization that is significantly more complex than a traditional public housing authority. Our Finance Team provides support to team members responsible for Continuum of Care grants in these specific functions: monthly rent assistance payments, monthly grant reporting, billing or drawdown from HUD’s Secure Systems, monthly review of credit card charges, completing the annual SF425 reports and representing the finance team during annual and other periodic audits.

In terms of administration and governance engagement in the financial management structure of Homes for Good, the Executive Director is actively engaged in the financial management structure of the organization in numerous ways including meeting with the Finance Team weekly. The governance board has an active Finance Committee that meets monthly. Homes for Good’s Finance Team actively engages with numerous regulators including HUD’s CoC representatives in the HUD Portland field office on reporting and monitoring. In January 2023, Homes for Good contracted the auditing services of Berman Hopkins CPAs and Associates, LLC. Berman Hopkins has a dedicated team that provides audit services to public housing authorities that are CoC grantees or who are CoC subrecipients.

**4. Are there any unresolved HUD monitoring or No
OIG audit findings for any HUD grants (including
ESG) under your organization?**

3A. Project Detail

- 1. CoC Number and Name: OR-500 - Eugene, Springfield/Lane County CoC
- 2. CoC Collaborative Applicant Name: Lane County

- 3. Project Name: Bridges on Broadway

- 4. Project Status: Standard

- 5. Component Type: PH

- 5a. Select the type of PH project: PSH

- 6. Is your organization, or subrecipient, a victim service provider defined in 24 CFR 578.3? No

- 7. Is this new project application requesting to transition from eligible renewal project(s) that was awarded to the same recipient and fully eliminated through reallocation in this CoC Program Competition? (Attachment Requirement) No

- 8. Will funds requested in this new project application replace state or local government funds (24 CFR 578.87(a))? No

- 9. Will this project include replacement reserves in the Operating budget? No

- 10. Is this project applying for Rural costs on screen 6A? No

3B. Project Description

1. Provide a description that addresses the entire scope of the proposed project.

Bridges on Broadway is a permanent supportive housing project located at 599 E Broadway in downtown Eugene and was developed through a community collaboration to convert previous Turnkey projects into permanent housing with the primary goal of providing supportive housing, through a housing first and harm reduction model, to chronically homeless members of the community. The building will include 57 studio apartments, community room, laundry room, computer access, outdoor courtyard and a services area for case management and peer support offices and meeting rooms. Target population is chronically homeless individuals who are living with a disabling condition.

Homes for Good Resident Services will offer voluntary intensive supportive services to the residents on-site at Bridges on Broadway from 8:00am to 8:00pm with after-hours support available through a dedicated hotline for residents. Services will be made attractive and accessible through outreach activities including introductions at the initial housing orientation, peer support availability in common areas including the common kitchen, resident unit visits, harm reduction supports, and through crisis intervention services. Homes for Good Resident Services will offer a team-based approach and will support residents in developing goals and plans to support housing retention and achieve optimum quality of life. Homes for Good Resident Services will engage in resident-led planning and provide services to enhance life skills, address access to health and mental health care and support, provide linkages to identified services and supports, engage residents in meaningful activities, provide linkages to employment and educational services, and assist in building social and community relations. Through methods that support resilience, increase self-esteem, address needs, increase skills, break down barriers in access, and enhance life quality, residents will have the opportunity to stabilize in housing, make positive life choices, and increase independent living.

Resident Services will engage in close coordination with health care and behavioral health services to allow for service delivery options both on site and off site at Bridges on Broadway. The close proximity of the Community Health Centers of Lane County, Willamette Family Rapid Access Center and the Medication Assisted Treatment center through Lane County Behavioral Health (all within a mile of Bridges on Broadway) will facilitate ease of access for residents. Through our partnership with Lane County, residents will also have access to Move On vouchers when they have determined they no longer need the intensive services.

