



# **FY 2017 New Project Application**

*e-snaps Instructional Guide*

**Version 1**

# New Project Application

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# New Project Application

## Introduction

Welcome to the New Project Application instructional guide. This instructional guide covers important information about accessing and completing the Project Application for new projects.

The organization submitting the Project Application for funding is the Project Applicant. Project Applications are submitted to the Continuum of Care (CoC) Collaborative Applicant, which will submit the entire funding application to HUD on or before the application deadline.

Prior to using this instructional guide, Project Applicants **must** have completed the Project Applicant Profile. In order to meet that requirement, the Project Applicant Profile's "Complete" button must be selected during the competition period. A separate Project Applicant Profile instructional guide is available on the CoC Program Competition Resources webpage on the HUD Exchange at: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>.

All Project Applicants are strongly encouraged to read the FY 2017 CoC Program Competition NOFA and the New Project Application Detailed Instructions, both of which can be found on the HUD Exchange.

## Objectives

By the end of this module, you will be able to do the following:

- Access *e-snaps*
- Register for the FY 2017 New Project Application funding opportunity
- Create a New Project Application under the funding opportunity
- Enter a New Project Application from the "Submissions" screen
- Complete and submit a New Project Application to the Collaborative Applicant
- *Only if needed*, coordinate with the Collaborative Applicant prior to the submission deadline to make changes to a Project Application in *e-snaps*

## Overview of the Project Application Process

FY 2017 Project Applicants must complete a Project Applicant Profile and Project Application using *e-snaps*, a web-based portal accessible at [www.hud.gov/esnaps](http://www.hud.gov/esnaps).

Each Project Applicant must complete a Project Applicant Profile and submit its Project Application(s) to the applicable CoC in *e-snaps* by the local submission deadline established by the CoC. The CoCs will do the following:

- (1) Review and either rank or reject properly submitted Project Applications received
- (2) Submit the Priority Listing with all approved and ranked or rejected Project Applications as part of the CoC Consolidated Application to HUD

## Overview of this Instructional Guide

The organization of material in this instructional guide corresponds with the different parts of the Project Application process, and the instructional steps follow the progression of screens in *e-snaps*.



# New Project Application

- **Accessing e-snaps.** All *e-snaps* users need usernames and passwords to log in to *e-snaps*. In order to see an organization's Project Applicant Profile and Project Applications, the *e-snaps* user needs to be associated as a "registrant" with the organization's *e-snaps* account. This section identifies the steps required to create user profiles and add/delete registrants.
- **Project Applicant Profile.** Project Applicants must review the Project Applicant Profile, update the information as needed, and select the "Complete" button in order to proceed with the Project Application process.
  - The Project Applicant Profile section of this instructional guide briefly highlights key information for Project Applicants that are getting ready to complete their Project Applications.
  - For instructions on completing the Project Applicant Profile, go to the Project Applicant Profile instructional guide on the CoC Program Competition Resources webpage on the HUD Exchange at: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>.
- **Accessing the Project Application.** After the Project Applicant Profile is complete, Project Applicants need to follow a series of steps in order to access the Project Application screens. The steps discussed in this section include registering the Project Applicant for the FY 2017 New Project Application funding opportunity, creating an FY 2017 project, and accessing the Project Application screens.
- **Project Application.** After accessing the FY 2017 New Project Application, Project Applicants will complete a series of screens asking for information about the project for which they are applying for funding. This section provides instructions on how to complete each screen. After providing all of the required information, the Project Applicant will submit the Project Application to the Collaborative Applicant via *e-snaps*.
- **Submitting the Project Application.** This section discusses what occurs after the Project Applicant submits the New Project Application in *e-snaps* to the Collaborative Applicant. The Collaborative Applicant will review and either approve and rank or reject the Project Application.

# New Project Application

- **Amending the Project Application.** If changes need to be made to the Project Application, the Collaborative Applicant will amend the project back to the Project Applicant. Notification for amending a project back to the applicant occurs outside of *e-snaps*. Once the Collaborative Applicant has finalized the CoC Project Priority Listing, it will submit to the CoC Consolidated Application to HUD.

**NOTE:**  
**Amending  
an  
Application**

*If the CoC amends the project application back to the Project Applicant for revision or correction, it is the project applicant's and Collaborative Applicant's responsibility to ensure the Project Application is resubmitted in e-snaps to the CoC and either approved and ranked (or re-ranked) or rejected before the CoC Priority Listing is submitted to HUD. If a Project Application does not appear on the CoC Priority Listing, it will not be reviewed or considered for conditional award.*

## Highlights in e-snaps for the FY 2017 CoC Program Competition

This section highlights several items in *e-snaps* this year.

- **New Part 1: SF-424 screens.** Starting in FY 2017, Part 1: SF-424 of the application has new screens in *e-snaps* that were previously uploaded as attachments. These HUD forms include:
  - HUD 2880 (Applicant/Recipient Disclosure/Initial Report)
  - HUD form 50070 (Drug-Free Workplace Certification)
  - SF-LLL (Disclosure of Lobbying Activities)
- **Permanent Housing (PH) Bonus, Reallocation, and Program Component.** During the FY 2017 CoC Program Competition, HUD will not consider requests for new funding outside of the types listed in the FY 2017 CoC Program Competition NOFA. HUD established a new project type that is allowable in the FY 2017 CoC Program Competition—the Joint TH-RRH component. Documents are available on the FY 2017 CoC Program Competition: Funding Availability page: <https://www.hudexchange.info/programs/e-snaps/fy-2017-coc-program-nofa-coc-program-competition/>
- **Uploading Attachments.** The Applicant Profile information will remain in *e-snaps* throughout the year; however, once the FY 2017 CoC Program Competition opens and modifications to the Applicant Profile (for Collaborative Applicant and Projects Applicants) are implemented, Applicants will be required to upload attachments again. Failure to attach correctly dated and completed HUD required forms will result in conditions being added to your project, if conditionally awarded, which will delay the issuance of a grant agreement.
- **The "Project Application," and "CoC Priority Listing."**
  - The Project Application includes the information submitted on the SF-424 forms, as well as the application submitted by renewal and new Project Applicants for funding consideration.
  - The CoC Priority Listing includes the New Project Listing, Renewal Project Listing, CoC Planning Project Listing, and, if designated by HUD as a UFA, a UFA Project Listing. The CoC Priority Listing also includes the reallocation forms that the Collaborative Applicant will need to complete if eligible renewal projects are being reallocated to create eligible new projects, along with an attachment form for the required HUD form HUD-2991.
- **Prepopulating of Data from the Project Applicant Profile.** Some data will automatically populate fields on several screens based on the information entered into your Project Applicant

# New Project Application

Profile. If this information is incorrect, changes can be made by exiting the application and returning to the Project Applicant Profile.

- **Applicant Field and Dropdown Menu.** When *e-snaps* users log in to the system, they will see an "Applicant" field at the top of the screen. This field identifies the organization's account in which the user is working.

Users with *e-snaps* access to more than one organization's account will see a dropdown menu listing two or more organizations. This group of *e-snaps* users includes staff persons who work on multiple applications (e.g., a staff person at an agency that serves as the Collaborative Applicant as well as a Project Applicant submitting one or more Project Applications).

This feature appears when working on the Applicants, Funding Opportunity, Projects, and Submissions screens. Only the items (e.g., Projects) pertaining to the Applicant listed in the field appear on the screen. Users must ensure they are working under the correct Applicant account.

- **Collaborative Applicant.** During the CoC Program Competition, Project Applicants will see references to the "Collaborative Applicant." The Collaborative Applicant is the entity designated by the CoC to submit the CoC Program Registration and CoC Consolidated Application in the CoC Program Competition on behalf of the CoC. The Collaborative Applicant is responsible for the coordination and oversight of the CoC planning efforts and has the authority to certify and submit the CoC Program Competition application.

# New Project Application

## Accessing *e-snaps*

The Project Application is submitted electronically in *e-snaps* during the annual competition under the FY 2017 CoC Program Competition NOFA.

The screenshot shows the 'Front Office Portal' for 'e-snaps'. The main heading is 'Welcome to e-snaps'. Below this, there is a login section with fields for 'Username:' (containing '2016test') and 'Password:' (masked with dots), and a 'Login' button. A callout bubble points to the login fields with the text 'Log in here'. Below the login section is a 'Forgot your password?' link and a 'Create Profile' button with a speech bubble icon. A callout bubble points to the 'Create Profile' button with the text 'If new to e-snaps, create a user profile here'. The page also contains a 'Contact Us' link and several paragraphs of text providing information about the system, including a note about OMB approval and a public reporting burden.

**NOTE:** *Each e-snaps user must have his or her unique log-in credentials. Preferably, each organization will have at least two people with access to e-snaps—the Authorized Representative and one or more additional staff.*

# New Project Application

## Existing Users

Step	Description
1.	Direct your Internet browser to <a href="http://www.hud.gov/esnaps">www.hud.gov/esnaps</a> .
2.	On the left menu bar, enter your username and password. You will then enter <i>e-snaps</i> and arrive at the "Welcome" screen.
3.	If you forgot your password, select "Forgot your password?" under the "Login" button.

## New e-snaps Users

Step	Description
1.	Create an <i>e-snaps</i> username and password by selecting the "Create Profile" link.
2.	Log in as instructed under Existing Users above.



For a refresher on how to navigate through the *e-snaps* system, the "Introduction to *e-snaps* Features and Functions" instructional guide is available on the CoC Program Competition Resources webpage on the HUD Exchange at: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>.

## Adding and Deleting Registrants

Having a user profile enables a person to access *e-snaps*. However, only individuals who have been associated with the organization as a registrant (also referred to as registered users) have the ability to enter information in the Project Applicant Profile and Project Applications associated with the organization.



For information on how to add and delete users, refer to the "Adding and Deleting Registrants in *e-snaps*" resource on the CoC Program Competition Resources webpage on the HUD Exchange at: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>.

# New Project Application

## Project Applicant Profile

Project Applicants must complete the Project Applicant Profile before moving forward in the Project Application process. To complete the Project Applicant Profile, the Project Applicant needs to ensure the data entered in the profile screens is accurate and must select the “Complete” button on the “Submission Summary” screen.

This section in the New Project Application Instructional Guide highlights key information needed to successfully complete this step. It does NOT provide detailed instructions.

- **Access the Project Applicant Profile.** To access the Project Applicant Profile, log in to *e-snaps*, select "Applicants" on the left menu bar, ensure that the correct Project Applicant name in the "Applicants" field at the top left side of the screen is selected, and select the orange folder to the left of the Project Applicant name on the screen.
- **Organizations that are Collaborative Applicants and Project Applicants.** If the organization applying for funding as a Project Applicant is also serving as the Collaborative Applicant, the organization will have two Applicant Profiles—one for the Project Applicant and one for the Collaborative Applicant.

The "Applicant" field dropdown menu at the top left side of the screen contains the list of Applicants that a user can access. If you have issues with finding the correct Project Applicant, submit a ticket to HUD Exchange Ask A Question, at: <https://www.hudexchange.info/get-assistance/my-question/>, under the *e-snaps* Reporting System (the header for which is featured on Step 2 of the AAQ page).

- **First-time Applicant.** If an organization is new to *e-snaps* (i.e., submitting a Project Application for the first time), the organization must establish itself as a Project Applicant in *e-snaps*. Review the Project Applicant Profile on the CoC Program Competition: *e-snaps* Resources webpage on the HUD Exchange at <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>. An organization will establish itself as a Project Applicant in *e-snaps* one time only.



*If you are a Collaborative Applicant and a Project Applicant applying for renewal, new, CoC planning, or UFA costs project funds, you must have **two separate Applicant Profiles**—a Collaborative Applicant Profile and a Project Applicant Profile. Contact the HUD Exchange Ask-A-Question if you need assistance: <https://www.hudexchange.info/get-assistance/my-question/>.*



*For detailed instructions, see the Project Applicant Profile instructional guide on the CoC Program Competition Resources webpage on the HUD Exchange at: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>.*

# New Project Application

## Accessing the Project Application

After the Project Applicant Profile is completed, Project Applicants can move to the next steps required to access the Project Application screens. This section covers the following:


- Funding Opportunity Registration
- Creating projects
- Accessing Project Applications from the Submissions screen

# New Project Application

## Funding Opportunity Registration

All Project Applicants must register the organization for the FY 2017 New Project Application funding opportunity. Registering for the funding opportunity enables Project Applicants to apply for funds during the FY 2017 CoC Program Competition.

Funding Opportunity Name	Applicants Registered	Start Date	End Date
CoC Full Annual Performance Report	0	Jul 19, 2010	Jun 20, 2020
CoC Planning Project Application FY2016	0	Sep 16, 2014	Dec 31, 2019
CoC Planning Project Application FY2017	0	Sep 16, 2014	Dec 31, 2019
New Project Application FY2017	0	Sep 16, 2014	Dec 31, 2020
Renewal Project Application FY2015	0	4	Dec 31, 2018
UFA Costs Project Application FY2016	0	4	Dec 31, 2019
UFA Costs Project Application FY2017	0	4	Dec 31, 2019

- | Step | Description   |
|------|---|
| 1.   | Select "Funding Opportunity Registrations" on the left menu bar.  |
| 2.   | The "Funding Opportunity Registrations" screen appears.   |
| 3.   | Select the "Register" icon  next to "New Project Application FY 2017." |
| 4.   | The "Funding Opportunity Details" screen appears.   |



# New Project Application

Front Office

TestUser2

Front Office Portal

Profile

My Account  
Change Password

Workspace

Applicants  
Funding Opportunity Registrations  
Projects  
Submissions

Contact Us

Applicant: Test Organization 2 (030700000)

**Funding Opportunity Details**

**Funding Opportunity Name:** New Project Application FY2017  
**Start Date:** Sep 16, 2014  
**End Date:** Jan 1, 2021

**Funding Opportunity Registration**

Are you sure you wish to register Test Organization 2 (030700000)?

Yes Cancel

- | Step | Description  |
|------|--|
| 1.   | When the question appears asking if you want to register the Project Applicant for the funding opportunity, select "Yes" to confirm that you want to register your organization. |
| 2.   | The screen will then indicate that the Project Applicant has been registered.  |
| 3.   | Select the "Back" button to return to the "Funding Opportunity Registrations" screen.  |



*Remember, the "Applicant" field with the dropdown menu located at the top left side of the screen identifies the Applicant Profile under which you are working.*

*Please ensure you are working under the correct one.*

# New Project Application

## Creating the Project Application Project

Project Applicants must create a project for the New Project Application in *e-snaps* on the "Projects" screen. Creating a project is an intermediate step. Organizations do NOT enter the Application from the "Projects" screen to complete the Application screens; instead, they access the application from the "Submissions" screen.

Once the Project Applicant "creates" the project, it will appear on this screen and the term "New Project Application" will appear under the "Funding Opportunity Name" column.

Front Office

TestUser2

Front Office Portal

Profile

My Account  
Change Password

Workspace

Applicants  
Funding Opportunity Registrations

**Projects**  
Submissions

Contact Us



2 (030700000)

**Projects**

Project Status: Open Projects

Funding Opportunity Name: All Funding Opportunities  
New Project Application FY2017

All	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z
Edit	Project Name	Project Number	Funding Opportunity Name	Applicant Name	Applicant Number	Step Status																				
This list contains no items																										

Step	Description
1.	Select "Projects" on the left menu bar.
2.	The "Projects" screen appears.
3.	Select "New Project Application FY 2017" from the "Funding Opportunity Name" dropdown.
4.	The screen refreshes and an "Add" icon  appears on the left side of the screen above the column headings.
5.	Select the "Add" icon. 
6.	The "Create a Project" screen appears.

# New Project Application

Front Office

TestUser2

Front Office Portal

Profile

My Account  
Change Password

Workspace

Applicant: Test Organization 2 (030700000)

**Create a Project**

Funding Opportunity Name: New Project Application FY2017


\* Applicant: Test Organization 2 (030700000)

\* Applicant Project Name:

Save Save & Add Another

Save & Back Cancel

Enter the Project Name. e-snaps will assign a Project Number.

- | Step | Description   |
|------|---|
| 1.   | On the "Create a Project" screen, the Project Applicant Name will be pre-populated.   |
| 2.   | In the "Applicant Project Name" field, enter the name of the project. <ul style="list-style-type: none"><li>You should enter the name that you want to appear in the grant award letter.</li></ul>  |
| 3.   | Select "Save & Back" to return to the "Projects" screen.  |
| 4.   | The project name is listed in the menu. <ul style="list-style-type: none"><li>Select the "View" icon  to view project details; however, it is not necessary to enter any notes on that page.</li></ul> |



*Remember, the "Applicant" field with the dropdown menu located at the top of the screen identifies the Applicant Profile under which you are working.*

*Please ensure you are working under the correct Project Applicant.*

# New Project Application

## Submissions

After completing the Project Applicant Profile, registering for the Funding Opportunity, and creating the New Project Application project, Project Applicants may now enter the Project Application and complete the screens. You must access the New Project Application from the "Submissions" screen.

Front Office

Applicant: Test Organization 2 (030700000)

**Submissions**

[Hide Filters] [Clear Filters]

Applicant Project Name: All Projects

Date Submitted: On [ ] 23

Project Status: Open Projects

Submission Version: Latest Version

Associate Type: All

Filter

Actions	Project Name Project Number	Funding Opportunity Name Step Name	Start Date	End Date	Associate Type	Version	Date Submitted
	New project FY 2017 0135635	New Project Application FY2017 New Project Application FY2017	Sep 16, 2014	Nov 19, 2018	Primary Applicant	1	

Page Generation Time: 1.758s

- | Step | Description   |
|------|---|
| 1.   | Select "Submissions" on the left menu bar.  |
| 2.   | The "Submissions" screen appears.   |
| 3.   | Locate the Project Application project you established. <ul style="list-style-type: none"><li>Option: Use the "Submissions Filters." Select the project name in the "Project Name" field. Then select the "Filter" button to single out your project(s).</li><li>Option: Select "Clear Filters" on the top left of the "Submissions Filters" box. Then, review the "Funding Opportunity Name / Step Name" column for "New Project Application."</li></ul> |
| 4.   | Continue with the instructions in the next section for the completing the New Project Application.  |



Remember, the "Applicant" field with the dropdown menu located at the top of the screen identifies the Applicant Profile under which you are working.

