



**ESSEX COUNTY**

**Division of Housing & Community Development**



**Citizen Participation Plan**

**ESSEX COUNTY**  
**DIVISION OF HOUSING & COMMUNITY DEVELOPMENT**

In accordance with the National Affordable Housing Act of 1992, the Division of Housing and Community Development considers the Citizen Participation component to be integral to the Consolidated Planning process for the Essex County Consortium. Although the County places particular emphasis on participation from residents of low and moderate-income areas, the programs and projects that are initiated as a result of the Consolidated Plan benefit all County residents. Therefore, all citizens are encouraged to participate in the development of the 2021 One Year Action Plan. It is noted that the County includes the Township of Bloomfield in this process because of their involvement in the HOME consortium.

To meet these requirements, the Division of Housing and Community Development has prepared the following Citizen Participation Plan outlining the Division's objectives and how they will be accomplished.

**Objective I:** Provide citizens with information concerning the range of eligible activities, applications, and program requirements.

**Implementation:**

1. Beginning November 4, 2020, the County's notification re the submission of applications was made available to:
  - a. All Community Development Representatives as elected by the participating municipalities.
  - b. All Public Service Agencies that previously participated in the program
  - c. The public via application advertisements that were placed in local papers and posted on the County's website.
2. Deadline for submission of 2021 applications was 4:00 PM on Friday, January 8, 2021.

**Objective II:** Provide for and encourage citizen participation, with particular emphasis on participation by persons of low and moderate income who are residents of slum and blighted areas, areas in which funds are proposed to be used, and low and moderate income neighborhoods as defined by the local jurisdiction.

**Implementation:**

1. The Essex County Division of Housing & Community Development will hold monthly meetings for all Committee Development Representatives. These meetings are scheduled for the third Thursday of each month.

2. The Essex County Division of Housing & Community Development will hold two public hearings that will allow equal opportunity for all county residents to attend or participate. In a normal year, these hearings would be held at the Salvation Army in Montclair. However, due to the Covid pandemic, and in order to practice safe, social distancing, the hearings for PY 2021 applications are scheduled to be virtual public hearings.

The locations for the 2021 Program Year public hearings are as follows:

Fall: Virtual Public Hearing  
Call in  
Virtual Hearing in order to practice social distancing  
Date: November 23, 2020  
Time: 2:00 PM

Spring: Virtual Public Hearing  
Call in  
Virtual Hearing in order to practice social distancing  
Date: July 6, 2021  
Time: 2:00 PM

Notice of Countywide public hearings will be handled as follows:

- a. Invitation letter will be sent to the following parties:
  - Community Development Representatives
  - Mayor of each participating municipality
  - Directors of Service Agencies
  - Representatives for Emergency Shelter Representatives
  - Home Investment Partnership Program recipients
- b. Advertisement will be placed in the legal section of the Star Ledger and local papers as well as the County website <http://www.essex-countynj.org/>
- c. Notices will be placed in various web pages throughout the municipalities by the Community Development Representatives (e.g. Library websites, police websites, municipal building websites).

Notice of Municipal Hearings will be handled as follows:

- a. Notice must be published in the local paper advertising two public hearings to be held in the municipality prior to the January 2021 municipal application submission deadline.
- b. Community Development Representatives will place notices in various buildings throughout the municipality encouraging local citizen participation.

The hearings are designed to enable citizens to comment on all aspects of the Community Development Programs. The citizen comment portion is the largest of all components of the hearing. The Division of Housing & Community Development will, within a reasonable amount of time, provide a response to all written grievances and proposals. This period shall not exceed thirty (30) days from receipt of the written comment.

Notification of public re construction projects:

1. The municipality will notify all residents of the project area at least one week before construction begins.
2. Direct Mailing
3. Posters in the project area.

If the nature of a project warrants, (as determined by Essex County Community Development), the individual municipality will hold a meeting with all concerned citizens. Minutes of these meetings will be kept on file at the Town Hall and Essex County Division of Housing & Community Development.

**Objective III:** Provide citizens with reasonable and timely access to local meetings, information, and records relating to the grantee's proposed use of funds as required by the regulations of the Secretary and relating to the actual use of funds under the Act.

### **Implementation**

#### **1. Public Hearings:**

A public notice appears in the local papers at least fifteen (15) days prior to the scheduled date of the public hearing.

An invitation is sent to all Community Development Representatives, Mayors and agency and company representatives at least two (2) weeks before the scheduled date of the Spring and Fall Public Hearings.

A follow-up telephone call is placed to each municipality, agency and company within one (1) week prior to the scheduled date of the hearing.

**Note: In emergency situations, this period may be shortened via a waiver as prescribed by HUD.**

2. Community Development Representative Meetings:

Meetings are scheduled for the third Thursday of each month.

Reminder is sent to the Representatives, Mayor and clerk of each municipality.

Minutes of each meeting are kept on file at the Division of Housing and Community Development within three (3) weeks following the meeting for public access and review.

Minutes from each meeting are e-mailed to all representatives and agencies and are reviewed at the beginning of the next meeting. These minutes are also kept on file at the Division of Housing & Community Development and the municipalities for public access and review.

3. Public Accessing of Information:

All information regarding Community Development programs is on file at the:

Division of Housing & Community Development  
Kip's Castle Park  
20 Crestmont Road  
Verona, New Jersey 07044

The proposed Essex County Consolidated Plan Objectives and Proposed Use of Funds is published fifteen (15) days prior to the second public hearing. This Statement is also presented to all persons in attendance at the hearing. Additional copies are available upon request from the Division of Housing and Community Development.

4. Submission of the Consolidated Plan to HUD:

A fifteen (15) day comment period follows the public hearing. During this time, all responses to citizen comments are prepared. Upon completion of this period, the 2021 One Year Action Plan and Use of Funds is submitted to HUD.

**Emergency Situations Provision**

In the event of an emergency, such as the Covid pandemic, if the County is in a location covered by a major disaster declaration made under Title IV of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (Stafford Act). The county will follow guidance provided by the HUD Office of the Secretary for Community Planning and Development. This includes shortening of the public notice requirements and comment period for substantial amendments to a Consolidated Plan or Action Plan, virtual public hearings and submissions to the local CPD field office. This also includes the posting of all public notices which may allow for posting on the county website as opposed to a paper of general circulation.

**Objective IV:** Provide technical assistance to groups representing low and moderate-income persons who request assistance.

**Implementation:**

1. The Division of Housing and Community Development's staff is available to any person or group requesting assistance. The following areas of expertise is provided upon request:

- Housing
- Public Improvements
- Public Facilities
- Environmental Reviews
- Application Submission

2. Technical assistance is available at, but not restricted to, the Division of Housing and Community Development's offices at Kip's Castle Park (Carriage House), 20 Crestmont Road, Verona, New Jersey 07044.

3. Notification for the availability of technical assistance is made via letter or e-mail to each requesting person or group.

**Objective V:** To conduct public hearings to obtain citizen views and respond to proposals and questions at all stages of the Consolidated Plan development process, including, but not limited to, identification of needs, review of proposed activities, and evaluation of program performance.

**Implementation:**

1. The Division of Housing and Community Development holds at least two (2) public hearings each program year. The first Hearing is held to discuss the application process and the development of the Consolidated Plan. The second public hearing is held to discuss the Plan, including the Proposed Use of Funds. Additional public hearings may be scheduled when the Division substantially amends the action plan. The County must notify HUD of a substantial amendment to the Action plan. The Division will notify the public of availability of reprogrammed funds via a public notice in the Star Ledger and the County's website as well as announcing reprogrammed fund availability at the monthly Community Development Representative's meeting.

Notification of these hearings is handled as follows:

Advertisements are published in the local papers at least fifteen (15) days prior to the scheduled date.

Invitations are sent to each Community Development Representative and clerk for each of the participating municipalities. Participating service providers also receive an invitation.

During the pandemic, these hearings are set up as virtual hearings.

The Division of Housing and Community Development will post the consolidated plan on the Essex County website and ensure that it is available at the 18 Essex County Consortium municipalities, as well as the Division of Community Action, the ARC of Essex County and the Mental Health Association of Essex & Morris, Inc. to ensure that citizens with disabilities also have access to this information

2. The Division of Housing and Community Development holds monthly Community Development meetings to discuss program performance. This forum allows for the discussion and dissemination of any existing or future HUD regulations or information that is pertinent to the County and the implementation of the CDBG programs.

Prior to the beginning of the Covid pandemic, these meetings were most recently being held at Verona Park Boat House in Verona and on occasion at various sites throughout the consortium to permit the public complete access to the information that will be disseminated including the County website. During the current pandemic, these monthly meetings are made available to participants via a virtual call in

3. The Division of Housing and Community Development holds individual meetings with the representatives from each municipality. At these meetings, municipalities receive information regarding their funding and current program evaluations. Depending on time availability, these meetings are scheduled beginning in mid January through to early March. During these meetings, the following items are discussed:

- a. the town's funding and project implementation history.
- b. 2021 applications, including following topics:

Documentation

Project evaluation

Timely expenditure of funds

Current Policy and Procedures

In some cases, supportive documentation is requested. This information is then added to the current municipalities' application and kept on file at the Division for public reference.

**Objective VI:** Provide a timely written answer to written complaints and grievances, within thirty (30) calendar days where practical.

**Implementation:**

1. Documented complaints and grievances are responded to, in writing, within thirty (30) calendar days from the receipt of the complaint.
2. If written responses cannot be offered within thirty (30) calendar days, notification is made to the complainant in writing. This notification will estimate the approximate time frame for a response to be issued.

**Objective VII:** Provide program information to persons with special needs including, but not limited to, non-English speaking persons, deaf persons, blind or sight impaired persons, or persons with disabilities.

**Implementation:**

1. An interpreter, who is fluent in Spanish, is available to provide assistance at the public hearings and technical assistance meetings. Based on current county demographics, the attendance of Spanish speaking residents is anticipated. Interpreters for other languages may be available upon prior request.
2. Interpreter assistance is available throughout the 2021 One Year Action Plan process. (Prior notification to the Division is required.)
3. Hearing impaired persons will receive written material. All public hearings are transcribed to minutes and circulated throughout participating municipalities.
4. Transportation is provided for individuals with disabilities to and from public hearings and technical assistance meetings. All meetings are scheduled in barrier-free facilities. (Prior notification to the Division is required.)
5. Any additional needs are addressed on an individual basis.

Note: Additional citizen participation may be included by each municipality in their corresponding Citizen Participation Plans. However, UNDER NO CIRCUMSTANCES, may the municipality omit any provision in this plan.



## **Objective VIII. Provide proper notification re Amendments to the Action Plan**

### **Implementation:**

An amendment to the One-Year Action Plan is required when a substantial change is requested to the existing annual action plan submitted to HUD.

An amendment is required if:

1. If there is a substantial change in the scope of the activity.
2. If the cost increase is more than 20% of the established allocation of the activity.
3. If it is deemed necessary by the Division, due to unusual or extraordinary circumstances.

An amendment is not required if:

1. If the increase in costs is no more than 20% of the established allocation for an activity.
2. If a new eligible activity is identified by the County and the cost is less than 10% of the existing program year's allocation. The Division shall notify the public of this new activity via a posting on the County's website and ad in the Star-Ledger.
3. If a proposed change of scope is minor and reasonably consistent with the original scope of the activity.

Amendment Procedure for substantial changes to the One-Year Action Plan

1. 15-day public notice of availability of funds due to reprogramming.
2. Public Notice of proposed awards of reprogrammed funds and changes.
3. Public hearing on proposed award of funds and changes to existing action plan.
4. Public Comment period of 15 days.
5. Submit amendment to action plan with public comments to HUD.
6. Decision memo to the Board of Chosen Freeholders for approved amendments.
7. Approval by the Board of Chosen Freeholders.
8. New contracts entered into and signed by all responsible parties.
9. IDIS updated to reflect changes to the action plan.
10. Funding made available to the grantee through the provision of a purchase order by the Division of Accounts & Controls.

Activities can begin once all-applicable bidding requirements and environmental reviews have been performed.

# **Essex County ESG Policies and Procedures Manual**



May 2020 Version 1.3

Essex County, Division of Housing & Community  
Development

Joseph N. DiVincenzo, Jr., County Executive

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## **SECTION 1: PROGRAM OVERVIEW**

In May of 2009 Congress passed the Homelessness Emergency Assistance and Rapid Transition to Housing Act (HEARTH). The newly passed HEARTH Act reauthorizes the McKinney-Vento program and provides new regulations for the Continuum of Care (CoC) and Emergency Solutions Grant (ESG) program. Starting in 2011, Continuums were offered the opportunity for greater flexibility and control of local CoC and ESG programs. At the same time, the U.S. Department of Housing and Urban Development (HUD) began placing greater emphasis on continuum performance and strategic planning efforts. New monitoring, evaluation, and data collection requirements will require more responsibility on the part of the Continuum of Care lead agency to ensure full compliance with HUD regulations and complete coordination of the homeless planning and service system

Together with the municipalities of the Essex County Consortium, the Division of Housing and Community Development will enter into sub-recipient agreements with providers that can administer activities in one of the eligible categories. These categories are divided between homeless assistance activities including Street Outreach and Emergency Shelter of which a maximum of 60% of fiscal year grant funds can be committed and Homeless Prevention and Rapid Re-Housing activities. Together they work to coordinate program planning, development, and funds distribution.

The sub-recipients implementing the Homelessness Prevention and Rapid Re-Housing activities (HP and RRH) will intend to prevent and reduce homelessness in Essex County. Specifically aiding those individuals and families who have been severely affected by recent economic recessions and other events, this funding is intended to serve persons who are homeless or would be homeless but for this assistance.

The County views the Homelessness Prevention and Rapid Re-Housing assistance as a way to implement a permanent systems change towards agency collaboration, prevention, and early intervention that will be sustained once this funding ends.

Intensive case management, diversion, housing relocation services, stabilization services (like Financial Counseling and Legal Assistance), and financial assistance have been identified as core tools to prevent and reduce homelessness.

On April 2, 2020 the U.S. Department of Housing and Urban Development notified the County of Essex of special Emergency Solutions Grant (ESG) Program funds being allocated to the jurisdiction in the amount of

\$1,574,441, as authorized by the Coronavirus Aid, Relief, and Economic Security Act (CARES ACT), Public Law 116-136. These special ESG-CV funds are to be used to prevent, prepare for and respond to the coronavirus pandemic (COVID-19) among individuals and families who are homeless or receiving homeless assistance; and to support additional homeless assistance and homeless prevention activities to mitigate the impacts of COVID-19.

### **PROGRAM INTENT:**

The purpose of the Emergency Solutions Grant (ESG) is to provide homeless assistance, homelessness prevention and rapid re-housing assistance to households who would otherwise become homeless—many due to the economic crisis—and to provide assistance to rapidly re-house persons who are homeless as defined by the amended section 103 of the McKinney-Vento Homeless Assistance Act (Public Law III-22 Division B).

The County Division of Housing & Community Development encourages programs to serve households that are most in need of this temporary assistance and are most likely to achieve stable housing; whether subsidized or unsubsidized, after the program concludes.

The sub-recipients contracted to administer such services will implement the same criteria and basic standards for assessment, financial assistance, and housing relocation and stabilization services.

### **OBJECTIVES:**

The ESG program will provide assistance to homeless service providers for activities that include Street Outreach including costs associated with case management, emergency health services, emergency mental health services, transportation and services for special populations – youth, victims of domestic violence, people living with HIV/AIDS.

The ESG program will also provide assistance to homeless service providers for Emergency Shelters including renovations, case management, education services employment assistance, outpatient services, legal services, life skills training, mental health services, substance abuse treatment services, transportation, services for special populations.