OHCS is providing some services funding, however additional funding is needed to ensure appropriate staff to client ratios. Due to the amount available, HUD COC Supportive Services funding is being requested to support only a portion of the beds/units in the project (25 beds/25 units). The project will track and report on expected outcomes including that 90% will move in to housing within 60 days of referral, 85% will maintain housing for 12+ months, 25% will increase income and 50% will be connected to primary care/behavioral healthcare.

2. For each primary project location, or structure, enter the number of days from the execution of the grant agreement that each of the following milestones will occur if this project is selected for conditional award.

Project Milestones	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement
	A	B	C	D
Begin hiring staff or expending funds	60			
Begin program participant enrollment				
Program participants occupy leased or rental assistance units or structure(s), or supportive services begin				
Leased or rental assistance units or structure, and supportive services near 100% capacity				
Closing on purchase of land, structure(s), or execution of structure lease				
Start rehabilitation				
Complete rehabilitation				
Start new construction				
Complete new construction				

2a. If requesting capital costs (i.e., acquisition, rehabilitation, or new construction), describe the proposed development activities with responsibilities of the applicant, and subrecipients if included, to develop and maintain the property using CoC Program funds.

N/A

3. Check the appropriate box(s) if this project will have a specific subpopulation focus.

(Select ALL that apply)

N/A - Project Serves All Subpopulations	<input type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Chronic Homeless	<input checked="" type="checkbox"/>
		Other (Click 'Save' to update)	<input type="checkbox"/>

4. Will your project participate in the CoC's Coordinated Entry (CE) process or recipient organization is a victim service provider, as defined in 24 CFR 578.3 and uses an alternate CE process that meets HUD's minimum requirements? Yes

5. Housing First

5a. Will the project quickly move participants into permanent housing? Yes

5b. Will the project enroll program participants who have the following barriers? Select all that apply.

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

5c. Will the project prevent program participant termination for the following reasons? Select all that apply.

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

5d. Will the project follow a "Housing First" approach? Yes
 (Click 'Save' to update)

6 Will program participants be required to live in a specific structure, unit, or locality at any time while in the program? Yes

6a. Explain how and why the project will implement this requirement.

This is a place based PSH project

7. Will more than 16 persons live in a single structure? Yes

7a. Describe the local market conditions that necessitate a project of this size.

Currently Lane County has over 500 individuals who are prioritized for PSH through Coordinated Entry and the County has a target of adding an additional 350 PSH units over the next five years. This project has been made possible through Project Turnkey and will be converting a current hotel into PSH and is not new construction and provides a necessary housing resource in the downtown area.

7b. Describe how the project will be integrated into the neighborhood.

This project is located in the downtown area of Eugene and is located in a neighborhood with substantial student housing and commercial areas. It has been operating for the past two years as a temporary shelter and is already integrated into the surrounding area.

100% Dedicated or DedicatedPLUS

A “100% Dedicated” project is a permanent supportive housing project that commits 100% of its beds to chronically homeless individuals and families, according to NOFA Section III.3.b.

A “DedicatedPLUS” project is a permanent supportive housing project where 100% of the beds are dedicated to serve individuals with disabilities and families in which one adult or child has a disability, including unaccompanied homeless youth, that at a minimum, meet ONE of the following criteria according to NOFA Section III.3.d:

- (1) experiencing chronic homelessness as defined in 24 CFR 578.3;
- (2) residing in a transitional housing project that will be eliminated and meets the definition of chronically homeless in effect at the time in which the individual or family entered the transitional housing project;
- (3) residing in a place not meant for human habitation, emergency shelter, or safe haven; but the individuals or families experiencing chronic homelessness as defined at 24 CFR 578.3 had been admitted and enrolled in a permanent housing project within the last year and were unable to maintain a housing placement;
- (4) residing in transitional housing funded by a joint TH and PH-RRH component project and who were experiencing chronic homelessness as defined at 24 CFR 578.3 prior to entering the project;
- (5) residing and has resided in a place not meant for human habitation, a safe haven, or emergency shelter for at least 12 months in the last three years, but has not done so on four separate occasions; or
- (6) receiving assistance through a Department of Veterans Affairs(VA)-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.