Please ensure you are working under the correct Applicant.

# New Project Application

## FY 2017 Project Application

This section identifies the steps for completing the New Project Application screens in *e-snaps*.

**NOTE:**

- *Some data may pre-populate from the Project Applicant Profile (i.e., e-snaps will bring it forward). Review the pre-populated data. If any information is incorrect, you must go back and correct it in the Project Applicant Profile.*
- *If you are in the Project Application and you need to update the Project Applicant Profile, do not use the "View Applicant Profile" link on the left menu bar, Instead, select "Back to Submissions List," select "Applicants" on the left menu bar, and select the orange folder next to the Applicant name. Next, make the appropriate corrections as needed.*
- *Select "Save" at the bottom of the screen after you make each revision. Once you have made all of the necessary corrections to your Project Applicant Profile, proceed to the "Submission Summary" screen and select "Complete." When you return to the Project Application, the screen will show the corrected information.*
- *Review the instructions in the Submitting the Project Application section in this guide.*

# New Project Application

## Accessing the New Project Application

Access the New Project Application through the "Submissions" screen.

Front Office

TestUser2

Front Office Portal

Applicant: Test Organization 2 (030700000)

### Submissions

[Hide Filters] [Clear Filters]

Applicant Project Name: All Projects


Date Submitted: On

Project Status: Open Projects


Submission Version: Latest Version

Associate Type: All

Filter

Project Name	Funding Opportunity Name	Start Date	End Date	Associate Type	Version	Date Submitted
 New project FY 2017 0135635	<b>New Project Application FY2017</b> New Project Application FY2017	Sep 16, 2014	Nov 19, 2018	Primary Applicant	1	

Page Generation Time: 1.758s

Step	Description
1.	Select "Submissions" on the left menu bar.
2.	The "Submissions" screen appears.
3.	Select the "Folder" icon  to the left of the Project Application Name you established with the Funding Opportunity Name "New Project Application FY 2017."
4.	The "Before Starting" screen appears.

# New Project Application

## Before Starting the New Project Application

Before you begin the FY 2017 New Project Application, review the following information on the "Before Starting the Project Application" screen.

The "Before Starting the Project Application" screen also contains links to resources needed to complete the project application at <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources> and [HUD Exchange Ask a Question](#).

**Before Starting the Project Application**

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

Things to Remember:

- Additional training resources can be found on the HUD Exchange at <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>.
- Program policy questions and problems related to completing the application in *e-snaps* may be directed to HUD the [HUD Exchange Ask A Question](#).
- Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2017 Continuum of Care (CoC) Program Competition. For more information see FY 2017 CoC Program Competition NOFA.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2017 CoC Program NOFA and the FY 2017 General Section NOFA.
- Detailed instructions can be found on the left menu within *e-snaps*. They contain more comprehensive instructions and so should be used in tandem with onscreen text and the hide/show instructions found on each individual screen.
- New projects may only be submitted as either Reallocated or Permanent Supportive Housing Bonus Projects. These funding methods are determined in collaboration with local CoC and it is critical that applicants indicate the correct funding method. Project applicants must communicate with their CoC to make sure that the CoC submissions reflect the same funding method.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in *e-snaps*.
- HUD reserves the right to reduce or reject any new project that fails to adhere to (24 CFR part 578 and application requirements set forth in FY 2017 CoC Program Competition NOFA.

Back Next

Back to Submissions List

Step	Description
------	-------------

1.	Select "Next."
----	----------------

**NOTE:** When working in the Project Application, *e-snaps* users may return to the main screen by selecting "Back to Submissions List" at the bottom of the left menu bar. From this screen, users may access Applicant, Funding Opportunity Registration, Projects, and Submissions on the left menu bar.

# New Project Application

## 1A. Application Type



Applicants must complete Part 1: SF-424 in its entirety before the rest of the application screens appear on the left menu bar.

The following steps provide instruction on reviewing the fields on the "Application Type" screen for **Part 1: SF-424** of the FY 2017 Project Application.

The screenshot shows the '1A. SF-424 Application Type' screen. The left sidebar contains the user 'TestUser2' and navigation links for 'New Project Application FY2017' and 'FY2016 New Project Application Instructions'. The main form area includes the following fields:

- 1. Type of Submission: Application
- 2. Type of Application: New Project Application
- If Revision, select appropriate letter(s): -- select --
- If "Other", specify: [text input]
- 3. Date Received: 05/31/2017
- 4. Applicant Identifier: [text input]
- 5a. Federal Entity Identifier: [text input]
- 6. Date Received by State: [text input]
- 7. State Application Identifier: [text input]

Buttons for 'Back' and 'Next' are located at the bottom of the form. A callout box with a red border points to fields 1, 2, and 3, containing the text: 'Verify the data in fields 1, 2 and 3'.

Step	Description
1.	Verify the information in field 2, "Type of Application," <ul style="list-style-type: none"><li>• Confirm that you have registered for the correct funding opportunity, "New Project Application." Fields 1, 2, and 3 are pre-populated and cannot be changed on this screen.</li></ul>
2.	Leave fields 4 through 7 blank.
3.	Select "Next" to continue to next screen.



# New Project Application

## 1B. Legal Applicant

The following steps provide instruction on reviewing the fields on the "Legal Applicant" screen for **Part 1: SF-424** of the FY 2017 Project Application.

The screenshot shows the '1B. SF-424 Legal Applicant' screen. The sidebar on the left contains the following items:

- TestUser2
- New Project Application FY2017
- Applicant Name: Test Organization 2
- Applicant Number: 030700000
- Project Name: New project FY 2017
- Project Number: 0135635
- New Project Application FY2017
- FY2016 New Project Application Instructions
- Before Starting
- Part 1 - Forms
- 1A. SF-424 Application Type
- 1B. SF-424 Legal Applicant**
- 1C. SF-424 Application Details
- 1D. SF-424 Congressional District(s)
- 1E. SF-424 Compliance
- 1F. SF-424 Declaration
- 1G. HUD 2880
- 1H. HUD 50070
- 1I. SF-LLL
- Export to PDF
- Get PDF Viewer
- Back to Submissions List

The main form area is titled '1B. SF-424 Legal Applicant' and contains the following sections:

- 8. Applicant**
  - a. Legal Name: Test Organization 2
  - b. Employer/Taxpayer Identification Number (EIN/TIN): 1234567
  - c. Organizational DUNS: 111111111 PLUS 4: [ ]
  - d. Address
    - Street 1: [text]
    - Street 2: [ ]
    - City: City
    - County: [ ]
    - State: Virginia
    - Country: United States
    - Zip / Postal Code: 22031
  - e. Organizational Unit (optional)
    - Department Name: [ ]
    - Division Name: [ ]
  - f. Name and contact information of person to be contacted on matters involving this application
    - Prefix: Ms.
    - First Name: first
    - Middle Name: [ ]
    - Last Name: last
    - Suffix: --select--
    - Title: title 2
    - Organizational Affiliation: Test Organization 2
    - Telephone Number: (123) 456-7890
    - Extension: [ ]
    - Fax Number: (123) 456-7890
    - Email: Last@organization.com

A callout box with the text 'Verify the data is accurate' is positioned over the form fields. At the bottom of the form are 'Back' and 'Next' buttons.

Step	Description
1.	Verify that all of the information on this screen is complete and accurate.
2.	Select "Next" at the bottom of the screen to move to the next screen.

**NOTE:** *If any pre-populated information is incorrect, you must correct it in the Project Applicant Profile. Review the instructions in the Submitting the Project Application section in this guide. Do not use the "View Applicant Profile" link on the left menu bar.*

# New Project Application

## 1C. Application Details

The following steps provide instruction on completing all mandatory fields marked with an asterisk (\*) on the "Application Details" screen for **Part 1: SF-424** of the FY 2017 Project Application.

The screenshot shows the '1C. SF-424 Application Details' screen. A callout box highlights fields 9, 10, 11, and 12 with the text: 'Verify the data in fields 9, 10, 11, and 12'. The fields are as follows:

- 9. Type of Applicant: [M. Nonprofit with 5]
- 10. Name of Federal Agency: [Department of Housing and Urban Development]
- 11. Catalog of Federal Domestic Assistance Title: [CoC Program]
- CFDA Number: [14.267]
- 12. Funding Opportunity Number: [FR-6100-N-25]
- Title: [Continuum of Care Homeless Assistance Co.]
- 13. Competition Identification Number: [ ]
- Title: [ ]

Buttons: Back, Next

Step	Description
------	-------------

- |    |   |
|----|---|
| 1. | Verify that the information populated in fields 9, 10, 11 and 12 is correct. <ul style="list-style-type: none"><li>Field 9 pre-populates from the Project Applicant Profile.</li><li>Fields 10, 11, and 12 pre-populate and cannot be edited.</li></ul> |
| 2. | Leave field 13 blank.   |
| 3. | Select "Save & Next" to continue to the next screen.  |

**NOTE:** *If any pre-populated information is incorrect, you must correct it in the Project Applicant Profile. Review the instructions in the Submitting the Project Application section in this guide. Do not use the "View Applicant Profile" link on the left menu bar.*

# New Project Application

## 1D. Congressional Districts

The following steps provide instruction on completing all mandatory fields marked with an asterisk (\*) on the "Congressional Districts" screen for **Part 1: SF-424** of the FY 2017 Project Application, as well as reviewing information populated from the "Applicant Profile" and "Projects" screens.

**eForms** Logout

TestUser2

New Project Application FY2017

Applicant Name: Test Organization 2  
Applicant Number: 030700000  
Project Name: New project FY 2017  
Project Number: 0135635

New Project Application FY2017

FY2016 New Project Application Instructions

Before Starting  
Part 1 - Forms  
1A. SF-424 Application Type  
1B. SF-424 Legal Applicant  
1C. SF-424 Application Details  
**1D. SF-424 Congressional District (s)**  
1E. SF-424 Compliance  
1F. SF-424 Declaration  
1G. HUD 2880  
1H. HUD 50070  
1I. SF-LLL

Export to PDF  
Get PDF Viewer  
Back to Submissions List

### 1D. SF-424 Congressional District(s)

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

Available Items: Alabama, Alaska, American Samoa, Arizona, Arkansas, California

Selected Items:

Use arrows to move selections from left column to the right column

**15. Descriptive Title of Applicant's Project:** New project FY 2017

**16. Congressional District(s):**

**a. Applicant:**

Available Items: AK-000, AL-001, AL-002, AL-003, AL-004, AL-005

Selected Items: VA-007

Populates from Applicant Profile

**\* b. Project:**  
(for multiple selections hold CTRL key)

Available Items: AK-000, AL-001, AL-002, AL-003, AL-004, AL-005

Selected Items:

Move correct Congressional District(s) for the project

**17. Proposed Project**

\* a. Start Date:  23

\* b. End Date:  23

**18. Estimated Funding (\$)**

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:



g. Total:

Save & Back   Save   Save & Next

Back   Next

Check Spelling

# New Project Application

Step	Description
1.	<p>In field 14, select the State(s) in which the proposed project will operate and serve persons experiencing homelessness.</p> <ul style="list-style-type: none"><li>• Highlight one state, or hold the CTRL+Key to make more than one selection. Using the single arrow key, move your selection from the left box to the right box.</li></ul>
2.	<p>Field 15 is pre-populated with the name entered on the “Projects” screen when the Project Application was initiated. To make changes to this field, return to the “Projects” screen to edit the name:</p> <ul style="list-style-type: none"><li>• From the left-menu bar select "Back to Submissions List."</li><li>• From the left-menu bar select “Projects.”</li><li>• On the “Projects” screen, locate the name of the project you wish to rename and select the View  icon to the left of the project name.</li><li>• On the “Project Details” screen, change the name you originally entered in the “Applicant Project Name” field and select “Save” at the bottom of the screen.</li><li>• When you re-enter the New Project Application and navigate back to the “Congressional Districts” screen, the correct project name should now be displayed in the “Descriptive Title of Applicant’s Project” field.</li></ul>
3.	<p>Field 16a "Congressional Districts" is pre-populated from the Project Applicant Profile.</p> <ul style="list-style-type: none"><li>• Applicants cannot modify the populated data on this screen; however, Project Applicants may modify the Project Applicant Profile to correct any errors identified.</li></ul>
4.	<p>For field 16b, select the congressional district(s) in which the project is expected to operate.</p> <ul style="list-style-type: none"><li>• Highlight one district, or hold the CTRL+Key to make more than one selection.</li><li>• Using the single arrow key, move your selection from the left box to the right box.</li></ul>
5.	<p>For field 17, under "Proposed Project," enter the project's estimated operating start and end dates in the appropriate fields using the calendar  icon function.</p>
6.	<p>Leave the "Estimated Funding" fields blank.</p>
7.	<p>Select "Save and Next" to continue to the next screen.</p>

**NOTE:** *If any pre-populated information is incorrect, you must correct it in the Project Applicant Profile. Review the instructions in the Submitting the Project Application section in this guide. Do not use the "View Applicant Profile" link on the left menu bar.*

# New Project Application


## 1E. Compliance

The following steps provide instructions on completing all the mandatory fields marked with an asterisk (\*) on the "Compliance" screen for **Part 1: SF-424** of the FY 2017 Project Application, as well as reviewing information populated from the "Applicant Profile."

The screenshot shows the '1E. SF-424 Compliance' screen. The sidebar on the left includes the user 'TestUser2' and application details for 'New Project Application FY2017'. The main form area contains two questions:

- \* 19. Is the Application Subject to Review By State Executive Order 12372 Process?** This question has a dropdown menu with '-- select --' and a date picker icon. Below it, it says 'If "YES", enter the date this application was made available to the State for review:'.
- \* 20. Is the Applicant delinquent on any Federal debt?** This question has a dropdown menu with '-- select --'. Below it, it says 'If "YES," provide an explanation:' followed by a text area.

At the bottom of the form are several buttons: 'Save & Back', 'Save', 'Save & Next', 'Back', 'Next', and 'Check Spelling'.

Step	Description
1.	<p>In the "Is the Application Subject to Review By State Executive Order 12372 Process?" field, select the correct option from the dropdown menu.</p> <ul style="list-style-type: none"><li>• If the State or U.S. Territory requires review of the application, select "Yes" and enter the date on which the application was made available to the State, using the calendar  icon function.</li><li>• If the State or U.S. Territory does not require review of the project application, select "Program is subject to E.O. 12372 but has not been selected by the State for review."</li><li>• If "Program is not covered by E.O. 12372" is selected, then the project is not eligible for this funding opportunity and you will not be able to access the project application.</li></ul>
2.	<p>Select "Yes" or "No" to indicate whether the Project Applicant is delinquent on any Federal debt.</p> <ul style="list-style-type: none"><li>• If "Yes," an explanation must be entered in the field provided.</li></ul>
3.	<p>Select "Save &amp; Next" to continue to the next screen.</p>



To access the lists of those states that have chosen to participate in the intergovernmental review process, visit [http://www.whitehouse.gov/omb/grants\\_spoc](http://www.whitehouse.gov/omb/grants_spoc).

# New Project Application

## 1F. Declaration

The following steps provide instructions on completing all the mandatory fields marked with an asterisk (\*) on the "Declaration" screen for **Part 1: SF-424** of the FY 2017 Project Application, as well as reviewing information populated from the "Applicant Profile" and "Projects" screens.

**e.Forms** Logout

TestUser2

New Project Application FY2017

Applicant Name: Test Organization 2  
Applicant Number: 030700000  
Project Name: New project FY 2017  
Project Number: 0135635

New Project Application FY2017

FY2016 New Project Application Instructions

Before Starting  
Part 1 - Forms  
1A. SF-424 Application Type  
1B. SF-424 Legal Applicant  
1C. SF-424 Application Details  
1D. SF-424 Congressional District(s)  
1E. SF-424 Compliance  
**1F. SF-424 Declaration**  
1G. HUD 2880  
1H. HUD 50070  
1I. SF-LLL

**1F. SF-424 Declaration**

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

\* I AGREE  Select

**21. Authorized Representative**

Prefix: Ms.

First Name: first

Middle Name:

Last Name: last

Suffix: -- select --

Title: title

Telephone Number: (123) 456-7890   
(Format: 123-456-7890, (S))

Fax Number: (123) 456-7890   
(Format: 123-456-7890, (S))

Email: Name@Organization.org

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

Date Signed: 05/31/2017

Save & Back Save Save & Next

Back Next

Check Spelling

Step	Description
1.	Verify that the all project information is complete and accurate.
2.	Select the box stating that you agree with the statement about certifying information in the SF-424 section of the FY 2017 New Project Application. <b>Note:</b> The Authorized Representative information must be for the person who is legally able to enter into a contract for the organization. This is the person who can legally sign the grant agreement if the new project application is selected for conditional award.
3.	Select "Save & Next" to continue to the next screen.

**NOTE:** If any pre-populated information is incorrect, you must correct it in the Project Applicant Profile. Review the instructions in the Submitting the Project Application section in this guide. Do not use the "View Applicant Profile" link on the left menu bar.

# New Project Application

## 1G. HUD 2880

The following steps provide instructions on completing all the mandatory fields marked with an asterisk (\*) on the "Applicant/Recipient Disclosure/Initial Report - Form 2880" screen for **Part 1: SF-424** of the FY 2017 Project Application, as well as reviewing information populated from the "Applicant Profile" screens.

The screenshot displays the 'e.Forms' interface for the '1G. HUD 2880' application. The left sidebar contains navigation options for 'TestUser2' and various application instructions. The main content area is titled 'Applicant/Recipient Disclosure/Initial Report - Form 2880' and includes the following sections:

- Applicant/Recipient Information**
  - 1. Applicant/Recipient Name, Address, and Phone**
    - Agency Legal Name: Test Organization 2
    - Prefix: Ms.
    - First Name: first
    - Middle Name:
    - Last Name: last
    - Suffix: -- select --
    - Title: title 2
    - Organizational Affiliation: Test Organization 2
    - Telephone Number: (123) 456-7890
    - Extension:
    - Email: Last@organization.com
    - \* City: City
    - County:
    - \* State: Virginia
    - Country: United States
    - Zip/Postal Code: 22031
  - 2. Employer ID Number (EIN):** 12-1234567
  - 3. HUD Program:** Continuum of Care Program
  - 4. Amount of HUD Assistance Requested/Received:** \$0.00  
(Requested amounts will be automatically entered within applications)
  - 5. State the name and location (street address, City and State) of the project or activity.**  
Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.
- Part I Threshold Determinations**
  - \* 1. Are you applying for assistance for a specific project or activity? Yes
  - \* 2. Have you received or do you expect to receive assistance from HUD's Continuum of Care (CoC) Program involving projects or activities in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? No
- Certification**

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

I certify that this information is true and complete.