In addition, the ESG program can assist with Shelter Operations including the following:

- Costs of maintenance
- Rent
- Security
- Fuel
- Equipment
- Insurance
- Utilities
- Food
- Furnishings
- Supplies necessary for the operation of the emergency shelter
- Where no appropriate emergency shelter is available for a homeless family or individual, eligible costs may include a hotel or family or individual.

The ESG program will provide temporary financial assistance and housing relocation and stabilization services to individuals and families who are homeless or would be homeless *but for* this assistance. The funds under this program are intended to target two populations of low-income persons facing housing instability:

- 1) Individuals and families who are currently in housing but are at risk of becoming homeless and need temporary financial assistance to prevent them from becoming homeless or assistance to move to another unit (prevention).
- 2) Individuals and families who are experiencing homelessness (residing in emergency shelters or on the street) and need temporary assistance in order to obtain housing and retain it (rapid re-housing).

## **SECTION 2: POLICIES**

### **Program Eligibility & Documentation:**

Individuals or families seeking assistance for prevention or rapid re-housing services must meet the following eligibility criteria:

1. Currently homeless or at risk of homelessness as defined by HUD through the ESG interim regulations and the homeless definition final rule (please see Appendix A)

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*It is important to note that ESG is not a mortgage assistance program. Congress has established other programs to assist with mortgage modifications.*

2. Willingness to participate in an initial consultation and eligibility screening
3. Ability to provide required documentation to verify eligibility and determine level of assistance

Households interested in receiving prevention or rapid re-housing assistance must complete an initial eligibility screening. Households found to be eligible for prevention or rapid re-housing assistance will be scheduled for a consultation appointment and be provided with a checklist of necessary documentation to verify program eligibility and complete enrollment in the program. During the consultation appointment, the program intake worker will review program requirements with the household seeking assistance, review documents provided for program enrollment, complete program intake (Please see Appendix B) and complete a full household assessment (Please see Appendix C) to determine the scope of household needs and eligibility for programs available in Essex County.

Program intake workers must document household eligibility by collecting the documents identified in the Prevention and Rapid Re-housing checklist (please see Appendix D). Homeless or At Risk of Homelessness eligibility must be documented in participant files according to the Homeless Documentation Matrix (please see Appendix E). Intake Workers must clearly indicate in participant files the definition of homelessness or risk of homelessness under which the household qualifies.

**\* Program intake workers must document ESG-CV funds are used to prevent, prepare for, and respond to the coronavirus pandemic (COVID-19) among individuals and families who are homeless, at risk of becoming homeless or receiving homeless assistance; and to support additional homeless assistance and homelessness prevention activities to mitigate the impacts of COVID-19. On March 19, 2020 Governor Murphy issued Executive Order 107, which stated given the rising incidence of COVID-19, he was temporarily closing non-essential retail businesses. A tenant shall provide documentation that due to this closure they lost income which led to an incidence of potential or actual homelessness.**

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## **Coordination Amongst Providers:**

The program intake worker will complete on-line eligibility screening with households seeking assistance using the NJ Helps tool. NJ Helps determines eligibility for the following programs:

1. Food & Nutrition programs – SNAPs, WIC, EndHungerNJ
2. Child & Family Resources – TANF, Childcare Assistance, Kinship Navigator, Earned Income Tax Credit
3. Income Supports – GA
4. Health Insurance – Medicaid, NJ FamilyCare, Medicare
5. Mortgage Assistance – NJ HOPE
6. Utility Assistance – LIHEAP, Lifeline, USF
7. Senior and Disability Services – Senior Prescription Assistance, HAAAD, CRPD, JACC, NH WorkAbility, AIDS Community Care Alternatives, Traumatic Brain Injury Waiver Program
8. Employment & Training – One Stop Career Center, Youth Corp, Self-Employment Assistance, WIA Training, WDP Training
9. Check the HMIS system to ensure the client has not already been entered into the system. If not, the caseworker will initiate the coordinated entry by entering client data into HMIS.

In addition to checking eligibility for mainstream benefits programs through the NJ Helps website, the intake worker must be familiar with and review eligibility for the following financial assistance programs:

1. Continuum of Care – SHP, S+C & SRO programs
2. FEMA Emergency Assistance Funds
3. Social Services for the Homeless (SSH) Funds
4. Homeless Prevention Funds
5. HUD VASH Program
6. Permanent Supportive Housing Units
7. Housing Choice Vouchers & Public Housing Units
8. Essex County Subsidized Housing Units

The program intake worker will obtain confirmation from the household regarding all programs to which applications have been submitted. If applications have not been submitted to programs for which the household is eligible to receive assistance, the intake worker will provide the household the necessary information in order to complete applications. The program intake worker must directly contact all programs, which the household has applied to or intends to apply to prior to the consultation appointment in order to determine status of application and level/type of assistance (if any) that will be approved for the household.

**\*If the applicant is receiving assistance from another CARES Act funded program, they are ineligible for ESG assistance in accordance with HUD guidance stating that ESG-CV grantees are required to prevent duplication of benefits. The guidance that has been received**

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**on and around September 1, 2020, under the NJ state moratorium on evictions which has been extended through September 24, 2020 is considered assistance and therefore would be a duplication of benefits if a tenant received ESG Homeless prevention funds for delinquent rental payment(s). As of September 2, 2020 the County is waiting for additional guidance regarding the availability of Homeless Prevention funds during a period where evictions are not allowed.**

Once a household is fully enrolled in prevention or rapid re-housing assistance, they will meet with the program case manager to develop a housing stabilization plan. At that time the Case Manager will review all services and programs the household is eligible for and work with the household to identify the appropriate programs and services to connect the household to. The program case manager will refer the household to appropriate community programs according to needs identified through the assessment and housing stabilization plan.

All ESG sub-recipients must actively participate in the Essex County community planning process and attend monthly CEAS & CoC committee meetings.

### **Targeting of Prevention & Rapid Re-Housing Funds:**

#### Rapid Re-housing Assistance

Households meeting the basic eligibility requirements for rapid re-housing will be prioritized as follows:

#### First Priority:

Households ineligible for any other financial assistance programs in Essex County

#### Second Priority:

Households approved for other financial assistance program requiring minimal assistance to facilitate movement into permanent housing and full enrollment in program – i.e. security or utility deposits for those with rental assistance vouchers. Assistance to households receiving financial assistance from other programs will only be allowable if and only if ESG funds are used to provide an alternate form of assistance – for example ESG funds cannot be used to provide rental assistance if another program is providing rental assistance at the same time

#### Third Priority:

Households without a certifiable disabling condition and/or households that do not require long-term supportive services

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### Prevention Assistance

Prevention assistance may be provided to households meeting the basic eligibility requirements and found to be ineligible for the New Jersey Homelessness Prevention Program or denied Emergency Assistance through the Board of Social Services. Households receiving emergency financial assistance to stabilize housing from other prevention assistance programs may be considered for funding on a case-by-case basis. ESG funds may only be used for these households so long as the type of costs covered is not the same as costs covered by other funding sources (i.e. household has been approved for rental assistance from an alternative prevention program, ESG funds may not be used to cover rental assistance as well but could be used for moving costs or utility payments). Households ineligible for any other form of emergency financial assistance must be given first priority for ESG funding.

### **Financial Assistance Determination**

Program case managers will be provided with flexibility to determine the appropriate level of financial assistance necessary to stabilize enrolled households. Case managers must use the Income Determination form (Appendix F) to determine the level of annual household income. The housing cost burden covered by the household seeking assistance may be calculated up to 50% of the household's adjusted monthly income. According to household need, case managers may offer the following types of financial assistance options:

1. ESG funds cover 50% - 100% of monthly housing costs at a fixed rate for a 3 month period

OR

2. Households receive a decreasing amount of assistance for a 3 month period
  - a. ESG funds cover 80% - 100% of housing costs during month 1
  - b. ESG funds cover 40% - 60% of housing costs during month 2
  - c. ESG funds cover 15% - 30% of housing costs during month 3

OR

3. Households receive a one-time payment to cover back rent or utilities up to 6 months in arrears, security or utility deposits

### **Length of Program Participation**

All households enrolled in the program will be approved for up to 3 months of financial assistance. Households may receive no more than two 3-month extensions based on a case-by-case determination made by program case managers. Households requesting an extension of assistance must be re-certified to ensure they meet program income requirements of 30% of AMI. The program supervisor must approve all extensions. Households may not receive more than 9 consecutive months of assistance within a 12 month period.

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Households in need of additional assistance after 9 months of program enrollment must complete a comprehensive re-evaluation to determine the full scope of household needs. The program case manager must work with these households to re-check eligibility for alternative assistance programs available in the community and aid in the completion of appropriate applications. Additional extensions must be approved by the program supervisor and may only be provided according to the minimum amount of assistance necessary to bridge the gap in transitioning the household to another community program.

Program participants must report any changes in income and will receive a re-evaluation/re-certification at that time. Should the household continue to qualify for the program, the case manager will work with the household to determine if the level and type of assistance is still appropriate given the change in income.

### **Housing Stabilization and Relocation Services**

The scope and duration of housing stabilization services will be determined based on assessment completed at program entry and the housing stabilization plan. Program case managers will work with each household to ensure they maximize use of mainstream benefits for which they are eligible. In addition, households will be connected to community based services that will aid in strengthening their housing stability such as financial management services, employment & training services, transportation, childcare, and any other needs identified through the initial assessment.

Households may only be enrolled in the program once in a 12-month period. Households may not receive more than 24 months of assistance within a 3-year period. The Program Supervisor must approve any cases in which a household re-enrolls in the program.

### **Performance Standards**

The Division of Housing and Community Development worked in coordination with the CoC Planning Committee to develop the following performance standards for homeless service programs within Essex County.

- 80% of persons in permanent housing programs remain stably housed for 6 months or longer
  - 70% of persons exiting transitional housing programs exit to permanent housing
  - 30% of persons exiting shelter exit to permanent housing
  - 30% of persons entering the homeless housing & service system (service, temporary shelter, permanent housing) exit programs with employment income
  - Prevention services financial assistance is provided for eligible households within 14 days of program enrollment
-

- Eligible households move into permanent housing within 2 months of enrollment in rapid re-housing programs
- 100% of households seeking assistance through the homeless housing and service system are screened for eligibility in all programs available in Essex County
- 100% of households enrolled in homeless assistance programs complete a housing stabilization plan

## **C1. Written standards for recipients using allocation funds for Emergency Shelter and Street Outreach Activities**

### **Emergency Shelter**

The ESG program will provide assistance to homeless service providers for Emergency Shelters including major rehabilitation or conversion of a building to serve as an emergency shelter, and to deliver essential services such as case management, child care, education services, employment assistance, outpatient health services, legal services, life skills training, mental health services, substance abuse treatment services, transportation, and services for special populations.

In addition, the ESG program can assist with funding Shelter Operation costs related to maintenance and repairs, rent, security, fuel, equipment, insurance, utilities, food, furnishings, and operating supplies necessary for the operation of the emergency shelter. Where no appropriate emergency shelter is available for a homeless family or individual, eligible costs may also include a hotel or motel voucher for that family or individual.

For site rehabilitation activities, the shelter must serve homeless persons for at least 3 or 10 years, depending on the type of renovation and the value of the building. Furthermore, property acquisition and new construction are ineligible ESG activities. See 24 CFR 576.102.

### **Street Outreach**

The ESG program will provide assistance to homeless service providers for activities that include Street Outreach including costs associated with case management, emergency health services, emergency mental health services, transportation and services for special populations – youth, victims of domestic violence, people living with HIV/AIDS. Essential Services related to reaching out to unsheltered homeless individuals and families, connecting them with emergency shelter, housing, or critical services, and providing them with urgent, non-facility-based care. Eligible costs include engagement, case management, emergency health and mental health services, transportation, and services for special populations. See 24 CFR 576.101.

**Essex County does not intend to use or allocate ESG-CV funds for Emergency Shelter or Street Outreach Activities.**

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#### **D. Requirements for use of Risk Factor (1)(iii)(G) of the "At Risk of Homelessness" Definition**

N/A: Essex County will not use the risk factor of households that "otherwise live[s] in housing that has characteristics associated with instability and an increase risk of homelessness" as qualifying criteria for prevention assistance.

#### **INELIGIBLE ACTIVITIES:**

Financial assistance or services to pay for expenses that are available through other Recovery Act programs, including child care and employment training **ARE NOT ELIGIBLE**. Case managers should work to link program participants to these other resources. Other activities not qualified for HP or RRH funding include but are not limited to:

- Long Term Support
- Mortgage costs and mortgage arrears
- Construction or rehabilitation
- Payment of credit card or other consumer debt
- Travel costs, Car repair or transportation costs
- Medical or dental care and medicines
- Clothing, grooming, or Pet care
- Home furnishings
- Entertainment activities
- Work or education related materials
- Cash assistance to participants

Rental assistance payments **CANNOT** be made on behalf of eligible individuals or families for the same period of time and for the same cost types that are being provided through another federal, state or local housing subsidy program.

#### **ELIGIBLE HOUSEHOLDS:**

This funding is intended to serve persons who are **HOMELESS** or would be homeless **BUT FOR THIS ASSISTANCE**. Households eligible for ESG-funded financial assistance and/or services may be individuals and/or families. They **MUST** meet all of the following criteria:

- A. At Risk of Homelessness: For purposes of ESG, household(s) must be at imminent risk of losing their current housing and must have identified no other subsequent housing options or resources in order to avoid homelessness.

OR

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- B. Homeless - For purposes of ESG, agencies are to follow HUD's definition of homeless, as defined by section 103 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11032)

AND

1. Income: Household income can be no greater than 30% of Area Median Income (AMI). **ESG-CV funded activities will allow for no more than 50% Area Median Income (AMI)**
2. Resources: Household **MUST** have no other existing housing options, financial resources, or other support networks identified.
3. Initial Consultation No household can receive (or continue to receive) any assistance related to ESG funds unless they have been assessed by a ESG case manager or other authorized representative.
4. Housing Stabilization Plan: No household can receive (or continue to receive) any assistance related to ESG funds unless they have created (and are abiding by) a Housing Stabilization Plan with their ESG case manager or other authorized representative.
5. Financial Counseling: No household can receive (or continue to receive) any assistance related to ESG funds unless they completed Financial Counseling.

Screening eligible households and individuals for the Homelessness Prevention and Rapid Re-Housing Program is very important. Through a countywide standardized assessment process, case managers can best evaluate potential clients based on their current financial resources and barriers to housing.

## **HUD PROGRAM REQUIREMENTS:**

**1. HMIS Data Collection:** All Homelessness Prevention and Rapid Re-Housing services provided under ESG funding **MUST** be recorded in the New Jersey Homeless Management Information System (HMIS) unless explicitly exempt. Complete and accurate data **MUST** be entered into HMIS in the week the service(s) are provided. Client data **MUST** be entered into the appropriate bins in HMIS (bin location is determined by the funding source).

To assure coordination of benefits and monitoring of ESG requirements regarding eligibility and duration of benefits, appropriate inter-agency agreements and client release of information will be executed so that HMIS data may be appropriately shared for all recipients between the ESG provider and the Division of Housing & Community Development.

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Subrecipients are expected to record all ESG recipients and impacted family members data into the HMIS including but not limited to:

- Name
- Date of birth
- Social security number
- Complete HUD/Required Universal Data elements
- Service related data

Subrecipients will enter data into HMIS as required by HUD and the Division of Housing & Community Development. This will include the HUD-defined universal data elements, homeless status, client income and sources, Financial Assistance provided, Housing Relocation & Stabilization services provided.