A renewal project where 100 percent of the beds are dedicated in their current grant as described in NOFA Section III.A.3.b. must either become DedicatedPLUS or remain 100% Dedicated. If a renewal project currently has 100 percent of its beds dedicated to chronically homeless individuals and families and elects to become a DedicatedPLUS project, the project will be required to adhere to all fair housing requirements at 24 CFR 578.93. Any beds that the applicant identifies in this application as being dedicated to chronically homeless individuals and families in a DedicatedPLUS project must continue to operate in accordance with Section III.A.3.b. Beds are identified on Screen 4B.

**8. Is this project 100% Dedicated or DedicatedPLUS
DedicatedPLUS?**

3C. Project Expansion Information

1. Is this a “Project Expansion” of an eligible No
renewal project?

4A. Supportive Services for Participants

1. Describe how program participants will be assisted to obtain and remain in permanent housing.

The Bridges on Broadway project is site-based PSH and locating housing in the community will not be necessary so individuals can move directly into obtaining housing. Homes for Good Case Managers will coordinate outreach to applicants referred through Coordinated Entry and will assist them in collecting required documents and preparing for program intake. Case Managers will work closely with Property Management to coordinate intake and compliance appointments and collaborate on a resident orientation. Once housed, the Resident Services team focuses extensively on tenant education including monthly group orientations, a visual Welcome Book and life skills and tenant education workshops such as Rent Well. The Property Management and Resident Services follow a progressive lease accountability plan, which details the intervention steps for each level of violation and offers support and education at every opportunity. Case Managers work with residents to build Housing Stability Plans and coordinate with external providers to ensure residents receive appropriate support. Weekly meetings between Property Management and Resident Services will be held to review the progress of each applicant and tenant.

2. Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible.

Homes for Good will utilize partnerships with many community agencies to create streamlined and flexible access to healthcare and other services that address social determinants of health. The services team will have access to established partnership resources such as food pantry access through our partnership with Food for Lane County, employment counseling and resources through Lane Workforce Partnerships, financial counseling and education through DevNW, free bikeshare memberships through Cascade Mobility and substance abuse treatment through our partnership with Chrysalis. Our Resident Services team meets regularly with our local CCO Case Managers to discuss shared clients and works closely with the Lane County Behavioral Health team to facilitate referrals as needed. We strive to have at least one SOAR certified staff, as well a Community Health Worker or Peer Support Specialist to assist with service navigation for staff and residents. Through linkages in the community to resources such as behavioral health services, life skills training, benefits navigation, tenant education, and financial management, residents will have opportunities to increase self-sufficiency, build capacity, and enhance their quality of life. Resident choice is crucial to the success of treatment and ongoing engagement, so Homes for Good will offer access to all internal programs and services, as well as referral and coordination with partners such as Laurel Hill, HIV Alliance and local CCO Case Managers to help clients find a best fit for their needs. Our Resident Services team will work to establish relationships and agreements with community resources & to coordinate ongoing linkages to effectively serve residents in addition to what we have listed above. Space on site will support provision of varying types of services and resources, and community partners have been invited to engage in feedback with development to ensure the space will accommodate differing needs, including considerations of adequate space for food resources, peer groups, and case management.

**3. For all supportive services available to program participants, indicate who will provide them and how often they will be provided.
 Click 'Save' to update.**

Supportive Services		Provider	Frequency
Assessment of Service Needs		Applicant	As needed
Assistance with Moving Costs		Non-Partner	As needed
Case Management		Applicant	Weekly
Child Care		Non-Partner	As needed
Education Services		Partner	Quarterly
Employment Assistance and Job Training		Partner	As needed
Food		Applicant	Weekly
Housing Search and Counseling Services		Applicant	As needed
Legal Services		Non-Partner	As needed
Life Skills Training		Applicant	As needed
Mental Health Services		Partner	As needed
Outpatient Health Services		Non-Partner	As needed
Outreach Services		Applicant	As needed
Substance Abuse Treatment Services		Partner	As needed

Transportation
Utility Deposits

Applicant	As needed
Non-Partner	As needed

Identify whether the project will include the following activities:

- 4. Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs? Yes
- 5. Annual follow-ups with program participants to ensure mainstream benefits are received and renewed? Yes
- 6. Will program participants have access to SSI/SSDI technical assistance provided by this project the applicant, a subrecipient, or partner agency? Yes
- 6a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months. No

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the  icon. To view or update a housing site already listed, select the  icon.

