



FY 2021 New Project Application

e-snaps Navigational Guide

Version 2

New Project Application

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New Project Application

Introduction

Welcome to the New Project Application Navigational Guide. This navigational 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 submits the entire funding application to HUD on or before the CoC Program Competition deadline.

Prior to using this navigational 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 Navigational Guide is available at:

- <https://files.hudexchange.info/resources/documents/Project-Applicant-Profile-Navigational-Guide.pdf>.

All Project Applicants are strongly encouraged to read the FY 2021 CoC Program Competition NOFO at:

- https://www.hud.gov/program_offices/comm_planning/coc/competition.

This navigational guide supplements the New Project Application Detailed Instructions provided at:

- <https://www.hudexchange.info/resource/2909/coc-project-application-instructions-for-new-projects/>

Have a question?

The e-snaps AAQ on HUD Exchange is no longer active. For questions related to the FY21 NOFO or navigating e-snaps, send questions to the appropriate HUD.gov email address:

- CoCNOFO@hud.gov for questions about the NOFO, competition, and applications.
- e-snaps@hud.gov for questions about e-snaps technical issues, including creating an individual user profile, lockouts/password resets, requesting access to a CoC's or project applicant's e-snaps account, navigating e-snaps, updating the Applicant Profile, identifying the funding opportunity, creating a project, and accessing the application on the Submissions screen.

Objectives

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

- Access *e-snaps*
- Register for the FY 2021 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*

New Project Application

Posted Resources

HUD has determined that some CoC and e-snaps related resources need to be posted to HUD.gov as HUD's official website, rather than to the HUD Exchange, which focuses on technical resources for communities and grant recipients. FY 2021 NOFO information (e.g., detailed instructions), including the FY 2021 e-snaps Navigational Guides, will be published and updated on HUD.gov.

Overview of the Project Application Process

FY 2021 Project Applicants must complete a Project Applicant Profile and Project Application using *e-snaps*, a web-based portal accessible at:

- <https://esnaps.hud.gov/>.

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, and
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 Navigational Guide

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

- **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 navigational 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 navigational guide at:
 - <https://files.hudexchange.info/resources/documents/Project-Applicant-Profile-Navigational-Guide.pdf>
- **Establishing and 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 2021 New Project Application funding opportunity, creating an FY 2021 project, and accessing the Project Application screens.

New Project Application

- **Project Application.** After accessing the FY 2021 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.
- **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.

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.

New Project Application

Highlights in e-snaps for the FY 2021 CoC Program Competition

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

- **Expansion Project Screen.**

If a project applicant intends to submit a new expansion project application (up to two new project applications are allowed) to a corresponding renewal project application, the renewal project application and new expansion project application must be submitted as outlined in the FY2021 CoC Program Competition NOFO.

Renewal projects that are part of an expansion must expire in Calendar Year (CY) 2022, as confirmed on the FY 2021 GIW or eLOCCS, must be to the same recipient, and must be for the same eligible component and project type (i.e., PH-PSH, PH-RRH, Joint TH/PH-RRH, TH, SSO, SSO-CE or HMIS).

Both the new and renewal project applications must be ranked on the CoC Priority Listing.

- **Funding Sources and Limitations.** For FY 2021, new projects are eligible through “Reallocation” funds, “Bonus” funds, a combination of “Reallocation + Bonus” funds, or “DV Bonus” funds. Review the NOFO for more information:

- https://www.hud.gov/program_offices/comm_planning/coc/competition

- **Transition Grant.** Project applicants can change the component of an existing renewal project application through the transition grant process by transitioning the project to an eligible new component. The CoC must fully reallocate the renewal project’s funds, and then the same project applicant must submit a new project application in *e-snaps*. Eligible components for new projects in the transition process are: PH-PSH, PH-RRH, Joint TH and PH-RRH, SSO-CE, and HMIS. Refer to Section II.B.2. of the FY 2021 CoC Program Competition NOFO for the criteria that applicants must follow for transition grants.

New Project Application

Helpful Reminders from Prior Years

This section highlights several items that are not new but are included as useful reminders.

- **HUD 2880 (Applicant/Recipient Disclosure/Initial Report).** As with prior years, the HUD Form 2880 is no longer uploaded as an attachment. This form is related to the Project Applicant Profile and the fields are not editable in the forms in the Project Applications. For instructions on completing the HUD Form 2880 in both the Project Applicant Profile and the Project Applications (new, renewal, YHPD, CoC planning, and UFA costs), refer to the following resource:
 - <https://files.hudexchange.info/resources/documents/How-to-Complete-the-HUD-Form-2880-in-e-snaps.pdf>.
- **Prepopulating Data from the Project Applicant Profile.** Some data will automatically populate fields on several screens from the information entered into your Project Applicant Profile. If this information is incorrect, changes can be made by exiting the application and returning to the Project Applicant Profile.
- **The "Project Application" and "CoC Priority Listing."**
 - The Project Application includes the information 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 Unified Funding Agency (UFA), a UFA Project Listing.
- **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).

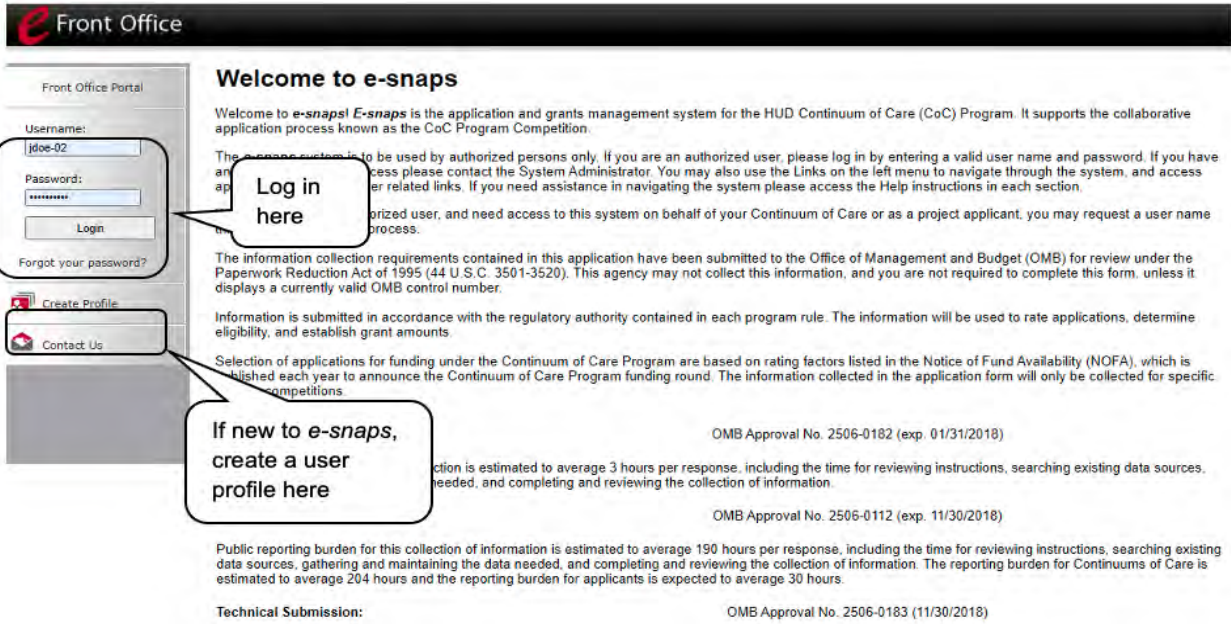
This feature appears when working on the Applicants, Funding Opportunity, Projects, and Submissions screens. Only the items (e.g., Projects) pertaining to the Applicant listed in the field appear on the screen. Users must ensure they are working in the correct Applicant account.

- **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.

New Project Application

Accessing e-snaps

The Project Application is submitted electronically in *e-snaps* during the annual competition under the FY 2021 CoC Program Competition NOFO.



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.

Existing Users

Steps

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

New e-snaps Users

Steps

1. Create an *e-snaps* username and password by selecting the "Create Profile" link.
2. Log in as instructed under Existing Users above.

New Project Application

Give Staff Access to Your Organization's e-snaps Account

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 “Give Staff Access to Your Organization's e-snaps Account” resource at:

- <https://files.hudexchange.info/resources/documents/Give-Staff-Access-to-Your-Organizations-e-snaps-Account.pdf>

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 Navigational Guide highlights key information needed to successfully complete this step. It does NOT provide detailed instructions.



For detailed instructions, see the Project Applicant Profile navigational guide at:

- <https://files.hudexchange.info/resources/documents/Project-Applicant-Profile-Navigational-Guide.pdf>

- **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 an email to e-snaps@HUD.gov. The *e-snaps* AAQ on HUD Exchange is no longer active.
- **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 Navigational Guide at:
 - <https://files.hudexchange.info/resources/documents/Project-Applicant-Profile-Navigational-Guide.pdf>

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 at:

- <https://www.hudexchange.info/get-assistance/my-question/>.

New Project Application

Establish the Project Application

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

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

Funding Opportunity Registration

All Project Applicants must register the organization for the FY 2021 New Project Application funding opportunity. Registering for the funding opportunity enables Project Applicants to apply for funds during the FY 2021 CoC Program Competition.

Terminology


"Registering" in this context means "indicating your intent to apply."

"Funding Opportunity" refers to "the type of grant." There are options when you select this screen. They include CoC Planning, New, Renewal, and UFA Costs.

On this screen, you are indicating your intent to apply for a specify type of grant.

Register View	Funding Opportunity Name	Applicants Registered	Start Date	End Date
	CoC Planning Project Application FY2021	3	Jan 11, 2021	Dec 31, 2025
	CoC Registration and Application FY2021	1	Nov 30, 2020	Dec 31, 2025
	New Project Application FY2021	1	Sep 16, 2020	Dec 31, 2026
	Renewal Project Application FY2021	1		Dec 31, 2026
		2020		Dec 31, 2022
		2021		Dec 31, 2025
		FY2021		Dec 31, 2026
	YHDP Replacement Project Application FY2021	0	Mar 8, 2021	Dec 31, 2026

Steps

3. Select "Funding Opportunity Registrations" on the left menu bar.
4. The "Funding Opportunity Registrations" screen will appear.
5. Select the "Register" icon  next to "New Project Application FY 2021."
6. The "Funding Opportunity Details" screen will appear.

New Project Application

Front Office

Help Logout

jdoe-02

Front Office Portal

Profile

My Account
Change Password

Workspace

Applicants
Funding Opportunity Registrations
Projects
Submissions

Contact Us

Applicant: Project Applicant 21 (08)

Funding Opportunity Details

Funding Opportunity Name: New Project Application FY2021
Start Date: Sep 16, 2020
End Date: Jan 1, 2027

Funding Opportunity Registration

Are you sure you wish to register Project Applicant 21 (08)?

Yes Cancel

Steps

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.

The following image shows the screen that appears when the organization has successfully registered for the New Project Application funding opportunity.

Front Office

Help Logout

jdoe-02

Front Office Portal

Profile

My Account
Change Password

Workspace

Applicants
Funding Opportunity Registrations
Projects
Submissions

Contact Us

Applicant: City and County of San Francisco (155440829)

Funding Opportunity Details

Funding Opportunity Name: New Project Application FY2021
Start Date: Sep 16, 2020
End Date: Jan 1, 2027

Funding Opportunity Registration

City and County of San Francisco (155440829) has been registered.

Back

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.

Terminology

"Creating a Project" means "giving the project application a name."

The screenshot shows the 'Front Office' interface with the 'Projects' screen. The 'Applicant' is set to 'City and County of San Francisco (155440829)'. The 'Project Status' is 'Open Projects' and the 'Funding Opportunity Name' is 'All Funding Opportunities'. A dropdown menu is open, showing 'New Project Application FY2021' selected. A callout box says 'Select New Project Application FY 2021'. The table below shows a list of projects with columns for Project Name, Project Number, Funding Opportunity Name, Applicant Number, and Step Status.



Project Name	Project Number	Funding Opportunity Name	Applicant Number	Step Status
1075 La Conca	CA110819T011200	New Project Application FY2012	15440829	In Progress
15-yrtest	136453	Renewal Project Application FY2013	15440829	In Progress
2015updateSS	CA081119T011200	New Project Application FY2015	15440829	In Progress
2015updateSS	CA081119T011200	New Project Application FY2015	15440829	In Progress
2015updateSS	CA081119T011200	New Project Application FY2015	15440829	In Progress
2015updateSS	CA081119T011200	New Project Application FY2015	15440829	In Progress
2015updateSS	CA081119T011200	New Project Application FY2015	15440829	In Progress
2015updateSS	CA081119T011200	New Project Application FY2015	15440829	In Progress
2015updateSS	CA081119T011200	New Project Application FY2015	15440829	In Progress
2015updateSS	CA081119T011200	New Project Application FY2015	15440829	In Progress
2016mra2	CA1532L9T011851	Renewal Project Application FY2016	15440829	In Progress
2019_new_all	CA1431L9T111982	New Project Application FY2019	15440829	In Progress

The screenshot shows the 'Front Office' interface with the 'Projects' screen. The 'Applicant' is set to 'City and County of San Francisco (155440829)'. The 'Project Status' is 'Open Projects' and the 'Funding Opportunity Name' is 'New Project Application FY2021'. A dropdown menu is open, showing 'Add' icon. A callout box says '"Add" icon appears after selection in dropdown menu'. The table below shows a list of projects with columns for Funding Opportunity Name, Applicant Name, Applicant Number, and Step Status.

Funding Opportunity Name	Applicant Name	Applicant Number	Step Status		
New Project Application FY2021	City and County of San Francisco	155440829	In Progress		
New Project Application FY2021	City and County of San Francisco	155440829	In Progress		
New Project Application FY2021	City and County of San Francisco	155440829	In Progress		
FY2021_New_Assess_7	137107	New Project Application FY2021	City and County of San Francisco	155440829	In Progress

New Project Application

Steps

1. Select "Projects" on the left menu bar.
2. The "Projects" screen will appear.
3. Select "New Project Application FY 2021" 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 will appear.



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

Front Office Help Logout

Applicant: City and County of San Francisco (155440829)

Create a Project

Funding Opportunity Name: New Project Application FY2021

* Applicant: City and County of San Francisco (155440829)

* Applicant Project Name:

Save Save & Add Another

Save & Back Cancel

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

Front Office Help Logout

Applicant: City and County of San Francisco (155440829)

Projects


Project Status: Open Projects

Funding Opportunity Name: New Project Application FY2021

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																				
	FY2021_New_App_Test3	137030	New Project Application FY2021	City and County of San Francisco	155440829	In Progress																				
	FY2021_New_Assess_1	137085	New Project Application FY2021	City and County of San Francisco	155440829	In Progress																				
	FY2021_New_Assess_5	137105	New Project Application FY2021	City and County of San Francisco	155440829	In Progress																				
	FY2021_New_Assess_7	137107	New Project Application FY2021	City and County of San Francisco	155440829	In Progress																				

1

Steps

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.
3. You should enter the name that you want to appear in the grant award letter.
4. Select "Save & Back" to return to the "Projects" screen.
5. The project name is listed in the menu.
6. Select the "View" icon  to view project details; however, it is not necessary to enter any notes on that page.

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.

Terminology

"Submissions" refers to both submitted project applications and project applications that are in progress to be submitted.

This screen also includes applications that are created by mistake and are not intended to be submitted.

Once you have created a project on the Projects screen and it appears here, you cannot delete it. You can only rename it.