\* I AGREE

Name / Title of Authorized Official: first last, title

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

Date Signed: 05/31/2017
- Buttons: Save & Back, Save, Save & Next, Back, Next, Check Spelling

# New Project Application

Step	Description
1.	Verify that the all project information is complete and accurate.
2.	Select the box stating that you certify that the information on the HUD 2880 in the SF-424 section of the FY 2017 New Project Application is correct. <b>Note:</b> The Authorized Representative information must be for the person who is legally able to enter into a contract for the organization. This is the person who can legally sign the grant agreement if the new project application is selected for conditional award.
3.	Select "Save & Next" to continue to the next screen.

**NOTE:** *If any pre-populated information is incorrect, you must correct it in the Project Applicant Profile. Review the instructions in the Submitting the Project Application section in this guide. Do not use the "View Applicant Profile" link on the left menu bar.*



# New Project Application

## 1H. HUD 50070

The following steps provide instructions on completing all the mandatory fields marked with an asterisk (\*) on the " HUD 50070 - Drug Free Workplace Certification" screen for Part 1: SF-424 of the FY 2017 Project Application, as well as reviewing information populated from the "Applicant Profile" screens.

e.Forms Logout

---

TestUser2

New Project Application  
FY2017

Applicant Name:  
Test Organization 2  
Applicant Number:  
030700000  
Project Name:  
New project FY 2017  
Project Number:  
0135635

New Project Application  
FY2017

FY2016 New Project  
Application Instructions

Before Starting  
Part 1 - Forms  
1A. SF-424 Application  
Type  
1B. SF-424 Legal  
Applicant  
1C. SF-424 Application  
Details  
1D. SF-424  
Congressional District(s)  
1E. SF-424  
Compliance  
1F. SF-424 Declaration  
1G. HUD 2880  
**1H. HUD 50070**  
1I. SF-LLL

Export to PDF  
Get PDF Viewer

Back to Submissions List

### 1H. HUD 50070

**Applicant Name:**

**Program/Activity Receiving Federal Grant Funding:**

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

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

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

**2. Sites for Work Performance.**  
The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)  
Workplaces, including addresses, entered in the attached project application.  
Refer to addresses entered into the attached project application.

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

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

**Authorized Representative**

**Prefix:**

**First Name:**

**Middle Name:**

**Last Name:**

**Suffix:**

**Title:**

**Telephone Number:**   
(Format: 123-456-7890)

**Fax Number:**   
(Format: 123-456-7890)

**Email:**

**Signature of Authorized Representative:**

**Date Signed:**

# New Project Application

Step	Description
1.	Verify that the all project information is complete and accurate.
2.	Select the box stating that you certify that the information on the HUD 50070 in the SF-424 section of the FY 2017 New Project Application is correct. <b>Note:</b> The Authorized Representative information must be for the person who is legally able to enter into a contract for the organization. This is the person who can legally sign the grant agreement if the new project application is selected for conditional award.
3.	Select "Save & Next" to continue to the next screen.

**NOTE:** *If any pre-populated information is incorrect, you must correct it in the Project Applicant Profile. Review the instructions in the Submitting the Project Application section in this guide. Do not use the "View Applicant Profile" link on the left menu bar.*

# New Project Application

## 1I. Certification Regarding Lobbying

The following steps provide instructions on completing the "Certification Regarding Lobbying" screen for **Part 1: SF-424** of the FY 2017 Project Application.

**eForms** Logout

TestUser2

New Project Application FY2017

Applicant Name: Project Applicant A  
Applicant Number: 030700000  
Project Name: New Project 2 2017  
Project Number: 135670

New Project Application FY2017

FY2016 New Project Application Instructions

Before Starting

Part 1 - Forms

1A. SF-424 Application Type

1B. SF-424 Legal Applicant

1C. SF-424 Application Details

1D. SF-424 Congressional District(s)

1E. SF-424 Compliance

1F. SF-424 Declaration

1G. HUD 2880

1H. HUD 50070

**1I. Cert. Lobbying**

1J. SF-LLL

Part 2 - Recipient and Subrecipient Information

2A. Subrecipients

2B. Experience

Part 3 - Project Information

3A. Project Detail

3B. Description

3C. Expansion

Part 4 - Housing, Services, and HMIS

4A. Services

4B. Housing Type

Part 5 - Participants and Outreach

5A. Households

5B. Subpopulations

5C. Outreach

Part 6 - Budget Information

6A. Funding Request

6B. Acq/Rehab/Const

**CERTIFICATION REGARDING LOBBYING**

**Certification for Contracts, Grants, Loans, and Cooperative Agreements**

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

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

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

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

**Statement for Loan Guarantees and Loan Insurance**

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

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

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

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

Applicant's Organization: Test Organization 2

Name / Title of Authorized Official: first last, title

Signature of Authorized Official:

Date Signed: 07/17/2017

Save & Back Save Save & Next

Back Next

Check Spelling

Step	Description
1.	Review the information on this screen.
2.	Select the box stating that you certify that the information is true and accurate. The other fields on this screen are not editable.
3.	Select "Save & Next" to continue to the next screen.

# New Project Application

## 1J. SF-LLL

The following steps provide instructions on completing all the mandatory fields marked with an asterisk (\*) on the " SF-LLL - Disclosure of Lobbying" screen for **Part 1: SF-424** of the FY 2017 Project Application, as well as reviewing information populated from the "Applicant Profile" screens.

**eForms** Logout

**TestUser2**

New Project Application FY2017

Applicant Name: Project Applicant A  
Applicant Number: 030700000  
Project Name: New Project 2 2017  
Project Number: 135670

New Project Application FY2017

FY2016 New Project Application Instructions

Before Starting  
Part 1 - Forms  
1A. SF-424 Application Type  
1B. SF-424 Legal Applicant  
1C. SF-424 Application Details  
1D. SF-424 Congressional District(s)  
1E. SF-424 Compliance

**1J. SF-LLL**

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

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

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

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

\* Does the recipient or subrecipient of this CoC grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program?  Select "Yes" or "No" to reveal additional questions

\* Legal Name: Test Organization 2

\* Street 1: 125 Test Street

Street 2:

\* City: Washington

County:

\* State: District of Columbia

\* Country: United States

\* Zip / Postal Code: 20410

Step	Description
1.	Verify that the all project information is complete and accurate.
2.	Select "Yes" or "No" to indicate if your organization participates in federal lobbying activities. Additional questions will appear. (see next pages)

**NOTE:** *If any pre-populated information is incorrect, you must correct it in the Project Applicant Profile. Review the instructions in the Submitting the Project Application section in this guide.*

# New Project Application

## If "No" Lobbying Activities

**11. SF-LLL**

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

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

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

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

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

Select "No" and confirm information

\* Legal Name: Test Organization 2  
 \* Street 1: 125 Test Street  
 Street 2:  
 \* City: Washington  
 County:  
 \* State: District of Columbia  
 \* Country: United States  
 \* Zip / Postal Code: 20410

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

\* I certify that this information is true and complete.

Select check box to certify

**Authorized Representative**

Prefix: Ms.  
 First Name: first  
 Middle Name:  
 Last Name: last  
 Suffix: -- select --  
 Title:  
 Telephone Number: (123) 456-7890  
 (Format: 123-456-7890)  
 Fax Number: (123) 456-7890  
 (Format: 123-456-7890)  
 Email: Name@Organization.org

**Signature of Authorized Representative:** Considered signed upon submission in e-form  
**Date Signed:** 07/17/2017

Save & Back    Save    Save & Next  
 Back    Next  
 Check Spelling

Step	Description
1.	If "No" lobbying activities, review the pre-populated data.
2.	Select the box stating that you certify that the information on the SF-LLL in the SF-424 section of the Renewal Project Application is correct.
3.	Select "Save & Next" to continue to the next screen.



# New Project Application

## If "Yes" Lobbying Activities

**eForms** Logout

TestUser2

New Project Application FY2017

Applicant Name: Project Applicant A  
Applicant Number: 030700000  
Project Name: New Project 2 2017  
Project Number: 135670

New Project Application FY2017

FY2016 New Project Application Instructions

Before Starting

Part 1 - Forms

1A. SF-424 Application Type

1B. SF-424 Legal Applicant

1C. SF-424 Application Details

1D. SF-424 Congressional District(s)

1E. SF-424 Compliance

1F. SF-424 Declaration

1G. HUD 2880

1H. HUD 50070

1I. Cert. Lobbying

**1J. SF-LLL**

Part 2 - Recipient and Subrecipient Information

2A. Subrecipients

2B. Experience

Part 3 - Project Information

3A. Project Detail

3B. Description

3C. Expansion

Part 4 - Housing, Services, and HMIS

4A. Services

4B. Housing Type

Part 5 - Participants and Outreach

5A. Households

5B. Subpopulations

5C. Outreach

Part 6 - Budget Information

6A. Funding Request

6B. Acq/Rehab/Const

6C. Leased Units

6D. Leased Structures

6E. Rental Assistance

6F. Supp Svcs Budget

6G. Operating

6H. HMIS Budget

6I. Match

6J. Summary Budget

Part 7 - Attachment(s) & Certification

7A. Attachment(s)

7D. Certification

Part 8 - Submission Summary

8B. Summary

Export to PDF

Get PDF Viewer

Back to Submissions List

### 1J. SF-LLL

#### DISCLOSURE OF LOBBYING ACTIVITIES

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

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

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

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

**\* Does the recipient or subrecipient of this CoC grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program?** Yes

**1. Type of Federal Action:** Grant

**2. Status of Federal Action:** Application

**3. Report Type:** Initial Filing

**\* 4. Name and Address of Reporting Entity:** Choose one option that applies from the following list:

- Prime
- Subrecipient

Refer to project name, addresses and contact information entered into the attached project application on screen 1B.

**Congressional District, if known:**

Available Items:	Selected Items:
AK-000	DC-000
AL-001	
AL-002	
AL-003	
AL-004	
AL-005	

**6. Federal Department/Agency:** Department of Housing and Urban Development

**7. Federal Program Name/Description and (CFDA Number):** Continuum of Care (CoC) Program (14.267)

**8. Federal Action Number:** FR-5900-N-18B

**9. Award Amount:** \$0.00

**\* 10a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):**  
Required Text

**\* 10b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):**  
Required Text

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

**\* I certify that this information is true and complete.**

**Authorized Representative**

Prefix: Ms.

First Name: first

Middle Name:

Last Name: last

Suffix: -- select --

Title: title

Telephone Number: (123) 456-7890  
(Format: 123-456-7890)

Fax Number: (123) 456-7890  
(Format: 123-456-7890)

Email: Name@Organization.org

**Signature of Authorized Representative:** Considered signed upon submission in e-signature

**Date Signed:** 07/17/2017

Review and complete the required fields

Select "Yes" and review questions

Select Prime

Select check box to certify

# New Project Application

<b>Step</b>	<b>Description</b>
1.	If "Yes" lobbying activities, review the pre-populated data in fields 1, 2, and 3.
2.	In field 4, indicate that the reporting entity is the Prime. The options include "Prime" and "Subrecipient," but the Project Applicant should always be the Prime.
3.	Confirm the Congressional districts and edit as needed.
4.	Review fields 6, 7, 8, and 9.
5.	In field 10a, identify the lobbying registrant's name and address.
6.	In field 10b, identify individuals performing services. It is a required field and requires text.
7.	After completing the questions, select the box stating that you certify that the information on the SF-LLL in the SF-424 section of the Renewal Project Application is correct.
8.	Select "Save & Next" to continue to the next screen.

**NOTE:**

*The Prime is the organization that receives the award; when the organization receives an award, it is called the recipient. The recipient is required to submit the Project Application and is referred to as the Project Applicant in the instructional guides.*

*The subrecipient NEVER submits the Project Application.*

# New Project Application


## 2A. Subrecipients



Remember, applicants must complete Part 1: SF-424 before the rest of the application screens will appear.

This screen lists all of the project's subrecipients. The detail that will populate this screen is based on what is entered in the "Project Subrecipients Detail" screen for **Part 2: Recipient and Subrecipient Information** of the FY 2017 Project Application.

The screenshot shows the '2A. Project Subrecipients' screen. On the left sidebar, the user is identified as 'TestUser2' and the application is 'New Project Application FY2017'. The sidebar also lists applicant and project details. The main content area contains instructions: 'This form lists all subrecipient organization(s) for the project. To add a subrecipient, select the Add icon. To update subrecipient information already listed, select the view icon.' Below this is a 'Total Expected Sub-Awards' input field and filter options. A table header is visible with columns: Delete, View, Organization, Type, Sub-Award Amount. The table body is empty, displaying 'This list contains no items'. At the bottom are 'Back' and 'Next' buttons. Callout boxes point to the 'Add' icon and the 'Next' button.

Step	Description
1.	To begin adding subrecipient organization(s) to this list, select the "Add" icon  .
2.	The "Project Subrecipients Detail" screen will appear.



# New Project Application

## 2A. Subrecipients (continued)

The screenshot shows the 'e.Forms' interface for '2A. Project Subrecipients Detail'. On the left, a sidebar contains user information and application details. The main form area contains the following fields:

- \* a. Organization Name:
- \* b. Organization Type: -- select --  
If "Other" specify:
- \* c. Employer or Tax Identification Number:
- \* d. Organizational DUNS:  PLUS 4:
- e. Physical Address
  - \* Street 1:
  - Street 2:
  - \* City:
  - \* State: -- select --
  - \* Zip Code:

A callout box points to the DUNS field with the text: "Enter Subrecipient Organization's DUNS number".

Step	Description
1.	Enter the legal name of the subrecipient organization.
2.	Indicate the subrecipient's organization type by selecting the appropriate option from the dropdown menu. <ul style="list-style-type: none"><li>• Nonprofit subrecipients(those who select options M or N as an organization type) are required to provide proof of their nonprofit status. Documentation of nonprofit status must be attached in <i>e-snaps</i> using the "Attachments" link on the left menu bar. This link appears prior to the "Submission Summary" link.</li><li>• If you select "Other," you must provide an explanation in the "If 'Other' specify" field. If you do not, the "Submission Summary" screen will show this screen as incomplete.</li></ul> If the information entered is for an individual, select "Other" and provide an explanation.
3.	Enter the subrecipient's 9-digit TAX ID/EIN number.
4.	Enter the subrecipient's 9-digit DUNS number (or 13-digit number, if applicable.)
5.	Enter the subrecipient's address, city, state, and zip code. If the mailing address is different from the street address; enter the mailing address.

# New Project Application

## 2A. Subrecipients (continued)

- Applicant
- 1C. SF-424 Application Details
- 1D. SF-424 Congressional District(s)
- 1E. SF-424 Compliance
- 1F. SF-424 Declaration
- 1G. HUD 2880
- 1H. HUD 50070
- 1I. SF-LLL
- Part 2 - Recipient and Subrecipient Information
- 2A. Subrecipients**
- 2B. Experience
- Part 3 - Project Information
- 3A. Project Detail
- 3B. Description
- 3C. Expansion
- Part 4 - Housing, Services, and HMIS
- Part 5 - Participants and Outreach
- Part 6 - Budget Information
- 6A. Funding Request
- 6I. Match
- 6J. Summary Budget
- Part 7 - Attachment Certification
- 7A. Attachment(s)
- 7D. Certification
- Part 8 - Submission Summary
- 8B. Summary
- Export to PDF
- Get PDF Viewer
- Back to Submissions List

**\* f. Congressional District(s):**  
(for multiple selections hold CTRL key)

Available Items:

Selected Items:

**\* g. Is the subrecipient a Faith-Based Organization?** -- select --

**\* h. Has the subrecipient ever received a federal grant, either directly from a federal agency or through a State/local agency?** -- select --

**\* i. Expected Sub-Award Amount:**

**j. Contact Person**

**\* Prefix:** -- select --

**\* First Name:**

**Middle Name:**

**\* Last Name:**

**Suffix:** -- select --

**\* Title:**

**\* E-mail Address:**

**\* Confirm E-mail Address:**

**\* Phone Number:**

**Extension:**

**Fax Number:**



Select "Save & Back to List" when finished adding subrecipients

Select "Save & Add Another" to add more subrecipients

Step	Description
6.	Under "Congressional Districts," select the Congressional district(s) in which the subrecipient is located. <ul style="list-style-type: none"> <li>• Highlight one district, or hold the CTRL+Key to make more than one selection.</li> <li>• Using the single arrow key, move your selection from the left box to the right box.</li> </ul>
7.	Select "Yes" or "No" to indicate if the subrecipient is a faith-based organization.
8.	Select "Yes" or "No" to indicate if the subrecipient has ever received a federal grant.
9.	Enter the total amount of funds that the Project Applicant expects to award to this subrecipient. <ul style="list-style-type: none"> <li>• The amount must be in whole dollars (i.e., no decimals).</li> <li>• This sum will be added to the total expected sub-award amount from all subrecipients and will be automatically calculated on the "Project Subrecipients" screen.</li> </ul>

# New Project Application

## 2A. Subrecipients (continued)

Step	Description
10.	Select the appropriate prefix from the dropdown menu.
11.	Enter the contact person's first, middle (optional), last name, suffix (optional), and title.
12.	Enter the contact person's email address, and in the next field re-enter the contact person's email address to verify that you entered it correctly.
13.	Enter the contact person's telephone number, starting with the area code.
14.	Enter the extension of the contact person's telephone number, if applicable.
15.	Enter the contact person's fax number, starting with the area code (optional).
16.	To add another subrecipient, select "Save & Add Another" and repeat steps 1 – 15. <ul style="list-style-type: none"><li>• Repeat these steps for each subrecipient you need to add.</li><li>• When you are finished adding subrecipients, select "Save &amp; Back to List" to return to the "2A. Project Subrecipients" screen.</li></ul>
17.	After you return to the "2A. Project Subrecipients" screen, review the list. <ul style="list-style-type: none"><li>• To edit the information you entered, select the "View" icon  to the left of the entry.</li><li>• To delete an entry from the list, select the red "Delete" icon. </li></ul>
18.	When your sponsor list is complete, select "Next" to continue to the next screen.