Contact the HMIS administer for ESG for more information:

New Jersey Housing Mortgage Finance Agency 609-278-7542  
637 S. Clinton Ave, Trenton, NJ 08650

**2. REPORTS:** ESG agencies will submit monthly reports to the Division of Housing & Community Development Monitoring Unit. Separate Weekly Timesheets **MUST** be kept for all staff and personnel funded in whole or part by ESG funding.

**3. Area Median Income:** ESG agencies can only assist clients at or below **30%** area median income and are responsible for verifying client income via third party sources, such a pay stub.

| <b>30% Area Median Income Limits (Effective 4/2/20 - Updated Annually)</b> |                     |                     |                     |                     |                     |                     |                     |                     |
|--|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|
| <b>Region*</b>   | <b>1<br/>Person</b> | <b>2<br/>Person</b> | <b>3<br/>Person</b> | <b>4<br/>Person</b> | <b>5<br/>Person</b> | <b>6<br/>Person</b> | <b>7<br/>Person</b> | <b>8<br/>Person</b> |
| Newark   | \$22,300            | \$25,450            | \$28,650            | \$31,800            | \$34,350            | \$36,900            | \$39,640            | \$44,120            |

**4. Area Median Income ESG-CV:** The funds may be used to provide homelessness prevention assistance (as authorized under 24 CFR 576.103 or subsequent HUD notices) to any individual or family who does not have income higher than HUD's Very Low-Income Limit for the area and meets the criteria in paragraphs (1)(ii) and (1)(iii) of the "at risk of homelessness" definition in 24 CFR 576.3;

## ESG-CV Funds may only use the following income limits:

| 50% Area Median Income Limits (Effective 4/10/20 - Updated Annually) |          |          |          |          |          |          |          |          |
|--|----------|----------|----------|----------|----------|----------|----------|----------|
| Region*  | 1 Person | 2 Person | 3 Person | 4 Person | 5 Person | 6 Person | 7 Person | 8 Person |
| Newark   | \$37,100 | \$42,400 | \$47,700 | \$53,000 | \$57,250 | \$61,500 | \$65,750 | \$70,000 |

**4. Rent Reasonableness:** ESG agencies **MUST** ensure that ESG funds used for rental assistance do not exceed the actual rental cost, which must be in compliance with HUD's standard of "rent reasonableness." "Rent reasonableness" means that the total rent charged, including utilities, for a unit must be reasonable in relation to the rents being charged during the same time period for comparable units in the private unassisted market and must not be in excess of rents being charged by the owner during the same time period for comparable non-luxury unassisted units.

| Fair Market Rents for Essex County (Effective 1/13/2020 - Updated Annually) |         |        |        |        |        |
|---|---------|--------|--------|--------|--------|
| Region*   | 0 BR    | 1 BR   | 2 BR   | 3 BR   | 4 BR   |
| Newark Region   | \$1,034 | \$1218 | \$1483 | \$1891 | \$2236 |

**5. Habitability Standards:** The ESG agency **MUST** conduct a Habitability Standards Inspection on any unit that receiving HP or RRH funds for rental and/or security deposit assistance. Subrecipients must certify that the unit has passed habitability standards before any ESG funds may be released. In addition, an annual habitability standards inspection must be conducted for any unit in which ESG funds are being used. A copy of the completed Inspection Report **MUST** be within each client file signed by the program participant and program supervisor. **(ESG-CV funds may utilize video inspections)**

The Habitability Standards can be found in the Attachments section of this manual.

**6. Confidentiality:** The ESG agency must develop and implement procedures to ensure:

- The confidentiality of records pertaining to any individual provided with assistance; and
- That the address or location of any assisted housing will not be made public, except to the extent that this prohibition contradicts a pre-existing privacy policy of the agency.

**7. Housing Waiver:** In cases where a grantee or subgrantee (subrecipient) wants to assist ESG participants to reside in housing owned by the grantee or subgrantee, the County/DCA (Grantee) must seek a waiver from HUD to allow the use of this housing for HP or RRH participants. The subrecipient



agency must submit a letter to the Division of Housing & Community Development, who will submit a letter to the CPD Director of the local HUD office requesting a waiver for good cause, including a description of the benefit(s) to HP or RRH participants. If HUD approves the waiver, the grantee will be notified of additional information or requirements necessary to ensure the use of housing is appropriate.

**8. Termination of Housing Assistance:** ESG agencies may terminate assistance to a program participant who violates program requirements. Agencies may also resume assistance to a program participant whose assistance was previously terminated. In terminating assistance to a program participant, HP or RRH agencies must provide a formal process that recognizes the rights of individuals receiving assistance to due process of law. This process, at a minimum, must consist of:

- Written notice to the program participant containing a clear statement of the reasons for termination;
- A review of the decision, in which the program participant is given the opportunity to present written or oral objections before a person other than the person (or a subordinate of that person) who made or approved the termination decision; and
- Prompt written notice of the final decision to the program participant.

**9. Recordkeeping:** Each HP or RRH Agency must keep any records and make any reports (including those pertaining to race, ethnicity, gender, and disability status data) that HUD may require within the timeframe specified.

**10. Sanctions:** If a grantee determines that a HP or RRH Agency is not complying with the requirements of this guide or other applicable federal laws, the grantee will take appropriate actions, which may include;

- Issue a warning letter that further failure to comply with such requirements will result in a more serious sanction;
- Direct the subrecipient to cease incurring costs with grant funds; or
- Require that some or all of the grant amounts be remitted to Division of Housing & Community Development.

Any grant amounts that become available to Division of Housing & Community Development as a result of a sanction will be made available (as soon as practicable) to other private non-profit organizations or units of general local government located in the state for use within the time periods specified in HUD Notice.

**11. Monitoring:** The Division of Housing & Community Development is responsible for monitoring all HP or RRH activities, including activities that are carried out by a subrecipient, to ensure that the program requirements established by the HUD Notice and any subsequent guidance are met.

The Division of Housing & Community Development has staff that will have responsibility for monitoring of all HP or RRH subgrantee activities in accordance with the currently approved citizen participation plan. This will be

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accomplished with regular site visits to subrecipients and reviews of all financial activity reports that will be required of subrecipients. This individual will also provide support and technical assistance, as needed.

Additional monitoring of subrecipients may be conducted by the Essex County Division of Housing & Community Development or the local HUD Office of Community Planning and Development, HUD's Office of Special Needs Assistance Programs, HUD's Office of Inspector General, HUD's Office of Fair Housing and Equal Opportunity, or any other applicable federal agency. These agencies will be monitoring HP and RRH programs nationwide to investigate fraud and determine compliance with federal program requirements.

**UPDATE as of May 4, 2015: The Division will monitor the sub-recipients or County program intake worker's submissions upon receipt of any vouchers until the termination of the contract.**

### **ADDITIONAL FEDERAL REQUIREMENTS:**

**1. Conflicts of Interest:** With respect to the use of ESG funds to procure services, equipment, supplies or other property, nonprofit subrecipients shall comply with 24 CFR 84.42. With respect to all other decisions involving the use of HP or RRH funds, the following restriction shall apply: No person who is an employee, agent, consultant, officer, or elected or appointed official of the grantee and who exercises or has exercised any functions or responsibilities with respect to assisted activities, or who is in a position to participate in a decision-making process or gain inside information with regard to such activities, may obtain a personal or financial interest or benefit from the activity, or have an interest in any contract, subcontract, or agreement with respect thereto, or the proceeds thereunder, either for himself or herself or for those with whom he or she has family or business ties, during his or her tenure or for one year thereafter.

**2. Nondiscrimination and Equal Opportunity Requirements:** Subrecipients must comply with all applicable fair housing and civil rights requirements in 24 CFR 5.105(a). In addition, ESG agencies must make known that HP or RRH rental assistance and services are available to all on a nondiscriminatory basis and ensure that all citizens have equal access to information about HP or RRH and equal access to the financial assistance and services provided under this program. Among other things, this means that each subgrantee must take reasonable steps to ensure meaningful access to programs to persons with limited English proficiency (LEP), pursuant to Title VI of the Civil Rights Act of 1964.

**3. Affirmatively Furthering Fair Housing:** Under section 808(e)(5) of the Fair Housing Act, HUD has a statutory duty to affirmatively further fair housing.

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HUD requires the same of its funding recipients. HP or RRH agencies will have a duty to affirmatively further fair housing opportunities for classes protected under the Fair Housing Act. Protected classes include race, color, national origin, religion, sex, disability, and familial status.

#### **4. Lead-Based Paint Requirements**

The Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4801 et seq.), as amended by the Residential Lead-Based Paint Hazard Reduction Act of 1992 (42 U.S.C. 4851 et seq.) and implementing regulations at 24 CFR part 35, subparts A, B, M, and R shall apply to housing occupied by families receiving assistance through HP or RRH.

**5. Uniform Administrative Requirements:** Non-profit subrecipients shall be subject to the requirements of 24 CFR part 84.

**6. Equal Participation of Religious Organizations:** Subrecipients that are directly funded under HP or RRH may not engage in inherently religious activities, such as worship, religious instruction, or proselytization as part of the programs or services funded under HP or RRH. If an organization conducts such activities, the activities must be offered separately, in time or location, from the programs or services funded under HP or RRH, and participation must be voluntary for the program participants.

**7. Lobbying and Disclosure Requirements:** The disclosure requirements and prohibitions of section 319 of the Department of the Interior and Related Agencies Appropriations Act for Fiscal Year 1990 (31 U.S.C. 1352) (the Byrd Amendment), and implementing regulations at 24 CFR part 87, apply to HP or RRH. Applicants must disclose, using Standard Form LLL (SF-LLL), "Disclosure of Lobbying Activities," any funds, other than federally appropriated funds, that will be or have been used to influence federal employees, members of Congress, or congressional staff regarding specific grants or contracts.

**8. Drug-Free Workplace Requirements:** The Drug-Free Workplace Act of 1988 (41 U.S.C. 701, et seq.) and HUD's implementing regulations at 24 CFR part 21 applies to HP or RRH.

## **SECTION 3: PROCEDURES**

### **PROGRAM ADMINISTRATION:**

Any subrecipient receiving HP or RRH funds shall be subject to all of the requirements that apply to the grantee under the HUD Notice.

HP/RRH Agencies **MUST:**

- Assess every program applicant for risk of imminent homelessness or verification of current homelessness, and to determine income and program eligibility.
-

- Use a clear documented process to determine the type, level, and duration of assistance for each program participant.
- Review and verify documents and payments to ensure compliance with HUD regulations and to avoid and prevent fraud.
- Certify eligibility at least once every 3 months for all program participants receiving rental assistance.
- Provide on-going case management or support services, as needed, to all program participants receiving rental assistance in order to transition them to independence.
- Adhere to all data collection and reporting requirements.

## **MONITORING AND COMPLIANCE:**

HP/RRH Agencies are expected to make available all client, financial and program records for periodic review on a schedule established by the Division of Housing & Community Development. In addition, HP and RRH Agencies will maintain client files in compliance with the standard set by HUD and the Division of Housing & Community Development.

## **EVALUATION:**

The Division of Housing & Community Development and all subrecipients will participate in evaluations that will measure the overall housing and financial stability of recipients who receive funding under the Recovery Act. Subrecipient staff will use tracking mechanisms developed by Division of Housing & Community Development to assess participant stability at 6 month intervals for up to 18 months.

## **REPORTING REQUIREMENTS:**

HP and RRH agencies will submit **regular financial statements** no less often than quarterly of program expenditures to their funding agency (the Essex County Division of Housing & Community Development), by the 15<sup>th</sup> of the following month.

HP or RRH agencies will input participant information into HMIS on a weekly basis and submit those reports to the Division of Housing & Community Development no less than quarterly during each year of the contract. Separate Weekly Timesheets **MUST** be kept for all staff and personnel funded in whole or part by ESG funding (if applicable).

HP or RRH agencies will submit any additional reporting requirements by the Federal Government or the Division of Housing & Community Development.

The Division of Housing & Community Development and HUD will closely track sub-recipient expenditures in order to meet requirements and allow for reallocation if sub-recipients have not spent at least 60 percent of their funds within 1 year.

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The Essex County Division of Housing & Community Development reserves the right to review a sub-recipients balance of funds quarterly and reallocate unused funds.

### **ADMINISTRATIVE COSTS:**

Only those agencies awarded administrative awards may be compensated for applicable administrative costs. Payment of these administrative costs is not to exceed the administrative award received.

Administrative costs may be used for accounting for the use of grant funds; preparing reports for submission to the Division of Housing & Community Development; and subrecipient staff salaries associated with these administrative costs. Administrative costs also include training for staff who will administer the program or case managers who will serve program participants, as long as this training is directly related to learning about HP or RRH.

Administrative costs *do not* include any additional costs of issuing financial assistance, providing housing relocation and stabilization services, or carrying out eligible data collection and evaluation activities, as specified above, such as subrecipient staff overhead (fringe and indirect costs), costs of conducting housing inspections, and other operating costs. These costs should be included under one of the three other eligible activity categories.

**Under the CARES ACT up to 10 percent of funds may be used for administrative costs, as opposed to 7.5% percent as provided by 24 CFR 576.108(a).**

### **DOCUMENTATION AND FILE CONTENTS:**

If a client is found to be eligible and appropriate for the program after the initial interview, certain documents must be obtained and placed in the client file.

Each file **MUST** contain:

1. Completed Intake Assessment Form
2. Income Verification
3. Homelessness/Risk Verification
4. Staff Affidavit
5. Housing Stabilization Plan
- 6. Evidence of how funds were used to prevent, prepare for, and respond to COVID-19 (ESG-CV funds only)**

The Housing Stabilization Plan is a tool that will be used to assess and develop a strategy to achieve client stability within the timeframe established by program regulations. Each HP or RRH agency should develop and adopt a format to be used for the Housing Stabilization Plan. This

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Housing Stabilization Plan should be used to actively assist clients in meeting established outcomes based upon individual client need and **MUST** be referenced, revised and updated frequently throughout a client's participation in the program.

**Procurement Requirements:** The Division will follow all County procurement procedures issued by the Division of Purchasing when acquiring goods and services with implementing the ESG program.

**ESG-CV funds only: Recipients may deviate from applicable procurement standards when using these funds to procure goods and services to prevent, prepare for, and respond to coronavirus, notwithstanding 24 CFR 576.407(f) and 2 CFR 200.317-200.326;**

## **PROGRAM SPECIFIC REQUIREMENTS:**

### **Financial Assistance:**

- Agencies providing HP or RRH Financial Assistance will only issues payments to third party vendors or landlords; no payments will be issued directly to program participants.
  - Rental assistance provided may not exceed rental costs accrued over the assistance period (i.e. short-term rental assistance may not exceed rental costs accrued over a period of 3 months), and rents must meet the HUD standard of rent reasonableness.
  - Providers will be expected to ensure that other resources are utilized prior to committing HP or RRH funds for financial assistance.
  - Financial assistance payments cannot be approved on behalf of eligible individuals or families for the same period of time and for the same cost types that are being provided under another federal, state or local housing subsidy program. *Mortgage assistance is specifically excluded.*
  - Households receiving financial assistance will be certified for eligibility every 3 months.
  - Prior to occupancy, all rented units must be inspected and pass the Habitability Standards set forth in HUD's HP or RRH Regulations. **Unit Inspection Verifications will be submitted to the DHCD upon issuance of assistance. (ESG-CV funds may use video inspections of the unit to ensure safety of inspectors)**
  - Agencies may terminate assistance to a program participant who violates program requirements, and may also resume assistance to a program participant whose assistance was previously terminated. In terminating assistance to a program participant, the program must provide a formal process that recognizes the rights of individuals receiving assistance to due process of law. This process, at a minimum, must consist of:
-

- Written notice to the program participant containing a clear statement of the reasons for termination;
- A review of the decision, in which the program participant is given the opportunity to present written or oral objections before a person other than the person (or a subordinate of that person) who made or approved the termination decision; and
- Prompt written notice of the final decision to the program participant.
- In cases where a grantee or subgrantee wants to assist HP or RRH participants to reside in housing owned by the grantee or subgrantee, the grantee may seek a waiver from HUD to allow the use of this housing for HP or RRH participants. The grantee must submit a letter to the CPD Director of the local HUD office requesting a waiver for good cause, including a description of the benefit(s) to HP or RRH participants. If HUD approves the waiver, the grantee will be notified of additional information or requirements necessary to ensure the use of the housing is appropriate.
- HP or RRH funds may not be used to develop discharge planning programs in mainstream institutions such as hospitals, jails, or prisons. However, persons who are being discharged into homelessness within 2 weeks from publicly funded institutions are eligible to receive financial assistance or services through HP or RRH as long as they meet the minimum program requirements.
- Hotel/Motel vouchers may only be used with authorization from the DHCD.