Total Units: 25

Total Beds: 25

Total Dedicated CH Beds: 25

Housing Type	Housing Type (JOINT)	Units	Beds	Dedicated CH Beds
Clustered apartments	---	25	25	25

4B. Housing Type and Location Detail

1. Housing Type: Clustered apartments

2. Indicate the maximum number of units and beds available for program participants at the selected housing site.

a. Units: 25

b. Beds: 25

3. How many beds in "2b. Beds" are dedicated to persons experiencing chronic homelessness? 25

This includes both the "dedicated" and "prioritized" beds.

4. Address:

Project applicants must enter an address for all proposed and existing properties. If the location is not yet known, enter the expected location of the housing units. For Scattered-site and Single-family home housing, or for projects that have units at multiple locations, project applicants should enter the address where the majority of beds will be located or where the majority of beds are located as of the application submission. Where the project uses tenant-based rental assistance in the RRH portion, or if the address for scattered-site or single-family homes housing cannot be identified at the time of application, enter the address for the project's administration office. Projects serving victims of domestic violence, including human trafficking, must use a PO Box or other anonymous address to ensure the safety of participants.

Street 1: 599 E Broadway

Street 2:

City: Eugene

State: Oregon

ZIP Code: 97401

*5. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered.
(for multiple selections hold CTRL key)

410426 Eugene, 419039 Lane County

5A. Project Participants - Households

Households Table

	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Number of Households	0	25	0	25
Characteristics				
Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Persons over age 24	0	25		25
Persons ages 18-24	0	0		0
Accompanied Children under age 18	0		0	0
Unaccompanied Children under age 18			0	0
Total Persons	0	25	0	25

Click Save to automatically calculate totals

5B. Project Participants - Subpopulations

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24										
Persons ages 18-24										
Children under age 18										
Total Persons	0	0	0	0	0	0	0	0	0	0

Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24	25									
Persons ages 18-24	0									
Total Persons	25	0	0	0	0	0	0	0	0	0

Click Save to automatically calculate totals

Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Accompanied Children under age 18										
Unaccompanied Children under age 18										
Total Persons	0			0	0	0	0	0	0	0

6A. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 30, 2025? Yes

2. What type of CoC funding is this project applying for in this CoC Program Competition? CoC Bonus

3. Does this project propose to allocate funds according to an indirect cost rate? No

4. Select a grant term: 1 Year

* 5. Select the costs for which funding is requested:

Acquisition/Rehabilitation/New Construction	<input type="checkbox"/>
Leased Units	<input type="checkbox"/>
Leased Structures	<input type="checkbox"/>
Rental Assistance	<input type="checkbox"/>
Supportive Services	<input checked="" type="checkbox"/>
Operating	<input type="checkbox"/>
HMIS	<input type="checkbox"/>
VAWA	<input checked="" type="checkbox"/>
Rural	<input type="checkbox"/>

The VAWA BLI is permanently checked. This allows any project to shift funds up to a 10% shift from another BLI if VAWA emergency transfer costs are needed.

6. If conditionally awarded, is this project requesting an initial grant term greater than 12 months? (13 to 18 months) No

6F. Supportive Services Budget

A quantity AND description must be entered for each requested cost.

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs		
2. Assistance with Moving Costs		
3. Case Management	2 FTE PSH Case Managers to provide for a 15 to 1 staffing ratio	\$182,350
4. Child Care		
5. Education Services		
6. Employment Assistance		
7. Food		
8. Housing/Counseling Services		
9. Legal Services		
10. Life Skills		
11. Mental Health Services		
12. Outpatient Health Services		
13. Outreach Services		
14. Substance Abuse Treatment Services		
15. Transportation		
16. Utility Deposits		
17. Operating Costs		
Total Annual Assistance Requested		\$182,350
Grant Term		1 Year
Total Request for Grant Term		\$182,350

Click the 'Save' button to automatically calculate totals.