NOTE: *Someone whose contact information is entered in e-snaps on the "Project Subrecipient" screen does not automatically have access to e-snaps.*

*Only a registrant, also called a registered user, who is associated in e-snaps with the organization, and thus the organization's application, may enter information in the Project Applicant Profile and all Project Applications associated with this Project Applicant Profile. **Under no circumstances should a subrecipient complete the project application on the project applicant's behalf.***

*Refer to the Project Applicant Profile instructional guide on the CoC Program Competition Resources webpage on the HUD Exchange at:*  
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>.

# New Project Application

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

The following steps provide instruction on completing all the mandatory fields marked with an asterisk (\*) on the “Experience of Applicant, Subrecipient(s), and Other Partners” screen for **Part 2: Recipient and Subrecipient Information** of the FY 2017 Project Application.

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

\* 1. Describe the experience of the applicant and potential subrecipients (if any), in effectively utilizing federal funds and performing the activities proposed in the application, given funding and time limitations.

\* 2. Describe the experience of the applicant and potential subrecipients (if any) in leveraging other Federal, State, local, and private sector funds.

\* 3. Describe the basic organization and management structure of the applicant and subrecipients (if any). Include evidence of internal and external coordination and an adequate financial accounting system.

\* 4a. Are there any unresolved monitoring or audit findings for any HUD grants(including ESG) operated by the applicant or potential subrecipients (if any)?

\* 4b. Describe the unresolved monitoring or audit findings.

Buttons: Save & Back, Save, Save & Next, Back, Next, Check Spelling

Callout: If "Yes," another question will appear.

Step	Description
1.	Describe the experience of the Project Applicant and potential subrecipients (if any) in effectively utilizing federal funds and performing the activities proposed in the application, given funding and time limitations.
2.	Describe the experience of the Project Applicant and potential subrecipients (if any) in leveraging other Federal, State, local, and private sector funds.
3.	Describe the basic organization and management structure of the Project Applicant and subrecipients (if any). Include evidence of internal and external coordination and an adequate financial accounting system.

# New Project Application

4. Select "Yes" or "No" from the dropdown menu regarding monitoring findings for any HUD grants (including ESG) operated by the Project Applicant or potential subrecipient(s).
  - If "Yes," a new text box will appear. Provide an explanation in the text box provided.
5. Select "Save & Next" to continue to the next screen.

**NOTE:** *When copying and pasting text from MS Word into e-snaps, additional characters may be added to your text. To ensure additional characters are not counted by the system, we recommend copying and pasting into e-snaps from Notepad, which will remove any unnecessary formatting from MS Word.*

# New Project Application

## 3A. Project Detail

The following steps provide instruction on updating fields populated with information from the "Applicant Type" and "Project" screens on the "Project Detail" screen in **Part 3: Project Information** of the FY 2017 New Project Application, as well as, completing all mandatory fields marked with an asterisk (\*) on the "Project Detail" screen of the application.

The screenshot shows the '3A. Project Detail' form with the following fields and callouts:

- \* 1a. CoC Number and Name:** A dropdown menu with "-- select --". A callout bubble states: "1a and 1b determine which CoC receives the project application when submitted in e-snaps".
- 1b. CoC Collaborative Applicant Name:** A dropdown menu with "-- select --".
- 2. Project Name:** A text input field containing "New project FY 2017".
- \* 3. Project Status:** A dropdown menu with "Standard" selected.
- \* 4. Component Type:** A dropdown menu with "-- select --". A callout bubble states: "Component Type determines questions on other screens".
- \* 5. Does this project use one or more properties that have been conveyed through the Title V process?** A dropdown menu with "-- select --".

Buttons at the bottom include: Save & Back, Save, Back, Next, and Check Spelling.

**NOTE:** You must select the correct CoC in the "CoC Number and Name" field. This field identifies the CoC to which your New Application will be submitted. If the CoC is incorrect, your application ultimately might not be submitted to HUD.

"No CoC" can only be selected if your CoC did not register for the FY 2017 CoC Competition or your project is located in geographic area that is unclaimed. You should contact CoCs next to your location to determine if the geographic area in which you reside has been claimed and/or the state CoC that is there is a Balance of State.

Step	Description
1.	Select your "CoC Number and Name" from the dropdown menu.
2.	Select your "CoC Applicant Name" from the dropdown menu.
3.	Verify the name of your project populated with the project name listed on your "Project" screen. If the project name is incorrect, follow the instructions in the NOTE below.
4.	Select your "Project Status" from the dropdown menu. Project Applicants typically select "Standard." See the NOTE below for more information about the "Appeal" option.
5.	Select the "Component Type" from the dropdown menu. <ul style="list-style-type: none"> <li><b>Eligible New Project component types during the FY 2017 CoC Program Competition include PH (for PSH and RRH projects), Joint TH and PH-RRH</b></li> </ul>

# New Project Application

---

**Component, SSO (for Coordinated Entry projects), and HMIS (for Dedicated HMIS projects).**

**Note: The component type determines what questions appear on other forms throughout the Project Application.**

---

6. Select "Yes" or "No" to indicate if the project includes one or more of the project properties conveyed under Title V.


---

7. Select "Save & Next" to continue to the next screen.

---

**NOTE:**  
**Incorrect Project Name**

*If the project name is incorrect:*

- Select the "Save" button to save responses on this screen.
- Select "Back to Submissions List" on the left menu bar.
- Select "Projects" on the left menu bar.
- Select the "View" icon  to the left of your project to open the "Project Details" screen.
- In the "Project Name" field, type in the correct name of the project, and select the "Save" button.

*Return to the New Application by navigating to the "Submissions" screen and selecting the orange folder next to the Project.*

---

**NOTE:**  
**Solo Application**

*If you select "Appeal," this note will appear on the screen:*

- You have selected "Appeal" and therefore are designating this application as an appeal due to the CoC's decision to not approve and rank this project on the CoC Priority Listing (the project application was rejected by the CoC in the local competition). To proceed, you must fill out an additional form, Part 8A - Notice of Intent to Appeal, and submit the details of your appeal to be considered as a Solo Applicant as outlined in Section X.C. of the FY 2017 CoC Program Competition NOFA). If you are filling out this application for the first time, or are otherwise not intending to appeal a rejection, please select "Standard".

*The selection of "Appeal" should only be used by the Project Applicant **if it attempted to participate in the CoC planning process in the geographic area in which it operates and believes it was denied the right to participate in a reasonable manner.** In this case, the Project Applicant may appeal the rejection directly to HUD by selecting "Appeal" and submitting a Solo Application prior to the application deadline.*

*Refer to the Appeal Project Application instructional guide on the CoC Program Competition Resources webpage on the HUD Exchange at:*

*<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>*

---

# New Project Application

## **3B. Project Description**

The following steps provide instruction on completing mandatory fields marked with an asterisk (\*) on the “Project Description” screen for **Part 3: Project Information** of the FY 2017 New Project Application.

**There are different versions of screen 3B, depending on which component type was selected on screen 3A. Project Detail, field 4: Component Type. The options are PH (PSH or RRH projects), Joint TH and PH-RRH, SSO (for Coordinated Entry projects), or HMIS (Dedicated HMIS projects).**

The purpose of the program description is to describe the project at full operational capacity and to demonstrate how full capacity will be achieved over the term being requested.

Follow-up questions and dropdown menu visibility for the default question on screen 3B will vary depending on your selections. Therefore, not all of the questions in the image below may appear to every Project Applicant. Review the instructions that follow.

**NOTE:**

*When copying and pasting text from MS Word into e-snaps, additional characters may be added to your text. To ensure additional characters are not counted by the system, e-snaps users should copy and paste text into e-snaps from Notepad, which will remove any unnecessary formatting from MS Word.*



# New Project Application

## 3B. PH Component

The following instructions are for screen 3B. Project Description when the PH component is selected on screen 3A. Project Detail.

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

**\* 2. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.**

**\* 3. Will your project participate in a CoC Coordinated Entry Process?** -- select --

**\* 4. Please identify the project's specific population focus. (Select ALL that apply)**

<input type="checkbox"/> Chronic Homeless	<input type="checkbox"/> Domestic Violence
<input type="checkbox"/> Substance Abuse	<input type="checkbox"/> Mental Illness
<input type="checkbox"/> HIV/AIDS	<input type="checkbox"/> Other

(Click 'Save' to update)

Step	Description
1.	Provide a description of the scope of the project.
2.	Provide a description of the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.
3.	Select "Yes" or "No" to indicate if your project will participate in a CoC Coordinated Entry Process. Select "No" if your CoC has not yet implemented a Coordinated Entry Process. <ul style="list-style-type: none"><li>If "No," one new question will appear. In the text box provided, explain why your project will not participate in a CoC Coordinated Entry Process.</li></ul>
4.	Indicate the proposed project's specific population focus. <ul style="list-style-type: none"><li>Select all of the boxes that apply. Multiple selections are permissible.</li><li>For New PH Projects, Chronically Homeless must be selected or else the user will not be allowed to submit.</li><li>If you select "Other," select "Save" and then provide a description of the specific type of population in the text box provided.</li></ul>

# New Project Application

## 3B. PH Component (continued)

Step	Description
5.	Under question 5. Housing First, select "Yes" or "No" to indicate whether your project will quickly move participants into permanent housing.
6.	Indicate whether your project ensures that participants are not screened out for certain situations. In other words, select the boxes that apply to indicate which, if any, of the barriers to accessing housing and services have been removed. <ul style="list-style-type: none"> <li>If you check the first four boxes, this project will be considered low barrier.</li> <li>If you select "None of the above," it indicates that all of those conditions are present in the project to screen out participants.</li> </ul>
7.	Select the boxes that apply to indicate which reasons were removed as reasons for program termination. <ul style="list-style-type: none"> <li>If you select "None of the above," it indicates that all of those reasons are present in the project for terminating participants.</li> </ul>
8.	Based on your selections to the questions about screening and termination, the response to "Does the project follow a 'Housing First' approach?" will auto-populate with "Yes" or "No" to indicate if your project follows a Housing First approach. <b>NOTE:</b> See the FY 2017 CoC Program NOFA regarding the requirements for projects that are designated as Housing First.

# New Project Application

## 3B. PH Component (continued)

6. If applicable, describe the proposed development activities and the responsibilities that the applicant and potential subrecipients (if any) will have in developing, operating, and maintaining the property.

\* 7. Will the PH project provide PSH or RRH? -- select --

Participants be required to live in a particular structure, unit, or locality, at some point during the period of participation? Yes

\* Explain how and why the project will implement this requirement.

\* 9. Will more than 16 persons live in one structure? Yes

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

\* b. Describe how the project will be integrated into the neighborhood.

Save & Back Save Save & Next Back Next

Step	Description
9.	If applicable, provide a description of the proposed development activities and the responsibilities that the applicant and potential subrecipients (if any) will have in developing, operating, and maintaining the property.
10.	Select "PSH" or "RRH" to indicate if your project will provide PSH or RRH. <ul style="list-style-type: none"> <li>If you select "PSH," a new section, "Dedicated and DedicatedPLUS," will appear on the screen after step 9.</li> </ul>
11.	Select "Yes" or "No" to indicate whether participants will be required to live in a particular structure, unit, or locality. <ul style="list-style-type: none"> <li>If "Yes," one new question will appear. Provide a description of how and why this project will implement this requirement.</li> </ul>
12.	Select "Yes" or "No" to indicate if there will be more than 16 persons living in one structure. <ul style="list-style-type: none"> <li>If "No," select "Save &amp; Next" to continue to the next screen.</li> <li>If "Yes," two new questions will appear. In the two text boxes available, provide a description of the local market conditions that necessitate a project of this size and how the project will be integrated into the neighborhood.</li> </ul>
12.	If "PSH" was selected, the "Dedicated and DedicatedPlus section will appear on the screen. In step 10, indicate whether the project is "100% Dedicated," or "DedicatedPLUS," according to the information provided.
13.	Select "Save & Next" to continue to the next screen.

# New Project Application

## 3B. SSO Component

The following instructions are for screen 3B. Project Description when the SSO component is selected on screen 3A. Project Detail.

**3B. Project Description**

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

**\* 2. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.**

**\* 3. Please identify the project's specific population focus.  
(Select ALL that apply)**

<b>Chronic Homeless</b>	<input type="checkbox"/>	<b>Domestic Violence</b>	<input type="checkbox"/>
<b>Veterans</b>	<input type="checkbox"/>	<b>Substance Abuse</b>	<input type="checkbox"/>
<b>Youth (under 25)</b>	<input type="checkbox"/>	<b>Mental Illness</b>	<input type="checkbox"/>
<b>Families</b>	<input type="checkbox"/>	<b>HIV/AIDS</b>	<input type="checkbox"/>
		<b>Other</b>	<input type="checkbox"/>

(Click 'Save' to update)

Step	Description
1.	Provide a description of the scope of the project.
2.	Provide a description of the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.
3.	Indicate the proposed project's specific population focus. <ul style="list-style-type: none"><li>• Select all of the boxes that apply. Multiple selections are permissible.</li><li>• If you select "Other," select "Save" and then provide a description of the specific type of population in the text box provided.</li></ul>

# New Project Application

## 3B. SSO Component (continued)

The screenshot shows a web application interface for the SSO Component. On the left is a navigation menu with sections: Details, 1D. SF-424 Congressional District(s), 1E. SF-424 Compliance, 1F. SF-424 Declaration, 1G. HUD 2880, 1H. HUD 50070, 1I. SF-LLL, Part 2 - Recipient and Subrecipient Information, 2A. Subrecipients, 2B. Experience, Part 3 - Project Information, 3A. Project Detail, **3B. Description**, 3C. Expansion, Part 4 - Housing, Services, and HMIS, Part 5 - Participants and Outreach, Part 6 - Budget Information, 6A. Funding Request, 6I. Match, 6J. Summary Budget, Part 7 - Attachment(s) & Certification, 7A. Attachment(s), 7D. Certification, Part 8 - Submission Summary, 8B. Summary, and Export to PDF.

The main form area contains the following questions and controls:

- \* 4. Please select the type of SSO project:** A dropdown menu with "Coordinated Entry" selected.
- \* 4a. Will the coordinated entry process funded in part by this grant cover the CoC's entire geographic area?** A dropdown menu with "-- select --" selected.
- \* 4b. Will the coordinated entry process funded in part by this grant be easily accessible?** A dropdown menu with "-- select --" selected.
- \* 4c. Describe the advertisement strategy for the coordinated entry process and how it is designed to reach the highest barriers to accessing assistance.** A large text input field.
- \* 4d. Does the coordinated entry process use a comprehensive, standardized assessment process?** A dropdown menu with "-- select --" selected.
- \* 4e. Describe the referral process and how the coordinated entry process ensures that participants are directed to appropriate housing and/or services.** A large text input field.
- \* 4f. If the coordinated entry process includes differences in the access, entry, assessment, or referral for certain populations, are those differences limited only to the following four groups: Chronically Homeless, Individuals, Families, and Youth?** A dropdown menu with "-- select --" selected.

At the bottom of the form are several buttons: "Save & Back", "Save", "Save & Next", "Back", "Next", and "Check Spelling". A callout bubble points to the "Coordinated Entry" dropdown with the text: "Select 'Coordinated Entry' and 'Save.'"

4. Select the type of SSO project. Coordinated entry is the only option. Select Save and a series of questions will appear.
5. Select "Yes" or "No" to indicate whether the coordinated entry process funded in part by this grant covers the CoC's entire geographic area.
6. Select "Yes" or "No" to indicate whether the coordinated entry process funded in part by this grant will be easily accessible.
7. Describe the advertisement strategy for the coordinated entry process and how it is designed to reach those with the highest barriers to accessing assistance.
8. Select "Yes" or "No" to indicate whether the coordinated entry process uses a comprehensive, standardized assessment process.
9. Describe the referral process and how the coordinated entry process ensures that participants are directed to appropriate housing and/or services.
10. If the coordinated entry process includes differences in the access, entry, assessment, or referral for certain populations, select "Yes" or "No" to indicate whether those differences limited only to the following four groups: Chronically Homeless, Individuals, Families, and Youth.
11. Select "Save & Next" to continue to the next screen.

# New Project Application

## 3B. HMIS Component

The following instructions are for screen 3B. Project Description when the HMIS component is selected on screen 3A. Project Detail.

The screenshot shows the '3B. Project Description' screen in the e.Forms application. The left sidebar contains navigation options for 'New Project Application FY2017' and 'FY2016 New Project Application Instructions'. The main content area has four numbered sections:

- \* 1. Provide a description that addresses the entire scope of the proposed project.** (Text box)
- \* 2. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.** (Text box)
- \* 3. Will your project participate in a CoC Coordinated Entry Process?** (Dropdown menu with 'No' selected)
- \* Please explain why your project will not participate in a CoC Coordinated Entry Process.** (Text box)
- \* 4. If applicable, describe the proposed development activities and the responsibilities that the applicant and potential subrecipients (if any) will have in developing, operating, and maintaining the property.** (Text box)

At the bottom, there are buttons for 'Save & Back', 'Save', 'Save & Next', 'Back', 'Next', and 'Check Spelling'. A callout box points to the dropdown menu in section 3 with the text: 'If "No," another question will appear.'

Step	Description
1.	Provide a details description of the scope of the project.
2.	Provide a description of the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.
3.	Select "Yes" or "No" to indicate if your project will participate in a CoC Coordinated Entry Process. Select "No" if your CoC has not yet implemented a Coordinated Entry Process. <ul style="list-style-type: none"><li>If "No," one new question will appear.<ul style="list-style-type: none"><li>In the text box provided, explain why your project will not participate in a CoC Coordinated Entry Process.</li></ul></li></ul>
4.	If applicable, describe the proposed development activities and the responsibilities that the applicant and potential subrecipients - if any - will have in developing, operating, and maintaining the property.
4.	Select "Save & Next" to continue to the next screen.

# New Project Application

## 3B. Joint TH and PH-RRH

The following instructions are for screen 3B. Project Description when the Joint TH and PH-RRH component is selected on screen 3A. Project Detail.