The screenshot shows the 'Front Office' interface. The top navigation bar includes 'Front Office Portal', 'Profile', 'My Account', 'Change Password', 'Workspace', 'Submissions', and 'Contact Us'. The main content area is titled 'Submissions' and shows a list of project applications. A callout box points to the 'Submissions' menu item, and another points to the 'Project Name' field in the filters. The table below shows the data for the selected project.

Actions	Project Name Project Number	Funding Opportunity Name Step Name
	FY2021_New_App_Test3 13/030	New Project Application FY21 New Project Application +Y2021

Steps

1. Select "Submissions" on the left menu bar.
2. The "Submissions" screen will appear.
3. Locate the Project Application project you established.
 - 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).
 - 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."
4. Continue with the instructions in the next section for the completing the New Project Application.

New Project Application

FY 2021 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.
- Ensure that the Applicant Profile is in "edit" mode.
- Make the appropriate corrections as needed, and 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, continue to the "Submission Summary" screen and select "Complete."
- When you return to the Project Application, the screen will show the corrected information.

If the corrected information does not populate the Project Application, do the following:

- Log out of e-snaps.
- Log back in and navigate to the screen in the Applicant Profile where information needs to be corrected. If the information is incorrect, correct it and Save. If the information is correct, then edit it to something that is incorrect, save it, then change it back, and save it.
- Navigate to the "Submission Summary" and select "Complete."
- Log out of e-snaps.
- Log in again. Navigate to your Project Application. The information should be updated.

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.

The screenshot shows the 'Front Office' interface. The left sidebar contains a menu with 'Submissions' highlighted. The main content area is titled 'Submissions' and shows a search filter for 'Applicant: City and County of San Francisco (155440829)'. Below this are filter options for 'Applicant Project Name', 'Date Submitted', 'Project Status', 'Submission Version', and 'Associate Type'. A 'Filter' button is present. At the bottom, a table lists project applications. A callout '1. Select "Submissions"' points to the sidebar menu. Callout '2. Confirm the correct Project Applicant' points to the applicant dropdown. Callout '3. Use the Filters to find the correct project.' points to the filter options. Callout '4. Access the Project Application' points to a folder icon in the table row.

Actions	Project Name Project Number	Funding Opportunity Name Step Name	Start Date	End Date	Associate Type	Version	Date Submitted
	New Project Application Test FY2021 137110	New Project Application FY2021 New Project Application FY2021	Sep 16, 2020	Sep 1, 2021	Primary Applicant	1	

Steps

1. Select "Submissions" on the left menu bar.
2. The "Submissions" screen will appear.
3. Select the "Folder" icon  to the left of the Project Application Name you established with the Funding Opportunity Name "New Project Application FY 2021."
4. The "Before Starting" screen will appear.

New Project Application

Before Starting the New Project Application

Before you begin the FY 2021 New Project Application, review the following information on the "Before Starting the Project Application" screen.

e.Forms Logout

jdooe-02

New Project Application FY2021

Applicant Name:
City and County of San Francisco

Applicant Number:
155440829

Project Name:
New Project Application Test FY2021

Project Number:
137110

New Project Application FY2021

FY2019 New Detailed 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 2980
- 1H. HUD 50070
- 1I. Cert. Lobbying
- 1J. SF-LLL
- 8B. Summary

View Applicant Profile

Export to PDF
Get PDF Viewer

Back to Submissions List

Before Starting the Project Application

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

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc or 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 via 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) 2021 Continuum of Care (CoC) Program Competition. For more information see FY 2021 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2021 CoC Program NOFO and the FY 2021 General Section NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- New projects may only be submitted as either Reallocated, Bonus Projects, Reallocated + Bonus or DV Bonus. These funding methods are determined in collaboration with local CoC and it is critical that applicants indicate the correct funding method. Project applicants must communicate with their CoC to make sure that the CoC submissions reflect the same funding method.

Before completing the project application, all project applicants must complete or update (as applicable) in e-snaps, particularly the Authorized Representative and Alternate ID uses this information to contact you if additional information is required (efficiency).

produce or reject any new project that fails to adhere to (24 CFR part 578 and forth in FY 2021 CoC Program Competition NOFO.

Back Next

Next

Only Part 1 and screen 8B appear. The rest will appear when you complete ALL of Part 1.

Back to Submissions List

Step

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 2021 Project Application.

eForms Logout

jdJoe-02

New Project Application
FY2021

Applicant Name:
City and County of San
Francisco

Applicant Number:
155440829

Project Name:
New Project Application
Test FY2021

Project Number:
137110

New Project Application
FY2021

FY2019 New Detailed
Instructions

1A. SF-424 Application Type

Verify the data in
fields 1, 2 and 3

1. Type of Submission: Application

2. Type of Application: New Project Application

If Revision, select appropriate letter(s): - select -

If "Other", specify:

3. Date Received: 05/28/2021

4. Applicant Identifier:

a. Federal Entity Identifier:

5. Federal Award Identifier:

6. Date Received by State:

7. State Application Identifier:

Back Next

Steps

1. In field 2, "Type of Application," verify the information.
 - Confirm that you have registered for the correct funding opportunity, "New Project Application."
2. Leave fields 4 through 7 blank.
3. Select "Next" to continue to the 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 2021 Project Application.

8. Applicant

a. Legal Name: City and County of San Francisco

b. Employer/Taxpayer Identification Number (EIN / TIN): 94-8006417

c. Organizational DUNS: 155440829 PLUS 4: 3444

d. Address

Street 1: 1650 Mission St. 3RD Floor

Street 2:

City: San Francisco

County: San Francisco

State: California

Country: United States

Zip / Postal Code: 94103

e. Organizational Unit (optional)

Department Name: Human Services Agency

Division Name: Housing and Homeless Programs

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

Prefix: Mr.

First Name: Trent TTT JJ

Middle Name:

Last Name: Rhorer RRR

Suffix: --select--

Title: Director

Organizational Affiliation: City and County of San Francisco

Telephone Number: (415) 557-6540

Extension:

Fax Number: (415) 431-9270

Email: trent.rhorer@sfgov.org

Verify the data is accurate

NOTE: This section populates from the **Alternate Contact** section of the Applicant Profile.

Back Next

Steps

1. In field 8, verify that all of the information on the 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 2021 Project Application.

Verify the data in fields 9, 10, 11, and 12

1C. SF-424 Application Details

9. Type of Applicant: A State Government

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-6500-N-25
Title: Continuum of Care Homeless Assistance Competi

13. Competition Identification Number:
Title:

Back Next

Steps

1. Verify that the information populated in fields 9, 10, 11, and 12 is correct.
 - Field 9 pre-populates from the Project Applicant Profile.
 - Fields 10, 11, and 12 pre-populate and cannot be edited.
2. Leave field 13 blank.
3. Select "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 2021 Project Application, as well as reviewing information populated from the "Applicant Profile" and "Projects" screens.

eForms Logout

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 Application Test FY2021

16. Congressional District(s):

16a. Applicant:

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

Selected Items: CA-012

Populates from Applicant Profile

*** 16b. 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

Steps

1. In field 14, select the State(s) in which the proposed project will operate and serve persons experiencing homelessness.
 - 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.
2. 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:
 - From the left-menu bar select "Back to Submissions List."
 - From the left-menu bar select "Projects."
 - 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.
 - 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.
 - 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.
3. Field 16a "Congressional Districts" is pre-populated from the Project Applicant Profile.
 - Applicants cannot modify the populated data on this screen; however, Project Applicants may modify the Project Applicant Profile to correct any errors identified.
4. In field 16b, select the congressional district(s) in which the project is expected to operate.
 - Highlight one district, 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.
5. In field 17, under "Proposed Project," enter the project's estimated operating start and end dates in the appropriate fields using the calendar  icon function.
6. Leave the Field 18 "Estimated Funding" fields blank.
7. 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

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 2021 Project Application, as well as reviewing information populated from the "Applicant Profile."

The screenshot displays the '1E. SF-424 Compliance' form. It features two main questions:

- Question 19:** "Is the Application Subject to Review By State Executive Order 12372 Process?" with a dropdown menu and a calendar icon for date entry.
- Question 20:** "Is the Applicant delinquent on any Federal debt?" with a dropdown menu and a text box for explanation.

Navigation buttons include "Save & Back", "Save", "Save & Next", "Back", "Next", and "Check Spelling". A note at the bottom states: "Note: This formlet contains mandatory fields for which no value has been saved."

Steps

1. In field 19, the "Is the Application Subject to Review By State Executive Order 12372 Process?" field, select the correct option from the dropdown menu.
 - 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.
 - 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."
 - 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.
2. In field 20, select "Yes" or "No" to indicate whether the Project Applicant is delinquent on any Federal debt.
 - If "Yes," an explanation must be entered in the field provided.
3. Select "Save & Next" to continue to the next screen.



To access the lists of those states that have chosen to participate in the intergovernmental review process, visit:

<https://www.whitehouse.gov/wp-content/uploads/2020/04/SPOC-4-13-20.pdf>

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 2021 Project Application, as well as reviewing information populated from the "Applicant Profile" and "Projects" screens.

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: Joyce JJJ TT

Middle Name:

Last Name: Crum CCC

Suffix: - select -

Title: DDDDDDirector, Housing & Homeless Program

Telephone Number: (415) 557-6444
(Format: 123-456-7890)

Fax Number: (415) 557-6033
(Format: 123-456-7890)

Email: joyce.crum@sfgov.org

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

Date Signed: 06/01/2021

Save & Back Save Save & Next

Back Next

Steps

1. Select the box stating that you agree with the statement about certifying information in the SF-424 section of the FY 2021 New Project Application.
2. In field 21, verify that the Authorized Representative information is complete and accurate.
 - Note: 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

HUD Form 2880 (Applicant/Recipient Disclosure/Initial Report) is incorporated both into the Project Applicant Profile and the individual Project Applications (new, renewal, CoC Planning, and UFA Costs). It is no longer uploaded as an attachment.

Due to the complexity of the form, a separate resource provides instructions on completing the HUD Form 2880 in both the Project Applicant Profile and the Project Applications (new, renewal, CoC Planning, and UFA Costs).

Refer to the following resource:

- <https://files.hudexchange.info/resources/documents/How-to-Complete-the-HUD-Form-2880-in-e-snaps.pdf>

The 2880 is divided into three parts; therefore, the referenced resource is organized as follows:

- The 2880 in the Project Applicant Profile
 - Part I
 - Part II
 - Part III
- The 2880 in the Project Applications
 - Part I
 - Part II
 - Part III

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 2021 Project Application, as well as reviewing information populated from the "Applicant Profile" screens.

e.Forms Logout

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

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:

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

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

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

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

Authorized Representative

Prefix:

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:

Buttons: Save & Back, Save, Save & Next, Back, Next

New Project Application

Steps

1. Select the box stating that you certify that the information on the HUD 50070 in the SF-424 section of the FY 2021 New Project Application is correct.
2. Verify that the Authorized Representative information is complete and accurate.
 - Note: 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 2021 Project Application.

e.Forms Logout

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: City and County of San Francisco

Name / Title of Authorized Official: Joyce JJJ TT Crum CCC, DDDDDDDirector, Hot.

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

Date Signed: 06/01/2021

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

Steps

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 2021 Project Application, as well as reviewing information populated from the "Applicant Profile" screens.

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?

Authorized Representative

Prefix: Ms
First Name: Joyce JJJ TT
Middle Name:
Last Name: Crum CCC
Suffix: -- select --
Title: DDDDDDirector, Housing & Homeless Program
Telephone Number: (415) 557-6444
(Format: 123-456-7890)
Fax Number: (415) 557-6033
(Format: 123-456-7890)
Email: joyce.crum@sfgov.org

Save & Back Save Save & Next
Back Next
Check Spelling

Steps

1. Verify that the Authorized Representative 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

eForms Logout

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 "No" and confirm information

Legal Name:

* Street 1:

Street 2:

* City:

County:

* State:

* Country:

* Zip / Postal Code:

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:

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:

Save & Back Save Save & Next

Back Next

Step

1. If "No" lobbying activities, review the pre-populated data on the screen.
2. Under field 11, 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

jdoo-02

New Project Application
FY2021

Applicant Name:
City and County of San Francisco

Applicant Number:
155440929

Project Name:
New Project Application Test FY2021

Project Number:
137110

New Project Application
FY2021

FY2019 New Detailed
Instructions

Before Starting
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1G. HUD 2880
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1I. Cert. Lobbying
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1K. Summary

View Applicant Profile

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 38 CFR 101-11.6 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 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?** Yes No

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

5. State: **County:**

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: FH-4500-025

9. Award Amount: \$0.00

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

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

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: Joyce JJ TT

Middle Name:

Last Name: Crum DEC

Suffix: --select--

Title: DDDDDDirector, Housing & Homeless Program

Telephone Number: (415) 557-8444
(Format: 123-456-7890)

Fax Number: (415) 557-6803
(Format: 123-456-7890)

Email: jjoyce.crum@sf.gov

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

Date Signed: 06/01/2021

Save & Back Save Save & Next

Back Next

New Project Application

Steps

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. Under field 4, 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 under field 11 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.

**Prime is
the required
selection:**

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 navigational guides.

A subrecipient NEVER submits the Project Application.

New Project Application

1K. SF-424B

The following steps provide instructions on completing all the mandatory fields marked with an asterisk (*) on the "SF-424B—Assurances Non-Construction Programs" screen for **Part 1: SF-424** of the FY 2021 Project Application, as well as reviewing information populated from the "Applicant Profile" screens.

IK. SF-424B

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

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

Review the assurances

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

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

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

Select check box to certify

Authorized Representative for: Project Applicant - jsmith-02 Test

Prefix: Mr.

First Name: J

Middle Name:

Last Name: Smith-02

Suffix:

Title: Director

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

Date Signed: 08/12/2021

Save & Back Save Save & Next

Steps

1. Review the information on this screen.
2. Verify that the Authorized Representative information is complete and accurate.
3. Select the box stating that you certify these assurances.
4. Select "Save & Next" to continue to the next screen.

New Project Application

1L. SF-424D

The following steps provide instructions on completing all the mandatory fields marked with an asterisk (*) on the "SF-424B—Assurances Construction Programs" screen for **Part 1: SF-424** of the FY 2021 Project Application, as well as reviewing information populated from the "Applicant Profile" screens.

The screenshot shows the e.Forms interface for the SF-424D form. On the left, a sidebar displays user information for 'jsmith-02' and project details: 'New Project Application FY2021', 'Project Applicant 21', 'Applicant Number: 08', 'Project Name: New Project FY 2021 Test 2112SB', and 'Project Number: 137274'. The main form area is titled '1L. SF-424D' and contains a mandatory question: '* Are you requesting CoC Program funds for construction costs in this application?'. A dropdown menu is open, showing 'No' and 'Yes' options. A callout box points to these options with the text 'Select "Yes" or "No"'. Below the question are buttons for 'Save & Back', 'Save', and 'Save & Next', and further down, 'Back' and 'Next' buttons. A red note at the bottom states: 'Note: This formlet contains mandatory fields for which no value has been saved.'

Steps

1. Select "Yes" or "No" from the dropdown menu regarding whether you are requesting CoC, Program funds for construction costs in this application.

This screenshot shows the same e.Forms interface as the previous one, but with 'No' selected in the dropdown menu. A red instruction message is displayed: 'No SF-424D is required. Select "Save and Next" to move to the next screen.' The 'Save & Next' button is highlighted, indicating the next step in the process. The sidebar and form title remain the same.

- If "No" is selected, then no SF-424D is required. Select "Save and Next" to move to the next screen.