VAWA Budget

VAWA Budget

New in FY2023, the Violence Against Women Act (VAWA) has clarified the use of CoC Program funds for VAWA eligible cost categories. These VAWA cost categories can be added to a new project application to create a CoC VAWA Budget Line Item (BLI) in e-snaps and eLOCCS. The new BLI will be added to grant agreements and utilized the same as other CoC Program BLIs in e-snaps and eLOCCS. Eligible CoC VAWA costs can be identified in one or both of the following CoC VAWA categories. Examples of eligible costs in these cost categories are identified as follows:

- A. VAWA Emergency Transfer Facilitation. Examples of eligible costs include the costs of assessing, coordinating, approving, denying, and implementing a survivor’s emergency transfer(s). Additional details of eligible costs include:
- Moving Costs. Assistance with reasonable moving costs to move survivors for an emergency transfer(s).
 - Travel Costs. Assistance with reasonable travel costs for survivors and their families to travel for an emergency transfer(s). This may include travel costs to locations outside of your CoC’s geography.
 - Security Deposits. Grant funds can be used to pay for security deposits of the safe unit the survivor is transferring to via an emergency transfer(s).
 - Utilities. Grant funds can be used to pay for costs of establishing utility assistance in the safe unit the survivor is transferring to.
 - Housing Fees. Grant funds can be used to pay fees associated with getting survivors into a safe unit via emergency transfer(s), including but not limited to application fees, broker fees, holding fees, trash fees, pet fees where the person believes they need their pet to be safe, etc.
 - Case Management. Grant funds can be used to pay staff time necessary to assess, coordinate, and implement emergency transfer(s).
 - Housing Navigation. Grant funds can be used to pay staff time necessary to identify safe units and facilitate moves into housing for survivors through emergency transfer(s).
 - Technology to make an available unit safe. Grant funds can be used to pay for technology that the individual believes is needed to make the unit safe, including but not limited to doorbell cameras, security systems, phone, and internet service when necessary to support security systems for the unit, etc.
- B. VAWA Confidentiality Requirements. Examples of eligible costs for ensuring compliance with VAWA confidentiality requirements include:
- Monitoring and evaluating compliance.
 - Developing and implementing strategies for corrective actions and remedies to ensure compliance.
 - Program evaluation of confidentiality policies, practices, and procedures.
 - Training on compliance with VAWA confidentiality requirements.
 - Reporting to CoC Collaborative Applicant, HUD, and other interested parties on compliance with VAWA confidentiality requirements.
 - Costs for establishing methodology to protect survivor information.
 - Staff time associated with maintaining adherence to VAWA confidentiality requirements.

Enter the estimated amount(s) you are requesting for this project’s Emergency Transfer Facilitation costs and VAWA Confidentiality Requirements costs for one or both of these eligible CoC VAWA cost categories. The CoC VAWA BLI Total amount can be expended for any eligible CoC VAWA cost identified above.

Eligible Costs	Annual Assistance Requested
Estimated budget amount for VAWA Emergency Transfer Facilitation:	
Estimated budget amount for VAWA Confidentiality Requirements:	



Applicant: Homes for Good
Project: Bridges on Broadway

P21QY69GGRU7
212755

CoC VAWA BLI Total:	\$0
Grant Term	1 Year
Total Request for Grant Term	\$0

Click the 'Save' button to automatically calculate totals.

6I. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the  icon. To view or update a Match source already listed, select the  icon.

Summary for Match

Total Amount of Cash Commitments:	\$55,000
Total Amount of In-Kind Commitments:	\$0
Total Amount of All Commitments:	\$55,000

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Type	Source	Name of Source	Amount of Commitments
Cash	Government	Oregon Housing an...	\$55,000

Sources of Match Detail

1. **Type of Match commitment:** Cash
2. **Source:** Government
3. **Name of Source:** Oregon Housing and Community Services
(Be as specific as possible and include the office or grant program as applicable)
4. **Amount of Written Commitment:** \$55,000

6J. Summary Budget

The following information summarizes the funding request for the total term of the project. However, administrative costs can be entered in 8. Admin field below.