The screenshot shows the 'e.Forms' application interface for '3B. Project Description'. The sidebar on the left contains navigation options for 'TestUser2' and 'New Project Application FY2017'. The main content area is divided into four numbered steps:

- \* 1. Provide a description that addresses the entire scope of the proposed project.** (Text input field)
- \* 2. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.** (Text input field)
- \* 3. Will your project participate in a CoC Coordinated Entry Process?** (Dropdown menu with 'No' selected). Below this is a text input field: **Please explain why your project will not participate in a CoC Coordinated Entry Process.**
- \* 4. Please identify the project's specific population focus. (Select ALL that apply)**
  - Chronic Homeless
  - Veterans
  - Youth (under 25)
  - Families
  - Domestic Violence
  - Substance Abuse
  - Mental Illness
  - HIV/AIDS
  - Other  (Click 'Save' to update)

A callout box points to the dropdown menu in step 3 with the text: "If 'No,' another question will appear."

Step	Description
1.	Provide a description of the scope of the project.
2.	Provide a description of the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.
3.	Select "Yes" or "No" to indicate if your project will participate in a CoC Coordinated Entry Process. Select "No" if your CoC has not yet implemented a Coordinated Entry Process. <ul style="list-style-type: none"><li>If "No," one new question will appear. In the text box provided, explain why your project will not participate in a CoC Coordinated Entry Process.</li></ul>
4.	Indicate the proposed project's specific population focus. <ul style="list-style-type: none"><li>Select all of the boxes that apply. Multiple selections are permissible.</li><li>If you select "Other," select "Save" and then provide a description of the specific type of population in the text box provided.</li></ul>

# New Project Application

## 3B. Joint TH and PH-RRH (continued)

Step	Description
5.	Under question 5. Housing First, select "Yes" or "No" to indicate whether your project will quickly move participants into permanent housing.
6.	Indicate whether your project ensures that participants are not screened out for certain situations. In other words, select the boxes that apply to indicate which, if any, of the barriers to accessing housing and services have been removed. <ul style="list-style-type: none"> <li>If you check the first four boxes, this project will be considered low barrier.</li> <li>If you select "None of the above," it indicates that all of those conditions are present in the project to screen out participants.</li> </ul>
7.	Select the boxes that apply to indicate which reasons were removed as reasons for program termination. <ul style="list-style-type: none"> <li>If you select "None of the above," it indicates that all of those reasons are present in the project for terminating participants.</li> </ul>
8.	Based on your selections to the questions about screening and termination, the response to "Does the project follow a 'Housing First' approach?" will auto-populate with "Yes" or "No" to indicate if your project follows a Housing First approach. <p><b>NOTE:</b> See the FY 2017 CoC Program NOFA regarding the requirements for projects that are designated as Housing First.</p>



# New Project Application

## 3C. Expansion

There are different versions of screen 3C, depending on which component type was selected on screen 3A. Project Detail, question 4: Component Type:

- Screen 3C. Project Expansion Information is available when the PH or SSO component is selected.
- Screen 3C. HMIS Expansion is available when the HMIS component is selected.

### 3C. Project Expansion Information (PH and SSO)

The following steps provide instruction on completing mandatory fields marked with an asterisk (\*) on the "Project Expansion" screen for **Part 3: Project Information** of the FY 2017 New Project Application.

The screenshot displays the '3C. Project Expansion Information' form. It includes two mandatory questions marked with an asterisk (\*). The first question asks if the project will use an existing homeless facility or incorporate activities from an existing project, with a dropdown menu currently set to 'Yes'. A callout box highlights this dropdown, instructing the user to select 'Yes' or 'No'. The second question asks if this is a new project application requesting a 'Project Expansion' of an eligible renewal project of the same component type, with a dropdown menu set to '-- select --'. Below the questions are buttons for 'Save & Back', 'Save', 'Save & Next', 'Back', and 'Next'. The left sidebar shows the user 'TestUser2' and application details for 'New Project Application FY2017'.

Step	Description
1.	Indicate whether or not your project will expand using an existing homeless facility or incorporate activities provided by an existing project. <ul style="list-style-type: none"><li>• If "No," select "Save &amp; Next" and continue to the next screen.</li><li>• If "Yes," one new question will appear that you are required to complete. Continue on to Step 2.</li></ul>

**NOTE:** *The project expansion process has changed and is outlined in the FY 2017 CoC Program NOFA.*  
<https://www.hudexchange.info/programs/e-snaps/fy-2017-coc-program-nofa-coc-program-competition/>

# New Project Application

## 3C. Project Expansion (continued)

The screenshot shows the 'e.Forms' application interface. The top navigation bar includes the 'e.Forms' logo and a 'Logout' link. The sidebar on the left contains the user name 'TestUser2' and a list of application steps: 'New Project Application FY2017', 'Applicant Name: Project Applicant A', 'Applicant Number: 030700000', 'Project Name: New project FY 2017', 'Project Number: 0135635', 'New Project Application FY2017', 'FY2016 New Project Application Instructions', 'Before Starting', 'Part 1 - Forms', '1A. SF-424 Application Type', '1B. SF-424 Legal Applicant', '1C. SF-424 Application Details', and '1D. SF-424 Congressional District(s)'. The main content area is titled '3C. Project Expansion Information' and contains three numbered questions:

- \* 1. Will the project use an existing homeless facility or incorporate activities provided by an existing project?  Yes
- \* 2. Is this New project application requesting a "Project Expansion" of an eligible renewal project of the same component type?  Yes
- \* 3. Select the activities below that describe the expansion project, and click on the "Save" button below to provide additional details.

Below the questions, there are two text boxes: 'Available Items:' and 'Selected Items:'. The 'Available Items' box contains the following text:

- Increase the number of homeless persons served
- Provide additional supportive services to homeless persons
- Bring existing facilities up to state/local government health and safety standards
- Replace the loss of nonrenewable funding (private, federal, other excluding state/local government)
- Coordinated entry


Buttons for 'Add All', 'Add', 'Remove', and 'Remove All' are located between the two text boxes. Below the 'Selected Items' box, there are buttons for 'Save & Back', 'Save', 'Save & Next', 'Back', and 'Next'. A callout box on the right side of the screen states: 'Selected items correspond with additional questions.'

Step	Description
2.	Select the activities that describe the expansion project from the "Available Items" text box and move them to the "Selected Items" text box by selecting "Add" or "Add All." <ul style="list-style-type: none"><li>• If you make a mistake, you can remove items from the "Selected Items" box by selecting "Remove" or "Remove All."</li><li>• Select "Save." Continue on to Step 3.</li></ul>
3.	Based on your selection of activities in Step 2, several new fields will appear that you are required to complete. The table on the next page of this document outlines which fields a Project Applicant may be required to complete; however, completion is based on your expansion activity selection. <b>Remember, you will only need to follow the steps associated with the activities you selected in Step 2.</b>
4.	Once all of the fields that were required based on your activity selection are completed, select "Save & Next" to continue to the next screen.

# New Project Application

## 3C. Project Expansion (continued)

The table below identifies which fields a Project Applicant may be required to complete. You will only need to follow the steps associated with the activities you selected in Step 2.

PH Expansion Activities	Steps
<p><b>Increase the number of homeless persons served</b></p>	<p>Indicate how your project is proposing to increase the number of persons experiencing homelessness served.</p> <ul style="list-style-type: none"> <li>• First, enter the “Current Level of Effort” for the following categories:               <ul style="list-style-type: none"> <li>○ # of persons served at a point-in-time</li> <li>○ # of units</li> <li>○ # of beds</li> </ul> </li> <li>• Next, enter the “New Effort” your proposed project will provide for the same three categories listed in the preceding step.</li> </ul>
<p><b>Provide additional supportive services to homeless persons</b></p>	<p>Identify how you will be providing additional services.</p> <ul style="list-style-type: none"> <li>• Select one or more reasons provided in the “Available Items” text box and move them to the “Selected Items” text box by selecting “Add” or “Add All.”</li> <li>• Provide an explanation in the “Describe the reason for the supportive service increase indicated above” text box.</li> </ul>
<p>Bring existing facilities up to state/local gov. health and safety standards</p>	<p>Describe how the project is proposing to bring the existing facility or facilities up to state/local government health and safety standards in the text box provided.</p>
<p>Replace the loss of non-renewable funding</p>	<p>Indicate how the project is proposing to replace the loss of non-renewable funding from private, federal, and/or other (excluding state/local government).</p> <ul style="list-style-type: none"> <li>• List the source of nonrenewable funding. Be sure to indicate that funds are not controlled by the state or local government.</li> <li>• Explain why the project funds are non-renewable.</li> <li>• Select the date that the nonrenewable funds expired or will expire.</li> </ul> <p>Use the “Calendar” icon  to the right of the date field to select the correct date from the pop-up calendar.</p> <ul style="list-style-type: none"> <li>• Identify any steps the Project Applicant or subrecipient took to identify other funding sources.</li> <li>• Provide text to explain why CoC Program funds are necessary to continue operating the project.</li> </ul>

# New Project Application

## 3C. HMIS Expansion (HMIS)

The following steps provide instruction on completing mandatory fields marked with an asterisk (\*) on the “HMIS Expansion” screen for **Part 3: Project Information** of the FY 2017 New Project Application.

**3C. HMIS Expansion**

\* 1. Will the requested funds increase the capacity or function of the CoC's existing HMIS?

\* 2. Is this New project application requesting a "Project Expansion" of an eligible renewal project of the same component type?

Enter the PIN number (first 6 numbers of the grant number) and Project Name for the CoC funded grant that is applying for renewal in FY 2017 upon which this project proposes to expand.

\* Eligible Renewal Grant PIN Number:

\* Eligible Renewal Grant Project Name:

\* 3. Indicate the scope of the proposed expansion:  
Click 'Save' to update form.

Available Items:

- Replace the loss of nonrenewable funding
- Increase HMIS functionality
- Increase geographic coverage of HMIS
- Increase # of HMIS participating agencies and/or programs

Selected Items:

Buttons: Add All, Add, Remove, Remove All, Save & Back, Save, Save & Next, Back, Next, Check Spelling

Callouts: "Select 'Yes' or 'No' from dropdown" (pointing to dropdowns); "Selected items correspond with additional questions." (pointing to Selected Items box)

Step	Description
1.	Select "Yes" or "No" to indicate whether the requested funds increase the capacity or function of the CoC's existing HMIS. <ul style="list-style-type: none"> <li>If "No," select "Save &amp; Next" and continue to the next screen.</li> <li>If "Yes," a new field will appear that you are required to complete. Continue on to Step 2.</li> </ul>
2.	Select "Yes" or "No" to indicate whether the requested funds are for a project expansion of an eligible renewal project of the same component type. <ul style="list-style-type: none"> <li>If "No," proceed to Step 3.</li> <li>If "Yes," two new fields will appear that you are required to complete.</li> </ul>
3.	Enter the PIN number (first 6 numbers of the grant number) and Project Name for the CoC funded grant that is applying for renewal in FY 2017 upon which this project proposes to expand.
4.	Select the activities that identify the scope of the expansion project from the "Available Items" text box and move them to the "Selected Items" text box by selecting "Add" or "Add All." <ul style="list-style-type: none"> <li>If you make a mistake, you can remove items from the "Selected Items" box by selecting "Remove" or "Remove All."</li> <li>Select "Save."</li> </ul>

# New Project Application

3. Based on your selection of activities in Step 3, several new fields will appear that you are required to complete. The table on the next page of this document outlines which fields a Project Applicant may be required to complete; however, completion is based on your expansion activity selection. **Remember, you will only need to follow the steps associated with the activities you selected in Step 3.**
4. Once all of the fields that were required based on your activity selection are completed, select "Save & Next" to continue to the next screen.

**NOTE:**


*The project expansion process has changed and is outlined in the FY 2017 CoC Program NOFA.*

<https://www.hudexchange.info/programs/e-snaps/fy-2017-coc-program-nofa-coc-program-competition/>

# New Project Application

## 3C. HMIS Expansion (continued)

The table below identifies which fields a Project Applicant may be required to complete. You will only need to follow the steps associated with the activities you selected in Step 2.

HMIS Expansion Activities	Steps
Replacing the loss of non-renewable funding	<ul style="list-style-type: none"> <li>• From the dropdown menu, select the source of non-renewable funding: Federal, State, Local Government, Private, or Other.</li> <li>• Explain why the project funds are non-renewable.</li> <li>• Select the date that the nonrenewable funds expired or will expire. Use the “Calendar” icon  to the right of the date field to select the correct date from the pop-up calendar.</li> <li>• Identify any steps the Project Applicant or subrecipient took to identify other funding sources.</li> </ul>
Increasing HMIS functionality	<ul style="list-style-type: none"> <li>• Describe the increased functionality.</li> </ul>
Increasing the geographic coverage of HMIS	<ul style="list-style-type: none"> <li>• Identify the geographic codes that were added to the HMIS coverage</li> </ul>
Increasing the number of HMIS participating agencies and/or programs	<p>Identify the additional participants in each of the following program that will be added:</p> <ul style="list-style-type: none"> <li>• HUD - Continuum of Care Program (CoC)</li> <li>• HUD - Emergency Solutions Grant (ESG)</li> <li>• HUD - Housing Opportunities for Persons with AIDS (HOPWA)</li> <li>• HHS - Projects for Assistance in Transition from Homelessness (PATH)</li> <li>• HHS - Runaway and Homeless Youth Programs (RHY)</li> <li>• Veterans Administration (VA)</li> <li>• Other</li> </ul>

# New Project Application

## **4A. Supportive Services and HMIS**

The following steps provide instruction on completing mandatory fields marked with an asterisk (\*) for screen 4A in **Part 4: Housing, Services, and HMIS** of the FY 2017 Project Application.

**The screens that appear under Part 4 depend on the selection of the component type on screen 3A: Project Detail and 3B. Project Description.**

**NOTE:**

*The Project Applicant must complete the following screens depending upon the component type listed on Screen 3A:*

- *4A. Supportive Services for Participants (PH: PSH)*
- *4A. Supportive Services for Participants (PH: RRH)*
- *4A. Supportive Services for Participants (Joint TH and PH-RRH)*
- *4A. HMIS Standards (HMIS)*
- *For new SSO projects, Project Applicants will not have a Part 4 screen to complete.*

# New Project Application

## 4A. Supportive Services for Participants (PH and Joint TH and PH-RRH)

The following screen, 4A. Supportive Services for Participants, applies to PH projects (PSH and RRH) and Joint TH and PH-RRH (the component selected on screen 3A. Project Detail).

The information entered into screen 4A, "Supportive Services for Participants," the first screen of **Part 4: Housing, Services, and HMIS** of the FY 2017 Project Application, should capture the capacity of the project to efficiently provide supportive services to program participants. Please ensure that the information provided is both accurate and complete.

The screenshot shows the 'e.Forms' interface for '4A. Supportive Services for Participants'. The main content area has three questions:

- \* 1a. Are the proposed project policies and practices consistent with the laws related to providing education services to individuals and families? (Dropdown menu set to 'No')
- \* 1b. Will the proposed project have a designated staff person to ensure that the children are enrolled in school and receive educational services, as appropriate? (Dropdown menu set to 'No')
- \* 1c. Describe the manner in which the project applicant will take into account the educational needs of children when youth and/or families are placed in housing. (Text box)
- \* 2. Describe how participants will be assisted to obtain and remain in permanent housing. (Text box)
- \* 3. Describe specifically how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently. (Text box)

A callout box points to the first dropdown menu with the text: "If 'No,' another question will appear."

Step	Description
1.	Select "Yes," "No," or "Not Applicable" from the dropdown menu to indicate whether proposed project policies and practices are consistent with laws related to providing education services to individuals and families. Only projects that will not serve families or unaccompanied youth should select "Not Applicable." <ul style="list-style-type: none"><li>If "No" is selected, another question will appear.<ul style="list-style-type: none"><li>Describe the manner in which the project applicant will take into account the educational needs of children when youth and/or families are placed in housing in the text box provided.</li></ul></li></ul>
2.	Select "Yes," "No," or "Not Applicable" from the dropdown menu to indicate whether the project will have a designated staff person responsible for ensuring that children are enrolled in school and receive educational services, as appropriate. <ul style="list-style-type: none"><li>Only projects that will not serve families or unaccompanied youth should select "Not Applicable."</li><li>If "No" is selected, another question will appear.<ul style="list-style-type: none"><li>Describe the manner in which the project applicant will take into account the educational needs of children when youth and/or families are placed in housing in the text box provided.</li></ul></li></ul>
3.	Describe the supportive services that will be provided to help project participants obtain and remain in permanent housing in the text box provided.



# New Project Application

Compliance

1F. SF-424 Declaration

1G. HUD 2880

1H. HUD 50070

1I. SF-LLL

Part 2 - Recipient and Subrecipient Information

2A. Subrecipients

2B. Experience

Part 3 - Project Information

3A. Project Detail

3B. Description

3C. Expansion

Part 4 - Housing, Services, and HMIS

**4A. Services**

4B. Housing Type

Part 5 - Participants and Outreach

5A. Households

5B. Subpopulations

5C. Outreach

Part 6 - Budget Information

6A. Funding Request

6I. Match

6J. Summary Budget

Part 7 - Attachment(s) & Certification

7A. Attachment(s)

7D. Certification

Part 8 - Submission Summary

8B. Summary

Export to PDF

Get PDF Viewer

Back to Submissions List

**\* 4. For all supportive services available to participants, indicate who will provide them and how often they will be provided.**  
Click 'Save' to update.

Supportive Services	Provider	Frequency
Assessment of Service Needs	-- select --	-- select --
Assistance with Moving Costs	-- select --	-- select --
Case Management	-- select --	-- select --
Child Care	-- select --	-- select --
Education Services	-- select --	-- select --
Employment Assistance and Job Training	-- select --	-- select --
Food	-- select --	-- select --
Housing Search and Counseling Services	-- select --	-- select --
Legal Services	-- select --	-- select --
Skills Training	-- select --	-- select --
Mental Health Services	-- select --	-- select --
Patient Health Services	-- select --	-- select --
Reach Services	-- select --	-- select --
Substance Abuse Treatment Services	-- select --	-- select --
Transportation	-- select --	-- select --
Utility Deposits	-- select --	-- select --

**Please enter all values for at least one line item.**

**5. Please identify whether the project will include the following activities:**

\* 5a. Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs? -- select --

\* 5b. Use of a single application form for four or more mainstream programs? -- select --

\* 5c. Regular follow-ups with participants to ensure mainstream benefits are received and renewed? -- select --

\* 6. Will project participants have access to SSI/SSDI technical assistance provided by the applicant, a subrecipient, or partner agency? Yes

\* 6a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months. -- select --

Save & Back      Save      Save & Next

Back      Next

Check Spelling

You must enter at least one type of service in the "Supportive Services Provided" table.