New Project Application

e.Forms Logout

jsmith-02

New Project Application FY2021

Applicant Name: Project Applicant 21
Applicant Number: 08
Project Name: New Project #Y 2021 Test 21125B
Project Number: 137274

New Project Application FY2021

1L SF-424D

* Are you requesting CoC Program funds for construction costs in this application? Yes

Review the assurances

(SF-424D) ASSURANCES - CONSTRUCTION PROGRAMS

OMB Number: 4040-0009
Expiration Date: 02/28/2022

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

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

* As the duly authorized representative of the applicant, I certify: Select check box to certify

Authorized Representative for: Mr. _____

Prefix: Mr. _____

First Name: J _____

Middle Name: _____

Last Name: Smith-02 _____

Suffix: _____

Title: Director _____

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

Date Signed: 08/12/2021

Save & Back Save Save & Next

- If “Yes” is selected, additional fields will appear.
 - Review the information on the screen.
 - Verify that the Authorized Representative information is complete and accurate.
 - Select the box stating that you certify to these assurances.
- 2. Select “Save & Next” to continue to the next screen.

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 2021 Project Application.

The screenshot shows the '2A. Project Subrecipients' screen. On the left sidebar, the user 'jdoe-02' is logged in. The application details include: 'New Project Application FY2021', 'Applicant Name: City and County of San Francisco', 'Applicant Number: 155440829', 'Project Name: New Project Application Test FY2021', and 'Project Number: 137110'. The main content area has a title '2A. Project Subrecipients' and a description: 'This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the [Add icon] icon. To view the subrecipient information already listed, select the view [View icon] icon.' Below this is a 'Total Expected Sub-Awards' field and filter options '[Show Filters] [Clear Filters]'. A table with columns 'Delete', 'View', 'Organization', 'Type', and 'Sub-Award Amount' is shown, with the message 'This list contains no items'. At the bottom are 'Back' and 'Next' buttons. Callouts point to the 'Add' icon and the 'Next' button.

Steps

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 '2A. Project Subrecipients Detail' form in the e.Forms system. The left sidebar contains navigation links for 'New Project Application FY2021' and 'FY2019 New Detailed Instructions'. The main form area contains the following fields:

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

A callout box with a speech bubble points to the DUNS field, containing the text: "Enter Subrecipient Organization's DUNS number".

Steps

1. In field a, enter the legal name of the subrecipient organization.
2. In field b, indicate the subrecipient's organization type by selecting the appropriate option from the dropdown menu.
 - Options include: State Government; County Government; City of Township Government; Special District Government; U.S. Territory or Possession; Public / State Controlled Institute of Higher Learning; Public Housing Authority; Nonprofit with 501c3 IRS Status; Nonprofit without 501C3 IRS Status; or Indian Tribes, and tribally designated housing entities, as defined in section 4 of the Native American Housing Assistance and Self-Determination Act of 1996 (25 U.S.C. 4103),); and public housing agencies, as such term is defined in 24 CFR 5.100

If the organization type does not appear on the list, it is not an eligible subrecipient.

The "Other" text box can be used for more information, if desired.

- 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 *e-snaps* using the "Attachments" link on the left menu bar. This link appears prior to the "Submission Summary" link.
3. In field c, enter the subrecipient's 9-digit TAX ID/EIN number.
 4. In field d, enter the subrecipient's 9-digit DUNS number (or 13-digit number, if applicable.)
 5. In field e, 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)

The screenshot shows a web form for adding subrecipients. On the left is a navigation menu with sections like 'Type', 'Applicant', 'Details', 'Compliance', 'Part 2 - Recipient and Subrecipient Information', 'Part 3 - Project Information', 'Part 4 - Housing, Services, and HMIS', 'Part 5 - Participants', 'Part 6 - Budget Information', 'Part 7 - Attachment Certification', and 'Part 8 - Submission Summary'. The main form area contains fields for:

- f. Congressional District(s):** A list of available districts (AK-000 to AL-005) and a selected items box.
- g. Is the subrecipient a Faith-Based Organization?** A dropdown menu.
- h. Has the subrecipient ever received a federal grant, either directly from a federal agency or through a State/local agency?** A dropdown menu.
- i. Expected Sub-Award Amount:** A text input field.
- j. Contact Person:** Fields for Prefix, First Name, Middle Name, Last Name, Title, E-mail Address, Confirm E-mail Address, Phone Number, Extension, and Fax Number.

At the bottom are four buttons: 'Save', 'Save & Add Another', 'Save & Back to List', and 'Back to List'. Two callout boxes provide instructions:

- A callout pointing to the 'Save & Back to List' button says: "Select 'Save & Back to List' when finished adding subrecipients".
- A callout pointing to the 'Save & Add Another' button says: "Select 'Save & Add Another' to add more subrecipients".



Steps (continued)

- In field f, under "Congressional Districts," select the Congressional district(s) in which the subrecipient is located.
 - Highlight one district 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.
- In field g, select "Yes" or "No" to indicate if the subrecipient is a faith-based organization.
- In field h, select "Yes" or "No" to indicate if the subrecipient has ever received a federal grant.
- In field i, enter the total amount of funds that the Project Applicant expects to award to this subrecipient.
 - The amount must be in whole dollars (i.e., no decimals).
 - 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.

New Project Application

2A. Subrecipients (continued)

Steps (continued)

10. In field j, enter the information of the contact person at the subrecipient.
 - Select the appropriate prefix from the dropdown menu.
 - Enter the contact person's first, middle (optional), last name, suffix (optional), and title.
 - 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.
 - Enter the contact person's telephone number, starting with the area code.
 - Enter the extension of the contact person's telephone number, if applicable.
 - Enter the contact person's fax number, starting with the area code (optional).
11. To add another subrecipient, select "Save & Add Another" and repeat steps 1 – 10.
 - Repeat these steps for each subrecipient you need to add.
 - When you are finished adding subrecipients, select "Save & Back to List" to return to the "2A. Project Subrecipients" screen.
12. After you return to the "2A. Project Subrecipients" screen, review the list.
 - To edit the information you entered, select the "View" icon  to the left of the entry.
 - To delete an entry from the list, select the red "Delete" icon. 
13. 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 navigational guide at:

<https://files.hudexchange.info/resources/documents/Project-Applicant-Profile-Navigational-Guide.pdf>.

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 2021 Project Application.

e.Forms Logout

jdoo-02

New Project Application
FY2021

Applicant Name:
City and County of San Francisco
Applicant Number:
155440829
Project Name:
New Project Application
Test FY2021
Project Number:
137110

New Project Application
FY2021

FY2019 New Detailed

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

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

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

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

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

* 4. Are there any unresolved HUD monitoring or OIG audit findings for any HUD grants (including ESG) under your organization? Yes

* 4a. Describe the unresolved monitoring or audit findings.

Save & Back Save Save & Next Back Next

If "Yes," field 4a will appear.

New Project Application

Steps

1. In field 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. In field 2, describe the experience of the Project Applicant and potential subrecipients (if any) in leveraging other Federal, State, local, and private sector funds.
3. In field 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.
4. In field 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" is selected, field 4a will appear.
Provide an explanation in the text box.
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 2021 New Project Application, as well as, completing all mandatory fields marked with an asterisk (*) on the "Project Detail" screen of the application.

1. and 2. determine which CoC receives the project application when submitted in e-snaps

* 1. CoC Number and Name: CA-501 - San Francisco CoC

2. CoC Collaborative Applicant Name: -- select --

3. Project Name: New Project Application Test FY2021

* 4. Project Status: Standard

* 5. Component Type: PH

* 5a. Select the type of PH project: -- select --

* 5. Component Type determines questions on other screens

* 6. Is your organization or expected subrecipient a victim service provider defined in 24 CFR 578.3 and uses a comparable HMIS database? -- select --

* 7. Is this new project application requesting to transition from eligible renewal project(s) that were awarded to the recipient and fully eliminated through reallocation in this CoC Program Competition? (Attachment Requirement) Yes

* 5a. Only if you selected "PH" as the Component Type, select "PSH" or "RRH"

Transition Projects. If "yes," identify expiring grant(s)

Full Grant Number	Operating Start Date	Expiration Date	Component Type
			-- select --
			-- select --
			-- select --
			-- select --

Please enter all values for at least one item.

IMPORTANT: For all expiring projects listed above, be sure to attach a copy of the most recently approved e-snaps project application(s) on Screen 7A (e.g., if the project was funded in the FY 2019 CoC Program Competition, a copy of the FY 2019 CoC Program Competition project application).

* 7b. Provide a brief description that addresses the scope of the proposed transition during the first year of operation.

* 8. Will funds requested in this new project application replace state or local government funds (24 CFR 578.87(a))? -- select --

Save & Back Save Save & Next

Back Next

Check Spelling

New Project Application

Steps

1. In field 1, select your "CoC Number and Name" from the dropdown menu.
2. In field 2, select your "CoC Collaborative Applicant Name" from the dropdown menu.

Fields 1 and 2

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

"No CoC"

"No CoC" can only be selected if your CoC did not register for the FY 2021 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.

Steps (continued)

3. In field 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 for "Incorrect Project Name" below.

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.

Steps (continued)

4. In field 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.

New Project Application

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 to the CoC's decision to not fund this project. To proceed, you must fill out an additional form, Part 8A - Notice of Intent to Appeal, and attach a letter from your CoC officially informing you of its decision. 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 navigational guide at:

https://www.hud.gov/program_offices/comm_planning/coc/competition

Steps (continued)

- In field 5, select the "Component Type" from the dropdown menu.

Eligible New Project component types during the FY 2021 CoC Program Competition include the following:

- PH

Project Name:
New Project Application
Test FY2021
Project Number:
137110

New Project Application
FY2021

FY2019 New Detailed
Instructions

Before Starting
Part 1 - Forms

* 5. Component Type: PH

* 6. Is [Indicate PSH or RRH] or expected subrecipient a victim defined in 24 CFR 578.3 and uses a comparable HMIS database?

* 7. Is this new project application requesting to transition from eligible renewal project(s) that were awarded to the same recipient and fully eliminated through reallocation in this CoC Program Competition? (Attachment Requirement)

- If you select PH, field 5a will appear.
- Indicate whether the project is PSH or RRH.
- Joint TH and PH-RRH
- SSO (for Coordinated Entry projects)
- HMIS (for Dedicated HMIS projects)

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

- In field 6, select "Yes" or "No" to indicate whether your organization or expected subrecipient is a victim service provider defined in 24 CFR 570.3 and uses a comparable database.

New Project Application

7. In field 7, select "Yes" or "No" to indicate whether this application for a new project is requesting funds to transition an expiring grant (i.e., a reallocated project) to a new project. The question asks "Is this new project application requesting to transition from eligible renewal project(s) that were awarded to the same recipient and fully eliminated through reallocation in the FY 2021 CoC Program Competition? (Section II.B.2. and Section III.C.3.q of the FY 2021 NOFO)."
 - If "Yes," fields 7a and 7b will appear.
 - In field 7a., identify the expiring grants (i.e., the project(s) being reallocated) by providing the Grant Number, Operating Start Date, Expiration Date, and Component Type.
 - In field 7b, briefly describe the scope of the proposed transition from the expiring component to the new component during the first year of operation. The description must address how no more than 50 percent of the funding for this new grant will be used for the eligible activities/costs of the project that is being eliminated.
8. In field 8, select "Yes" or "No" confirm that this project application for new CoC program funding will not replace state or local funds.
9. Select "Save & Next" to continue to the next screen.

Transition Projects

A New Project Application that identifies as a transition project is essentially a new project created through reallocation, but rather than cutting off the funding for the reallocated project when the most recent executed grant agreement ends, the recipient can receive some funding in the new award that can be used to "wind down" the reallocated project. The remainder of the funds will be used to "ramp up" the new project.

Note: If the new project is identified as a transition project, there is no option for it to be an expansion project.

Review the FY 2021 NOFO for details about which projects are eligible for reallocation and other requirements associated with transition projects and funding.

https://www.hud.gov/program_offices/comm_planning/coc/competition

Transition Project: Required Attachment

On Screen 7A, attach a copy of the most recently approved project application; for example, if the project was awarded funds in FY 2020, attach the FY 2020 Project Application.

A copy of the project application can be exported to PDF.

- *Navigate to the Submissions screen*
- *Select the orange folder icon next to the FY 2020 project application*
- *Navigate to the Submission Summary screen*
- *Select "Export to PDF" at the bottom of the page*

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 2021 New Project Application.

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.



Screen 3B has different versions, depending on which component type was selected on screen 3A. Project Detail.

See the following pages for instructions:

[3B. Permanent Housing - PSH and RRH projects](#)

[3B. Joint TH and PH-RRH projects](#)

[3B. Supportive Services Only - Coordinated Entry projects](#)

[3B. HMIS projects](#)

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. The screen is the same for PH-PSH and PH-RRH, except for question 10, which asks whether the PSH project is 100% Dedicated or Dedicated Plus.

eForms Logout

3B. Project Description

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

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

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

You must enter a value greater than zero for at least one project milestone.

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

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

- Chronic Homeless
- Veterans
- Youth (under 25)
- Families
- Domestic Violence
- Substance Abuse
- Mental Illness
- HIV/AIDS
- N/A - Project Serves All Subpopulation
- Other If "Other," provide an explanation

(Click 'Save' to update)

*** Other:**

New Project Application

Steps

1. In field 1, provide a description that addresses the entire scope of the project.
2. In field 2, complete the Project Milestones table by entering the number of days from the execution of the grant agreement for each milestone. Milestones include:
 - New project staff hired or other expenses begin
 - Participant enrollment begins
 - Participants begin to occupy leased units or structures and supportive services begin
 - Leased or rental assistance units or structure and supportive services near 100% capacity
 - Closing on purchase of land, structure(s), or execution of structure lease
 - Rehabilitation started
 - Rehabilitation completed
 - New construction started
 - New construction completed

Each column pertains to one location or structure.

- If the project has only one location or structure, or no structures, complete only column A.
- If multiple structures, complete one column for each structure.

If a milestone is not applicable, leave the associated fields blank.

3. In field 2a, if the project is requesting capital costs (i.e. acquisition, rehabilitation, or new construction), describe the proposed development activities with responsibilities of the applicant, and subrecipients if included, to develop and maintain the property using CoC Program funds.
4. In field 3, indicate the proposed project's specific population focus.
 - Select all of the boxes that apply. Multiple selections are permissible. Select "N/A" if the project serves all subpopulations.
 - If you select "Other," select "Save," and then provide a description of the specific type of population in the text box provided.

New Project Application

3B. PH Component (continued)

Part 5 - Participants
5A. Households
5B. Subpopulations
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

View Applicant Profile

Export to PDF
Get PDF Viewer

Back

* Other:

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

5. Housing First

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

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

Having too little or little income

Active or history of substance use

Having a criminal record with exceptions for state-mandated restrictions

History of victimization (e.g. domestic violence, sexual assault, childhood abuse)

None of the above

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

Failure to participate in supportive services

Failure to make progress on a service plan

Loss of income or failure to improve income

Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area

None of the above

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

This response auto-populates based on responses in 5a, 5b, and 5c.

Steps (continued)

5. In field 4, 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.
6. In field 5a, select "Yes" or "No" to indicate whether your project will quickly move participants into permanent housing.
7. In field 5b, indicate whether the 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.
 - If you check the first four boxes, this project will be considered low barrier.
 - If you select "None of the above," it indicates that all those conditions are present in the project to screen out participants.
8. In field 5c, select the boxes that apply to indicate which reasons were removed as reasons for program termination.
 - If you select "None of the above," it indicates that all of those reasons are present in the project for terminating participants.
9. Based on your selections to the questions about screening and termination, in field 5d 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. See the FY 2021 CoC Program NOFO regarding the requirements for project that are designated as Housing First: https://www.hud.gov/program_offices/comm_planning/coc/competition.