Eligible Costs (Light gray fields are available for entry of the previous grant agreement, GIW, approved GIW Change Form, or reduced by reallocation)	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Applicant CoC Program Costs Requested
1a. Acquisition (Screen 6B)			\$0
1b. Rehabilitation (Screen 6B)			\$0
1c. New Construction (Screen 6B)			\$0
2a. Leased Units (Screen 6C)	\$0	1 Year	\$0
2b. Leased Structures (Screen 6D)	\$0	1 Year	\$0
3. Rental Assistance (Screen 6E)	\$0	1 Year	\$0
4. Supportive Services (Screen 6F)	\$182,350	1 Year	\$182,350
5. Operating (Screen 6G)	\$0	1 Year	\$0
6. HMIS (Screen 6H)	\$0	1 Year	\$0
 7. VAWA	\$0	1 Year	\$0
8. Rural (Only for HUD CoC Program approved rural areas)	\$0	1 Year	\$0
9. Sub-total of CoC Program Costs Requested			\$182,350
10. Admin (Up to 10% of Sub-total in #9)			\$18,035
11. HUD funded Sub-total + Admin. Requested			\$200,385
12. Cash Match (From Screen 6I)			\$55,000
13. In-Kind Match (From Screen 6I)			\$0
14. Total Match (From Screen 6I)			\$55,000
15. Total Project Budget for this grant, including Match			\$255,385

Click the 'Save' button to automatically calculate totals.

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No		
2) Other Attachment(s)	No	PBV Award	09/06/2023
3) Other Attachment(s)	No	Oregon Housing an...	09/06/2023

Attachment Details

Document Description:

Attachment Details

Document Description: PBV Award

Attachment Details

Document Description: Oregon Housing and Community Services & Oregon Health Authority commitments

7D. Certification

**Applicant and Recipient Assurances and Certifications - form HUD-424B (Title)
U.S. Department of Housing and Urban Development OMB Approval No.
2501-0017
(expires 01/31/2026)**

As part of your application for HUD funding, you, as the official authorized to sign on behalf of your organization or as an individual must provide the following assurances and certifications. The Responsible Civil Rights Official has specified this form for use for purposes of general compliance with 24 CFR §§ 1.5, 3.115, 8.50, and 146.25, as applicable. The Responsible Civil Rights Official may require specific civil rights assurances to be furnished consistent with those authorities and will specify the form on which such assurances must be made. A failure to furnish or comply with the civil rights assurances contained in this form may result in the procedures to effect compliance at 24 CFR §§ 1.8, 3.115, 8.57, or 146.39. By submitting this form, you are stating that to the best of your knowledge and belief, all assertions are true and correct.

1. Has the legal authority to apply for Federal assistance, has the institutional, managerial and financial capability (including funds to pay the non-Federal share of program costs) to plan, manage and complete the program as described in the application and the governing body has duly authorized the submission of the application, including these assurances and certifications, and authorized me as the official representative of the application to act in connection with the application and to provide any additional information as may be required.

2. Will administer the grant in compliance with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and implementing regulations (24 CFR part 1), which provide that no person in the United States shall, on the grounds of race, color or national origin, be excluded from participation in, be denied the benefits of, or otherwise be subject to discrimination under any program or activity that receives Federal financial assistance OR if the applicant is a Federally recognized Indian tribe or its tribally designated housing entity, is subject to the Indian Civil Rights Act (25 U.S.C. 1301-1303).