Step	Description
4.	Describe the supportive services that will be provided to help project participants locate employment, increase their employment income, and maximize their ability to live independently.
5.	In the table provided, using the dropdown next to each service type, indicate who will provide the service and the frequency of service (daily, weekly, bi-weekly, monthly, bi-monthly, quarterly, semi-annually, annually, or as needed) that will be provided to project participants.
6.	Under question 5, using the dropdowns provided, select "Yes" or "No" to indicate whether the project: <ul style="list-style-type: none"> <li>Provides transportation assistance to clients to enable them to attend mainstream benefit appointments, employment training, or jobs.</li> <li>Uses a single application form for four or more mainstream programs.</li> <li>Follow-ups at least annually with participants to ensure mainstream benefits are received and renewed.</li> </ul>
7.	Select "Yes" or "No" to indicate whether the project enables program participants to access SSI/SSDI technical assistance provided by the applicant, a subrecipient, or a partner agency. <ul style="list-style-type: none"> <li>If "Yes," an additional question will appear. Select "Yes" or "No" from the dropdown menu to indicate if the staff person providing the technical assistance completed SOAR training in the last 24 months.</li> </ul>
8.	Select "Save & Next" to navigate to the next screen.

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# New Project Application

## 4A. HMIS Standards (HMIS Only)

The following screen, 4A. HMIS Standards, applies to HMIS projects (the component selected on screen 3A. Project Detail).

The screenshot shows the 'e.Forms' application interface. The title bar reads 'e.Forms' and 'Logout'. The sidebar on the left shows the user 'TestUser2' and several navigation links: 'New Project Application FY2017', 'Applicant Name: Project Applicant A', 'Applicant Number: 030700000', 'Project Name: New project FY 2017', 'Project Number: 0135635', 'New Project Application FY2017', 'FY2016 New Project Application Instructions', 'Before Starting', and 'Part 1 - Forms'. The main content area is titled '4A. HMIS Standards' and contains two questions:

\* 1a. Is the HMIS currently programmed to collect all Universal Data Elements (UDE's) as set forth in the HMIS Data Standard Notice? -- select --

1b. If no, explain why and the planned steps for compliance.  
Max. 500 characters

\* 2a. Is the HMIS currently able to produce all HUD-required reports and provide data as needed for HUD reporting? -- select --  
(i.e., Annual Performance Reports, quarterly reports, data for CAPER/ESG reporting, etc).

2b. If no, explain why and the planned steps for compliance.  
Max. 500 characters.

Step	Description
1.	In 1a, select "Yes" or "No" from the dropdown menu to indicate if the HMIS is currently programmed to collect all Universal Data Elements (UDEs) as set forth in the HMIS Data Standard Notice.
2.	If you answered "No" to Question 1a, you are required to explain why and discuss the planned steps for compliance in Question 1b.
3.	In 2a, select "Yes" or "No" from the dropdown menu to indicate if the HMIS is currently able to produce all HUD-required reports and provide data as needed for HUD reporting.
4.	If you answered "No," to Question 2a, you are required to explain why and discuss the planned steps for compliance in Question 2b.

**NOTE:** *When copying and pasting text from MS Word into e-snaps, additional characters may be added to your text. To ensure additional characters are not counted by the system, e-snaps users should copy and paste text into e-snaps from Notepad, which will remove any unnecessary formatting from MS Word.*

# New Project Application

## 3C. HMIS Standards (HMIS Only) (continued)

1A. SF-424 Application Type  
 1B. SF-424 Legal Applicant  
 1C. SF-424 Application Details  
 1D. SF-424 Congressional District(s)  
 1E. SF-424 Compliance  
 1F. SF-424 Declaration  
 1G. HUD 2880  
 1H. HUD 50070  
 1I. SF-LLL  
 Part 2 - Recipient and Subrecipient Information  
 2A. Subrecipients  
 2B. Experience  
 Part 3 - Project Information  
 3A. Project Detail  
 3B. Description  
 3C. HMIS Expansion  
 Part 4 - Housing, Services, and HMIS  
**4A. HMIS Standards**  
 4B. HMIS Training  
 Part 6 - Budget Information  
 6A. Funding Request  
 6I. Match  
 6J. Summary Budget

\* 3a. Is your HMIS capable of generating all reports required by all Federal partners including HUD, VA, and HHS? -- select --

3b. If No, explain why and the planned steps for compliance.  
 Max. 500 characters.

\* 4. Can the HMIS currently provide the CoC with an unduplicated count of clients receiving services in the CoC? -- select --

\* 5. Does your HMIS implementation have a staff person responsible for insuring the implementation meets all security standards as required by HUD and the federal partners? -- select --

\* 6. Does your organization conduct a background check on all employees who access HMIS or view HMIS data? -- select --

\* 7. Does the HMIS Lead conduct Security Training and follow up on security standards on a regular basis? -- select --

\* 8. Do you have a process in place to remove community members who no longer need access to HMIS (e.g. leave their job, fired, etc.) -- select --

\* a. How long does it take to remove access rights to former HMIS users? -- select --

Save & Back Save Save & Next  
 Back Next  
 Check Spelling

Step	Description
5.	Select "Yes" or "No" from the dropdown menu to indicate whether the HMIS is capable of generating all reports required by Federal partners, including HUD, VA, and HHS.
6.	Select "Yes" or "No" from the dropdown menu to indicate if the HMIS can currently provide the CoC with an unduplicated count of clients receiving services in the CoC.
7.	Select "Yes" or "No" from the dropdown menu to indicate if the HMIS Lead has a staff person responsible for insuring the implementation meets all security standards as required by HUD and the federal partners.
8.	Select "Yes" or "No" from the dropdown menu to indicate if your organization conducts a background check on all employees who access HMIS or view HMIS data.
9.	Select "Yes" or "No" from the dropdown menu to indicate if the HMIS Lead conducts Security Training and follows up on security standards on a regular basis.
10.	Select "Yes" or "No" from the dropdown menu to indicate if your organization has a process in place to remove community members who no longer need access to HMIS (e.g. leave their job, fired, etc.).
11.	Select from the dropdown menu to indicate the length of time it takes to remove access rights to former HMIS users. Options include: within 24 hours, within 1 week, within 2 weeks, within 1 month, and longer than 1 month.
12.	Select "Save & Next" to continue to the next screen.

# New Project Application

## **4B. Housing Type and Location**

The following steps provide instruction on completing mandatory fields marked with an asterisk (\*) for screen 4B in **Part 4: Housing, Services, and HMIS** of the FY 2017 Project Application.

**The screens that appear under Part 4 depend on the selection of the component type on screen 3A: Project Detail and 3B. Project Description.**

**NOTE:**

*The Project Applicant must complete the following screens depending upon the component type listed on Screen 3A:*

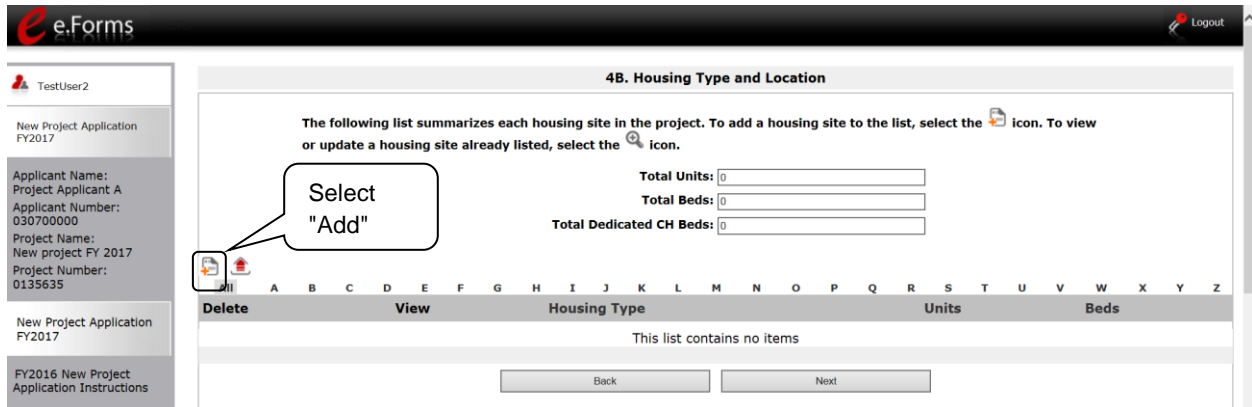
- *4B. Housing Type and Location (PH: PSH)*
- *4B. Housing Type and Location (PH: RRH)*
- *4B. HMIS Training (HMIS)*
- *For new SSO projects, Project Applicants will not have a Part 4 screen to complete.*


# New Project Application

## 4B. Housing Type and Location (PH: PSH)



The following screen, 4B. Housing Type and Location, applies to PH: PSH (the components selected on screen 3A. Project Detail and 3B. Project Description).

The list in the “Housing Type and Location” screen summarizes each housing site in the project. The list will be populated by information you add about individual project sites.



Step	Description
1.	To begin adding information to this list, add a housing site by selecting the "Add" icon  .
2.	The "4B. Housing Type and Location Detail" screen appears.

**NOTE:** On the “4B. Housing Type and Location” screen, review the information you entered for each housing type.

- To edit the information on the “Housing Type and Scale” screen, select the “View” icon  to the left of the housing type. Make any necessary changes, and select “Save & Back to List.”
- To delete the information on the “Type and Scale of Housing” screen, select the red “Delete” icon  to the left of the housing type.

# New Project Application

## 4B. Housing Type and Location Detail (PH: PSH)

On this screen, you will enter information about an individual housing site.

**1. Housing Type:** -- select --

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

\* a. Units:

\* b. Beds:

\* 3. How many beds of the total beds in "2b. Beds" are dedicated to the chronically homeless?

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

**4. Address:**

\* Street 1:

Street 2:

\* City:

\* State: -- select --

\* ZIP Code:

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

Available Items:

- 510024 Alexandria
- 510114 Blacksburg
- 510186 Bristol
- 510264 Charlottesville
- 510300 Chesapeake
- 510310 Christiansburg
- 510320 Charlottesville

Selected Items:

Please select at least one area.

Buttons: Save, Save & Add Another, Save & Back to List, Back to List, Check Spelling

Callout boxes:

- Select from dropdown menu
- Select "Save & Back to List" when finished adding housing types
- Select "Save & Add Another" to add another

Step	Description
1.	<p>From the "Housing Type" dropdown menu, select the type of housing that most closely resembles the type of housing the project provides.</p> <ul style="list-style-type: none"><li>• Barracks</li><li>• Dormitory, shared or private rooms</li><li>• Shared housing</li><li>• Single Room Occupancy (SRO) units</li><li>• Clustered apartments</li><li>• Scattered site apartments (including efficiencies)</li><li>• Single-family homes/townhouses/duplexes</li></ul>

# New Project Application

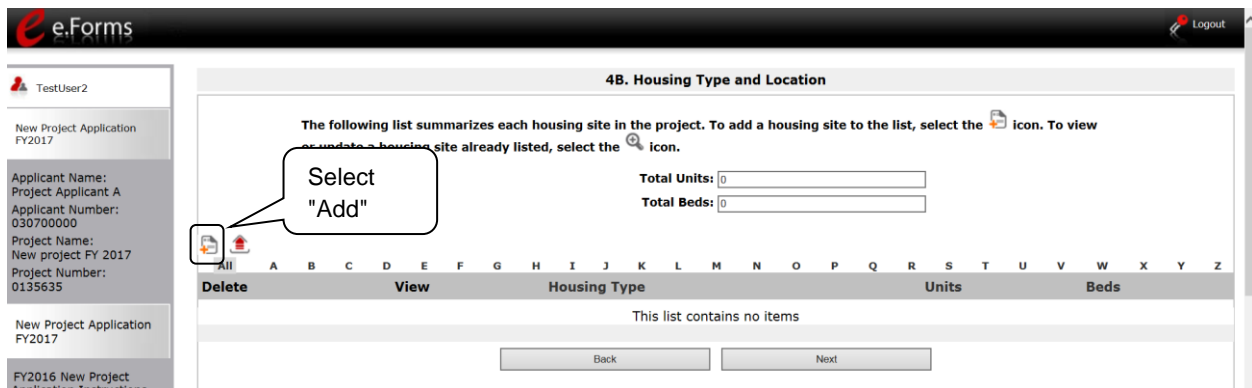
Step	Description
2.	<p>Enter the maximum number of units and beds available for project participants at the selected housing site.</p> <ul style="list-style-type: none"><li>• The number entered should be based on the number of units and beds that will be available at the point-in-time and used for housing program participants in this project.</li><li>• Select "Save".</li></ul>
3.	<p>Indicate the number beds of the total beds in "2b. Beds" that are dedicated to the chronically homeless.</p>
4.	<p>Enter the physical address for this proposed project. For scattered-site housing, or other unit configurations with multiple addresses, enter the address where the majority of beds will be located, or where most beds are planned to be located as of the application submission.</p> <ul style="list-style-type: none"><li>• <i>If the project uses tenant based rental assistance, or if the address for scattered-site or single family homes housing cannot be identified at the time of application, enter the address for the administration office.</i></li></ul>
5.	<p>Select the geographic area(s) in which the project will be located.</p> <ul style="list-style-type: none"><li>• Highlight one geographic area, or hold the CTRL Key to make more than one selection.</li><li>• Using the single arrow, move your selection from the left box to the right box.</li></ul>
6.	<p>To add additional housing sites, select "Save &amp; Add Another" and repeat steps 1 through 5.</p>
7.	<p>When you have entered all of the types of housing for the project, select "Save &amp; Back to List" to return to the "4B. Housing Type and Location" screen.</p>
8.	<p>When your list is complete, select "Next" to continue to the next screen.</p>


# New Project Application



## 4B. Housing Type and Location (PH: RRH)

The following screen, 4B. Housing Type and Location, applies to PH: RRH (the components selected on screen 3A. Project Detail and 3B. Project Description).

The list in the “Housing Type and Location” screen summarizes each housing site in the project. The list will be populated by information you add about individual project sites.



Step	Description
1.	To begin adding information to this list, add a housing site by selecting the "Add" icon  .
2.	The "4B. Housing Type and Location Detail" screen appears.

- NOTE:** On the “4B. Housing Type and Location” screen, review the information you entered for each housing type.
- To edit the information on the “Housing Type and Scale”: screen, select the “View” icon  to the left of the housing type. Make any necessary changes, and select “Save & Back to List.”
  - To delete the information on the “Type and Scale of Housing” screen, select the red “Delete” icon  to the left of the housing type.



# New Project Application

## 4B. Housing Type and Location Detail (PH: RRH)

On this screen, you will enter information about an individual housing site.

The screenshot shows the 'eForms' interface for '4B. Housing Type and Location Detail'. The form is divided into several sections:

- 1. Housing Type:** A dropdown menu with '-- select --' as the current selection.
- 2. Indicate the maximum number of units and beds available for project participants at the selected housing site.** Two input fields labeled '\* a. Units:' and '\* b. Beds:'.
- 3. Address:** Input fields for '\* Street 1:', 'Street 2:', '\* City:', '\* State:' (dropdown), and '\* ZIP Code:'.
- 4. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered. (for multiple selections hold CTRL key)** A list of 'Available Items' (510024 Alexandria, 510114 Blacksburg, 510186 Bristol, 510264 Charlottesville, 510268 Chesapeake, 510270 Christiansburg) and a 'Selected Items' list with navigation buttons (>>, >, <, <<).

Callout boxes provide instructions:

- 'Select from dropdown menu' points to the '1. Housing Type' dropdown.
- 'Select "Save & Back to List" when finished adding housing types' points to the 'Save & Back to List' button.
- 'Select "Save and Add Another" to add another housing' points to the 'Save & Add Another' button.

Step	Description
1.	<p>From the "Housing Type" dropdown menu, select the type of housing that most closely resembles the type of housing the project provides.</p> <ul style="list-style-type: none"><li>• Barracks</li><li>• Dormitory, shared or private rooms</li><li>• Shared housing</li><li>• Single Room Occupancy (SRO) units</li><li>• Clustered apartments</li><li>• Scattered site apartments (including efficiencies)</li><li>• Single-family homes/townhouses/duplexes.</li></ul>
2.	<p>Enter the maximum number of units and beds available for project participants at the selected housing site.</p> <ul style="list-style-type: none"><li>• The number entered should be based on the number of units and beds that will be available at the point-in-time and used for housing program participants in this project.</li><li>• Select "Save".</li></ul>

# New Project Application

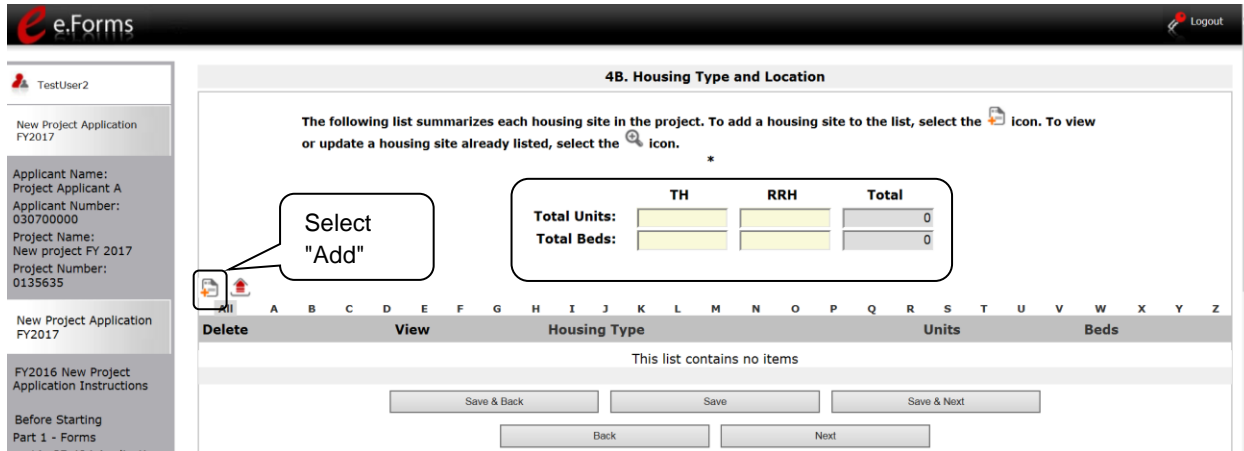
3. Enter the physical address for this proposed project. For scattered-site housing, enter the address where the majority of beds are located, where most beds are located as of the date you submit the application, or an administrative address.
4. Select the geographic area(s) in which the project is located.
  - Highlight one geographic area, or hold the CTRL Key to make more than one selection.
  - Using the single arrow, move your selection from the left box to the right box.
5. To add additional housing sites, select "Save & Add Another" and repeat steps 1 through 4.
6. When you have entered all of the types of housing for the project, select "Save & Back to List" to return to the "4B. Housing Type and Location" screen.
7. When your list is complete, select "Next" to continue to the next screen.