New Project Application

3B. PH Component (continued)

The screenshot shows a portion of a project application form. It features two main questions, each with a dropdown menu and a corresponding callout box. Question 6 asks if program participants will be required to live in a specific structure, unit, or locality at any time while in the program. A dropdown menu next to it is set to 'Yes'. A callout box points to this dropdown, stating 'If "Yes," explain how and why.' Below this question is a text input field labeled '6a. Explain how and why the project will implement this requirement'. Question 7 asks if more than 16 persons will live in a single structure. Its dropdown menu is also set to 'Yes'. A callout box points to this dropdown, stating 'If "Yes," 2 more questions will appear.' Below question 7 are two text input fields labeled '7a. Describe the local market conditions that necessitate a project of this size.' and '7b. Describe how the project will be integrated into the neighborhood.'

Steps (continued)

10. In field 6, select "Yes" or "No" to indicate whether participants will be required to live in a particular structure, unit, or locality at any time while in the program.
 - If "Yes," field 6a will appear.
Provide a description of how and why this project will implement this requirement.
11. In field 7, select "Yes" or "No" to indicate if there will be more than 16 persons living in a single structure.
 - If "Yes," fields 7a and 7b will appear.
In field 7a, describe the local market conditions that necessitate a project of this size.
In field 7b, describe how the project will be integrated into the neighborhood.

New Project Application

3B. PH Component (continued)

100% Dedicated or DedicatedPLUS

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

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

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

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

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

Save & Back	Save	Save & Next
Back	Next	

Steps (continued)

12. If "PSH" was selected, the "Dedicated and DedicatedPlus section will appear on the screen.
 - In field 8, 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. Joint TH and PH-RRH Component

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

eForms Logout

3B. Project Description

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

test

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

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

You must enter a value greater than zero for at least one project milestone.

3. Check the appropriate box(es) if this project will have a specific subpopulation focus. (Select ALL that apply)

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

(Click 'Save' to update)

* Other:

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

No

If "Other," provide an explanation

Steps

- In field 1, provide a description that addresses the entire scope of the project.
- In field 2, complete the Project Milestones table by entering the number of days from the execution of the grant agreement for each milestone. Milestones include:
 - New project staff hired or other expenses begin
 - Participant enrollment begins
 - Participants begin to occupy leased units or structures and supportive services begin
 - Leased or rental assistance units or structure and supportive services near 100% capacity
 - Closing on purchase of land, structure(s), or execution of structure lease
 - Rehabilitation started

New Project Application

- Rehabilitation completed
- New construction started
- New construction completed

Each column pertains to one location or structure.

- If the project has only one location or structure, or no structures, complete only column A.
- If multiple structures, complete one column for each structure.

If a milestone is not applicable, leave the associated fields blank.

3. In field 3, indicate the proposed project's specific population focus.
 - Select all of the boxes that apply. Multiple selections are permissible. Select "N/A" if the project serves all subpopulations.
 - If you select "Other," select "Save" and then provide a description of the specific type of population in the text box provided.
4. 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.

New Project Application

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

The screenshot shows a web application interface for a '5. Housing First' section. On the left is a navigation menu with items: 6A. Funding Request, 6I. Match, 6J. Summary Budget, Part 7 - Attachment(s) & Certification, 7A. Attachment(s), 7D. Certification, Part 8 - Submission Summary, and 8B. Summary. The main form area contains the following questions and options:

- 5. Housing First**
- * 5a. Will the project quickly move participants into permanent housing?** (Yes)
- * 5b. Will the project enroll program participants who have the following barriers? Select all that apply.**
 - Having too little or little income
 - Active or history of substance use
 - Having a criminal record with exceptions for state-mandated restrictions
 - History of victimization (e.g. domestic violence, sexual assault, childhood abuse)
 - None of the above
- * 5c. Will the project prevent program participant termination from the project for the following reasons? Select all that apply.**
 - Failure to participate in supportive services
 - Failure to make progress on a service plan
 - Loss of income or failure to improve income
 - Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area
 - None of the above
- * 5d. Will the project follow a "Housing First" approach?** (No)
(Click 'Save' to update)

A callout box on the left side of the form states: "This response auto-populates based on responses in 5a, 5b, and 5c." A box around the 5d question also contains the text "(Click 'Save' to update)".

Steps (continued)

- In field 5a, select "Yes" or "No" to indicate whether your project will quickly move participants into permanent housing.
- In field 5b, 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.
 - If you check the first four boxes, this project will be considered low barrier.
 - If you select "None of the above," it indicates that all of those conditions are present in the project to screen out participants.
- In field 5c, select the boxes that apply to indicate which reasons were removed as reasons for program termination.
 - If you select "None of the above," it indicates that all of those reasons are present in the project for terminating participants.
- Based on your selections to the questions about screening and termination, in field 5d 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.
 - NOTE:** See the FY 2021 CoC Program NOFO regarding the requirements for projects that are designated as Housing First:
https://www.hud.gov/program_offices/comm_planning/coc/competition.

New Project Application

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

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

If "Yes," explain how and why.

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

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

If "Yes," 2 more questions will appear.

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

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

Save & Back Save Save & Next

Back Next

Steps (continued)

- In field 6, select "Yes" or "No" to indicate whether participants will be required to live in a particular structure, unit, or locality.
 - If "Yes," field 6a will appear.
Provide a description of how and why this project will implement this requirement.
- Select "Yes" or "No" to indicate if there will be more than 16 persons living in one structure.
 - If "Yes," fields 7a and 7b will appear.
In field 7a, describe the local market conditions that necessitate a project of this size.
In field 7b, describe how the project will be integrated into the neighborhood.
- 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 and Coordinated Entry for SSO project type is selected on screen 3A. Project Detail.

e.Forms Logout

3B. Project Description

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

test

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

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

You must enter a value greater than zero for at least one project milestone.

3. Check the appropriate box(es) if this project will have a specific subpopulation focus. (Select ALL that apply)

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

(Click 'Save' to update)

* Other:

4. As an SSO-Coordinated Entry project answer the following questions:

Steps

1. In field 1, provide a description that addresses the entire scope of the project.
2. In field 2, complete the Project Milestones table by entering the number of days from the execution of the grant agreement for each milestone. Milestones include:
 - New project staff hired or other expenses begin
 - Participant enrollment begins
 - Participants begin to occupy leased units or structures and supportive services begin
 - Leased or rental assistance units or structure and supportive services near 100% capacity
 - Closing on purchase of land, structure(s), or execution of structure lease
 - Rehabilitation started
 - Rehabilitation completed

New Project Application

- New construction started
- New construction completed

Each column pertains to one location or structure.

- If the project has only one location or structure, or no structures, complete only column A.
- If multiple structures, complete one column for each structure.

If a milestone is not applicable, leave the associated fields blank.

3. In field 3, indicate the proposed project's specific population focus.

- Select all of the boxes that apply. Multiple selections are permissible. Select "N/A" if the project serves all subpopulations.
- If you select "Other," select "Save" and then provide a description of the specific type of population in the text box provided.

4. As an SSO-Coordinated Entry project answer the following questions:

* 4a. Will the coordinated entry process cover the CoC's entire geographic area?

* 4b. Will the coordinated entry process be affirmatively marketed and easily accessible by program participants seeking assistance?

* 4c. Describe the advertisement strategy for the coordinated entry process and how it is designed to reach those with the highest barriers to accessing assistance.

* 4d. Will the coordinated entry process use a comprehensive, standardized assessment process?

* 4e. Describe the standardized assessment and referral process that directs individuals and families to appropriate housing and services.

* 4f. If the coordinated entry process includes differences in access, entry, assessment, or referral for certain subpopulations, are those differences limited only to the following groups:

- (1) adults without children;
- (2) adults accompanied by children;
- (3) unaccompanied youth;
- (4) households fleeing domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions (including human trafficking); and
- (5) persons at risk of homelessness?

* 4g. Will this coordinated entry project refer program participants to projects that specifically coordinates and integrates mainstream health, social services, and employment programs for which they may be eligible?

<input type="button" value="Save & Back"/>	<input type="button" value="Save"/>	<input type="button" value="Save & Next"/>
<input type="button" value="Back"/>	<input type="button" value="Next"/>	

New Project Application

Steps (continued)

4. In field 4a, select "Yes" or "No" to indicate whether the coordinated entry process funded in part by this grant covers the CoC's entire geographic area.
5. In field 4b, select "Yes" or "No" to indicate whether the coordinated entry process funded in part by this grant will be affirmatively marketed and easily accessible by programs participants seeking assistance.
6. In field 4c, describe the advertisement strategy for the coordinated entry process and how it is designed to reach those with the highest barriers to accessing assistance.
7. In field 4d, select "Yes" or "No" to indicate whether the coordinated entry process uses a comprehensive, standardized assessment process.
8. In field 4e, describe the standardized assessment and referral process and how the coordinated entry process ensures that participants are directed to appropriate housing and/or services.
9. In field 4f, if the coordinated entry process includes differences in access, entry, assessment, or referral for certain populations, select "Yes" or "No" to indicate whether those differences are limited only to the following five groups: adults without children; adults accompanied by children; unaccompanied youth; households fleeing domestic violence, sexual assault, stalking, or other dangerous or life-threatening conditions (including human trafficking); persons at risk of homelessness.
10. In field 4g, select "Yes" or "No" to indicate whether the coordinated entry project will refer program participants to projects that specifically coordinates and integrates mainstream health, social services, and employment programs for which they may be eligible.
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.

3B. Project Description

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

Test

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

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

You must enter a value greater than zero for at least one project milestone.

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

Save & Back Save Save & Next

Back Next

Steps

1. In field 1, provide a description that addresses the entire the scope of the project.
2. In field 2, complete the Project Milestones table by entering the number of days from the execution of the grant agreement for each milestone. Milestones include:
 - New project staff hired or other expenses begin
 - Participant enrollment begins
 - Participants begin to occupy leased units or structures and supportive services begin
 - Leased or rental assistance units or structure and supportive services near 100% capacity
 - Closing on purchase of land, structure(s), or execution of structure lease
 - Rehabilitation started
 - Rehabilitation completed
 - New construction started
 - New construction completed

Each column pertains to one location or structure.

- If the project has only one location or structure, or no structures, complete only column A.
- If multiple structures, complete one column for each structure.

If a milestone is not applicable, leave the associated fields blank.

3. In field 4, 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.
4. Select "Save & Next" to continue to the next screen.

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-PSH, PH-RRH, Joint TH and PH-RRH, or SSO component is selected.
- Screen 3C. HMIS Expansion is available when the HMIS component is selected.

NOTE:

To apply for an expansion project, applicants must submit:

- *A Renewal Project Application for the individual, existing Renewal project being expanded.*
- *A New Project Application for the portion expanding the project.*

More information on Expansion Projects is available on the Applying for Expansion Projects During the CoC Program Competition page at:

<https://www.hudexchange.info/resource/5853/applying-for-expansion-projects-during-the-coc-program-competition/>

3C. Project Expansion Information (PH-PSH, PH-RRH, Joint TH and PH-RRH, 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 2021 New Project Application.

The screenshot shows the 'eForms' interface for '3C. HMIS Expansion'. The main content area contains a mandatory question: '* 1. Is this a "Project Expansion" of an eligible renewal project?'. A dropdown menu is open, showing options for 'No' and 'Yes'. Below the question are buttons for 'Save & Back', 'Save & Next', 'Back', and 'Next'. A note at the bottom states: 'Note: This formlet contains mandatory fields for which no value has been saved.' The left sidebar shows the user's name 'jdoe-02' and application details for 'New Project Application FY2021'.

Steps

1. Indicate whether the expansion project is for an eligible CoC Program funded renewal project with the same component type.
 - If "No," select "Save & Next" and continue to the next screen.
 - If "Yes," additional fields appear that you are required to complete. Continue on to Step 2.

New Project Application

3C. Project Expansion (continued)

e.Forms Logout

jdooe-02

New Project Application FY2021

Applicant Name: City and County of San Francisco
Applicant Number: 155440829
Project Name: New Project Application Test FY2021
Project Number: 137110

New Project Application FY2021

FY2019 New Detailed Instructions

Before Starting
Part 1 - Forms
1A. SF-424 Application Type
1B. SF-424 Legal Applicant

3C. Project Expansion Information

* 1. Is this a "Project Expansion" of an eligible renewal project?

Enter the PIN (first 6 characters of the grant number) and Project Name for the grant that is applying for renewal in FY 2021 upon which this project proposes to expand.

* 1a. Eligible Renewal Grant PIN:

* 1b. Eligible Renewal Grant Project Name:

* 2. Will this expansion project increase the number of program participants?

* 3. Will this expansion project provide additional supportive services to program participants?

* 4. Will this expansion project bring existing facilities up to government health or safety standards?

Enter the PIN and name of project being expanded.

"Yes" to question 2, 3, and/or 4 will reveal additional questions.

Note: This formlet contains mandatory fields for which no value has been saved.

Steps (continued)

- In field 1a, enter the PIN number (first 6 numbers of the grant number) of the eligible CoC funded grant that is applying for renewal in FY 2021 upon which this project proposes to expand.
- In field 1b, enter the Project Name of the eligible CoC funded grant that is applying for renewal in FY 2021 upon which this project proposes to expand.
- In field 2, select "Yes" or "No" to indicate whether the expansion will increase the number of homeless persons served. If "Yes," fields 2a and 2b will appear.
 - In field 2a, indicate the currently approved renewal numbers, from the Stand-alone Renewal project application.
 - In field 2b, indicate the new requested numbers to add, from this Stand-alone New project application.
- For question 3, select "Yes" or "No" to indicate whether the expansion will bring additional supportive services to homeless persons. If "Yes," field 3a will appear.
 - In field 3a, indicate how the project will provide additional supportive services to program participants. Check one or both boxes.
- In field 4, select "Yes" or "No" to indicate whether the expansion will bring the existing facilities up to government health and safety standards. If "Yes," field 4a will appear.
 - In field 4a, describe how the project is proposing to bring existing facility(s) up to state or local government health or safety standards.
- Once all of the fields are completed, select "Save & Next" to continue to the next screen.

New Project Application

3C. Project Expansion (continued)

* 2. Will this expansion project increase the number of program participants?

"Yes" to question 2, 3, and/or 4 will reveal additional questions.

2a. **Currently Approved Renewal Numbers (from "Stand-alone Renewal" project application)**

Number of persons (From renewal application Screen 5A)

Number of units (From renewal application Screen 4B)

Number of beds (From renewal application Screen 4B)

2b. **New Requested Numbers to Add (from this "Stand-alone New" project application)**

Number of additional persons (From this new application Screen 5A)

Number of additional units (From this new application Screen 4B)

Number of additional beds (From this new application Screen 4B)

Enter all values for 2a and 2b.

* 3. Will this expansion project provide additional supportive services to program participants?

* 3a. Indicate how the project will provide additional supportive services to program participants. (Check one or both boxes)

Increase number of or expand supportive services provided

Increase frequency or intensity of supportive services

* 4. Will this expansion project bring existing facilities up to government health or safety standards?

* 4a. Describe how the project is proposing to "bring existing facility(s) up to state or local government health or safety standards."

The table below identifies which the new questions that appear when an activity is selected in Screen 3C.