3. Will administer the grant in compliance with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and implementing regulations at 24 CFR part 8, the American Disabilities Act (42 U.S.C. §§ 12101 et seq.), and implementing regulations at 28 CFR part 35 or 36, as applicable, and the Age Discrimination Act of 1975 (42 U.S.C. 6101-07) as amended, and implementing regulations at 24 CFR part 146 which together provide that no person in the United States shall, on the grounds of disability or age, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity that receives Federal financial assistance; except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

4. Will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and the implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion sex (including gender identity and sexual orientation), disability, familial status, or national origin and will affirmatively further fair housing; except an applicant which is an Indian tribe or its instrumentality which is excluded by statute from coverage does not make this certification; and further except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

5. Will comply with all applicable Federal nondiscrimination requirements, including those listed at 24 CFR §§ 5.105(a) and 5.106 as applicable.

6. Will comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (42 U.S.C. 4601) and implementing regulations at 49 CFR part 24 and, as applicable, Section 104(d) of the Housing and Community Development Act of 1974 (42 U.S.C. 5304(d)) and implementing regulations at 24 CFR part 42, subpart A.

7. Will comply with the environmental requirements of the National Environmental Policy Act (42 U.S.C. 4321 et seq.) and related Federal authorities prior to the commitment or expenditure of funds for property.

8. That no Federal appropriated funds have been paid, or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress, in connection with the awarding of this Federal grant or its extension, renewal, amendment or modification. If funds other than Federal appropriated funds have or will be paid for influencing or attempting to influence the persons listed above, I shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying. I certify that I shall require all subawards at all tiers (including sub-grants and contracts) to similarly certify and disclose accordingly. Federally recognized Indian Tribes and tribally designated housing entities (TDHEs) established by Federally-recognized Indian tribes as a result of the exercise of the tribe's sovereign power are excluded from coverage by the Byrd Amendment, but State-recognized Indian tribes and TDHs established under State law are not excluded from the statute's coverage.

Name of Authorized Certifying Official: Jacob Fox

Date: 09/06/2023

Title: Executive Director

Applicant Organization: Homes for Good

PHA Number (For PHA Applicants Only):

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. **WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties.**(18 U.S.C. §§287, 1001, 1010, 1012, 1014; 31 U.S.C. §3729, 3802).

X

8B. Submission Summary

Applicant must click the submit button once all forms have a status of Complete.

Page	Last Updated
1A. SF-424 Application Type	No Input Required
New Project Application FY2023	Page 50
	09/06/2023

1B. SF-424 Legal Applicant	09/06/2023
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	09/06/2023
1E. SF-424 Compliance	09/06/2023
1F. SF-424 Declaration	09/06/2023
1G. HUD 2880	09/06/2023
1H. HUD 50070	09/06/2023
1I. Cert. Lobbying	09/06/2023
1J. SF-LLL	09/06/2023
IK. SF-424B	09/06/2023
1L. SF-424D	09/06/2023
2A. Subrecipients	No Input Required
2B. Experience	09/06/2023
3A. Project Detail	09/06/2023
3B. Description	09/06/2023
3C. Expansion	09/06/2023
4A. Services	09/06/2023
4B. Housing Type	09/06/2023
5A. Households	09/06/2023
5B. Subpopulations	No Input Required
6A. Funding Request	09/06/2023
6F. Supp Srvcs Budget	09/06/2023
VAWA Budget	No Input Required
6I. Match	09/06/2023
6J. Summary Budget	No Input Required
7A. Attachment(s)	09/06/2023
7D. Certification	09/06/2023



100 West 13th Avenue, Eugene, OR 97401 • PH 541-682-3755 • FAX 541-682-3411



Homes. People. Partnerships. Good. www.homesforgood.org

March 7, 2023

Homes for Good
100 W 13th Ave
Eugene OR 97401

Dear Homes for Good,

Under 24 CFR 983.52(d) a Public Housing Agency is required to provide written notice to the party that submitted a selected proposal.

Please accept this letter as documentation that Homes for Good Housing Agency is offering 57 Project Based Vouchers for the Bridges on Broadway project in Eugene, Oregon.

If funding is not obtained from OHCS by September of 2023, then the awarded PBV vouchers will be voided.

We look forward to partnering with you.