### **Case Management:**

- Agencies will arrange, coordinate, and monitor the delivery of services related to meeting the housing needs of program participants and helping them obtain housing stability.
- Component services and activities shall include:
  - Counseling; developing, securing, and coordinating services;
  - Monitoring and evaluating program participant progress;
  - Assuring that program participants' rights are protected; and developing an individualized stabilization plan, including a path to permanent housing stability.
  - *Recertification of eligibility every three months for those receiving medium term financial assistance is also considered a case management activity.*

### **Housing search and placement:**

- Agencies will assist individuals or families in locating, obtaining, and retaining suitable housing. Component services or activities shall include:
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- Tenant counseling;
- Assisting individuals and families to understand leases; securing utilities; making moving arrangements; representative payee services concerning rent and utilities;
- Mediation and outreach to property owners related to locating or retaining housing.

### **Financial Counseling:**

- Agencies will assist program participants with critical skills related to household budgeting, money management, accessing a free personal credit report, and resolving personal credit issues.
- Funds may not be used to pay consumer debt of any kind.

### **Legal Services:**

- Agencies will offer legal services the help people stay in their and assist program participants with legal advice and representation in administrative or court proceedings related to tenant/landlord matters on housing issues.
- Legal services related to mortgages are not eligible. Local governments and subrecipient entities are required to adhere to all applicable procurement requirements in the selection and award of contracts for goods and services. Therefore, all solicitation of bids for goods and services to be paid with HP or RRH funds must be conducted openly and competitively in accordance with Essex County Procurement guidelines, as applicable.

These guidelines, in effect, require:

For any procurements expected, a Request for Quotations (RFQs) must be solicited. No less than three qualified vendors shall be solicited to submit electronic or written quotations. Competitive sealed bidding or Request for Bids (RFBs) is the preferred method for purchases and acquisition of materials, supplies, equipment, and services expected to cost greater than \$21,500. Bidders must submit their sealed bid to the location identified in the Request for Bids prior to the specified time and date of the bid opening. The award shall be made to the lowest responsible bidder.

**Match Requirements:** Recipients and sub-recipients must provide match dollars on a one for one basis when using ESG funds. This amount may include contributions to any project under the [recipient's](#) ESG program, including any [subrecipient's](#) ESG project, if the requirements in this section are met. Eligible types of matching contributions may be met by the following: Cash Contributions, noncash contributions.

**• ESG-CV ONLY: The funds are exempt from the ESG match requirements, including 24 CFR 576.201.**

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## **SECTION 4: APPENDICES**

### **Appendix A Homeless/At Risk Eligibility Requirements**

#### Homeless Prevention Eligibility:

Individuals or Families seeking assistance for homeless prevention must be at 30% of the Area Median Income (AMI) or below and meet one of the following definitions for At Risk of Homelessness or Homelessness:

#### At Risk of Homelessness –

1. Individual or Family
  - a. 30% of AMI or below
  - b. Insufficient resources or support networks immediately available to prevent household from moving into an emergency shelter, hotel or motel placement or place not fit for human habitation
  - c. Meets one of the following conditions:
    - i. 2 moves in the past 60 days due to economic hardship
    - ii. Living doubled up due to economic hardship
    - iii. Possess written notice terminating current living situation within 21 days of application
    - iv. Living in hotel or motel paid for by household income
    - v. Living in crowded conditions: SRO or Efficiency with more than 2 people or larger unit with more than 1.5 people per room
    - vi. Exiting publicly funded institution
    - vii. Living in housing with characteristics associated with instability and increased risk of homelessness
2. A child or youth qualifying as homeless under one of the following:
  - a. Runaway and Homeless Youth Act
  - b. Head Start Act
  - c. Violence Against Women Act
  - d. Public Health Service Act
  - e. Food and Nutrition Act
  - f. Child Nutrition Act
3. A child or youth qualifying as homeless under section 725(2) of the McKinney-Vento Homeless Assistance Act, and the parents or guardians of that child or youth living with them

#### Homeless:

1. An Individual or Family who will imminently lose their primary nighttime residences
    - a. Primary nighttime residence will be lost in 14 days of application for assistance
    - b. No subsequent residence has been identified
    - c. Household lack resources or support networks needed to obtain permanent housing
-

2. Unaccompanied youth under age 25 or family with children & youth who
  - a. qualify as homeless under one of the following: Section 387 of the Runaway and Homeless Youth Act; Section 637 of the Head Start Act; Section 41403 of the Violence Against Women Act; Section 3 of the Food and Nutrition Act of 2008; Section 17b of the Child Nutrition Act of 1966; Section 725 of the McKinney-Vento Homeless Assistance Act
  - b. Have not had a lease, ownership interest or occupancy agreement in permanent housing at any time during the past 60 days
  - c. Have had 2 or more moves in the past 60 days
  - d. Housing instability expected to continue for an extended period of time due to one of the following:
    - i. Chronic Disabilities
    - ii. Chronic physical health or mental health conditions
    - iii. Substance addiction
    - iv. History of domestic violence or childhood abuse (including neglect)
    - v. Presence of child or youth with disability
    - vi. Two or more barriers to employment
      1. Lack of high school degree or GED
      2. Illiteracy
      3. Low English proficiency
      4. History of incarceration or detention for criminal activity
      5. History of unstable employment
3. Individual or Family who:
  - a. Is fleeing domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening condition related to violence against family member in which return to primary nighttime residence threatens household safety
  - b. Has no other residence
  - c. Lacks resources or support networks to obtain other permanent housing

Rapid Re-Housing Eligibility:

Individuals or families seeking rapid re-housing assistance must be literally homeless and meet one of the following definitions:

1. An individual or family who lacks a fixed, regular and adequate nighttime residence
    - a. Primary nighttime residence is a public or private place not designed for human habitation (including car, park, abandoned building, bus or train station, camping ground)
    - b. Supervised publicly or privately operated shelter providing temporary living arrangements (including congregate shelters, transitional housing, hotel/motel paid for by an agency)
-

- c. An individual exiting an institution where they resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately prior to entering the institution
2. Individual or Family who:
- a. Is fleeing domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening condition related to violence against family member in which return to primary nighttime residence threatens household safety
  - b. Has no other residence
  - c. Lacks resources or support networks to obtain other permanent housing
  - d. Is currently living in an emergency shelter, transitional housing, hotel or motel paid for by an agency, place not meant for human habitation or an institution in which they have resided for 90 days or less and resided in an emergency shelter or place not meant for human habitation immediately prior to entering the institution
-

**Appendix B**  
**Program Intake Form (HMIS)**

**SINGLE STEP INTAKE FORM:**

**\*Intake Date:** \_\_/\_\_/\_\_

**Primary Worker:** \_\_\_\_\_

**INFORMATION SHARING LEVEL:**

**Referred By:** \_\_\_\_\_

**\*First Name:** \_\_\_\_\_ **Middle Name:** \_\_\_\_\_ **\*Last Name:** \_\_\_\_\_

**Alias:** \_\_\_\_\_

**\*Birthdate:** \_\_/\_\_/\_\_

**\*Birthdate Data Quality: (CHOOSE ONE)**

- FULL D.O.B. REPORTED
- APPROXIMATE OR PARTIAL D.O.B.
- DON'T KNOW
- REFUSED

**\*Social Security #:** \_\_/\_\_/\_\_

**\*SSN Data Quality: (CHOOSE ONE)**

- FULL SSN REPORTED
- PARTIAL SSN REPORTED
- DON'T KNOW OR DON'T HAVE SSN
- REFUSED

**\*Gender: (CHOOSE ONE)**

- MALE
- FEMALE
- TRANSGENDERED FEMALE TO MALE
- TRANSGENDERED MALE TO FEMALE
- OTHER
- DON'T KNOW
- REFUSED

**\*Ethnicity: (CHOOSE ONE)**

- HISPANIC/LATINO
- NON-HISPANIC/NON-LATINO
- DON'T KNOW
- REFUSED

**STREET ADDRESS: (SERVICE PROGRAMS ONLY)**

**CITY, STATE, AND ZIP:**

\_\_\_\_\_

\_\_\_\_\_

**PHONE:** \_\_\_\_\_

**MOVE IN DATE:** \_\_/\_\_/\_\_

**\*Race: (SELECT ALL THAT APPLY)**

- ☐ AMERICAN INDIAN OR ALASKAN NATIVE
- ☐ BLACK OR AFRICAN-AMERICAN
- ☐ NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
- ☐ ASIAN
- ☐ WHITE
- ☐ DON'T KNOW
- ☐ REFUSED

**\*Housing Status: (CHOOSE ONE)**

- LITERALLY HOMELESS
- IMMINENTLY LOSING THEIR HOUSING
- UNSTABLY HOUSED AND AT-RISK OF LOSING THEIR HOUSING
- STABLY HOUSED
- DON'T KNOW
- REFUSED

**\*Episodes of Homelessness: (CHOOSE ONE)**

- 1                      - 8
- 2                      - 9
- 3                      - 10 OR MORE
- 4
- 5
- 6

**\*Homeless Duration: (CHOOSE ONE)**

- 0 – 30 DAYS
- 31 – 60 DAYS
- 61 – 90 DAYS
- 91 – 180 DAYS
- BETWEEN 6 AND 12 MONTHS
- 12 MONTHS OR LONGER

**\*Income Received from Any Source in the Past 30 Days: (CHOOSE ONE)**

- NO                      - YES                      - DON'T KNOW                      - REFUSED

**Monthly Income: (ONLY IF ANSWERED YES)**

- ☐ EARNED INCOME: \$ \_\_\_\_\_
- ☐ UNEMPLOYMENT BENEFITS: \$ \_\_\_\_\_
- ☐ SSI: \$ \_\_\_\_\_
- ☐ SSDI: \$ \_\_\_\_\_
- ☐ VETERAN'S DISABILITY PAYMENT: \$ \_\_\_\_\_
- ☐ PRIVATE DISABILITY INSURANCE: \$ \_\_\_\_\_
- ☐ WORKER'S COMPENSATION: \$ \_\_\_\_\_
- ☐ TANF: \$ \_\_\_\_\_
- ☐ GENERAL PUBLIC ASSISTANCE: \$ \_\_\_\_\_
- ☐ RETIREMENT INCOME FROM SSA: \$ \_\_\_\_\_
- ☐ VETERAN'S PENSION: \$ \_\_\_\_\_
- ☐ PENSION FROM A FORMER JOB: \$ \_\_\_\_\_
- ☐ CHILD SUPPORT: \$ \_\_\_\_\_
- ☐ ALIMONY OR OTHER SPOUSAL SUPPORT: \$ \_\_\_\_\_
- ☐ OTHER: \$ \_\_\_\_\_

**\*NON-CASH Benefits Received from Any Source in the Past 30 Days: (CHOOSE ONE)**

- NO                      - YES                      - DON'T KNOW                      - REFUSED

**NON-CASH Benefits: (SELECT ALL THAT APPLY)**

- ☐ SNAP (FOOD STAMPS)
- ☐ MEDICAID HEALTH INSURANCE PROGRAM
- ☐ MEDICARE HEALTH INSURANCE PROGRAM
- ☐ STATE CHILDREN'S HEALTH INSURANCE PROGRAM
- ☐ SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN, INFANTS, AND CHILDREN (WIC)
- ☐ VETERAN'S ADMINISTRATION (VA) MEDICAL SERVICES
- ☐ TANF CHILD CARE SERVICES
- ☐ TANF TRANSPORTATION SERVICE
- ☐ OTHER TANF-FUNDED SERVICES
- ☐ SECTION 8, PUBLIC HOUSING, OR OTHER ONGOING RENTAL ASSISTANCE
- ☐ TEMPORARY RENTAL ASSISTANCE
- ☐ OTHER SOURCE

**\*Disabling Condition: (CHOOSE ONE)**

- NO
- YES
- YES – DIAGNOSABLE SUBSTANCE USE DISORDER
- YES – SERIOUS MENTAL ILLNESS
- YES – DEVELOPMENTAL DISABILITY
- YES – CHRONIC PHYSICALLY ILLNESS OR DISABILITY
- YES – DUALY DIAGNOSED
- DON'T KNOW
- REFUSED

**\*Physical Disability: (CHOOSE ONE)**

- NO                      - YES                      - DON'T KNOW                      - REFUSED

(IF YES) CURRENTLY RECEIVING SERVICES OR TREATMENT FOR THIS CONDITION: - NO

- YES                      - DON'T KNOW                      - REFUSED

**\*Developmental Disability: (CHOOSE ONE)**

- NO                      - YES                      - DON'T KNOW                      - REFUSED

(IF YES) CURRENTLY RECEIVING SERVICES OR TREATMENT FOR THIS CONDITION: - NO

- YES                      - DON'T KNOW                      - REFUSED

**\*Chronic Health Condition: (CHOOSE ONE)**

- NO                      - YES                      - DON'T KNOW                      - REFUSED

(IF YES) CURRENTLY RECEIVING SERVICES OR TREATMENT FOR THIS CONDITION: - NO

- YES                      - DON'T KNOW                      - REFUSED

**\*HIV/AIDS: (CHOOSE ONE)**

- NO                      - YES                      - DON'T KNOW                      - REFUSED

(IF YES) CURRENTLY RECEIVING SERVICES OR TREATMENT FOR THIS CONDITION: - NO

- YES                      - DON'T KNOW                      - REFUSED

**\*Mental Health: (CHOOSE ONE)**

- NO                      - YES                      - DON'T KNOW                      - REFUSED

(IF CLIENT HAS A MENTAL HEALTH PROBLEM) EXPECTED TO BE OF LONG-CONTINUED AND INDEFINITE DURATION AND SUBSTANTIALLY IMPAIRS ABILITY TO LIVE INDEPENDENTLY:

- NO                      - YES                      - DON'T KNOW                      - REFUSED

(IF CLIENT HAS A MENTAL HEALTH PROBLEM) CURRENTLY RECEIVING SERVICES OR TREATMENT FOR THIS CONDITION:

-NO                      -YES                      - DON'T KNOW                      -REFUSED

**\*Substance Abuse Problem: (CHOOSE ONE)**

- NO

- ALCOHOL ABUSE

- DRUG ABUSE

- BOTH ALCOHOL ABUSE AND DRUG ABUSE

- DON'T KNOW

- REFUSED

(IF CLIENT HAS A SUBSTANCE ABUSE PROBLEM) EXPECTED TO BE OF LONG-CONTINUED AND INDEFINITE DURATION AND SUBSTANTIALLY IMPAIRS ABILITY TO LIVE INDEPENDENTLY:

-NO                      - YES                      - DON'T KNOW                      - REFUSED

(IF CLIENT HAS A SUBSTANCE ABUSE PROBLEM) CURRENTLY RECEIVING SERVICES OR TREATMENT FOR THIS CONDITION:

-NO                      - YES                      -DON'T KNOW                      - REFUSED

**\*Domestic Violence Victim/Survivor: (CHOOSE ONE)**

-NO                      - YES                      - DON'T KNOW                      - REFUSED

(IF YES) WHEN EXPERIENCE OCCURRED:

- WITHIN THE PAST THREE MONTHS
- THREE TO SIX MONTHS AGO
- FROM SIX TO TWELVE MONTHS AGO
- MORE THAN A YEAR AGO
- DON'T KNOW
- REFUSED

**\*Residence Prior to Program Entry: (CHOOSE ONE)**

- EMERGENCY SHELTER, INCLUDING HOTEL OR MOTEL PAID FOR WITH EMERGENCY SHELTER VOUCHER

- TRANSITIONAL HOUSING FOR HOMELESS PERSONS (INCLUDING HOMELESS YOUTH)

- PERMANENT SUPPORTIVE HOUSING FOR FORMERLY HOMELESS PERSONS (SUCH AS SHP, S+C, OR SRG MOD REHAB)
- PSYCHIATRIC HOSPITAL OR OTHER PSYCHIATRIC FACILITY
- SUBSTANCE ABUSE TREATMENT FACILITY OR DETOX CENTER
- HOSPITAL (NON-PYSCHIATRIC)
- JAIL, PRISON OR JUVENILE DETENTION FACILITY
- STAYING OR LIVING IN A FAMILY MEMBER'S ROOM, APARTMENT, OR HOUSE
- STAYING OR LIVING IN A FRIENDS ROOM, APARTMENT, OR HOUSE
- HOTEL OR MOTEL PAID FOR WITHOUT EMERGENCY SHELTER VOUCHER
- FOSTER CARE HOME OR FOSTER CARE GROUP HOME
- PLACE NOT MEANT FOR HABITATION (E.G., A VEHICLE, AN ABANDONED BUILDING, BUS/TRAIN/SUBWAY/AIRPORT OR ANYWHERE OUTSIDE)
- OTHER
- SAFE HAVEN
- RENTAL BY CLIENT, WITH VASH HOUSING SUBSIDY
- RENTAL BY CLIENT, WITH OTHER (NON-VASH) ONGOING HOUSING SUBSIDY
- OWNED BY CLIENT, WITH ONGOING HOUSING SUBSIDY
- RENTAL BY CLIENT, NO ONGOING HOUSING SUBSIDY
- DON'T KNOW
- REFUSED

**\*Length of Stay at Previous Residence:**

\_\_\_/\_\_\_/\_\_\_

**(CHOOSE ONE)**

- ONE WEEK OR LESS

- MORE THAN ONCE WEEK, BUT LESS THAN ONE MONTH
- ONE TO THREE MONTHS
- MORE THAN THREE MONTHS, BUT LESS THAN ONE YEAR
- ONE YEAR OR LONGER
- DON'T KNOW
- REFUSED

**Date Left Last Permanent Address:**

**\*Zip Code of Last Permanent Address:**

**\*Zip Code Data Quality: (CHOOSE ONE)**

- FULL OR PARTIAL ZIP CODE REPORTED
- DON'T KNOW
- REFUSED

**\*General Health: (CHOOSE ONE)**

- EXCELLENT
- VERY GOOD
- GOOD
- FAIR
- POOR
- DON'T KNOW
- REFUSED

**Currently Pregnant:**

**(CHOOSE ONE)**

- NO
- YES
- DON'T KNOW
- REFUSED

**Due Date:** \_\_\_/\_\_\_/\_\_\_

**\*Employment Status: (CHOOSE ONE)**

- NO
- YES
- DON'T KNOW
- REFUSED

**Number of Hours Worked in the Past Week:** \_\_\_\_\_

**Employment Tenure: (CHOOSE ONE)**

- PERMANENT
- TEMPORARY
- SEASONAL
- DON'T KNOW
- REFUSED

**(If Unemployed) Looking for Work? (If Employed) Looking for Additional Employment or Increased Hours?**

- NO
- YES
- DON'T KNOW
- REFUSED

**(CHOOSE ONE)**

- YES
- NO
- DON'T KNOW
- REFUSED

**If Yes, Was/Is the Child Connected to the McKinney-Vento Homeless Assistance Act School Liaison?:**

- YES
- NO
- DON'T KNOW
- REFUSED

**Type of School:**

- PUBLIC SCHOOL - DON'T KNOW  
- PAROCHIAL OR OTHER PRIVATE SCHOOL - REFUSED

**If Not Enrolled, Last Date of Enrollment:** (MM/YYYY)     /     /

**\*Student Body Age: (CHOOSE ONE)**

- NURSERY/PRESCHOOL
- KINDERGARTEN SCHOOL
- ELEMENTARY SCHOOL
- MIDDLE SCHOOL
- APPROVED JUNIOR HIGH SCHOOL
- FOUR-YEAR HIGH SCHOOL
- COUNTY VOC-TECH SCHOOL OR INSTITUTE
- EVENING HIGH SCHOOL (APPROVED)
- SIX YEAR HIGH SCHOOL
- HIGH SCHOOL – OTHER THAN LISTED ABOVE
- SPECIAL ELEM/SEC. SCHOOL FOR HANDICAPPED
- SPECIAL ELEMENTARY SCHOOL FOR HANDICAPPED
- SPECIAL SECONDARY SCHOOL FOR HANDICAPPED
- THREE YEAR SCHOOL
- ADULT EDUCATION SCHOOL
- EVENING SCHOOL FOR FOREIGN BORN (APPROVED)

**\*School County: (CHOOSE ONE)**

- |             |             |            |           |
|-------------|-------------|------------|-----------|
| -ATLANTIC   | -ESSEX      | -MIDDLESEX | -SALEM    |
| -BERGEN     | -GLOUCESTER | -MONMOUTH  | -SOMERSET |
| -BURLINGTON | -HUDSON     | -MORRIS    | -SUSSEX   |
| -CAMDEN     | -HUNTERDON  | -OCEAN     | -UNION    |
| -CUMBERLAND | -MERCER     | -PASSIAC   | -WARREN   |

**\*School District:** \_\_\_\_\_

**\*School Name:** \_\_\_\_\_

**Other School Name:** \_\_\_\_\_

**\*Barriers to Enrollment: (SELECT ALL THAT APPLY)**

- ☐ NONE
  - ☐ SCHOOL SELECTION
  - ☐ IMMUNIZATION OR OTHER MEDICAL RECORDS ISSUES
  - ☐ RESIDENCY REQUIRED
  - ☐ LEGAL GUARDIANSHIP REQUIREMENTS RECORDS
  - ☐ SCHOOL RECORDS
  - ☐ TRANSPORTATION
  - ☐ OTHER ENROLLMENT
  - ☐ BIRTH CERTIFICATES
  - ☐ PHYSICAL EXAMINATION

**\*Homeless Cause: (CHOOSE ONE)**

- BENEFIT LOSS/REDUCTION
- JOB INCOME/REDUCTION
- EVICTION

**\*Marital Status:**  
**(CHOOSE ONE)**

- SINGLE
- MARRIED



- RELOCATION
- RELEASED FROM PRISON/JAIL
- RELEASED FROM HOSPITAL
- RELEASED FROM PSYCH. FACILITY
- ILLNESS
- INJURY
- DOMESTIC VIOLENCE
- ASKED TO LEAVE CHARED RESIDENCE
- DRUG/ALCOHOL ABUSE
- OTHER
- NATURAL DISASTER
- FORECLOSURE – RENTED PROPERTY
- FORECLOSURE – OWNED PROPERTY
- UNKNOWN
- NOT HOMELESS

- COMMON LAW
- DIVORCED
- SEPARATED
- REMARRIED
- WIDOW(ER)
- CIVIL UNION

**\*Highest Level of School Completed: (CHOOSE ONE)**

- NO SCHOOLING COMPLETED
- NURSERY SCHOOL TO 4<sup>TH</sup> GRADE
- 5<sup>TH</sup> TO 6<sup>TH</sup> GRADE
- 7<sup>TH</sup> TO 8<sup>TH</sup> GRADE
- 9<sup>TH</sup> GRADE
- 10<sup>TH</sup> GRADE
- 11<sup>TH</sup> GRADE
- 12<sup>TH</sup> GRADE – NO DIPLOMA
- HIGH SCHOOL DIPLOMA
- GED
- POST-SECONDARY SCHOOL
- DON'T KNOW
- REFUSED

**\*Received Vocational Training or Apprenticeship Certificate: (CHOOSE ONE)**

- YES
- NO
- DON'T KNOW
- REFUSED

**\*Post-Secondary Degree: (SELECT ALL THAT APPLY)**

- ☐ NONE
- ☐ DOCTORATE
- ☐ CERTIFICATE OF ADVANCED TRAINING OR SKILLED ARTISAN
- ☐ MASTERS
- ☐ OTHER GRADUATE/PROFESSIONAL DEGREE
- ☐ DON'T KNOW
- ☐ REFUSED

**\*Current Student: (CHOOSE ONE)**

- YES
- NO
- DON'T KNOW
- REFUSED

**\*Veteran: (CHOOSE ONE)**

- YES
- NO
- DON'T KNOW
- REFUSED

**\*Individual/Family Type: (CHOOSE ONE)**

- INDIVIDUAL MALE HEAD
- INDIVIDUAL FEMALE YOUTH HEAD
- INDIVIDUAL MALE YOUTH (<18)
- INDIVIDUAL FEMALE YOUTH (<18)
- SINGLE PARENT FAMILY – MALE HEAD
- SINGLE PARENT FAMILY – FEMALE
- SINGLE PARENT FAMILY – YOUTH
- TWO PARENT FAMILY – ADULT
- TWO PARENT FAMILY – YOUTH
- ADULT COUPLE WITHOUT CHILDREN

**\*Number of Children: \_\_\_\_\_**  
**ASK):**

**\*If Number Placed (PAGE WILL REFRESH AND**

AGE: \_\_\_\_\_ GENDER: \_\_\_\_\_

AGE: \_\_\_\_\_ GENDER: \_\_\_\_\_

**Birth Place:** \_\_\_\_\_

**Citizen: (CHOOSE ONE)**

- US CITIZEN
- REGISTERED ALIEN
- UNDOCUMENTED ALIEN

**Alien Registration:** \_\_\_\_\_

**Household Size:** \_\_\_\_\_

**Primary Language: (CHOOSE ONE)**

- |           |                 |              |
|-----------|-----------------|--------------|
| - ENGLISH | - HINDI         | - GREEK      |
| - SPANISH | - RUSSIAN       | - ITALIAN    |
| - FRENCH  | - SIGN LANGUAGE | - JAPANESE   |
| - CHINESE | - OTHER         | - VIETNAMESE |
| - HEBREW  | - CREOLE        | - BRAILLE    |

**\*Services Sought: (CHOOSE AS MANY APPLY)**

- |   |   |
|---|---|
| <input type="checkbox"/> SHELTER/HOUSING                        | <input type="checkbox"/> DRUG TREATMENT                 |
| <input type="checkbox"/> MENTAL HEALTH CARE                     | <input type="checkbox"/> MEDICAL CARE                   |
| <input type="checkbox"/> LEGAL AID – CRJS/CIVIL                 | <input type="checkbox"/> LEGAL AID – IMMIGRATION        |
| <input type="checkbox"/> FINANCIAL ASSISTANCE – UTILITIES       | <input type="checkbox"/> FINANCIAL ASSISTANCE - HOUSING |
| <input type="checkbox"/> FINANCIAL ASSISTANCE - MOVING EXPENSES | <input type="checkbox"/> FINANCIAL ASSISTANCE – OTHER   |
| <input type="checkbox"/> OTHER                                  |   |

**Emergency Contact:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** HOME/WORK/CELL \_\_\_\_\_

**Relation:** \_\_\_\_\_

## Appendix C

### Barriers to Housing Stability Assessment

|                     |                         |
|---------------------|-------------------------|
| <b>CLIENT NAME:</b> | <b>Assessment Date:</b> |
|---------------------|-------------------------|

|   |  |   |
|---|--|---|
| <b>1. TENANT SCREENING BARRIERS TO GETTING HOUSING</b>  |  |   |
| <b>TENANT SCREEING BARRIERS (Check one)</b><br><input type="checkbox"/> Barriers <i>(Complete below)</i> <input type="checkbox"/> No Barriers <i>(Skip to next section)</i> <input type="checkbox"/> Barriers not assessed/NA <i>(Skip to next section)</i> |  |   |
| <b>1A. RENTAL HISTORY</b>   |  |   |
| Number of evictions or unlawful detainers:  | Poor reference from current/prior landlords: <i>(Y/N/NA)</i> | Lack of rental history: <i>(Y/N/NA)</i> |
| <b>1B. CREDIT HISTORY</b>   |  |   |
| Unpaid rent or utility bills: <i>(Y/N/NA)</i>   | Lack of or poor credit history: <i>(Y/N/NA)</i>              |   |
| <b>1C. CRIMINAL HISTORY</b>   |  |   |
| One or more misdemeanors: <i>(Y/N/NA)</i>   | Critical felony (sex crime, arson, drugs): <i>(Y/N/NA)</i>   | Other felony: <i>(Y/N/NA)</i>           |

|   |                                 |   |   |
|---|---------------------------------|---|---|
| <b>2. PERSONAL BARRIERS TO GETTING OR KEEPING HOUSING</b>   |                                 |   |   |
| <b>PERSONAL BARRIERS (Check one)</b><br><input type="checkbox"/> Barriers <i>(Complete below)</i> <input type="checkbox"/> No Barriers <i>(Skip to next section)</i> <input type="checkbox"/> Barriers not assessed <i>(Skip to next section)</i> |                                 |   |   |
| Indicate Yes (Y), No (N), or Not Applicable (N/A) for each of the following categories  |                                 |   |   |
|   | Resulted in the loss of housing | Currently affects housing/ability to obtain housing | Currently affects employment/ability to obtain employment |
| Substance Abuse   |                                 |   |   |
| Mental Health   |                                 |   |   |
| Medical/Physical Condition  |                                 |   |   |
| Domestic Violence   |                                 |   |   |

|   |  |   |
|---|--|---|
| <b>3. INCOME BARRIERS TO GETTING OR KEEPING HOUSING</b>   |  |   |
| <b>INCOME BARRIERS (Check one)</b><br><input type="checkbox"/> Barriers <i>(Complete below)</i> <input type="checkbox"/> No Barriers <i>(Skip to next section)</i> <input type="checkbox"/> Barriers not assessed <i>(Skip to next section)</i> |  |   |
| <b>3A. INCOME</b>   |  |   |
| Needs temporary assistance to get or keep housing: <i>(Y/N/NA)</i>  | If housed: percent of income spent on housing:                       | If not housed: amount able to spend on housing:                       |
| <b>3B. OTHER INCOME—RELATED</b>   |  |   |
| Lacks steady, full time employment: <i>(Y/N/NA)</i>   | Lacks high school diploma or GED: <i>(Y/N/NA)</i>                    | Currently has large amount of debt: <i>(Y/N/NA)</i> : if so, how much |
| Job barrier: lack of reliable transportation: <i>(Y/N/NA)</i>   | Job barrier: lack of reliable/affordable child care: <i>(Y/N/NA)</i> | Job barrier: limited English proficiency: <i>(Y/N/NA)</i>             |
| Job barrier: has adult in the household worked in the last 3 years: <i>(Y/N/NA)</i>   |  |   |

### Additional Areas of Service Needs

| <b>Domain</b>                | <b>Y/N/NA</b> | <b>Notes</b> |
|------------------------------|---------------|--------------|
| <b>Income</b>                |               |              |
| <b>Employment</b>            |               |              |
| <b>Housing</b>               |               |              |
| <b>Food</b>                  |               |              |
| <b>Childcare</b>             |               |              |
| <b>Children's Education</b>  |               |              |
| <b>Adult Education</b>       |               |              |
| <b>Legal</b>                 |               |              |
| <b>Health Care</b>           |               |              |
| <b>Life Skills</b>           |               |              |
| <b>Mental Health</b>         |               |              |
| <b>Substance Abuse</b>       |               |              |
| <b>Family Relations</b>      |               |              |
| <b>Transportation</b>        |               |              |
| <b>Community Involvement</b> |               |              |
| <b>Safety</b>                |               |              |
| <b>Parenting Skills</b>      |               |              |

## HOUSING STABILIZATION ASSESSMENT

CLIENT NAME \_\_\_\_\_ DATE OF ASSESSMENT \_\_\_\_\_

### BARRIERS TO HOUSING STABILIZATION

Identify barriers to stable housing situation. Topical areas of concern may include Employment/Income; Budgeting; Rent History/Credit History; Unexpected medical expenses; Health; Mental or Physical Disabilities; Substance Abuse; Eviction Notice; Termination of existing residential option; Education Level; Family Relations; Child Support; Domestic Violence

Victim/Survivor; Criminal Record, Other

### GOALS OF TENANT RE HOUSING STABILIZATION

Describe personal goals re housing, employment, income, health, education, and other applicable issues

### ACTION STEPS WITH ANTICIPATED EXECUTION DATES (Month/Year)

Describe planned activities and actions to clear barriers and achieve goals along with projected timeline

By completing this Housing Stabilization Assessment, the applicant acknowledges that the information presented herein is accurate and true, and that applicant will work to achieve the stated goals and action items. Client will work with and update case manager as goals and action items are achieved, and/or to address any challenges or obstacles that may arise.