PH Expansion Activities	Steps
Increase the number of homeless persons served	<p>In fields 2a and 2b, indicate how your project is proposing to increase the number of persons experiencing homelessness served.</p> <ul style="list-style-type: none"> In field 2a, enter the "Current Level of Effort" for the following categories: <ul style="list-style-type: none"> # of persons served at a point-in-time # of units # of beds In field 2b, enter the "New Effort" your proposed project will provide for the same three categories listed in the preceding step.
Provide additional supportive services to homeless persons	<p>In field 3a, identify how you will be providing additional services.</p> <ul style="list-style-type: none"> Increase the number and/or expand the variety of services Increase the frequency and/or intensity of services
Bring existing facilities up to state/local gov. health and safety standards	<p>In field 4a, describe how the project is proposing to bring the existing facility or facilities up to state/local government health and safety standards.</p>

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 2021 New Project Application.

The screenshot shows the '3C. HMIS Expansion' form. The primary question is: '* 1. Is this a "Project Expansion" of an eligible renewal project?'. A dropdown menu is open, showing 'Yes' and 'No' options. Below the question are buttons for 'Save & Back', 'Save & Next', 'Back', and 'Next'. A note at the bottom states: 'Note: This formlet contains mandatory fields for which no value has been saved.'

Steps

1. In field 1, select "Yes" or "No" to indicate whether the requested funds increase the capacity or function of the CoC's existing HMIS eligible renewal project.
 - If "No," select "Save & Next" and continue to the next screen.
 - If "Yes, additional fields appear that you are required to complete. Continue on to Step 2.

The screenshot shows the '3C. HMIS Expansion' form with 'Yes' selected in the first dropdown. A callout box says: 'If "Yes," the fields with the Renewal data appears.' The form now shows additional fields: '* 1a. Eligible Renewal Grant PIN:' and '* 1b. Eligible Renewal Grant Project Name:'. Below these are questions 2, 3, and 4, each with a dropdown menu. A note at the bottom states: 'At least one of question 2, 3, or 4 must be "Yes".'

New Project Application

Steps (continued)

2. In field 1a, enter the PIN number (first 6 numbers of the grant number) of the eligible CoC funded grant that is applying for renewal in FY 2021 upon which this project proposes to expand.
3. In field 1b, enter the Project Name of the eligible CoC funded grant that is applying for renewal in FY 2021 upon which this project proposes to expand.
4. In field 2, select "Yes" or "No" to indicate whether this expansion project will increase HMIS functionality.
 - If "Yes," field 2a will appear.
In field 2a, describe the increased HMIS functionality.
5. In field 3, select "Yes" or "No" to indicate whether this expansion project will increase geographic coverage of HMIS.
6. In field 4, select "Yes" or "No" to indicate whether the expansion project will increase the number of HMIS participating agencies and/or programs.
 - If "Yes," field 4a will appear.
In field 4a, identify the number of additional users in each agency or programs that will be added.
7. Select "Save & Next" to continue.

New Project Application

4A. Supportive Services, 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 2021 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. Project Detail:

- [4A. Supportive Services for Participants \(PH: PSH, PH: RRH, Joint TH and PH-RRH\)](#)
- [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 2021 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 application interface. At the top left is the 'e.Forms' logo. In the top right corner, there is a 'Logout' button. On the left side, there is a sidebar with the user's name 'jdoe-02' and application details: 'New Project Application FY2021', 'Applicant Name: City and County of San Francisco', 'Applicant Number: 155440829', 'Project Name: New Project Application Test FY2021', and 'Project Number: 137110'. The main content area is titled '4A. Supportive Services for Participants' and contains two text input fields. The first field is labeled '* 1. Describe how program participants will be assisted to obtain and remain in permanent housing.' The second field is labeled '* 2. Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible.'

Steps

1. In field 1, describe the supportive services that will be provided to help project participants obtain and remain in permanent housing.
2. In field 2, describe the specific plans to coordinate and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible.

New Project Application

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

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

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

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

Funding requests on screen 6F. Supportive Services must have a corresponding entry on this screen 4A.

Please enter all values for at least one line item and leave no incomplete line items.

Steps (continued)

3. In the table provided in field 3, 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.

New Project Application

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

- 3A. Project Detail
- 3B. Description
- 3C. Expansion
- Part 4 - Housing, Services, and HMIS
- 4A. Services**
- 4B. Housing Type
- Part 5 - Participants
- 5A. Households
- 5B. Subpopulations
- Part 6 - Budget Information
- 6A. Funding Request
- 6I. Match
- 6J. Summary Budget
- Part 7 - Attachment(s) & Certification
- 7A. Attachment(s)
- 7D. Certification

Identify whether the project will include the following activities:

*** 4. Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs?**

*** 5. Annual follow-ups with program participants to ensure mainstream benefits are received and renewed?**

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

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

Steps (continued)

4. In field 4, select "Yes" or "No" to indicate whether the project provides transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs.
5. In field 5, select "Yes" or "No" to indicate whether the project provides annual follow ups with program participants to ensure mainstream benefits are received and renewed.
6. In field 6, select "Yes" or "No" to indicate whether program participants will have access to SSI/SSDI technical assistance provided by the applicant, a subrecipient, or partner agency.
 - If "Yes," field 6a will appear.
In field 6a, select "Yes" or "No" from the dropdown menu to indicate if the staff person providing the technical assistance has completed SOAR training in the last 24 months.
7. Select "Save & Next" to navigate to the next screen.

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).

eForms Logout

4A. HMIS Standards

*** 1. Is the HMIS currently programmed to collect all Universal Data Elements (UDEs) as set forth in the 2020 HMIS Data Standard Notice?**

*** 1a. If no, explain why and the planned steps for correction.**
Max. 500 characters

*** 2. Does HMIS produce all HUD-required reports and provide data needed for HUD reporting? (i.e., Annual Performance Reports, Annual Homeless Assessment table shells (Logitudinal System Analysis), data for CAPER/ESG reporting, SPM and Data Quality Table, etc.)**

*** 2a. If no, explain why and the planned steps for correction.**
Max. 500 characters.

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

*** 3a. If no, explain why and the planned steps for correction.**
Max. 500 characters.

*** 4. Does HMIS provide the CoC with an unduplicated count of program participants receiving services in the CoC?**

*** 5. Is there a staff person responsible for insuring the HMIS implementation meets all privacy and security standards as required by HUD and other federal partners?**

*** 6. Does your organization conduct a background check for all employees who access and view HMIS data?**

*** 7. Does the HMIS Lead conduct Privacy and Security Training and follow up on privacy and security standards?**

*** 8. Do you have a process in place to remove licenses for former users who no longer need access to HMIS (e.g. leave their job, fired)?**

*** 8a. How long does it take to remove user licenses for former HMIS users?**

- jdoe-02
- New Project Application FY2021
- Applicant Name: City and County of San Francisco
- Applicant Number: 155440829
- Project Name: New Project Application Test FY2021
- Project Number: 137110
- New Project Application FY2021
- FY2019 New Detailed 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. HMIS Expansion
- Part 4 - Housing, Services, and HMIS
 - 4A. HMIS Standards**
 - 4B. HMIS Training
- Part 6 - Budget Information
 - 6A. Funding Request
 - 6I. Match

New Project Application

Steps

1. In field 1, 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.
 - If you answered "No," field 1a will appear.
In field 1a, you are required to explain why and discuss the planned steps for correction.
2. In field 2, 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.
 - If you answered "No," field 2a will appear.
In field 2a, you are required to explain why and discuss the planned steps for correction.
3. In field 3, 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.
 - If you answered "No," field 3a will appear.
In field 3a, you are required to explain why and discuss the planned steps for correction.
4. In field 4, 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.
5. In field 5, select "Yes" or "No" from the dropdown menu to indicate if the HMIS Lead has a staff person responsible for ensuring the implementation meets all privacy and security standards as required by HUD and other federal partners.
6. In field 6, select "Yes" or "No" from the dropdown menu to indicate if your organization conducts a background check for all employees who access and view HMIS data.
7. In field 7, select "Yes" or "No" from the dropdown menu to indicate if the HMIS Lead conducts Privacy and Security Training and follows up on privacy and security standards.
8. In field 8, 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.).
 - If "Yes," field 8a will appear.
In field 8a, select from the dropdown menu to indicate the length of time it takes to remove access rights of former HMIS users. Options include: within 24 hours, within 1 week, within 2 weeks, within 1 month, and longer than 1 month.
9. Select "Save & Next" to continue to the next screen.

New Project Application

4B. Housing Type and Location, HMIS Training

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 2021 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. Housing Type and Location \(Joint TH\)*](#)
- [*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.



The screenshot shows the e.Forms application interface. The top navigation bar includes the e.Forms logo and a Logout button. The sidebar on the left displays the user's name (jdoe-02) and project details for a New Project Application FY2021, including the applicant name, number, and project name. The main content area is titled "4B. Housing Type and Location" and contains a summary of housing sites. A callout box points to the "Add" icon (a document with a plus sign) and says "Select 'Add'". Another callout box points to the summary box and says "Auto-calculates based on entries". The summary box includes fields for "Total Units:", "Total Beds:", and "Total Dedicated CH Beds:". Below the summary box is a table with columns: "Delete", "View", "Housing Type", "Housing Type (JOINT)", "Units", "Beds", and "Dedicated CH Beds". The table currently contains no items, with the message "This list contains no items" displayed. At the bottom of the table are "Back" and "Next" buttons.

Steps

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 will appear.

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.

The screenshot shows the 'e.Forms' application interface for '4B. Housing Type and Location Detail'. The sidebar on the left contains navigation options for 'New Project Application FY2021' and 'FY2019 New Detailed Instructions'. The main content area includes the following sections:

- 1. Housing Type:** A dropdown menu with a callout box stating 'Select from dropdown menu'. The dropdown is open, showing options: Barracks, Dormitory, shared or private rooms, Shared housing, Single Room Occupancy (SRO) units, Clustered apartments, Scattered-site apartments (including efficiencies), and Single family homes/townhouses/duplexes.
- 2. Indicate the maximum number of units and beds available at the site:** Fields for '* 2a. Units:' and '* 2b. Beds:'.
- 3. How many beds in "2b. Beds" are dedicated to persons experiencing chronic homelessness?** A field with a callout box stating 'This includes both the "dedicated" and "shared" beds.'
- 4. Address:** Fields for '* Street 1:', 'Street 2:', '* City:', '* State:' (dropdown), and '* ZIP Code:'.
- 5. Select the geographic area(s) associated with the address.** A callout box states 'Select "Save & Add Another" to add another housing type'. The interface shows 'Available Items' (060012 Alameda, 060030 Alhambra, 060032 Aliso Viejo, 060078 Anaheim, 060102 Antioch, 060108 Apple Valley) and 'Selected Items' with navigation buttons (>>, >, <, <<). A red text prompt says 'Please select at least one area.' Below are buttons for 'Save', 'Save & Add Another', 'Save & Back to List', and 'Back to List'.

Steps

1. In field 1, from the "Housing Type" dropdown menu, select the type of housing that most closely resembles the type of housing the project provides.
 - Barracks
 - Dormitory, shared or private rooms
 - Shared housing
 - Single Room Occupancy (SRO) units
 - Clustered apartments
 - Scattered site apartments (including efficiencies)
 - Single-family homes/townhouses/duplexes

New Project Application

2. In fields 2a and 2b, enter the maximum number of units and beds available for project participants at the selected housing site.
 - 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.
 - Select "Save."
3. In field 3, indicate the number beds of the total beds in "2b. Beds" that are dedicated to persons experiencing chronic homelessness.
4. In field 4, 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.
 - If the project uses tenant based rental assistance, or if the address for scattered-site or single family home housing cannot be identified at the time of application, enter the address for the administration office.
 - Projects serving victims of domestic violence, including human trafficking, must use a PO Box or other anonymous address to ensure the safety of participants.
5. In field 5, select the geographic area(s) in which the project will be 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.
6. To add additional housing sites, select "Save & Add Another" and repeat steps 1 through 5.
7. 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.
8. When your list is complete, select "Next" to continue to the next screen.

**NOTE:
Regarding
Addresses:**

Project applicants must enter an address for all proposed and existing properties.

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

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.



The screenshot shows the e.Forms application interface. On the left is a sidebar with user information for 'jdoe-02' and project details for 'New Project Application FY2021'. The main content area is titled '4B. Housing Type and Location' and contains instructions: 'The following list summarizes each housing site in the project. To add a housing site to the list, select the Add icon. To view or update a housing site already listed, select the View icon.' Below the instructions are two input fields: 'Total Units:' and 'Total Beds:'. A callout bubble points to the 'Add' icon with the text 'Select "Add"'. Another callout bubble points to the 'Auto-calculate based on entries' text. Below the input fields is a table with columns: 'Delete', 'View', 'Housing Type', 'Housing Type (JOINT)', 'Units', 'Beds', and 'Dedicated CH Beds'. The table is currently empty, with the text 'This list contains no items' displayed below it. At the bottom of the table are 'Back' and 'Next' buttons.

Steps

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 will appear.

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' application interface for '4B. Housing Type and Location Detail'. The sidebar on the left contains navigation options such as 'New Project Application FY2021', 'Applicant Name: City and County of San Francisco', 'Applicant Number: 155440829', 'Project Name: New Project Application Test FY2021', 'Project Number: 137110', 'New Project Application FY2021', 'FY2019 New Detailed 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 50', '1I. Cert. Lo', '1J. SF-LLL', 'Part 2 - Recipient Subrecipient Information', '2A. Subrecipient', '2B. Experience', 'Part 3 - Project Information', and '3A. Project Detail'. The main content area is titled '4B. Housing Type and Location Detail' and contains the following sections:

- 1. Housing Type:** A dropdown menu with the text '-- select --'. A callout box points to it with the text 'Select from dropdown menu'.
- 2. Indicate the maximum number of units and beds available for program participants at the selected housing site.** Two input fields: '* 2a. Units:' and '* 2b. Beds:'.
- 3. Address:** A text area with instructions: 'Project applicants must enter an address for all proposed and existing properties. If the location is not yet known, enter the expected location of the housing units. For Scattered-site and Single-family home housing, or for projects that have units at multiple locations, project applicants should enter the address where the majority of beds will be located or where the majority of beds are located as of the application submission. Where the project uses tenant-based rental assistance in the RRH portion, or if the address for scattered-site or single-family homes housing cannot be identified at the time of application, enter the address for the project's administration office. Projects serving victims of domestic violence, including human trafficking, must use a PO Box or other anonymous address to ensure the safety of participants.' Below the text are input fields for '* Street 1:', '* Street 2:', '* City:', '* State: -- select --', 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 selection interface with 'Available Items:' and 'Selected Items:' lists. The 'Available Items:' list includes: '060012 Alameda', '060030 Alhambra', '060032 Aliso Viejo', '078 Anaheim', '102 Antioch', and '108 Apple Valley'. A callout box points to the 'Save & Add Another' button with the text 'Select "Save & Add Another" to add another housing type'. Below the lists is a red text prompt: 'Please select at least one area.' At the bottom are four buttons: 'Save', 'Save & Add Another', 'Save & Back to List', and 'Back to List'. A callout box points to the 'Save & Back to List' button with the text 'Select "Save & Back to List" when finished adding housing types'.

Steps

1. In field 1, from the "Housing Type" dropdown menu, select the type of housing that most closely resembles the type of housing the project provides.
 - Barracks
 - Dormitory, shared or private rooms
 - Shared housing
 - Single Room Occupancy (SRO) units
 - Clustered apartments
 - Scattered site apartments (including efficiencies)
 - Single-family homes/townhouses/duplexes.