# New Project Application

## 4B. Housing Type and Location (Joint TH and PH-RRH)



The following screen, 4B. Housing Type and Location, applies to Joint TH and PH-RRH (the component selected on screen 3A. Project Detail).

The list in the “Housing Type and Location” screen summarizes each housing site in the project. The list will be populated by information you add about individual project sites.



Step	Description
1.	To begin adding information to this list, add a housing site by selecting the "Add" icon  .
2.	The "4B. Housing Type and Location Detail" screen appears.

**NOTE:** On the “4B. Housing Type and Location” screen, review the information you entered for each housing type.

- To edit the information on the “Housing Type and Scale”: screen, select the “View” icon  to the left of the housing type. Make any necessary changes, and select “Save & Back to List.”
- To delete the information on the “Type and Scale of Housing” screen, select the red “Delete” icon  to the left of the housing type.

**NOTE:** On the "4B. Housing Type and Location screen for the Joint TH and PH-RRH component, the number of TH units and beds and RRH units and beds must be designated. The number of TH units and beds and RRH units and beds must equal the total number of units designated on all of the Housing Type and Location Detail screens.

# New Project Application

## 4B. Housing Type and Location Detail (Joint TH and PH-RRH)

On this screen, you will enter information about an individual housing site.

The screenshot shows the '4B. Housing Type and Location Detail' form. It includes a sidebar with navigation options like 'New Project Application FY2017' and 'FY2016 New Project Application Instructions'. The main form area contains the following sections:

- \* 1. Housing Type:** A dropdown menu with '-- select --'.
- \* Is this a private or semi private room?:** A dropdown menu with '-- select --'.
- 2. Indicate the maximum number of units and beds available for project participants at the selected housing site.**
  - \* a. Units:** A text input field.
  - \* b. Beds:** A text input field.
- 3. Address**
  - \* Street 1:** A text input field.
  - Street 2:** A text input field.
  - \* City:** A text input field.
  - \* State:** A dropdown menu with '-- select --'.
  - \* ZIP Code:** A text input field.
- \*4. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered. (for multiple selections hold CTRL key)**
  - Available Items:** A list of geographic areas: 510024 Alexandria, 510114 Blacksburg, 510186 Bristol, 510264 Charlottesville, 510288 Chesapeake, 510312 Christiansburg.
  - Selected Items:** An empty list.
  - Navigation buttons: >>, >, <, <<.
  - Please select at least one area.**
  - Buttons: Save, Save & Add Another, Save & Back to List, Back to List, Check Spelling.

Step	Description
1.	<p>From the "Housing Type" dropdown menu, select the type of housing that most closely resembles the type of housing the project provides.</p> <ul style="list-style-type: none"> <li>• Barracks</li> <li>• Dormitory, shared or private rooms</li> <li>• Shared housing</li> <li>• Single Room Occupancy (SRO) units</li> <li>• Clustered apartments</li> <li>• Scattered site apartments (including efficiencies)</li> <li>• Single-family homes/townhouses/duplexes.</li> </ul>
2.	<p>Enter the maximum number of units and beds available for project participants at the selected housing site.</p> <ul style="list-style-type: none"> <li>• The number entered should be based on the number of units and beds that will be available at the point-in-time and used for housing program participants in this project.</li> <li>• Select "Save".</li> </ul>

# New Project Application

- 
3. Enter the physical address for this proposed project. For scattered-site housing, enter the address where the majority of beds are located, where most beds are located as of the date you submit the application, or an administrative address.

---

  4. Select the geographic area(s) in which the project is located.
    - Highlight one geographic area, or hold the CTRL Key to make more than one selection.
    - Using the single arrow, move your selection from the left box to the right box.

---

  5. To add additional housing sites, select "Save & Add Another" and repeat steps 1 through 4.

---

  6. When you have entered all of the types of housing for the project, select "Save & Back to List" to return to the "4B. Housing Type and Location" screen.
-

# New Project Application

## 4B. Housing Type and Location (Joint TH and PH- RRH) (continued)

**4B. Housing Type and Location**

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

	TH	RRH	Total
Total Units:	2	2	4
Total Beds:	2	2	4

Enter the number of TH units and beds and RRH units and beds

Delete	View	Housing Type	Units	Beds
		Shared housing	4	4

1

Save & Back      Save      Save & Next

Back      Next

- | Step | Description   |
|------|---|
| 1.   | Of the total units entered on the "Housing Type and Location Detail" screens, you must designate which units and beds are TH, and which units and beds are RRH.                                   |
| 2.   | Once the number of TH units and beds and RRH units and beds have been entered, and as long as they equal the total number of units and beds, select "Save & Next" to continue to the next screen. |
| 3.   | Select "Save & Next" to continue to the next screen.  |

# New Project Application

## 4B. HMIS Training

The following screen, 4B. HMIS Training, applies to HMIS projects (the component selected on screen 3A. Project Detail).

**e.Forms** Logout

**4B. HMIS Training**

**\* Indicate the last training date or proposed training date for each HMIS training, as applicable.**

Activity	Enter date of last training or proposed next training (mm/yyyy)
Basic Computer Training	<input type="text"/>
HMIS Software Training for Sys Admin	<input type="text"/>
HMIS Software Training	<input type="text"/>
Data Quality Training	<input type="text"/>
Security Training	<input type="text"/>
Privacy/Ethics Training	<input type="text"/>
HMIS PIT Count Training	<input type="text"/>
Other (must specify)	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Step	Description
1.	For each type of training listed, indicate the last training date or proposed training date for each HMIS training type, as applicable.
2.	Enter up to 3 additional HMIS trainings that apply to the implementation of the proposed project, and enter the implementation date for each additional training.
3.	Select "Save & Next" to continue to the next screen.

# New Project Application

## **Preface to Part 5: Participant Screens**

The upcoming pages contain instructions for the two “Project Participants” screens—one for “Households” and the other for “Subpopulations”

---

**NOTE:** *Part 5 is applicable only to PH and Joint TH and PH-RRH projects.  
If you selected "HMIS" or "SSO" as the component on screen 3A, you will not see the Part 5 screens as these screens do not apply to HMIS or SSO projects.*

---

Before continuing to the instructions, please review the following notes, which provide information regarding gathering and entering data for these two populations.

---

**NOTE:** (1) *The data gathered on these “Project Participants“ screens consist of the number of participants in the program when the program is at full capacity (at a point in time, not over the course of a year or term of the grant).  
For a new grant, this count is based on the Project Applicant’s estimate at the time of application. The data describes the number of households as well as the number of persons in households.*

---

**NOTE:** (2) *Dark grey cells are not applicable and light grey cells will be totaled by e-snaps automatically.*

---

**NOTE:** (3) *For homeless assistance programs, chronic substance abuse, by itself, may constitute a disability.*

---

**NOTE:** (4) *Additional characteristics have been added to this screen for the FY 2017 CoC Program Competition.*

---

---

**NOTE:** *See also the Additional Guidelines for 5A. Project Participants – Households and 5B. Project Participants - Subpopulations subsection on the next page.*

---



# New Project Application

## **Additional Guidelines for 5A. Project Participants – Households and 5B. Project Participants - Subpopulations**

This section provides some guidelines to clarify the way in which the fields on 5A. Project Participants – Households and 5B. Project Participants - Subpopulations work together. The example applies to the Household Type: Households with at least one adult and one child, which is the first fillable column on screen 5A and the first chart at the top of screen 5B.

These guidelines also apply to the other two Household Types—Adult Households without children and Households with Only Children.

**5A. Project Participants - Households**

**\* Households Table**

	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
<b>Number of Households</b>	1			1
<b>Characteristics</b>				
Adults over age 24	1			1
Adults ages 18-24				0
Accompanied Children under age 18	1			1
Unaccompanied Children under age 18				0
<b>Total Persons</b>	2	0	0	2

Click Save to automatically calculate totals

Save & Back   Save   Save & Next

Back   Next

Household Type: HHs with at least 1 adult and 1 child

"Total Persons" for this Household Type

# New Project Application

The “Total Persons” field on screen 5A will not necessarily be the sum of the 10 column totals for the corresponding household type on screen 5B (see image below).

While the first three columns on screen 5B are mutually exclusive, people might be listed in more than one subpopulation category in the final seven columns of the chart. For example, a participant can only be either a non-CH veteran, a CH veteran, or a CH non-veteran, but a participant may be any one of these three and dually-diagnosed, fitting into more than one subpopulation. Therefore, an HIV positive and chronic substance abusing CH non-veteran could be included in one subpopulation from the first three columns and in both subpopulations in the final seven columns.

The total number of persons in a particular subpopulation column (e.g., non-CH veterans, chronic substance abuse, etc.) on screen 5B cannot exceed the total number entered in the “Total Persons” column on screen 5A.

The screenshot shows a form titled "5B. Project Participants - Subpopulations" for "Persons in Households with at Least One Adult and One Child". The form includes a table with the following columns: Chronically Homeless Non-Veterans, Chronically Homeless Veterans, Non-Chronically Homeless Veterans, Chronic Substance Abuse, Persons with HIV/AIDS, Severely Mentally Ill, Victims of Domestic Violence, Physical Disability, Developmental Disability, and Persons Not represented by listed subpopulations. A "Total Persons" field is located at the bottom of the table. Callout boxes provide the following information:

- "These 3 columns are mutually exclusive." (referring to the first three columns)
- "The total of these 3 columns cannot exceed the 'Total Persons' field on 5A for the corresponding Household type" (referring to the first three columns and the Total Persons field)
- "Columns 4 – 9 are not mutually exclusive. People can be in more than one subpopulation." (referring to columns 4 through 9)
- "Example: Household Type: HHs with at least 1 adult and 1 child from 5A" (referring to the form title)
- "See Note: Field Calculations below." (referring to the note section)

**NOTE:**

**Field Calculations**

Refer to the following guidance about the calculations in the rows and columns:

- While individuals may be shown under more than one sub-population—in addition to being either a chronically homeless non-veteran, a chronically homeless veteran, or a non-chronically homeless veteran—column 10, "Persons not represented by listed sub-populations, is mutually exclusive. If someone is listed in column 10, the person cannot be listed in any of columns 1 through 9.

For example, in a project with 15 adults, if one adult is listed under column 10, the column total for each individual column (for columns 1 through 9) cannot exceed 14 individuals.

# New Project Application

## 5A. Project Participants - Households

The following steps provide instructions on completing the "Project Participants – Households" screen for **Part 5: Participants and Outreach Information** to indicate the total number of households and number of persons by demographic served at maximum program capacity at a single point in time by household type.

For a new project, you will not have historical data on persons served, so you will need to estimate the maximum number of persons experiencing homelessness the project will serve.

**5A. Project Participants - Households**

**\* Households Table**

	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
<b>Number of Households</b>	1			1

	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Adults over age 24	1			1
Adults ages 18-24				0
Accompanied Children under age 18	1			
Unaccompanied Children under age 18				
<b>Total Persons</b>	2	0	0	

Save to automatically calculate totals

Save    Save & Next

Back    Next

Select "Save" to calculate totals

Select "Save & Next" to proceed

Step	Description
1.	Under the "Households" section, enter the total number of households for each household type.
2.	Select "Save" and the system will calculate the total for the "Total Number of Households" field.
3.	Under the "Characteristics" section, enter the number of persons by household type for each demographic row.
4.	Select "Save" and the system will calculate the remaining four fields in the columns and the totals for each demographic based on the values you entered.
5.	Select "Save & Next" at the bottom of the screen once all information is complete on this screen.

# New Project Application

## 5B. Project Participants - Subpopulations

The following steps provide instructions on completing the “Project Participants – Subpopulations” screen for **Part 5: Participants and Outreach Information** to indicate the number of persons served at maximum program capacity at a single point in time, as well as the characteristics/disabilities, according to their respective household types.

For a new project, you will not have historical data on persons served, so you will need to estimate the maximum number of persons experiencing homelessness the project will serve.

When filling out this table, applicants should think of it as follows:

- The first three columns that are in dark gray, along with column 10, for "Persons not represented by listed subpopulations," are mutually exclusive (i.e., for each row, you cannot count the same person in more than one of these columns).
- Columns 4 through 9 are not mutually exclusive (i.e., in each row, you may include the same person in multiple columns if they have multiple characteristics). However, for each row, if you list a person in column 10, you cannot include the person in columns 1 through 9.

For each household type included on the previous screen, 5A, applicants must fill in at least one cell on the corresponding chart on for screen 5B. On the previous screen, the household types were displayed as columns; on 5B, the household types are shown in individual tables.

The screenshot shows the '5B. Project Participants - Subpopulations' screen. It features three tables for different household types. Each table has columns for various characteristics and a 'Total Persons' row. Callouts point to 'Save' and 'Save & Next' buttons.

Characteristics	Chronically Homeless Non-Veterans	Chronically Homeless Veterans	Non-Chronically Homeless Veterans	Chronic Substance Abuse	Persons with HIV/AIDS	Severely Mentally Ill	Victims of Domestic Violence	Physical Disability	Developmental Disability	Persons not represented by listed subpopulations
Adults over age 24	1									
Adults ages 18-24				1						
Children under age 18									1	
<b>Total Persons</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>

Buttons: Save, Save & Next

Step	Description
1.	For each household type included from screen 5A, enter the appropriate subpopulation on this screen based on capacity at a single point in time, as well as the characteristics/disabilities, according to their respective household types.
2.	Select “Save” and the system will calculate all totals based on the values you entered for each subpopulation.
3.	Select “Save & Next” once all information is complete on this screen.

# New Project Application

**NOTE:**  
**Subpopulations**

- *Chronically Homeless includes disabled adults in households with or without children.*
- *Veterans must be adults; therefore, no entry is allowed for unaccompanied youth under the “Chronically Homeless Veterans” column.*

# New Project Application

## 5C. Outreach for Participants

The following steps provide instructions on completing the “Outreach to Participants” screen for **Part 5: Participants and Outreach Information** to indicate the places from which participants are coming to the project.

The screenshot shows the '5C. Outreach for Participants' screen in the eForms application. The sidebar on the left contains navigation options such as 'TestUser2', 'New Project Application FY2017', and 'FY2016 New Project Application Instructions'. The main content area is titled '5C. Outreach for Participants' and contains the following instructions and form elements:

**1. Enter the percentage of project participants that will be coming from each of the following locations.**

\*

- Directly from the street or other locations not meant for human habitation.
- Directly from emergency shelters.
- Directly from safe havens.
- Persons fleeing domestic violence.
- Directly from transitional housing that was eliminated in the FY 2017 CoC Program Competition.
- Directly from the TH Portion of a Joint TH and PH-RRH Component project.
- Persons receiving services through a Department of Veterans Affairs (VA)-funded homeless assistance program (Eligible for JOINT projects if from TH or Emergency Shelters).

**Total of above percentages**

**Total must be 100% in order to submit.**

**\* 2. Describe the outreach plan to bring these homeless participants into the project.**

Below the text area are buttons for 'Save', 'Save & Next', 'Back', 'Next', and 'Check Spelling'. Callout boxes provide instructions: 'Select "Save" to calculate totals' points to the 'Save' button, and 'Select "Save & Next" to proceed' points to the 'Save & Next' button.

Step	Description
1.	Enter the percentage of persons experiencing homelessness who will be served by the proposed project for each of the following locations: <ul style="list-style-type: none"><li>• Directly from the street or other locations not meant for human habitation</li><li>• Directly from emergency shelters</li><li>• Directly from safe havens</li><li>• Persons fleeing domestic violence</li><li>• Directly from transitional housing that was eliminated in the FY 2017 CoC Program Competition</li><li>• Directly from the TH Portion of a Joint TH and PH-RRH Component project.</li><li>• Persons receiving services through a Department of Veterans Affairs (VA)-funded homeless assistance program (eligible for JOINT projects if from TH or Emergency Shelters).</li></ul>
2.	Select “Save” and the system will calculate the total based on the values you entered. <ul style="list-style-type: none"><li>• The total must be 100% in order to submit the form.</li></ul>

# New Project Application

3. In the next text box provided, describe the outreach plan to bring these participants experiencing homelessness into the project.
4. Select "Save & Next" at the bottom of the screen once all information is complete on this screen.

# New Project Application

## **Part 6: Budget Information**

In *e-snaps*, the budget screens that appear for **Part 6: Budget Information** in the left menu bar of the Project Application are determined by the answers provided on the “Funding Request” screen.

- You will select the relevant budgets on the “Funding Request” screen. Once you make these selections, your left menu bar will re-populate and will list only those budget screens that you are required to complete.
- If your new project is being created through the reallocation process, the budget should not exceed the amount allocated by the CoC from eligible renewal projects that were reduced or eliminated. If the budget does exceed the amount reallocated by the CoC as provided on the reallocation forms on the CoC Priority Listing, the budget will be reduced by HUD to match the amount specified by the CoC for reallocation.



*Because there are numerous budget screens and instructions on how to complete these screens, there is a separate instructional guide on budgets that may be found on the CoC Program Competition: e-snaps Resources webpage on the HUD Exchange at: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>.*

Next, this instructional guide will discuss Attachments.