---

**Appendix D**  
**ESG Prevention & Rapid Re-Housing Participant File Checklist**

| Check <input checked="" type="checkbox"/> | Items for Participant File – enrolled in HP or RRH  |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|---|---|--|------------------------------|--|---|--|---|--|---|--|--|--|--|--|--|--|--|--|---|--|--|
|   | <ul style="list-style-type: none"> <li>• Intake form</li> <li>• Participant consent form (all members)</li> </ul>   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | <ul style="list-style-type: none"> <li>• Income Determination Form</li> <li>• Income eligibility verification</li> </ul> <table border="1"> <tr><td></td><td>Copy of most recent paystubs</td></tr> <tr><td></td><td>Written verification of income from employer</td></tr> <tr><td></td><td>Oral verification of income from employer</td></tr> <tr><td></td><td>Self declaration (case manager must document attempts to obtain third party verification)</td></tr> <tr><td></td><td>Copy of most recent tax returns</td></tr> <tr><td></td><td>Copy of most recent dividend income statement</td></tr> <tr><td></td><td>Copy of most recent payment statement from SSA or other pension provider</td></tr> <tr><td></td><td>Copy of most recent unemployment payment statement</td></tr> <tr><td></td><td>Copy of most recent welfare payment statement or benefit notice</td></tr> <tr><td></td><td>Copy of most recent support payment, notice or court order</td></tr> </table> |  | Copy of most recent paystubs |  | Written verification of income from employer                                      |  | Oral verification of income from employer |  | Self declaration (case manager must document attempts to obtain third party verification) |  | Copy of most recent tax returns  |  | Copy of most recent dividend income statement        |  | Copy of most recent payment statement from SSA or other pension provider                             |  | Copy of most recent unemployment payment statement |  | Copy of most recent welfare payment statement or benefit notice |  | Copy of most recent support payment, notice or court order |
|   | Copy of most recent paystubs  |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Written verification of income from employer  |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Oral verification of income from employer   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Self declaration (case manager must document attempts to obtain third party verification)   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Copy of most recent tax returns   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Copy of most recent dividend income statement   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Copy of most recent payment statement from SSA or other pension provider  |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Copy of most recent unemployment payment statement  |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Copy of most recent welfare payment statement or benefit notice   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Copy of most recent support payment, notice or court order  |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | <ul style="list-style-type: none"> <li>• Housing status verification – see homeless documentation matrix</li> </ul>   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | <ul style="list-style-type: none"> <li>• Resident Status</li> </ul> <table border="1"> <tr><td></td><td>Birth Certificate</td></tr> <tr><td></td><td>Social security card</td></tr> <tr><td></td><td>Green Card</td></tr> </table>  |  | Birth Certificate            |  | Social security card  |  | Green Card                                |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Birth Certificate   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Social security card  |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Green Card  |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | <ul style="list-style-type: none"> <li>• Housing barriers assessment</li> </ul>   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | <ul style="list-style-type: none"> <li>• Financial Assistance Need Verification</li> </ul> <table border="1"> <tr><td></td><td>Copy of lease</td></tr> <tr><td></td><td>Signed letter from landlord indicating total amount of arrears and final due date</td></tr> <tr><td></td><td>Court order indicating settlement amount</td></tr> <tr><td></td><td>Utility Bill</td></tr> <tr><td></td><td>Signed letter from utility company indicating total amount of arrears and final due date</td></tr> <tr><td></td><td>Quote for moving costs on official agency letterhead</td></tr> <tr><td></td><td>Copy of rental application or official documentation from landlord indicating rental application fee</td></tr> </table>  |  | Copy of lease                |  | Signed letter from landlord indicating total amount of arrears and final due date |  | Court order indicating settlement amount  |  | Utility Bill  |  | Signed letter from utility company indicating total amount of arrears and final due date |  | Quote for moving costs on official agency letterhead |  | Copy of rental application or official documentation from landlord indicating rental application fee |  |  |  |   |  |  |
|   | Copy of lease   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Signed letter from landlord indicating total amount of arrears and final due date   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Court order indicating settlement amount  |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Utility Bill  |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Signed letter from utility company indicating total amount of arrears and final due date  |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Quote for moving costs on official agency letterhead  |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Copy of rental application or official documentation from landlord indicating rental application fee  |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | <ul style="list-style-type: none"> <li>• Housing Stabilization Plan</li> </ul>  |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | HQS inspection – (if moving to new unit and receiving rent assistance/security deposit)   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Rent Assistance Calculation Worksheet (if receiving rent assistance/security deposit, rent arrears)   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Transition Plan (if needed)   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   | Exit form   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |
|   |   |  |                              |  |   |  |   |  |   |  |  |  |  |  |  |  |  |  |   |  |  |

|                |   |
|----------------|---|
| <b>Check</b> ✓ | <b>Items for Applicant File – not enrolled in HP or RRH</b>   |
|                | <ul style="list-style-type: none"> <li>• <b>Eligibility Criteria:</b></li> <li>• Intake form</li> </ul>   |
|                | <ul style="list-style-type: none"> <li>• Participant consent form</li> </ul>  |
|                | <ul style="list-style-type: none"> <li>• Other: _____</li> </ul>  |
|                | <ul style="list-style-type: none"> <li>• Summary Statement Describing reason for Denial</li> </ul>  |
|                | Items in file depends on what was captured during application   |
|                |   |
| <b>Check</b> ✓ | <b>Items for Applicant File – Recertification</b>   |
|                | <ul style="list-style-type: none"> <li>• Income Eligibility Certification</li> </ul>  |
|                | <ul style="list-style-type: none"> <li>• Rent Assistance Calculation Worksheet (if receiving rent assistance/security deposit, rent arrears)</li> </ul> |
|                | <ul style="list-style-type: none"> <li>• Updated Housing Stabilization Plan</li> </ul>  |
|                | <ul style="list-style-type: none"> <li>• Housing Barriers Assessment</li> </ul>   |



# Homeless Definition

|                                   |            |                                       |   |
|-----------------------------------|------------|---------------------------------------|---|
| CRITERIA FOR<br>DEFINING HOMELESS | Category 1 | Literally Homeless                    | <p>(1) Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:</p> <ul style="list-style-type: none"> <li>(i) Has a primary nighttime residence that is a public or private place not meant for human habitation;</li> <li>(ii) Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); <u>or</u></li> <li>(iii) Is exiting an institution where (s)he has resided for 90 days or less <u>and</u> who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution</li> </ul> |
|                                   | Category 2 | Imminent Risk of Homelessness         | <p>(2) Individual or family who will imminently lose their primary nighttime residence, provided that:</p> <ul style="list-style-type: none"> <li>(i) Residence will be lost within 14 days of the date of application for homeless assistance;</li> <li>(ii) No subsequent residence has been identified; <u>and</u></li> <li>(iii) The individual or family lacks the resources or support networks needed to obtain other permanent housing</li> </ul>   |
|                                   | Category 3 | Homeless under other Federal statutes | <p>(3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:</p> <ul style="list-style-type: none"> <li>(i) Are defined as homeless under the other listed federal statutes;</li> <li>(ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;</li> <li>(iii) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; <u>and</u></li> <li>(iv) Can be expected to continue in such status for an extended period of time due to special needs or barriers</li> </ul>  |
|                                   | Category 4 | Fleeing/<br>Attempting to Flee DV     | <p>(4) Any individual or family who:</p> <ul style="list-style-type: none"> <li>(i) Is fleeing, or is attempting to flee, domestic violence;</li> <li>(ii) Has no other residence; <u>and</u></li> <li>(iii) Lacks the resources or support networks to obtain other permanent housing</li> </ul>   |





# Homeless Definition

## RECORDKEEPING REQUIREMENTS



|                            |            |                                       |  |
|----------------------------|------------|---------------------------------------|--|
| RECORDKEEPING REQUIREMENTS | Category 1 | Literally Homeless                    | <ul style="list-style-type: none"> <li>Written observation by the outreach worker; <u>or</u></li> <li>Written referral by another housing or service provider; <u>or</u></li> <li>Certification by the individual or head of household seeking assistance stating that (s)he was living on the streets or in shelter;</li> <li>For individuals exiting an institution—one of the forms of evidence above <u>and</u>: <ul style="list-style-type: none"> <li>discharge paperwork <u>or</u> written/oral referral, <u>or</u></li> <li>written record of intake worker's due diligence to obtain above evidence <u>and</u> certification by individual that they exited institution</li> </ul> </li> </ul>  |
|                            | Category 2 | Imminent Risk of Homelessness         | <ul style="list-style-type: none"> <li>A court order resulting from an eviction action notifying the individual or family that they must leave; <u>or</u></li> <li>For individual and families leaving a hotel or motel—evidence that they lack the financial resources to stay; <u>or</u></li> <li>A documented and verified oral statement; <u>and</u></li> <li>Certification that no subsequent residence has been identified; <u>and</u></li> <li>Self-certification or other written documentation that the individual lack the financial resources and support necessary to obtain permanent housing</li> </ul>  |
|                            | Category 3 | Homeless under other Federal statutes | <ul style="list-style-type: none"> <li>Certification by the nonprofit or state or local government that the individual or head of household seeking assistance met the criteria of homelessness under another federal statute; <u>and</u></li> <li>Certification of no PH in last 60 days; <u>and</u></li> <li>Certification by the individual or head of household, and any available supporting documentation, that (s)he has moved two or more times in the past 60 days; <u>and</u></li> <li>Documentation of special needs <u>or</u> 2 or more barriers</li> </ul>  |
|                            | Category 4 | Fleeing/ Attempting to Flee DV        | <ul style="list-style-type: none"> <li><i>For victim service providers:</i> <ul style="list-style-type: none"> <li>An oral statement by the individual or head of household seeking assistance which states: they are fleeing; they have no subsequent residence; and they lack resources. Statement must be documented by a self-certification or a certification by the intake worker.</li> </ul> </li> <li><i>For non-victim service providers:</i> <ul style="list-style-type: none"> <li>Oral statement by the individual or head of household seeking assistance that they are fleeing. This statement is documented by a self-certification or by the caseworker. Where the safety of the individual or family is not jeopardized, the oral statement must be verified; <u>and</u></li> <li>Certification by the individual or head of household that no subsequent residence has been identified; <u>and</u></li> <li>Self-certification, or other written documentation, that the individual or family lacks the financial resources and support networks to obtain other permanent housing.</li> </ul> </li> </ul> |



# At Risk of Homelessness

|  |            |                                  |   |
|--|------------|----------------------------------|---|
| CRITERIA FOR DEFINING<br>AT RISK OF HOMELESSNESS | Category 1 | Individuals and Families         | <p>An individual or family who:</p> <ul style="list-style-type: none"> <li>(i) Has an annual income below <u>30%</u> of median family income for the area; <u>AND</u></li> <li>(ii) Does not have sufficient resources or support networks immediately available to prevent them from moving to an emergency shelter or another place defined in Category 1 of the “homeless” definition; <u>AND</u></li> <li>(iii) Meets one of the following conditions: <ul style="list-style-type: none"> <li>(A) Has moved because of economic reasons 2 or more times during the 60 days immediately preceding the application for assistance; <u>OR</u></li> <li>(B) Is living in the home of another because of economic hardship; <u>OR</u></li> <li>(C) Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; <u>OR</u></li> <li>(D) Lives in a hotel or motel and the cost is not paid for by charitable organizations or by Federal, State, or local government programs for low-income individuals; <u>OR</u></li> <li>(E) Lives in an SRO or efficiency apartment unit in which there reside more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room; <u>OR</u></li> <li>(F) Is exiting a publicly funded institution or system of care; <u>OR</u></li> <li>(G) Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient’s approved Con Plan</li> </ul> </li> </ul> |
|  | Category 2 | Unaccompanied Children and Youth | A child or youth who does not qualify as homeless under the homeless definition, but qualifies as homeless under another Federal statute  |
|  | Category 3 | Families with Children and Youth | An unaccompanied youth who does not qualify as homeless under the homeless definition, but qualifies as homeless under section 725(2) of the McKinney-Vento Homeless Assistance Act, and the parent(s) or guardian(s) or that child or youth if living with him or her.   |