New Project Application

2. In field 2, enter the maximum number of units and beds available for project participants at the selected housing site.
 - 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.
 - Select "Save."
3. In field 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.
 - If the project uses tenant based rental assistance, or if the address for scattered-site or single family home housing cannot be identified at the time of application, enter the address for the administration office.
 - Projects serving victims of domestic violence, including human trafficking, must use a PO Box or other anonymous address to ensure the safety of participants.
4. In field 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.

**NOTE:
Regarding
Addresses:**

Project applicants must enter an address for all proposed and existing properties.

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

New Project Application


4B. Housing Type and Location (Joint TH)

The following screen, 4B. Housing Type and Location, applies to Joint TH (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.



The screenshot shows the e.Forms interface for '4B. Housing Type and Location'. On the left is a sidebar with user information (jdoe-02) and project details (New Project Application FY2021, Applicant Name: City and County of San Francisco, Applicant Number: 155440829, Project Name: New Project Application Test FY2021, Project Number: 137110). The main area contains instructions: 'The following list summarizes each housing site in the project. To add a housing site to the list, select the [Add icon] icon. To view or update a housing site already listed, select the [View icon] icon.' Below this is a table with columns 'TH', 'RRH', and 'Total'. The rows are 'Total Units' and 'Total Beds', with values of 0 in the 'Total' column. A callout box points to the 'Add' icon with the text 'Select "Add"'. Another callout box points to the table with the text 'Auto-calculate based on entries'. At the bottom, there are buttons for 'Delete', 'View', 'Housing Type', 'Housing Type (JOINT)', 'Units', 'Beds', and 'Dedicated CH Beds'. Below these buttons, it says 'This list contains no items'. At the very bottom are buttons for 'Save & Back', 'Save', 'Save & Next', 'Back', and 'Next'.

Steps

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 will appear.

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 (Joint TH)

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

4B. Housing Type and Location Detail

The applicant has selected "JOINT TH & PH-RRH" as their component type and CoC-funded units and beds being provided under this project.

1. Is this housing type and location for the TH portion or the RRRH portion of the project?

If "TH", an additional question will appear

2. Housing Type:

3. What is the funding source for these units and beds? (If multiple sources, select "Mixed" from the dropdown menu)

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

* 2a. Units:

* 2b. Beds:

5. Address

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

* Street 1:

Street 2:

* City:

* State:

* ZIP Code:

6. 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:

- 060012 Alameda
- 060030 Alhambra
- 060032 Aliso Viejo
- 060078 Anaheim
- 060102 Antioch
- 060108 Apple Valley

Selected Items:

Please select at least one area.

Select "Save & Add Another" to add another housing type

Select "Save & Back to List" when finished adding housing types

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

Steps

1. In field 1, select "TH" or "RRH" from the dropdown menu to indicate whether the housing type and location is for the TH or RRRH portion of the project.
 - If "TH," is selected, field 1a will appear. Field 1a automatically pre-populates to "Yes."
2. In field 2, from the "Housing Type" dropdown menu, select the type of housing that most closely resembles the type of housing the project provides.
 - Barracks

New Project Application

- Dormitory, shared or private rooms
 - Shared housing
 - Single Room Occupancy (SRO) units
 - Clustered apartments
 - Scattered site apartments (including efficiencies)
 - Single-family homes/townhouses/duplexes.
3. In field 3, enter the funding source for the units and beds. If multiple sources, select "Mixed" from the dropdown menu.
 4. In field 4, enter the maximum number of units and beds available for project participants at the selected housing site.
 - 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.
 - Select "Save."
 5. In field 5, 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.
 - If the project uses tenant based rental assistance, or if the address for scattered-site or single family home housing cannot be identified at the time of application, enter the address for the administration office.
 - Projects serving victims of domestic violence, including human trafficking, must use a PO Box or other anonymous address to ensure the safety of participants.
 6. In field 6, 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.
 7. To add additional housing sites, select "Save & Add Another" and repeat steps 1 through 6.
 8. 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. 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"/>

Save & Back Save Save & Next

Back Next

Steps

1. For each type of activity listed, indicate the last training date or proposed training date for each HMIS training, 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-PSH, PH-RRH, 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 consists of the number of participants in the program when the program is at full capacity (at a single point in time, not over the course of a year or term of the grant).*
For a new project, you will not have historical data on persons served, so you will need to use estimates 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: *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.

Example:
Household Type: HHs with at least 1 adult and 1 child
Households = 10
Adults over age 24 = 16
Accompanied Children under age 18 = 12

The screenshot displays the '5A. Project Participants - Households' form. On the left, a sidebar contains application details: 'New Project Application FY2021', 'Applicant Name: City and County of San Francisco', 'Applicant Number: 135440829', 'Project Name: New Project Application Test FY2021', and 'Project Number: 137110'. The main form area is titled 'Households Table' and contains the following data:

Number of Households	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
	10			10
Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Persons over age 24	16			16
Persons ages 18-24	0			0
Accompanied Children under age 18	12			12
Unaccompanied Children under age 18				0
Total Persons	28	0	0	28

Below the table, there are buttons for 'Save & Back', 'Save', and 'Save & Next', along with 'Back' and 'Next' buttons. A callout box points to the 'Total Persons' field, stating: "Total Persons" for this Household Type = 28.

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.

Example from 5A previous page:
 Household Type: HHs with at least 1 adult and 1 child
 - Adults over age 24
 Columns 1, 2, 3, and 10 = 16
 Columns 4 - 9 = 18
 - Accompanied children under 18 = Columns 1 and 10 = 12 (children cannot be veterans)
 - "Total Persons" = Columns 1, 2, 3, and 10 = 28

For each row, columns 1, 2, 3, and 10 are mutually exclusive.

People counted in column 10 cannot be counted in columns 1-9.

5B. Project Participants - Subpopulations

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Non-Veterans)	CH Veterans	Veterans (Non-CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24	10	2	3	4	2	2	2	2	2	2
Persons ages 18-23										
Children under age 18										
Total Persons	10	2	3	4	2	2	2	2	2	2

For row "Total Persons," columns 1, 2, 3, and 10 cannot exceed the "Total Persons" field on 5A for the corresponding Household type

Columns 4 – 9 are not mutually exclusive. People can be in more than one subpopulation. Total # for columns 4 - 9 may exceed "Total Person" field on 5A.

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.

Estimations:

For a new project, you will not have historical data on persons served, so you will need to use estimates at the time of application.

The data describes the number of households as well as the number of persons in households.

The screenshot shows the '5A. Project Participants - Households' screen in the e.Forms application. The interface includes a sidebar with application details and a main content area with a table and form fields. A callout points to the 'Save' button, stating 'Click Save to automatically calculate totals'. Another callout points to the 'Save & Next' button, stating 'Select "Save & Next" to proceed'.

Number of Households	Households with <u>at Least One Adult and One Child</u>	Adult Households <u>without</u> Children	Households with <u>Only</u> Children
<input type="text" value="10"/>	<input type="text" value="10"/>	<input type="text"/>	<input type="text"/>

Characteristics	Persons in Households with <u>at Least One Adult and One Child</u>	Adult Persons in Households <u>without</u> Children	Persons in Households with <u>Only</u> Children
Persons over age 24	<input type="text" value="16"/>	<input type="text"/>	<input type="text"/>
Persons ages 18-24	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>
Accompanied Children under age 18	<input type="text" value="12"/>	<input type="text"/>	<input type="text"/>
Unaccompanied Children under age 18	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Persons	<input type="text" value="28"/>	<input type="text" value="0"/>	<input type="text"/>

Click Save to automatically calculate totals

Buttons: Save & Back, Save, Save & Next, Back, Next

Steps

1. In the "Number of Households" row, 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. In 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.

Estimations:

For a new project, you will not have historical data on persons served, so you will need to use estimates at the time of application.

The data describes the number of households as well as the number of persons in households.

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

- For each row, the first three columns that are in dark gray, along with column 10 "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 4 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.

New Project Application

SB. Project Participants - Subpopulations

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV
Persons over age 24	10	2	2	4	2	2	
Persons ages 18-24							
Children under age 18	12						
Total Persons	22	2	2	4	2	2	

Click Save to automatically calculate totals

Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV
Persons over age 24							
Persons ages 18-24							
Total Persons	0	0	0	0	0	0	

Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV
Accompanied Children under age 18							
Unaccompanied Children under age 18							
Total Persons	0				0		

Select "Save" to calculate totals

Select "Save & Next" to proceed

by a Listed Subpopulation" referred to above:

Save & Back Save Save & Next

Back Next

Steps

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.

Subpopulations

Chronically Homeless includes disabled adults in households with or without children.

Veterans must be adults; therefore, no entry is allowed for accompanied or unaccompanied children under age 18 for the "Chronically Homeless Veterans" column.

New Project Application

Preface to Part 6: Budget Information

The upcoming pages contain instructions for completing budgets for the New Project component types and activities. Before continuing to the instructions, please review the following information:

- **Reallocation.** 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.
- **Budget Detail screens.** New Project Applications have "Detail" project screens for each budget category: leased units; leased structures; rental assistance; supportive services; operating; and HMIS. (Renewal Project Applications now omit the "Detail" project screens for leased structures, supportive services, operating, and HMIS.)
- **Rental Assistance.** There is only one rental assistance screen to use for short/medium-term or long-term. The user will select which type of rental assistance is applicable to the project from the dropdown provided.
- **FMRs.** Project Applicants will apply for projects in the FY 2021 CoC Program Competition using the FY 2020 FMRs. To ensure consistency between the Grant Inventory Worksheet (GIW) and the FY 2021 application process, GIWs will also use FY 2020 FMRs. Project applications that are selected for a conditional award will be adjusted and awarded based on the FMRs that are in effect at time of the FY 2021 application submission deadline.

24 CFR 578.51(f) provides the following information regarding when updates to the FMR will be made for rental assistance projects, "The amount of rental assistance in each project will be calculated by multiplying the number and size of units proposed by the FMR of each unit on the date the application is submitted to HUD, by the term of the grant."

Project Applicants will need to complete the budget screens that appear on the left menu bar after completing the following:

- "Part 1 – SF-424
- "Part 3 - Project Information, 3A. Project Detail" screen
- "Part 6 – Budget Information, 6A. Funding Request" screen

Throughout the *e-snaps* budget screens, there are gray-shaded cells in which you will not be able to enter or revise data. These cells are typically "Totals" with amounts that are automatically calculated within *e-snaps* when you select the "Save" button. There are a handful of places where the gray-shaded cells contain other information (e.g., "Numbers of Months"), but the information is always populated by *e-snaps*. You must fill in or revise the data in the white cells, except in certain situations (e.g., you would fill in a white cell for "Other" only if it is applicable).

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 all of the following:

- Whether your project is a new, renewal or YHPD project, as reflected on screen **1A. Application Type**.
- The component type selected on screen **3A. Project Detail**.
 - If you have a Permanent Housing (PH) project, the budget screens you will be eligible to complete are also dependent upon how you respond to questions on screen 3B. Project Description. Specifically, Project Applicants must indicate whether they are a PSH or RRH project.
- Your selections on the **6A. Funding Request** screen. Project Applicants must carefully choose the correct funding request as you will only see the budget screen(s) chosen.

Below is a table that shows the eligible activities for New Projects by Component Type.

**New Projects:
Possible Component Types and Eligible Activities**

PH (PSH)	PH (RRH)	Joint TH/PH-RRH	SSO-CE	HMIS
Acquisition/Rehabilitation/New Constructions				
Leased Units		Leased Units		
Leased Structures		Leased Structures		
Rental Assistance	Rental Assistance	Rental Assistance		
Supportive Services	Supportive Services	Supportive Services	Supportive Services	
Operations		Operations		
HMIS	HMIS	HMIS		HMIS

NOTE:

Project Applicants may NOT have any of the following combinations in a single structure or housing unit, although some of these budgets may be combined in a single Project Application because the funding is not used in the same structure or unit, such as in a Joint TH and PH-RRH Project:

- *Acquisition and/or rehabilitation with new construction*
- *Leasing with acquisition, rehabilitation, or new construction*
- *Rental assistance with acquisition, rehabilitation, or new construction*
- *Leasing and rental assistance*
- *Rental assistance and operations*

New Project Application

6A. Funding Request for New Projects

This screen has six questions. The navigational steps in this section go through the questions in order. The options available in Question 5 are determined by your selections on screen 3A. Project Detail. Once you select the activities in Question 5, the appropriate budget screens will populate in the left menu bar.

All Projects: Questions 1 and 2: Readiness and Funding Source

The screenshot shows the '6A. Funding Request' form in the e.Forms system. On the left, a sidebar displays the user 'jsmith-02' and project information: 'New Project Application FY2021', 'Applicant Name: Project Applicant 21', 'Applicant Number: 08', and 'Project Name: FY 2021 New Project'. The main form area contains three questions:

- Question 1: '* 1. Will it be feasible for the project to be under grant agreement by September 15, 2023?' with a 'Yes' dropdown menu.
- Question 1a: '1a. DV Bonus Only: This project can realistically be under grant agreement by September 15, 2022.' with a checked checkbox. A callout box points to this checkbox with the text 'DV Bonus projects select check box'.
- Question 2: '* 2. What type of CoC funding is this project applying for in this CoC Program Competition?' with a dropdown menu showing 'DV Bonus'.

Steps

1. In field 1, select “Yes” or “No” to indicate the Project Applicant's readiness to initiate the project by September 15, 2023.
 - If you select “No,” you will not be able to submit the Project Application.
 - DV Bonus projects will check the box if the project can realistically be under grant agreement by September 15, 2022.
2. In field 2, select one of the following options for how the project will be funded:
 - Reallocation
 - CoC Bonus
 - Reallocation + CoC Bonus
 - DV Bonus

Note: If “Yes” was selected on Screen 3A. Project Detail, field 7, which asks if the new project application is requesting to transition from eligible renewal projects that were awarded through reallocation, “Reallocation” will automatically be selected and is not editable.

NOTE:

PH-PSH is not eligible for DV Bonus funding.

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

Only RRR, SSO and JOINT component types can apply for this funding

New Project Application

The following table identifies the eligible types of new projects for each type of funding source.

	PH-PSH	PH-RRH	Joint	SSO	HMIS	Transition
Reallocation	X	X	X	X	X	X
Bonus	X	X	X	X	X	not eligible
Reallocation and Bonus	X	X	X	X	X	not eligible
DV Bonus	not eligible	X	X	X	not eligible	not eligible

All Projects: Question 3: Indirect Costs

Applicant Number:
155440829

Project Name:
New Project Application
Test FY2021

Project Number:
137110

New Project Application
FY2021

FY2019 New Detailed
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

*** 3. Does this project propose to allocate funds according to an indirect cost rate?**

Indirect cost rate proposals should be submitted as soon as the applicant is notified of a conditional award. Conditional award recipients will be asked to submit the proposal rate during the e-snaps post-award process.

Applicants with an approved indirect cost rate must submit a copy of the approval with this application.

*** 3a. Complete the indirect cost rate table below**

Agency	Indirect Cost Rate	Direct Cost Base	Date approved or enter "NA" if using 10 % de minimis rate

The applicant must complete at least one row in the indirect cost rate schedule.

*** b. Has this rate been approved by your cognizant agency?**

*** c. Do you plan to use the 10% de minimis rate?**

Steps (continued)

3. In field 3, select "Yes" or "No" to indicate if this project proposes to allocate funds according to an indirect cost rate.
 - If "Yes", fields 3a, 3b, and 3c will appear.
 - In field 3a, complete the indirect cost rate schedule.
 - In field 3b, indicate whether the indirect cost rate has been approved by your cognizant agency.
 - In field 3c, indicate whether you plan to use the 10% de minimis rate.