# New Project Application

## 7A. Attachments

Depending on the Applicant, the "Attachment" screen has three potential items:

- **Subrecipient Nonprofit Documentation.** On the "Project Subrecipients" screen, if the subrecipient is a nonprofit (i.e., either "M" or "N" was selected from the "Organization Type" dropdown menu,), then proof of subrecipient's nonprofit status is required.
- **Other Attachment(s).** Attach any additional information supporting the project funding request. Use a zip file to attach multiple documents.
  - **Consolidated Plan Certification.** For Project Applicants that selected "No CoC" on Screen 3A, and are thus applying as Solo Applicants, a form HUD-2991 must be obtained and signed by the certifying official for the applicable jurisdiction, indicating that the proposed project will be consistent with the Consolidated Plan. If the Solo Applicant is a state or unit of local government, the jurisdiction must certify that it is following its HUD-approved Consolidated Plan.

# New Project Application

## 7A. Attachments (continued)

The screenshot shows the '7A. Attachment(s)' screen in the e.Forms application. On the left, a sidebar contains user information for 'TestUser2' and application details for 'New Project Application FY2017', including applicant name, number, project name, and number. The main content area features a table with the following data:

Delete	Document Type	Required?	Download	Document Description	Date Attached
	<a href="#">1) Subrecipient Nonprofit Documentation</a>	No	--		No Attachment
	<a href="#">2) Other Attachment(s)</a>	No	--		No Attachment
	<a href="#">3) Other Attachment(s)</a>	No	--		No Attachment

Below the table are 'Back' and 'Next' navigation buttons. A 'Select a link' box is positioned above the table, and a larger box highlights the first document type link.

Step	Description
------	-------------

- |    |   |
|----|---|
| 1. | Select the document name under "Document Type." |
| 2. | The "Attachment Details" screen appears.        |

# New Project Application

## 7A. Attachments (continued)

The following instructions explain how to upload an attachment in *e-snaps*; the steps are the same for each attachment link on the screen.

**e.Forms** Logout

TestUser2

New Project Application FY2017

Applicant Name: Project Applicant A  
Applicant Number: 030700000  
Project Name: New Project 2 2017  
Project Number: 135670

New Project Application FY2017

FY2016 New Project Application Instructions

**Attachment Details**

\* Document Description:

\* File Name:  Browse...

Document Type: 1) Subrecipient Nonprofit Documentation

Maximum Size: 5 MB

Allowable Formats: zip, xls, xlsx, tif, jpeg, wpd, pdf, img, rtf, pptx, ppt, txt, bmp, jpg, png, zipx, doc, docx, ZIP\*, gif, tiff

Instructions: Subrecipient Nonprofit Documentation: Documentation of the subrecipient's nonprofit status must be attached in e-snaps, if the applicant and subrecipient are different entities, and the subrecipient is a nonprofit organization.


Save

Save & Back to List Back to List

Check Spelling

Enter the Description, including the Project Number

Step	Description
1.	Enter the name of the document in the "Document Description" field.
2.	Select "Browse" to the right of the "File Name" field to upload the file from your computer. <ul style="list-style-type: none"><li>The allowable formats are: zip, xls, xlsx, wpd, pdf, zipx, doc, ZIP*, docx, rtf, txt.</li></ul>
3.	Select "Save & Back to List" to return to the "Attachments" screen.
4.	On the "Attachments" screen, select "Next."

- NOTE:** *To delete an uploaded attachment.*
- Click the "Delete" icon  that appears to the left of the document name.
  - Confirm the deletion in the pop-up window.



For instructions on how to zip a file that may be too large to upload, refer to the *How to Zip a File* document on the *CoC Program Competition Resources* webpage on the HUD Exchange at: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>.

# New Project Application

## 7B. Certification

The Project Applicant must certify that the proposed program will comply with the various laws as outlined in the CoC Program Competition NOFA. The Project Applicant should carefully review all of the items carefully.

The following steps provide instruction on completing all mandatory fields marked with an asterisk (\*) on the "Certification" screen of the application.

[Back to Submissions List](#)

**Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.**

**Name of Authorized Certifying Official:**

**Date:**

**Title:**

**Applicant Organization:**

**PHA Number (For PHA Applicants Only):**

**\* I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).**

Step	Description
1.	Review sections A, B, and C of the screen.
2.	Verify the name of the Project Applicant organization's Authorized Certifying Official.
3.	Verify that the current date auto populates in the Date field.
4.	Verify the title of the Project Applicant organization's Authorized Certifying Official.
5.	Verify the name of the Project Applicant Organization.
6.	For PHA Applicants only, enter the PHA Number.
7.	Review the certification statement and select the check box to the right of the certification statement.
8.	Select "Save & Next" to navigate to the next screen.

# New Project Application

## 8B. Submission Summary

Once the required information has been entered and the required attachments have been uploaded, the Project Applicant needs to select the "Submit" button on the "Submission Summary" screen.

The "Submission Summary" screen shows the Project Application screens. In the "Last Updated" column, the system will identify the following:

- A date if the screen is complete
- "No Input Required" if there is no input required
- "Please Complete" if more information is needed

Users can go back to any screen by clicking on the screen name on the left menu or on the screen name in the Submissions list itself. Remember to select "Save" after making any changes.

**NOTE:**

*The "No Input Required" status on the Submission Summary indicates that additional information for that screen is not required for the Project Applicant to continue to the next step in e-snaps. In the context of this instructional guide, the Project Applicant may continue to the next steps in the Project Application process. HUD, however, may require you to address the particular item prior to entering into a grant agreement if conditionally awarded.*

The "Submit" button is located at the bottom of the screen under the navigation buttons. The "Submit" button will be active if all parts of the Project Application are complete (and have a date) or state "No Input Required."

After submitting the Project Application, Project Applicants should notify the Collaborative Applicant. Notification is recommended to provide a heads-up to the Collaborative Applicant that the application is ready for their review and ranking.

# New Project Application

The following image shows the Project Application "Submission Summary" screen with items that still need to be completed. Note that the "Submit" button is gray-shaded, and you cannot select it.

**8B. Submission Summary**

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

Comp		Last Updated	Mandatory
	<a href="#">1D. SF-424 Congressional District(s)</a>	06/13/2017	Yes
✓	<a href="#">1E. SF-424 Compliance</a>	06/13/2017	Yes
✓	<a href="#">1F. SF-424 Declaration</a>	06/13/2017	Yes
✓	<a href="#">1G. HUD 2880</a>	06/13/2017	Yes
✓	<a href="#">1H. HUD 50070</a>	06/13/2017	Yes
✓	<a href="#">1I. SF-LLL</a>	06/13/2017	Yes
--	<a href="#">2A. Subrecipients</a>	No Input Required	No
✗	<a href="#">2B. Experience</a>	Please Complete	Yes
✗	<a href="#">3A. Project Detail</a>	Please Complete	Yes
✗	<a href="#">3B. Description</a>	Please Complete	Yes
✗	<a href="#">3C. Expansion</a>	Please Complete	Yes
✗	<a href="#">4A. Services</a>	Please Complete	Yes
✗	<a href="#">4B. Housing Type</a>	Please Complete	Yes
✓	<a href="#">5A. Households</a>	06/13/2017	Yes
--	<a href="#">5B. Subpopulations</a>	No Input Required	No
✗	<a href="#">5C. Outreach</a>	Please Complete	Yes
✗	<a href="#">6A. Funding Request</a>	Please Complete	Yes
✗	<a href="#">6I. Match</a>	Please Complete	Yes
--	<a href="#">6J. Summary Budget</a>	No Input Required	No
--	<a href="#">7A. Attachment(s)</a>	No Input Required	No
✗	<a href="#">7D. Certification</a>	Please Complete	Yes

**Notes:**

- PIN format must be two letters followed by 4 digits
- 4A. Please enter all values for at least one line item.
- 4B. Housing Type list must include at least 1 item(s).
- Please enter the percentage of project participants that will be coming from each of the following locations.
- The Total must equal 100% in order to submit.
- For project submission, it must be feasible for the project to be under grant agreement by September 30, 2019.
- At least one box must be checked.

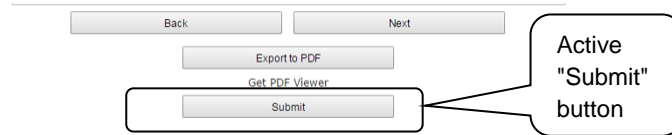
Buttons: Back, Next, Export to PDF, Get PDF Viewer, Submit (Inactive)

- | Step | Description   |
|------|---|
| 1.   | For the item(s) that state "Please Complete," either select the link under the "Page" column or select the item on the left menu bar. |
| 2.   | Complete the screen, saving the information on each screen.   |
| 3.   | When you have an active "Submit" button, continue to the next section.  |

# New Project Application

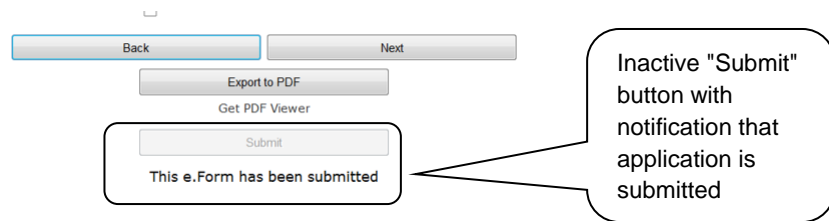
## Submitting the Project Application

The following image shows an active "Submit" button on the Project Application "Submission Summary".



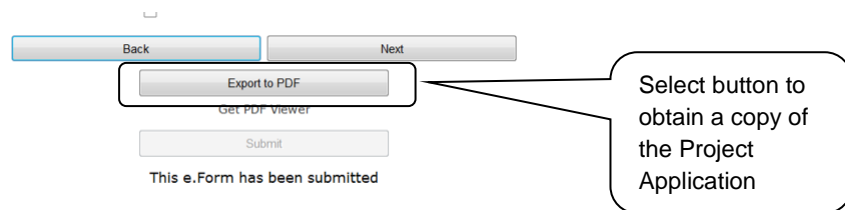
Step	Description
1.	If you are not already on the "Submission Summary" screen, select it on the left menu bar.
2.	Select the "Submit" button.
3.	Notify the Collaborative Applicant that you have submitted your Project Application.

The following image shows the completed Project Application "Submission Summary" screen. Note that the "Submit" button is no longer active, but instead appears gray-shaded. The screen is marked "This e.Form has been submitted."



## Exporting to PDF

Project Applicants can obtain a hard copy of the Project Application using the "Export to PDF" button located at the bottom of the Submission Summary screen under the navigation buttons.



Step	Description
1.	Select the "Export to PDF" button.
2.	On the "Configure PDF Export" screen, select the screen(s) you would like included.
3.	Select "Export to PDF."

# New Project Application

## Trouble-shooting when you cannot submit the Project Application

Applicants may encounter issues when trying to submit the Project Application. If the "Submit" button is gray (i.e., "grayed-out"), it is not active and you cannot select it. You will not be permitted to complete your form at this time. The "Submit" button will appear gray if information is missing on any of the required Project Application forms or in the Applicant Profile.

The following image shows the New Project Application "Submission Summary" screen with items that still need to be completed. Note that the "Submit" button is gray-shaded, and you cannot select it.

**8B. Submission Summary**

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

Complete	Page	Last Updated	Mandatory
--		No Input Required	No
--		No Input Required	No
--		No Input Required	No
✓		06/13/2017	Yes
✓		06/13/2017	Yes
✓	<a href="#">1F. SF-424 Declaration</a>	06/13/2017	Yes
✓	<a href="#">1G. HUD 2880</a>	06/13/2017	Yes
✓	<a href="#">1H. HUD 50070</a>	06/13/2017	Yes
✓	<a href="#">1I. SF-LLL</a>	06/13/2017	Yes
--	<a href="#">2A. Subrecipients</a>	No Input Required	No
✗	<a href="#">2B. Experience</a>	Please Complete	Yes
✗	<a href="#">3A. Project Detail</a>	Please Complete	Yes
✗	<a href="#">3B. Description</a>	Please Complete	Yes
✗	<a href="#">3C. Expansion</a>	Please Complete	Yes
✗	<a href="#">4A. Services</a>	Please Complete	Yes
✗	<a href="#">4B. Housing Type</a>	Please Complete	Yes
✓	<a href="#">5A. Households</a>	06/13/2017	Yes
--	<a href="#">5B. Subpopulations</a>	No Input Required	No
✗	<a href="#">5C. Outreach</a>	Please Complete	Yes
✗	<a href="#">6A. Funding Request</a>	Please Complete	Yes
✗	<a href="#">6I. Match</a>	Please Complete	Yes
--	<a href="#">6J. Summary Budget</a>	No Input Required	No
--	<a href="#">7A. Attachment(s)</a>	No Input Required	No
✗	<a href="#">7D. Certification</a>	Please Complete	Yes

**Notes:**

- PIN format must be two letters followed by 4 digits
- 4A. Please enter all values for at least one line item.
- 4B. Housing Type list must include at least 1 item(s).
- Please enter the percentage of project participants that will be coming from each of the following locations.
- The Total must equal 100% in order to submit.
- For project submission, it must be feasible for the project to be under grant agreement by September 30, 2019.
- At least one box must be checked.

Buttons: Back, Next, Export to PDF, Get PDF Viewer, Submit



# New Project Application

Step	Description
1.	Review your Submission Summary screen to determine which Project Application form needs to be completed. For the item(s) that state "Please Complete," either select the link under the "Page" column or select the item on the left menu bar.
2.	Complete the screen, saving the information on each screen.
3.	Return to the Submission Summary screen and select the "Submit" button.

**What the “Last Updated” column tells you.** A date identifies a form with complete information for all required fields. It is the most recent date on which the completed form was saved.

- "Please Complete" identifies a form with information missing in one or more required fields.
- "No Input Required" identifies the form that are not required for completion by all projects. You are strongly encouraged to double-check these forms to ensure that all appropriate project information is completed.

**What the “Notes” section at the bottom of the screen tells you.** Notes are not a standard section on the “Submission Summary” screen, so you will not see this section all the time.

- If Notes appear on the screen, they are located under the two-column list and above the navigational buttons.
- The Notes provide information on the errors in the Project Application. Some Notes include a link to the applicable form and error(s).

**NOTE:**


*If you are still unable to submit the New Project Application after following these instructions, please submit a question to the HUD Exchange Ask A Question, at: <https://www.hudexchange.info/get-assistance/my-question/>, under the e-snaps Reporting System.*

*In the question field, please provide specific details regarding the issue you are encountering while trying to submit and provide a screenshot whenever possible.*

# New Project Application

## ***Updating the Applicant Profile***

If an Applicant needs to edit the Project Applicant Profile in order to correct information, the Applicant must do the following:


<b>Step</b>	<b>Description</b>
1.	Select "Back to Submissions List."
2.	Select "Applicants" in the left menu bar.
3.	Ensure your Applicant name is selected in the dropdown menu at the top of the screen.
4.	Select the "Open Folder" icon  to the left of the Applicant Name.
5.	Select "Submission Summary" on the left menu bar.
6.	Select the "Edit" button.
7.	Navigate to the applicable screen(s), make the edits, and select "Save."
8.	Select "Submission Summary" on the left menu bar and select the "Complete" button.
9.	Selects "Back to Applicants List" on the left menu bar.
10.	Select "Submissions" on the left menu bar.
11.	Select the orange folder to enter the Project Application. The change should have pulled forward.

**NOTE:** *The "View Applicant Profile" link in the left menu bar, within the project application, is intended only to view the Project Applicant Profile and not to make any updates.*

# New Project Application

## Project Application Changes

If changes need to be made to the Project Applications, the Collaborative Applicant will send the project back to the Project Applicant. Project Applicants may need to change the Project Application if they find an error or if the Collaborative Applicant requests that a change is made to one or more of the forms. The following action steps must be taken by the Collaborative Applicant and Project Applicant.

Step	Who	Description
1.	Either	<p>If a submitted Project Application needs to be changed, contact must be made between the Project Applicant and the Collaborative Applicant (via email or phone,) outside of <i>e-snaps</i>.</p> <ul style="list-style-type: none"><li>• If a Project Applicant determines that a change is necessary, the Project Applicant should contact the Collaborative Applicant and request that it “send,” or release, the Project Application back to the Applicant.</li><li>• If the Collaborative Applicant requests a change, the Collaborative Applicant should contact the applicant.</li></ul>
2.	Collaborative Applicant	<p>The Collaborative Applicant will notify the Project Applicant (via email or phone) that the Project Application has been sent back for changes.</p>
3.	Project Applicant	<p>After the Project Application has been sent back for amendment, any person who is an authorized <i>e-snaps</i> user with the Project Applicant's organization will be able to reopen the project.</p> <p>The following actions are taken by the applicant once the Collaborative Applicant has released the Project Application:</p> <ul style="list-style-type: none"><li>• Log in to <i>e-snaps</i>.</li><li>• Select “Submissions” on the left menu bar.</li><li>• Find the Project Application that was sent back to the applicant.<ul style="list-style-type: none"><li>○ Review the list under the Project Name column, or use the Project Name dropdown menu and “Filter” button.</li><li>○ The Project Name for the Project Application will be listed, but it will no longer have a date under the “Date Submitted” column.</li></ul></li><li>• Select the “Open Folder” icon  to the left of the project with no submission date.</li><li>• Make the required change(s), saving each form as it is revised.</li><li>• Select the “Submit” button.</li><li>• Notify the Collaborative Applicant that the Project Application has been re-submitted.</li></ul>
4.	Collaborative Applicant	<p>After the Project Applicant has re-submitted the Project Application, the Collaborative Applicant must update the CoC Priority Listing for the Project Application to reappear on the appropriate project screen in the CoC Priority Listings.</p>

# New Project Application

## Next Steps

Congratulations on submitting your New Project Application!

At this point, your project application has been submitted to the Collaborative Applicant, as indicated on screen "3A. Project Detail" questions 1a and 1b. Notifications are **not** provided through *e-snaps* to the Collaborative Applicant, so you should notify them that the application has been submitted.

The Collaborative Applicant will review every project application and approve and rank or reject the project applications prior to submitting them as part of the CoC Priority Listing to HUD for the FY 2017 CoC Program Competition. Please make sure you keep in contact with the organization in case any amendments need to be made.

For additional resources go to the CoC Program Competition: *e-snaps* Resources webpage on the HUD Exchange at: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>.