| <b>Annual income for 24 CFR 5 Income Calculation includes:</b> |  |
|--|--|
| <b>Income that should be included</b>                          |  |
| (1)  | The full amount, before payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, and other compensation for personal services (excludes wages earned by children 18 and under   |
| (2)  | The full amount of periodic payments received from social security, annuities, insurance policies, retirement funds, pensions, disability or death benefits and other similar types of periodic receipts, including lump sum payment for delayed start of a periodic payment;  |
| (3)  | Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation and severance pay; excluding temporary increases in unemployment during COVID 19 pandemic  |
| (4)  | Welfare assistance. Welfare or other payments to families or individuals, based on need, that are made under program funded, separately or jointly, by Federal, State or local governments (i.e., Social Security Income (SSI) and general assistance available through state welfare programs);   |
| (5)  | Periodic and determinable allowances, such as alimony and child support payments, and regular contributions or gifts received from persons not residing in the dwelling;   |
| (6)  | Net income from the operation of a business or profession;   |
| (7)  | Interest, dividends, and other net income of any kind from real and personal property/assets   |
| (8)  | All regular pay, special pay and allowances of a member of the Armed Forces, except special hostile fire pay.  |
| <b>Income That Should Be Excluded</b>                          |  |
|  | <b>Annual income does not include:</b>   |
| (1)  | Income from employment of children (including foster children) under the age of 18 years;  |
| (2)  | Payments received for the care of foster children or foster adults (usually individuals with disabilities, unrelated to the tenant family, who are unable to live alone);  |
| (3)  | Lump-sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance and worker's compensation), capital gains, and settlement for personal or property;  |
| (4)  | Amounts received by the family, that are specifically for, or in reimbursement of, the cost of medical expenses for any family member;   |
| (5)  | Income of a live-in aide as defined in Sec. 813.102;   |
| (6)  | The full amount of student assistance paid directly to the student or to the educational institution;  |
| (7)  | Amounts received under training programs funded by HUD;  |
| (8)  | Amounts received by a disabled person that are disregarded for a limited time for purposes of SSI income eligibility and benefits because they are set aside for use under a Plan for Achieving Self-Support (PASS); or  |
| (9)  | Amounts received by a participant in other publicly assisted programs which are specifically for or in reimbursement of out-of-pocket expenses incurred (special equipment, clothing, transportation, child care, etc.) and which are made solely to allow participation in a specific program;  |
| (10)   | A resident service stipend. A resident service stipend is a modest amount (not to exceed \$200 per month) received by a resident for performing a service for the owner, on a part-time basis, that enhances the quality of life in the development. Such services may include, but are not limited to, fire patrol, hall monitoring lawn maintenance, and resident initiatives coordination. No resident may receive more than one such stipend during same period of time; |
| (11)   | Compensation from state or local employment training programs and training of a family member as resident management staff. Amounts excluded by this provision must be received under employment training programs with clearly defined goals and objectives, and are excluded only for a limited period as determined in advance;   |
| (12)   | Temporary, non-recurring or sporadic income (including gifts); <b>such as extra unemployment benefits during COVID 19 pandemic</b>   |
| (13)   | Reparation payments paid by a foreign government pursuant to claims filed under the laws of that government by persons who were persecuted during the Nazi era;  |
| (14)   | <b>Earnings in excess of \$480 for each full time student 18 years old or older (excluding head of household &amp; spouse);</b>  |
| (15)   | Adoption assistance payments in excess of \$480 per adopted child;   |
| (16)   | Deferred periodic payments of SSI income and social security benefits;   |

|      |   |
|------|---|
| (17) | Amounts received by the family in the form of refunds or rebates under state or local law for property taxes paid on the dwelling unit;   |
| (18) | Amounts paid by a State agency to a family with a developmentally disabled family member living at home to offset the cost of services and equipment needed to keep the developmentally disabled family member at home;   |
| (19) | Amounts specifically excluded by any other Federal statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under any program to which the exclusions set forth in 24 CFR 5.609(c) apply. Updated notices are published when necessary in the FEDERAL REGISTER and distributed to PHAs and housing owners identifying the benefits that qualify for this income exclusion in any Federal program or in specific Federal programs. The following updated list of federally mandated exclusions dated <b>May 20, 2014</b> supersedes the notice published in the <b>Federal Register</b> on December 14, 2012: |
|      | (i) The value of the allotment provided to an eligible household under the Food Stamp Act of 1977 (7 U.S.C. 2017(b));   |
|      | (ii) Payments to volunteers under the Domestic Volunteer Service Act of 1973 (42 U.S.C. 5044, 5058);  |
|      | (iii) Payments received under the Alaska Native Claims Settlement Act (43 U.S.C. 1626);   |
|      | (iv) Income derived from certain submarginal land of the United States that is held in trust for certain Indian tribes (25 U.S.C. 459e);  |
|      | (v) Payments or allowances made under the Department of Health and Human Services' Low-Income Home Energy Assistance Program (42 U.S.C. 8624(f));   |
|      | (vi) Income derived from the disposition of funds of the Grand River Band of Ottawa Indians (Public Law 94-540, 90 Statute 2503-2504);  |
|      | (vii) The first \$2,000 of per capita shares received from judgment funds awarded by the Indian Claims Commission or the Court of Claims (25 U.S.C. 1407-1408) or from funds held in trust for an Indian tribe by the Secretary of Interior (25 U.S.C. 117);  |
|      | (viii) Scholarships funded under Title IV of the Higher Education Act of 1965 including awards under the Federal work-study program or under the Bureau of Indian Affairs student assistance programs that are made available to cover the costs of tuition, fees, books, equipment, materials, supplies, transportation, and miscellaneous personal expenses of a student at an educational institution (20 U.S.C. 1087uu);  |
|      | (ix) Payments received from programs funded under Title V of the Older Americans Act of 1965 (U.S.C. 3056(f));  |
|      | (x) Payments received after January 1, 1989, from the Agent Orange Settlement Fund or any other fund established pursuant to the settlement in the In Re Agent Orange product liability litigation, M.D.L. No. 381 (E.D.N.Y.); and  |
|      | (xi) Payments received under Maine Indian Claims Settlement Act of 1980 (Pub.L. 96-420, 94 Statute 1785);   |
|      | (xii) The value of any child care provided or arranged (or any amount received as payment for such care or reimbursement for costs incurred for such care) under the Child Care and Development Block Grant Act of 1990 (42 U.S.C. 9858q);  |
|      | (xiii) Earned income tax credit refund payments received from the Internal Revenue Service on or after January 1, 1991. Payments may be received in a resident's regular pay or as a single sum payment;  |
|      | (xiv) Payments by the Indian Claims Commission to the Confederated Tribes and Bands of Yakima Indian Nation or the Apache Tribe of Mescalero Reservation (Pub. L. 95-433);  |
|      | (xv) Allowances, earnings and payments to AmeriCorps participants under the National and Community Service Act of 1990 ( <a href="#">42 U.S.C. 12637(d)</a> );  |
|      | (xvi) Any allowance paid under the provisions of <a href="#">38 U.S.C. 1833(c)</a> to children of Vietnam veterans born with spina bifida ( <a href="#">38 U.S.C. 1802-05</a> ), children of women Vietnam veterans born with certain birth defects ( <a href="#">38 U.S.C. 1811-16</a> ), and children of certain Korean service veterans born with spina bifida ( <a href="#">38 U.S.C. 1821</a> ).   |
|      | (xvii) Any amount of crime victim compensation (under the Victims of Crime Act) received through crime victim assistance (or payment or reimbursement of the cost of such assistance) as determined under the Victims of Crime Act because of the commission of a crime against the applicant under the Victims of Crime Act ( <a href="#">42 U.S.C. 10602(c)</a> );  |
|      | (xviii) Allowances, earnings, and payments to individuals participating in programs under the Workforce Investment Act of 1998 ( <a href="#">29 U.S.C. 2931(a)(2)</a> );  |
|      | (xix) Any amount received under the Richard B. Russell School Lunch Act ( <a href="#">42 U.S.C. 1760(e)</a> ) and the Child Nutrition Act of 1966 ( <a href="#">42 U.S.C. 1780(b)</a> ), including reduced-price lunches and food under the Special Supplemental Food Program for Women, Infants, and Children (WIC);   |
|      | (xx) Payments, funds, or distributions authorized, established, or directed by the Seneca Nation Settlement Act of 1990 ( <a href="#">25 U.S.C. 1774f(b)</a> );   |
|      | (xxi) Payments from any deferred U.S. Department of Veterans Affairs disability benefits that are received in a   |

|  |  |
|--|--|
|  | lump sum amount or in prospective monthly amounts (42 U.S.C. § 1437a(b)(4));   |
|  | (xxii) Compensation received by or on behalf of a veteran for service-connected disability, death, dependency, or indemnity compensation as provided by an amendment by the Indian Veterans Housing Opportunity Act of 2010 ( <a href="#">Pub. L. 111-269</a> ; <a href="#">25 U.S.C. 4103</a> (9)) to the definition of income applicable to programs authorized under the Native American Housing Assistance and Self-Determination Act (NAHASDA) ( <a href="#">25 U.S.C. 4101 et seq.</a> ) and administered by the Office of Native American Programs; |
|  | (xxiii) A lump sum or a periodic payment received by an individual Start Printed Page 28940 Indian pursuant to the Class Action Settlement Agreement in the case entitled <i>Elouise Cobell et al. v. Ken Salazar et al.</i> , 816 F.Supp.2d 10 (Oct. 5, 2011 D.D.C.), for a period of one year from the time of receipt of that payment as provided in the Claims Resolution Act of 2010 ( <a href="#">Pub. L. 111-291</a> );   |
|  | (xxiv) Any amounts in an “individual development account” as provided by the Assets for Independence Act, as amended in 2002 ( <a href="#">Pub. L. 107-110</a> , <a href="#">42 U.S.C. 604</a> (h)(4));  |
|  | (xxv) Per capita payments made from the proceeds of Indian Tribal Trust Cases as described in PIH Notice 2013-30 “Exclusion from Income of Payments under Recent Tribal Trust Settlements” ( <a href="#">25 U.S.C. 117b</a> (a)); and  |
|  | (xxvi) Major disaster and emergency assistance received by individuals and families under the Robert T. Stafford Disaster Relief and Emergency Assistance Act (Pub. L. 93-288, as amended) and comparable disaster assistance provided by States, local governments, and disaster assistance organizations ( <a href="#">42 U.S.C. 5155</a> (d))   |

## Appendix F

### Income Determination Form

| <b>Income Calculation Worksheet</b>               |      |  |
|---|------|--|
|   |      |  |
| (1)   |      | Annual Income from all sources   |
| (2)   |      | Income Exclusions  |
| (3)   | \$ - | Annual Income  |
| <b>Calculating Adjusted Income</b>                |      |  |
| <b>Dependent Allowance</b>                        |      |  |
| (4)   |      | Number of Dependents   |
| (5)   | \$ - | Multiply Line 4 by \$480   |
| <b>Child Care Allowance</b>                       |      |  |
| (6)   |      | Anticipated Unreimbursed Expenses for Care of Children                                   |
| <b>Disabled Assistance Allowance</b>              |      |  |
| (7)   |      | Disabled Assistance Expenses   |
| (8)   | \$ - | Multiply Line 3 by 0.03  |
| (9)   | \$ - | Subtract Line 8 from Line 7  |
| (10)  |      | Family Member Earnings which were dependent on the disabled assistance expenses          |
| (11)  | \$ - | Lesser of Lines 9 or 10  |
| <b>Medical Expenses/Elderly Family Allowances</b> |      |  |
| (12)  |      | List Total for Medical Expenses  |
| (13)  | \$ - | If Line 9>0, enter amount from Line 12, otherwise add Line 7 and 12 and subtract Line 8. |
| (14)  |      | Elderly/Disabled Allowance ( Enter \$400, if applicable)                                 |
| <b>Adjusted Income</b>                            |      |  |
| (15)  | \$ - | Total Income Adjustments (Add Lines 5, 6, 11,13, and 14)                                 |
| (16)  | \$ - | Adjusted Income (Subtract Line 15 from Line 3)   |

## CALCULATION OF HOUSING SUBSIDY AND MONTHLY OPERATING BUDGET

Client Name \_\_\_\_\_

### TENANT PORTION

Adjusted Annual Income (AAI) \$ \_\_\_\_\_  
Adjusted Monthly Income (AMI) = (AAI / 12) \$ \_\_\_\_\_  
Maximum Affordable Housing Cost (AMI \* .50) \$ \_\_\_\_\_

### UNIT AFFORDABILITY

Unit Size (# bedrooms) # \_\_\_\_\_  
Unit Monthly Rent \$ \_\_\_\_\_  
Utility Allowance \$ \_\_\_\_\_  
Gross Rent (GR) = Rent + Utility Allowance \$ \_\_\_\_\_  
Current Fair Market Rate (FMR) for Unit Size \$ \_\_\_\_\_

Gross Rent (GR) less than or equal to FMR YES \_\_\_\_\_ NO \_\_\_\_\_

Monthly Income necessary for affordability (GR\*2) \$ \_\_\_\_\_

### ESG FINANCIAL ASSISTANCE

| Assistance Options                                | Approved level          |
|---|-------------------------|
| Fixed rate of assistance (50%-100% of gross rent) | Up to 3 months @ _____% |
| Decreasing Assistance (indicate % for each month) |                         |
| a. 80% - 100% of gross rent during month 1        | 1st month _____%        |
| b. 40% - 60% of gross rent costs during month 2   | 2nd month _____%        |
| c. 15% - 30% of gross rent during month 3         | 3rd month _____%        |
| One-time Payment (indicate type & amount)         |                         |

| PAYMENTS                         | Month 1  | Month 2  | Month 3  |
|----------------------------------|----------|----------|----------|
| Tenant Payment                   | \$ _____ | \$ _____ | \$ _____ |
| ESG Financial Assistance Payment | \$ _____ | \$ _____ | \$ _____ |
| Total Rent                       | \$ _____ | \$ _____ | \$ _____ |

DATE PREPARED \_\_\_\_\_ BY \_\_\_\_\_

## MONTHLY HOUSEHOLD BUDGET

| Income Sources | Monthly Income |
|----------------|----------------|
|----------------|----------------|

|              |          |
|--------------|----------|
| <b>Total</b> | \$ _____ |
|--------------|----------|

| Expenses | Monthly Expenditures |
|----------|----------------------|
|----------|----------------------|

|      |          |
|------|----------|
| Rent | \$ _____ |
|------|----------|

|           |          |
|-----------|----------|
| Groceries | \$ _____ |
|-----------|----------|

|          |          |
|----------|----------|
| Clothing | \$ _____ |
|----------|----------|

|           |          |
|-----------|----------|
| Childcare | \$ _____ |
|-----------|----------|

|             |          |
|-------------|----------|
| Car Payment | \$ _____ |
|-------------|----------|

|               |          |
|---------------|----------|
| Car Insurance | \$ _____ |
|---------------|----------|

|                      |          |
|----------------------|----------|
| Car Maintenance/Fees | \$ _____ |
|----------------------|----------|

|          |          |
|----------|----------|
| Gasoline | \$ _____ |
|----------|----------|

|                       |          |
|-----------------------|----------|
| Public Transportation | \$ _____ |
|-----------------------|----------|

|                         |          |
|-------------------------|----------|
| Medical / Prescriptions | \$ _____ |
|-------------------------|----------|

|        |          |
|--------|----------|
| Dental | \$ _____ |
|--------|----------|

|        |          |
|--------|----------|
| Vision | \$ _____ |
|--------|----------|

|                      |          |
|----------------------|----------|
| Telephone - Landline | \$ _____ |
|----------------------|----------|

|                  |          |
|------------------|----------|
| Telephone - Cell | \$ _____ |
|------------------|----------|

|           |          |
|-----------|----------|
| Utilities | \$ _____ |
|-----------|----------|

|       |          |
|-------|----------|
| Cable | \$ _____ |
|-------|----------|

|                       |          |
|-----------------------|----------|
| Laundry / Drycleaning | \$ _____ |
|-----------------------|----------|

|                    |          |
|--------------------|----------|
| Household Products | \$ _____ |
|--------------------|----------|

|                     |          |
|---------------------|----------|
| Credit Card Payment | \$ _____ |
|---------------------|----------|

|                      |          |
|----------------------|----------|
| Student Loan Payment | \$ _____ |
|----------------------|----------|

|                          |          |
|--------------------------|----------|
| Entertainment/Recreation | \$ _____ |
|--------------------------|----------|

|              |          |
|--------------|----------|
| Tuition Fees | \$ _____ |
|--------------|----------|

|              |          |
|--------------|----------|
| Pocket Money | \$ _____ |
|--------------|----------|

|         |          |
|---------|----------|
| Savings | \$ _____ |
|---------|----------|

|        |          |
|--------|----------|
| Other: | \$ _____ |
|--------|----------|

|        |          |
|--------|----------|
| Other: | \$ _____ |
|--------|----------|

|              |          |
|--------------|----------|
| <b>Total</b> | \$ _____ |
|--------------|----------|

|                      |          |
|----------------------|----------|
| <b>Net Available</b> | \$ _____ |
|----------------------|----------|