Note: If you select "Yes," indirect cost rate proposals should be submitted as soon as HUD notifies the applicant of a conditional award and no later than three months after the award. HUD will ask conditional award recipients to submit the proposal or approved rate during the e-snaps post-award process. Applicants with an approved indirect cost rate must submit a copy of the approval with this application.

New Project Application

All Projects: Question 4: Grant Term

e.Forms Logout

jsmith-02

New Project Application
FY2021

Applicant Name:
Project Applicant 21
Applicant Number:
08
Project Name:
FY 2021 New Project
Application YYZ
Project Number:
137275

New Project Application
FY2021

6A. Funding Request

* 1. Will it be feasible for the project to be under grant agreement by September 15, 2023? Yes ▾

1a. DV Bonus Only: This project can realistically be under grant agreement by September 15, 2022.

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

Only RRH, SSO and JOINT component types can apply for this funding

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

* 4. Select a grant term: 1 Year ▾

Steps (continued)

4. In field 4, from the dropdown menu, specify the grant term by selecting either "1 Year," "2 Years," "3 Years," "4 Years," "5 Years," or "15 years."

NOTE:

Review the FY 2021 CoC Program Competition NOFO for more information on grant terms at:

- https://www.hud.gov/program_offices/comm_planning/coc/competition.

New Project Application

Individual Project Types: Question 5

NOTE:

For new projects, the number of eligible costs listed in Question 5 depends on the project component selected on screen 3A. Project Detail.

Steps (continued)

5. In field 5, select all the costs for which you are requesting funds for the project. After you select the “Save” button, the left menu bar will populate with a complete list of budget screens that you will need to complete.

PH-PSH Projects

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

- Leased Units
- Leased Structures
- Rental Assistance
- Supportive Services
- Operating
- HMIS

PH-RRH Projects

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

- Rental Assistance
- Supportive Services
- HMIS

Joint TH-RRH Projects

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

- Leased Units
- Leased Structures
- Rental Assistance
- Supportive Services
- Operating
- HMIS

New Project Application

SSO-CE Projects

For new SSO-CE projects, the only eligible activity is Coordinated Entry. Therefore, the only expense categories listed in Question 5 are Supportive Services and HMIS.

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

Supportive Services

HMIS

Dedicated HMIS Projects

New Dedicated HMIS project costs can only be carried out by the HMIS Lead, which is the project applicant or subrecipient for HMIS dedicated funds and that is listed on the HMIS Lead form in the CoC Applicant Profile in *e-snaps*.

HMIS

Part 4 - Housing, Services, and HMIS
4A. Services
4B. Housing Type
Part 5 - Participants
5A. Households
5B. Subpopulations
Part 6 - Budget Information
6A. Funding Request
6G. Operating
6I. Match
6J. Summary Budget

* 6. If conditionally awarded, is this project requesting an initial grant term greater than 12 months?

(13 to 18 months)

* 6a. Select the number of months requested for the initial grant term:

Save & Back Save Save & Next

Back Next

Check Spelling



Steps (continued)

- In field 6, select "Yes" or "No" to indicate whether this project will require an initial grant term greater than 12 months.
 - If "Yes," field 6a will appear.
In field 6a, use the dropdown menu to select the number of months required for the initial grant term.
- Select "Save & Next".


New Project Application

6B. Acquisition/Rehabilitation/New Construction Budget

The following steps provide instruction on completing the "Acquisition/Rehabilitation/New Construction Budget" screen for new projects with a PH-PSH component.

The screenshot shows the e.Forms application interface. On the left is a sidebar with user information (jdoe-02) and application details (New Project Application FY2021, Applicant Name: City and County of San Francisco, Applicant Number: 155440829, Project Name: New Project Application Test FY2021, Project Number: 137110). The main content area is titled "6B. Acquisition/Rehabilitation/New Construction Budget" and contains the following text: "The following list summarizes the total request for each structure. To add a structure to the list, select the  icon. To view or update a structure already listed, select the  icon." Below this text are four input fields for "Total Acquisition:", "Total Rehabilitation:", "Total New Construction:", and "Total Assistance Requested:". A red warning message states: "Total Assistance Requested Amount has to be greater than \$0." Below the input fields is an alphabetic listing from "All" to "Z". A callout box labeled "Add icon" points to the "All" listing. Below the listing is a table with columns: Delete, View, Name of Structure, Street Address 1, Street Address 2, City State, Zip Code, Total Request, Acquisition, Rehabilitation, and New Construction. The table currently contains no items, with the text "This list contains no items" displayed. At the bottom of the main area are buttons for "Save & Back", "Save", "Save & Next", "Back", and "Next".

Steps

1. To add information to this list, select the "Add" icon  above the word "All" at the left side of the alphabetic listing to open the "Acquisition/Rehabilitation/New Construction Detail" screen.
2. The "Acquisition/Rehabilitation/New Construction Budget Detail" screen will appear.

New Project Application

Acquisition/Rehabilitation/New Construction Budget Detail

The screenshot shows the 'Acquisition/Rehabilitation/New Construction Budget Detail' form. On the left is a sidebar with user information (jdoe-02) and a navigation menu. The main content area contains a title bar, a header, and a form with several input fields and a table. The form fields are: Name of Structure, Street Address 1, Street Address 2, City, State (dropdown), and Zip Code. Below these is a table with four rows: 1. Acquisition, 2. Rehabilitation, 3. New Construction, and 4. Total Assistance Requested. The table has a column for 'Assistance Requested'. Below the table are four buttons: Save, Save & Add Another, Save & Back to List, and Back to List. A note above the buttons says 'Click the 'Save' button to automatically calculate the Total Assistance Requested.'

e.Forms Logout

Acquisition/Rehabilitation/New Construction Budget Detail

Complete the following fields related to the funds being requested for acquisition, rehabilitation, and/or new construction of the new project.

* Name of Structure:

* Street Address 1:

Street Address 2:

* City:

* State: -- select --

* Zip Code:

	Assistance Requested
1. Acquisition	<input type="text"/>
2. Rehabilitation	<input type="text"/>
3. New Construction	<input type="text"/>
4. Total Assistance Requested	<input type="text"/>

Click the 'Save' button to automatically calculate the Total Assistance Requested.

Steps

1. Enter the name, street address, city, state, and zip code of the structure.
 - The name of the structure can be as simple as "Structure 1" or something that is descriptive of the project's use of the structure. It does not have to be the legal name of the structure.
2. Enter the amount of grant funds requested for acquisition, rehabilitation, and new construction.
 - Select "Save" and the screen will automatically calculate the Total Assistance Requested.
3. If you are requesting project funds for acquisition, rehabilitation, or new construction for one location only:
 - Select "Save & Back to List" to go back to the "Acquisition/Rehabilitation/New Construction Budget" screen.

If you are requesting project funds for acquisition, rehabilitation, or new construction for another location:

- Select "Save & Add Another." Follow the directions for completing another "Acquisition/Rehabilitation/New Construction Budget Detail" screen as described above.




After you have entered all of the "Acquisition/Rehabilitation/New Construction Budget Detail" screens that your project requires, select "Save & Back to List" to return to the "Acquisition/Rehabilitation/New Construction Budget" screen.

New Project Application

4. After completing all of the “Acquisition/Rehabilitation/New Construction Budget Detail” screens, the “Acquisition/Rehabilitation/New Construction Budget” screen will auto-populate with the budget information you entered, as shown below.
 - Note: Acquisition can be combined with Rehabilitation. However, new construction cannot be combined with acquisition.

Completion of the Acquisition/Rehabilitation/New Construction Budget Screen

After completing all of the “Acquisition/Rehabilitation/New Construction Budget Detail” screens, the “Leased Unit Budget” screen will auto-populate with the budget information you entered.

1. Review the following items on the “Acquisition/Rehabilitation/New Construction Budget” screen.
 - The “Acquisition/Rehabilitation/New Construction Budget” screen should have been auto-calculated with your total acquisition/rehabilitation/new construction budget amount.
 - Each "Acquisition/Rehabilitation/New Construction Budget Detail" screen you entered for each location will appear as a separate entry under the "View" header.
2. If changes are needed, please follow the following guidance:
 - If you want to view and edit any of the “Leased Units Budget Detail” screens, select the “View” icon  next to the appropriate entry.
 - If you have created a "Leased Units Budget Detail" screen in error and want to delete it, select the "Delete" icon  next to the appropriate entry.
 - If the list seems to be missing one or more items select the “Add” icon  and complete additional "Leased Units Budget Detail" screen(s), as discussed previously.
3. If the list is complete, select “Next” at the bottom of the screen. You will proceed to the next budget screen.

New Project Application

6C. Leased Units Budget

Project Applicants must complete the "Leased Units Budget" screen and relevant detail screens if the Project Applicant is applying for leased units funds, and **the recipient has entered or is entering into leases directly with the property owner** for units to house program participants. If the lease will be between the landowner and the participant, the project applicant must complete the rental assistance budget, not the leased units budget.

The following steps provide instruction on completing the "Leased Units Budget" screen.

The screenshot shows the '6C. Leased Units' screen in the e.Forms application. The left sidebar contains user information (jdoe-02) and application details for 'New Project Application FY2021'. The main content area displays a summary of funds requested and a table of units. A callout box highlights the 'Add' icon above the 'All' link in the table header. The table currently shows 'This list contains no items'.

Steps

1. To add information to this list, select the "Add" icon  above the word "All" at the left side of the alphabetic listing to open the "Leased Units Budget Detail" screen.
2. The "Leased Units Budget Detail" screen will appear.

FMR

The Budget Detail screens use the FY 2020 FMRs.

To ensure consistency between the GIW and the FY 2021 application process, GIWs also used FY 2020 FMRs.

Project applications that are selected for a conditional award will be adjusted and awarded based on the FMRs that are in effect at time of the FY 2021 application submission deadline (i.e., the FY 2020 FMRs).

New Project Application

Leased Units Budget Detail

e.Forms
Logout

Leased Units Budget Detail

Instructions: [Show Instructions](#)

In the chart below, enter the appropriate values in the "Number of units" and "HUD Paid Rent" fields.

Metropolitan or non-metropolitan fair market rent area:

Leased Units Annual Budget

Size of Units	Number of units (Applicant)	FMR (Applicant)	HUD Paid Rent (Applicant)	12 months	Total request (Applicant)
SRO	<input type="text"/>	<input type="text"/>	<input type="text"/>	12	\$0
0 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	12	\$0
1 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	12	\$0
2 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	12	\$0
3 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	12	\$0
4 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	12	\$0
5 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	12	\$0
6 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	12	\$0
7 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	12	\$0
8 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	12	\$0
9 Bedroom	<input type="text"/>	<input type="text"/>	<input type="text"/>	12	\$0
Total units and annual assistance requested:					<input type="text" value="0"/>
Grant term:					<input type="text"/>
Total request for grant term:					<input type="text" value="\$0"/>

Click the 'Save' button to automatically calculate totals.

Steps




- Select the FY 2020 Fair Market Rent (FMR) area in which the project is located. The list is sorted by state abbreviation. The selected FMR area will be used to populate the rents in the FMR Area column in the chart below.
- Enter the number of units of each bedroom size for which the project is requesting leased units assistance.
- In the "HUD Paid Rent" column, for each unit size, enter the rent to be paid by the CoC Program grant. This rent can be equal to or below the FMR amount in the previous column - it cannot exceed the FMR amount. Once HUD awards funds to the project, recipients must document compliance with the rent reasonableness requirement explained in section 578.51 of the CoC Program interim rule.
- The 12-month column is fixed. The amount of "HUD Paid Rent" multiplied by the number of units per unit type, multiplied by 12 automatically populates in the "Total Request (Applicant)" column per unit type.
- The "Grant Term" field is populated with the grant term selected on the "6A Funding Request" screen.
- Once you enter figures in each column for the relevant fields, select the "Save" button at the bottom of the screen. The sum of each column will be auto-calculated.

New Project Application

7. If the project is housed in one structure, select “Save & Back to List” to go back to the “Leased Units Budget” screen.
 - If the project is housed in more than one FMR Area, select “Save & Add Another” and repeat steps 1 through 6 for each structure in the project for which you are requesting leased units funds.
 - Once you have completed all of the “Leased Units Budget Detail” screens that your project requires, select “Save & Back to List.”

Completion of Leased Units Budget

After completing all of the “Leased Unit Budget Detail” screens, the “Leased Unit Budget” screen will auto-populate with the budget information you entered.

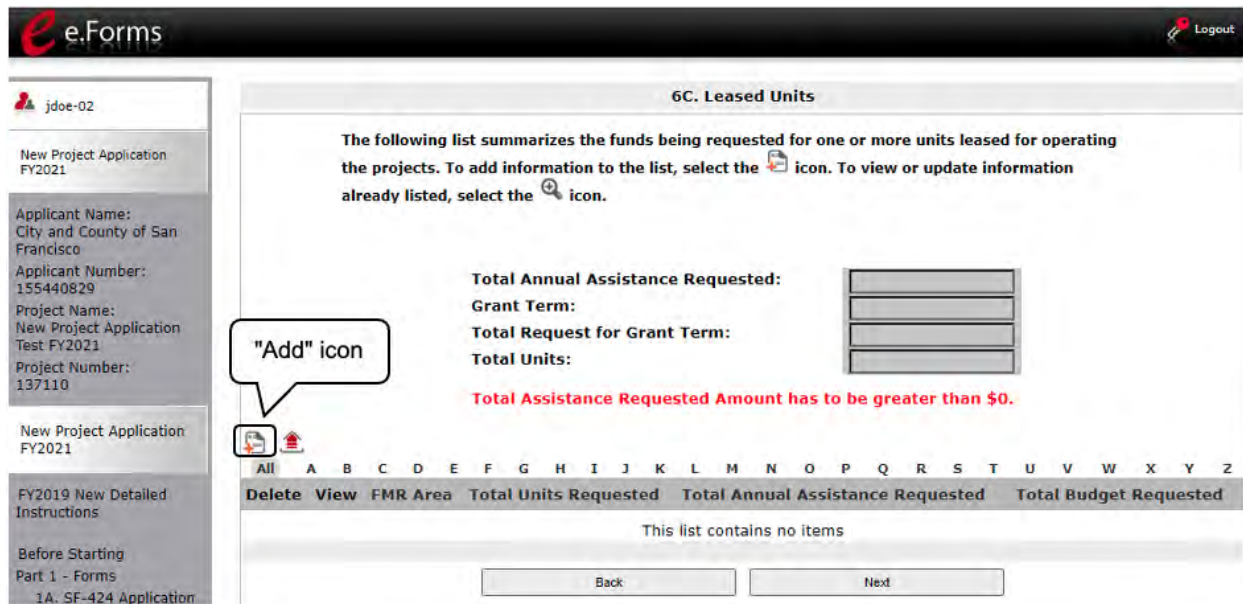
1. Review the following items on the “Leased Units Budget” screen.
 - The “Leased Units Budget” screen should have been populated with your total leased units budget amount.
 - The "Leased Units Budget Detail" information you entered for each location will appear as a separate entry under the "View" header.
2. After completing the "Leased Units Budget Detail" screen(s) and reviewing the "Leased Units Budget" screen, you may want to make changes.
 - If you want to view and edit any of the “Leased Units Budget Detail” screens, select the “View” icon  next to the appropriate entry.
 - If you have created a "Leased Units Budget Detail" screen in error and want to delete it, select the "Delete" icon  next to the appropriate entry.
 - If the list seems to be missing one or more items select the “Add” icon  and complete additional "Leased Units Budget Detail” screen(s), as discussed previously.
3. If the list is complete, select “Next” at the bottom of the screen. You will proceed to the next budget screen.