Best Regards,
Christi Champ
Rent Assistance Program Supervisor



September 5, 2023

**Homes for Good Housing Agency
Attn: Nora Cronin
100 W 13th Ave
Eugene, OR 97401-3433**

Dear Ms. Cronin:

The State of Oregon, acting by and through its Housing and Community Services Department (“OHCS”), hereby reserves the Notice of Fund Availability (NOFA) source for **Bridges on Broadway** (the “Project”), as follows:

Project Name	Project City	OHCS Project Number
Bridges on Broadway	Eugene	3188

Amount	Funding Program	Grant/Loan
Up to \$ 8,400,000	PSH (Development Capital Only)	Loan
Up to \$ 560,000	Annual PSH Services Funding	N/A

Recipient Entity:

The “RECIPIENT ENTITY” (Recipient), for the purposes of this Funding Reservation, is the entity to which, upon satisfaction of all associated conditions of this reservation, the funds identified in this letter will be issued and is further, the entity responsible for assuring that all conditions of this funding reservation will be satisfied.

Conditions:

This letter does not constitute a commitment of funds or the allocation of tax credits. Any such commitment is conditioned on satisfactory completion (as determined by OHCS) of all the Conditions of Funding Reservation identified in this letter.

- a) The Recipient acknowledges that this funding reservation is conditioned upon satisfactory completion (as determined by OHCS) of all the requirements stipulated within the Attachment A: Reservation Letter Conditions Checklist.

-
- b) The Recipient (and their consultant if applicable) acknowledge that prompt, timely, and accurate attention to, and completion of, the tasks associated with the Reservation and Conditions Letter is itself a condition of this agreement.

NOTE: A general list of Reservation Letter Attachments can be found on the OHCS Website
<https://www.oregon.gov/ohcs/development/Pages/nofa-reservation-letter-attachments.aspx>

All questions, comments, documents, and correspondence regarding the conditions of reservation are to be directed to your assigned Production Analyst via their email address or the physical address indicated below. The formatting and content of all materials submitted to OHCS must be deemed satisfactory by OHCS.

ATTENTION:

To accept this funding reservation, this Reservation and Conditions Letter must be signed on page 3 and must be returned to OHCS within 15 calendar days of the date of this letter. Not meeting this task within the stated timeframe will be regarded by OHCS as formal declination of this offer of funding reservation. The signed letter may be received by OHCS via upload to the project's assigned Procorem WorkCenter or by sending to the address given in the letterhead of this letter and to the attention of the OHCS Production Analyst assigned to your project as indicated below.

Assigned OHCS Production Analyst:

As your assigned Production Analyst and on behalf of OHCS, congratulations on achieving reservation status for the designated funds. I look forward to working with you in maintaining your funding eligibility as you progress toward the successful completion of **Bridges on Broadway**.

Terrance Murdock, Production Analyst
Affordable Rental Housing Production Section
Tel. 503-986-2112
Terrance.MURDOCK@hcs.oregon.gov

Acceptance of the Funding Reservation and Associated Conditions:

Note: For projects required to undergo an Environmental Review per the U.S. Department of Housing and Urban Development, the Recipient acknowledges the following:

Notwithstanding any provision of this letter, the parties hereto agree and acknowledge that this letter does not constitute a commitment of funds or allocation of tax credits or site approval, and that such commitment of funds or allocation of tax credits or site approval may occur only upon satisfactory completion of an environmental review, if required, and receipt of a release of funds from the U.S. Department of Housing and Urban Development under 24 CFR Part 58. The parties further agree that the provision of any funds or tax credits to the project is conditioned on the determination to proceed with, modify or cancel the project based on the results of the subsequent environmental review.

On behalf of Innovative Housing, Inc. and having legal authority to bind said entity to the terms and conditions associated with this Reservation and Conditions Letter, my signature below signifies that the Recipient has read, understands, and accepts all terms and conditions set forth in this letter and its associated attachments.

By:
Homes for Good Housing Agency

X _____
Signature of Homes for Good Housing Agency Authorized Signer Printed Name Date