## ESG Minimum Habitability Standards for Permanent Housing: Checklists

### Minimum Standards for Permanent Housing

**Instructions:** Place a check mark in correct column to indicate whether the property is approved or deficient with respect to each standard. The property must meet all standards in order to be approved. A copy of this checklist should be placed in the client file.

| Approved | Deficient | Standard<br>(24 CFR part 576.403(c))   |
|----------|-----------|--|
|          |           | 1. <i>Structure and materials:</i> The structure is structurally sound to protect the residents from the elements and not pose any threat to the health and safety of the residents.   |
|          |           | 2. <i>Space and security:</i> Each resident is provided adequate space and security for themselves and their belongings. Each resident is provided an acceptable place to sleep.   |
|          |           | 3. <i>Interior air quality:</i> Each room or space has a natural or mechanical means of ventilation. The interior air is free of pollutants at a level that might threaten or harm the health of residents. Combustion appliances must be vented to outside (including but not limited to furnace, gas hot water heater, kerosene heater)  |
|          |           | 4. <i>Water Supply:</i> The water supply is free from contamination.   |
|          |           | 5. <i>Sanitary Facilities:</i> Residents have access to sufficient sanitary facilities that are in proper operating condition, are private, and are adequate for personal cleanliness and the disposal of human waste.   |
|          |           | 6. <i>Thermal environment:</i> The housing has any necessary heating/cooling facilities in proper operating condition.   |
|          |           | 7. <i>Illumination and electricity:</i> The structure has adequate natural or artificial illumination to permit normal indoor activities and support health and safety. There are sufficient electrical sources to permit the safe use of electrical appliances in the structure.  |
|          |           | 8. <i>Food preparation:</i> All food preparation areas contain suitable space and equipment to store, prepare, and serve food in a safe and sanitary manner.   |
|          |           | 9. <i>Sanitary condition:</i> Housing & equipment maintained in sanitary condition.  |
|          |           | 10. <i>Fire safety:</i> <ol style="list-style-type: none"> <li>There is a second means of exiting the building in the event of fire or other emergency.</li> <li>The unit includes at least one battery-operated or hard-wired smoke detector, in proper working condition, on each occupied level of the unit. Smoke detectors are located, to the extent practicable, in a hallway adjacent to a bedroom.</li> <li>If the unit is occupied by hearing-impaired persons, smoke detectors have an alarm system designed for hearing-impaired persons in each bedroom occupied by a hearing-impaired person.</li> <li>The public areas are equipped with a sufficient number, but not less than one for each area, of battery-operated or hard-wired smoke detectors. Public areas include, but are not limited to, laundry rooms, day care centers, hallways, stairwells, and other common areas.</li> </ol> |
|          |           | 11. Meets additional recipient/subrecipient standards (if any). Compliant with all state and local requirements: housing codes; licensing requirements; and any other requirements in the jurisdiction.  |

**CERTIFICATION STATEMENT**

I certify that I have evaluated the property located at the address below to the best of my ability and find the following:

- ☐ Property meets all of the above standards.  
☐ Property does not meet all of the above standards.

**COMMENTS:**

ESG Recipient Name: \_\_\_\_\_

ESG Subrecipient Name: \_\_\_\_\_

Program Participant Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Apartment: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Evaluator Signature: \_\_\_\_\_ Date of review: \_\_\_\_\_

Evaluator Name: \_\_\_\_\_

Approving Official Signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_

Approving Official Name (if applicable): \_\_\_\_\_

## LEAD BASED PAINT POISONING PREVENTION

ESG grantees and sub recipients must comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4821-4846), the Residential Lead-Based Paint Hazard Reduction Act of 1992 (42 U.S.C. 4851-4856), and applicable regulations found at 24 CFR 35, Parts A, B, H, J, K, M, and R with respect to shelters assisted under ESG and housing occupied by program participants.

Under certain circumstances, a visual assessment of the unit is not required. A visual assessment must be completed if all of the following three conditions are met:

1. Household is receiving ESG financial assistance
2. Unit was constructed prior to 1978
3. A child under the age of 6 will be living in the unit

Other exceptions include:

1. Unit is a SRO
2. Unit officially certified as free of lead based paint
3. Certification that lead based paint has been identified and removed
4. Unit received visual assessment within past 12 months and was cleared

Utilize the ESG Lead Based Paint Screening worksheet (ESG Form 218) to assess whether a unit is subject to a visual assessment, and if so, how to proceed. A copy of the completed worksheet along with any related documentation should be kept in each grantee or program participant's file.

# Lead Screening Worksheet

## About this Tool

The *Lead Screening Worksheet* is intended to guide sub-recipients through the lead-based paint inspection process to ensure compliance with the rule. Agency staff can use this worksheet to document any exemptions that may apply, whether any potential hazards have been identified, and if safe work practices and clearance are required and used. A copy of the completed worksheet along with any additional documentation should be kept in each program participant's case file.

## INSTRUCTIONS

To prevent lead-poisoning in young children, ESG sub-recipients must comply with the Lead-Based Paint Poisoning Prevention Act of 1973 and its applicable regulations found at 24 CFR 35, Parts A, B, M, and R. Under certain circumstances, a visual assessment of the unit is not required. This screening worksheet will help program staff determine whether a unit is subject to a visual assessment, and if so, how to proceed. A copy of the completed worksheet along with any related documentation should be kept in each program participant's file.

Note: ALL pre-1978 properties are subject to the disclosure requirements outlined in 24 CFR 35, Part A, regardless of whether they are exempt from the visual assessment requirements.

## BASIC INFORMATION

Name of Participant  
Address  
City  
ESG Program Staff

Unit Number  
State

Zip

## PART 1: DETERMINE WHETHER THE UNIT IS SUBJECT TO A VISUAL ASSESSMENT

If the answer to one or both of the following questions is 'no,' a visual assessment is not triggered for this unit and no further action is required at this time. Place this screening worksheet and related documentation in the program participant's file.

If the answer to both of these questions is 'yes,' then a visual assessment is triggered for this unit and program staff should continue to Part 2.

1. Was the leased property constructed before 1978?

☐ Yes  
☐ No

2. Will a child under the age of six be living in the unit occupied by the household receiving HPRP assistance?

☐ Yes  
☐ No

## PART 2: DOCUMENT ADDITIONAL EXEMPTIONS

If the answer to any of the following questions is 'yes,' the property is exempt from the visual assessment requirement and no further action is needed at this point. Place this screening sheet and supporting documentation for each exemption in the program participant's file.

If the answer to all of these questions is 'no,' then continue to Part 3 to determine whether deteriorated paint is present.

1. Is it a zero-bedroom or SRO-sized unit?

☐ Yes  
☐ No

2. Has X-ray or laboratory testing of all painted surfaces by certified personnel been conducted in accordance with HUD regulations and the unit is officially certified to not contain lead-based paint?

☐ Yes  
☐ No

3. Has this property had all lead-based paint identified and removed in accordance with HUD regulations?

☐ Yes  
☐ No

4. Is the client receiving Federal assistance from another program, where the unit has already undergone (and passed) a visual assessment within the past 12 months (e.g., if the client has a Section 8 voucher and is receiving HPRP assistance for a security deposit or arrears)?

☐ Yes (Obtain documentation for the case file.)  
☐ No

5. Does the property meet any of the other exemptions described in 24 CFR Part 35.115(a).

☐ Yes  
☐ No

Please describe the exemption and provide appropriate documentation of the exemption.

## PART 3: DETERMINE THE PRESENCE OF DETERIORATED PAINT

To determine whether there are any identified problems with paint surfaces, program staff should conduct a visual assessment prior to providing ESG financial assistance to the unit as outlined in the following training on HUD's website at:

<http://www.hud.gov/offices/lead/training/visualassessment/h00101.htm>.

If no problems with paint surfaces are identified during the visual assessment, then no further action is required at this time. Place this screening sheet and certification form (Attachment A) in the program participant's file.

If any problems with paint surfaces are identified during the visual assessment, then continue to Part 4 to determine whether safe work practices and clearance are required.

1. Has a visual assessment of the unit been conducted?

☐ Yes  
☐ No

2. Were any problems with paint surfaces identified in the unit during the visual assessment?

☐ Yes  
☐ No (Complete Attachment A – Lead-Based Paint Visual Assessment Certification Form)

#### **PART 4: DOCUMENT THE LEVEL OF IDENTIFIED PROBLEMS**

All deteriorated paint identified during the visual assessment must be repaired prior to clearing the unit for assistance. However, if the area of paint to be stabilized exceeds the de minimus levels (defined below), the use of lead safe work practices and clearance is required.

If deteriorating paint exists but the area of paint to be stabilized does not exceed these levels, then the paint must be repaired prior to clearing the unit for assistance, but safe work practices and clearance are not required.

1. Does the area of paint to be stabilized exceed any of the de minimus levels below?

- 20 square feet on exterior surfaces ☐ Yes ☐ No
- 2 square feet in any one interior room or space ☐ Yes ☐ No
- 10 percent of the total surface area on an interior or exterior component with a small surface area, like window sills, baseboards, and trim ☐ Yes ☐ No

If *any* of the above are 'yes,' then safe work practices and clearance are required prior to clearing the unit for assistance.

#### **PART 5: CONFIRM ALL IDENTIFIED DETERIORATED PAINT HAS BEEN STABILIZED**

Program staff should work with property owners/managers to ensure that all deteriorated paint identified during the visual assessment has been stabilized. If the area of paint to be stabilized does not exceed the de minimus level, safe work practices and a clearance exam are not required (though safe work practices are always recommended). In these cases, the ESG program staff should confirm that the identified deteriorated paint has been repaired by conducting a follow-up assessment.

If the area of paint to be stabilized exceeds the de minimus level, program staff should ensure that the clearance inspection is conducted by an independent certified lead professional. A certified lead professional may go by various titles, including a certified paint inspector, risk assessor, or sampling/clearance technician. Note, the clearance inspection cannot be conducted by the same firm that is repairing the deteriorated paint.

1. Has a follow-up visual assessment of the unit been conducted?

- ☐ Yes  
☐ No

2. Have all identified problems with the paint surfaces been repaired?

- ☐ Yes  
☐ No

3. Were all identified problems with paint surfaces repaired using safe work practices?

- ☐ Yes  
☐ No  
☐ Not Applicable – The area of paint to be stabilized did not exceed the de minimus levels.

4. Was a clearance exam conducted by an independent, certified lead professional?

- ☐ Yes  
☐ No  
☐ Not Applicable – The area of paint to be stabilized did not exceed the de minimus levels.

5. Did the unit pass the clearance exam?

- ☐ Yes  
☐ No  
☐ Not Applicable – The area of paint to be stabilized did not exceed the de minimus levels.

Note: A copy of the clearance report should be placed in the program participant's file.

## ATTACHMENT 1: LEAD-BASED PAINT VISUAL ASSESSMENT CERTIFICATION TEMPLATE

(To be completed by ESG Program Staff)

I, \_\_\_\_\_, CERTIFY THE FOLLOWING:

- I have completed HUD's online visual assessment training and am a HUD-certified visual assessor.
- I conducted a visual assessment at (enter property address and unit number) \_\_\_\_\_ on (enter date of assessment) \_\_\_\_\_.
- No problems with paint surfaces were identified in the unit or in the building's common areas.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)



## ESG-CV HUD Issued Waivers

1. **To expedite grantees' use of ESG-CV funds to prevent, prepare for, and respond to coronavirus as authorized by the CARES Act, HUD is waiving the requirements at 42 U.S.C. 12705(a)(2) to the extent it requires updates to the housing and homeless needs assessment, housing market analysis and strategic plan. HUD is also waiving 24 CFR 91.220 and 91.320, pursuant to its authority under 24 CFR 91.600, to the extent the action plan is limited to a specific program year to permit grantees to prepare substantial amendments to their most recent annual action plan, including their 2019 annual action plan. Grantees must identify the proposed use of all funds and how the funds will be used to prevent, prepare for and respond to coronavirus.**
2. **Citizen Participation Public Comment Period for Consolidated Plan Amendment:** This 30-day minimum for the required public comment period is waived for substantial amendments, provided that no less than 5 days are provided for public comments on each substantial amendment. The waiver is available through the end of the recipient's 2020 program year. Any recipient wishing to undertake further amendments to prior year plans following the 2020 program year can do so during the development of its FY 2021 Annual Action Plan.
3. **Citizen Participation Reasonable Notice and Opportunity to Comment:** HUD recognizes the efforts to contain COVID-19 require limiting public gatherings, such as those often used to obtain citizen participation, and that there is a need to respond quickly to the growing spread and effects of COVID-19. Therefore, HUD waives 24 CFR 91.105(c)(2) and (k), 24 CFR 91.115(c)(2) and (i) and 24 CFR 91.401 as specified below to allow these grantees to determine what constitutes reasonable notice and opportunity to comment given their circumstances. This authority is in effect through the end of the 2020 program year.
4. **Re-evaluations for Homelessness Prevention Assistance:** The ESG regulations at 24 CFR 576.401(b) requires recipients or subrecipients providing homelessness prevention assistance to re-evaluate the program participant's eligibility, and the types and amounts of assistance the program participant needs not less than once every 3 months. The required frequency of re-evaluations for homelessness prevention assistance under section 576.401(b) is waived for up to 2-years beginning on the date of this memorandum, so long as the recipient or sub-recipient conducts the required re-evaluations not less than once every 6 months.

**5. Housing Stability Case Management:** Program participants receiving homelessness prevention or rapid re-housing assistance must meet with a case manager not less than once per month, unless certain statutory prohibitions apply. Recipients are reporting limited staff capacity as staff members are home for a variety of reasons related to COVID-19 (e.g., quarantining, children home from school, working elsewhere in the community to manage the COVID-19 response). In addition, not all program participants have capacity to meet via phone or internet. Waiving the monthly case management requirement as specified below will allow recipients to provide case management on an as needed basis and reduce the possible spread and harm of COVID-19. This waiver is in effect for two months beginning on the date of this memorandum.

**6. Restriction of Rental Assistance to Units with Rent at or Below FMR:**

Under 24 CFR 576.106(d)(1), rental assistance cannot be provided unless the total rent is equal to or less than the FMR established by HUD, as provided under 24 CFR Part 888, and complies with HUD's standard of rent reasonableness, as established under 24 CFR 982.507. The FMR restriction is waived for any individual or family receiving Rapid Re-housing or Homelessness Prevention assistance who executes a lease for a unit during the 6-month period beginning on the date of this memorandum. The ESG recipient or sub-recipient must still ensure that the units in which ESG assistance is provided to these individuals and families meet the rent reasonableness standard.

## **ADDENDUM TO ESG MANUAL**

### **CDBG – CV funding**

Program guidelines and Standard Operating Procedures for CDBG – CV funds are similar to those described in the ESG Manual for ESG –CV funds but with the following key differences:

1. CDBG – CV awards restricted to rental assistance subsidies for up to six months moving forward – no funds for rent arrearages or security deposits (vs. ESG which covers past due rents and up to three months for security deposits)
2. CDBG – CV awards restricted to maximum of \$1000 per month for rent subsidies for up to six months
3. Initial commitment can be 1 to 3 months, with an option to renew upon review after the initial commitment expires.
4. Income eligibility based on 80% Area Median Income (AMI), vs. 50% AMI for ESG – CV
5. Applicant does not have to be homeless or at risk of homelessness
6. Household Income is determined based on IRS Adjusted Gross Income methodology, vs. 24 CFR 5 for ESG – CV)
7. CDBG – CV funding for rental assistance is a temporary and emergency use of funds because of the COVID 19 pandemic emergency. In non-emergency scenarios, rental assistance would not be an eligible use of CDBG funds.