New Project Application


6D. Leased Structures Budget

Project Applicants that plan to lease structures or portions of structures for housing or supportive services as part of a New project must complete the "Leased Structures Budget" screen.

The following steps provide instructions to complete the "Leased Structures Budget" screen of the Project Application and are relevant for New projects seeking funds for leased structures.



Steps

1. To add information to this list, select the "Add" icon  above the word "All" at the left side of the alphabetic listing to open the "Leased Structures Budget Detail" screen.
2. The "Leased Structures Budget Detail" screen will appear.

FMR

The Budget Detail screens use the FY 2020 FMRs.

To ensure consistency between the GIW and the FY 2021 application process, GIWs also used FY 2020 FMRs.

Project applications that are selected for a conditional award will be adjusted and awarded based on the FMRs that are in effect at time of the FY 2021 application submission deadline (i.e., the FY 2020 FMRs).

New Project Application

Leased Structures Budget Detail

Leased Structures Budget Detail

* Structure Name:

* Street Address 1:

Street Address 2:

* City:

* State: -- select --

* Zip Code:

HUD Paid Rent (per Month):

12 Months:

Total Annual Assistance Requested:

Grant Term:

Total Request for Grant Term:

Click the 'Save' button to automatically calculate the Total Assistance Requested.

HUD Paid Rent (per Month) amount has to be greater than \$0

Save Save & Add Another

Save & Back to List Back to List




Steps

1. Enter the name, street address, city, state, and zip code of the structure. The name of the structure can be as simple as "Structure 1" or something that is descriptive of the use of the structure.
2. Enter the monthly leasing amount in the "HUD Paid Rent (per month)" field. The amount entered must not exceed the monthly rent for comparable structures.
3. The screen will automatically calculate the HUD paid rent multiplied by 12 months to show the "Total Annual Assistance Request."
4. The screen will automatically calculate the "Total Annual Assistance Request" multiplied by the "Grant Term." The "Grant Term" field is populated from screen "6A: Funding Request."
5. If the project will lease one structure only, select "Save & Back to List" to go back to the "Leased Structures Budget" screen.
 - If the project will lease more than one structure, select "Save & Add Another."
 - Follow the directions for completing another "Leased Structures Budget Detail" screen as described in the preceding steps.
 - After you have entered all of the "Leased Structures Budget Detail" screens that your project requires, select "Save & Back to List" to return to the "Leased Structures Budget" screen.

New Project Application

Completion of Leased Structures Budget

After completing all of the “Leased Structures Budget Detail” screens, the “Leased Structures Budget” screen will auto-populate with the budget information you entered.

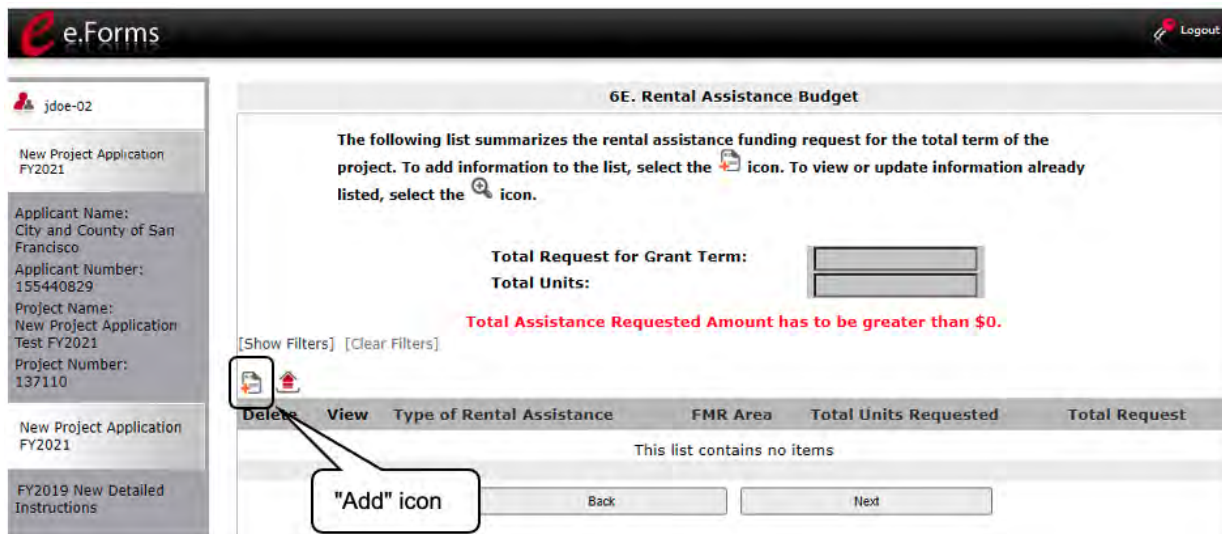
1. Review the following items on the “Leased Structures Budget” screen.
 - The “Leased Structures Budget” screen should have been populated with your total leased structures budget amount.
 - Each "Leased Structures Budget Detail" screen you entered for each location will appear as a separate entry.
2. After completing the "Leased Structures Budget Detail" screen(s) and reviewing the "Leased Structures Budget" screen, you may want to make changes.
 - If you want to view and edit any of the “Leased Structures Budget Detail” screens, select the “View” icon  next to the appropriate entry.
 - If you find that you have created a "Leased Structures Budget Detail" screen in error and want to delete it, select the "Delete" icon  next to the appropriate entry.
 - If the list is missing one or more items, select the “Add” icon  and complete another "Leased Structures Budget Detail" screen, as discussed above.
3. If the list is complete, select “Next” at the bottom of the screen. You will proceed to the next budget screen.

New Project Application

6E. Rental Assistance Budget

Project Applicants that plan to provide rental assistance to participants (short/medium - or long-term) as part of a New project must complete the "Rental Assistance Budget" screen. If you are applying for rental assistance units, the lease agreement will be between the landowner and the participant. If the leases are between the project applicant and the landowner, then the Project Applicant must complete the leased units budget, not the rental assistance budget.

The following steps provide instruction on completing the "Rental Assistance Budget" screen of the New Project Application.



Steps

1. To add information to this list, select the "Add" icon to open the "Rental Assistance Budget Detail" screen.
2. The "Rental Assistance Budget Detail" screen will appear.

FMR

The Budget Detail screens use the FY 2020 FMRs.

To ensure consistency between the GIW and the FY 2021 application process, GIWs also used FY 2020 FMRs.

Project applications that are selected for a conditional award will be adjusted and awarded based on the FMRs that are in effect at time of the FY 2021 application submission deadline (i.e., the FY 2020 FMRs).

New Project Application

Rental Assistance Budget Detail

e.Forms
Logout

jdoo-02

New Project Application
FY2021

Applicant Name:
City and County of San Francisco

Applicant Number:
155440829

Project Name:
New Project Application Test FY2021

Project Number:
137110

New Project Application
FY2021

FY2019 New Detailed 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

Rental Assistance Budget Detail

Instructions: [Show Instructions](#)

* Type of Rental Assistance: -- select --

* Metropolitan or non-metropolitan fair market rent area: -- select --

Size of Units	# of Units (Applicant)	FMR Area (Applicant)	12 Months	Total Request (Applicant)
SRO	<input type="text"/>	x <input type="text"/>	x <input type="text" value="12"/>	= <input type="text" value="\$0"/>
0 Bedroom	<input type="text"/>	x <input type="text"/>	x <input type="text" value="12"/>	= <input type="text" value="\$0"/>
1 Bedroom	<input type="text"/>	x <input type="text"/>	x <input type="text" value="12"/>	= <input type="text" value="\$0"/>
2 Bedrooms	<input type="text"/>	x <input type="text"/>	x <input type="text" value="12"/>	= <input type="text" value="\$0"/>
3 Bedrooms	<input type="text"/>	x <input type="text"/>	x <input type="text" value="12"/>	= <input type="text" value="\$0"/>
4 Bedrooms	<input type="text"/>	x <input type="text"/>	x <input type="text" value="12"/>	= <input type="text" value="\$0"/>
5 Bedrooms	<input type="text"/>	x <input type="text"/>	x <input type="text" value="12"/>	= <input type="text" value="\$0"/>
6 Bedrooms	<input type="text"/>	x <input type="text"/>	x <input type="text" value="12"/>	= <input type="text" value="\$0"/>
7 Bedrooms	<input type="text"/>	x <input type="text"/>	x <input type="text" value="12"/>	= <input type="text" value="\$0"/>
8 Bedrooms	<input type="text"/>	x <input type="text"/>	x <input type="text" value="12"/>	= <input type="text" value="\$0"/>
9 Bedrooms	<input type="text"/>	x <input type="text"/>	x <input type="text" value="12"/>	= <input type="text" value="\$0"/>
Total Units and Annual Assistance Requested				<input type="text" value="0"/>
Total Request for Grant Term				<input type="text" value="1 Year"/>
				<input type="text" value="\$0"/>

Click the 'Save' button to automatically calculate totals.

Steps




1. Select the "Type of Rental Assistance:"—PRA, TRA, or SRA. (project-based rental assistance, tenant-based rental assistance, or sponsor-based rental assistance).
2. Select the FY 2020 FMR area in which the project is located. The list is sorted by state abbreviation. The selected FMR area will be used to populate the rents in the FMR Area column in the chart below.
3. Enter the number of units of each bedroom size for which the project is requesting rental assistance.
4. The 12-month column is fixed. The amount shown in the FMR column multiplied by the number of units per unit type, multiplied by 12 automatically populates in the "Total Request (Applicant)" column per unit type.
5. After you enter figures in the "# of Units" column for the relevant fields, select the "Save" button at the bottom. The sum of each column will be auto-calculated.
6. The "Grant Term" field is populated based on the grant term selected on the "Funding Request" screen and will be read only.

New Project Application

7. The "Total Request for Grant Term" field is calculated based on the per month rent entered in the first field, multiplied by 12 months, multiplied by the grant term.
8. If the project is requesting rental assistance for one location, select "Save & Back to List" to go back to the "Rental Assistance Budget" screen.
 - If the project is requesting rental assistance for units in another location, select "Save & Add Another" and repeat steps 1 through 7 for each structure in the project for which you are requesting rental assistance funds.
 - Once you have completed all of the "Rental Assistance Budget Detail" screens that your project requires, select "Save & Back to List."

Completion of Rental Assistance Budget

After completing all of the "Rental Assistance Budget Detail" screens, the "Rental Assistance Budget" screen will populate with the budget information you entered.

1. Review the following items on the "Rental Assistance Budget" screen.
 - The "Rental Assistance Budget" screen should have been auto-calculated with your total rental assistance total request for the grant term.
 - Each "Rental Assistance Detail" screen you entered will appear as a separate entry under the "View" header.
2. After completing the "Rental Assistance Budget Detail" screen(s) and reviewing the "Rental Assistance Budget" screen, you may want to make changes.
 - If you want to view and edit any of the "Rental Assistance Budget Detail" screens, select the "View" icon  next to the appropriate entry.
 - If you find that you have created a "Rental Assistance Budget Detail" screen in error and want to delete it, select the "Delete" icon  next to the appropriate entry.
 - If the list is missing one or more items, select the "Add" icon  and complete a "Rental Assistance Budget Detail" screen, as discussed in the previous section.
3. If the list is complete, select "Next" at the bottom of the screen. You will proceed to the next budget screen.

New Project Application

6F. Supportive Services Budget

The following steps provide instruction to complete the Supportive Services Budget for new projects. Please note that the Supportive Services Budget Detail screen appears only for new projects.

NOTE:

For a description of the categories listed on this screen, please review the CoC Program interim rule at

- <https://www.govinfo.gov/content/pkg/FR-2016-09-21/pdf/2016-22589.pdf>.

6F. Supportive Services Budget

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

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs		
2. Assistance with Moving Costs		
3. Case Management		
4. Child Care		
5. Education Services		
6. Employment Assistance		
7. Food		
8. Housing/ Counseling Services		
9. Legal Services		
10. Life Skills		
11. Mental Health Services		
12. Outpatient Health Services		
13. Outreach Services		
14. Substance Abuse Treatment Services		
15. Transportation		
16. Utility Deposits		
17. Operating Costs		
Total Annual Assistance Requested		\$0
Grant Term		1 Year
Total Request for Grant Term		\$0

Click the 'Save' button to automatically calculate totals.
Total Request for Grant Term must be greater than \$0.

Save & Back Save Save & Next

Back Next

Steps

1. There are seventeen (17) budget categories on the Supportive Services Budget. For each applicable category, enter the following information:
 - Narrative description of up to 400 characters under the quantity column. Be brief and use abbreviations as much as possible.
 - Dollar request for each year of the grant term.
 - o Note: #17, Operating Costs is for facilities providing only supportive services.
2. Select "Save."
3. The "Total Annual Assistance Requested" field is automatically calculated based on the sum of the annual assistance requests entered for each activity.
4. The "Grant Term" field is prepopulated from the "6A. Funding Request" screen and is a "read only" field.
5. The "Total Request for Grant Term" field is automatically calculated based on the "Total Annual Assistance Requested" multiplied by the grant term.
6. Select "Save & Next" to continue to the next budget form.

New Project Application

6G. Operating Budget

The following steps provide instruction to complete the "Operating Budget" screen of the New Project Applications. Please note that the Operating Budget Detail screen appears only for new projects.

NOTE:

For a description of the categories listed on this screen, please review the CoC Program interim rule at

- <https://www.govinfo.gov/content/pkg/FR-2016-09-21/pdf/2016-22589.pdf>.

6G. Operating

Instructions: [Show Instructions](#)

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

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Maintenance/Repair		
2. Property Taxes and Insurance		
3. Replacement Reserve		
4. Building Security		
5. Electricity, Gas, and Water		
6. Furniture		
7. Equipment (lease, buy)		
Total Annual Assistance Requested		\$0
Grant Term		1 Year
Total Request for Grant Term		\$0

Click the 'Save' button to automatically calculate totals.
Total Request for Grant Term must be greater than \$0.

Save & Back Save Save & Next

Back Next

Steps

1. There are seven (7) budget categories on the Operating Budget. For each applicable category, enter the following information:
 - Narrative description of up to 400 characters under the quantity column. Be brief and use abbreviations as much as possible.
 - Dollar amount requested for each year of the grant term.
2. Select "Save."
3. The "Total Annual Assistance Requested" field is automatically calculated based on the sum of the annual assistance requests entered for each activity.
4. The "Grant Term" field is populated based on the grant term selected on the "6A. Funding Request" screen and is a "read only" field.
5. The "Total Request for Grant Term" field is automatically calculated based on the "Total Annual Assistance Requested" multiplied by the grant term.
6. Select "Save & Next" to proceed to the next budget form.

New Project Application

6H. HMIS Budget

The following steps provide instruction to complete the "HMIS Budget" screen of the new Project Applications. Please note that the HMIS Budget Detail screen appears only for new projects.

NOTE:

For a description of the categories listed on this screen, please review the CoC Program interim rule at:

- <https://www.govinfo.gov/content/pkg/FR-2016-09-21/pdf/2016-22589.pdf>.

The screenshot shows the '6H. HMIS Budget' screen in the e.Forms application. The sidebar on the left contains user information for 'jdoe-02' and navigation options for 'New Project Application FY2021' and 'FY2019 New Detailed Instructions'. The main content area includes instructions to show instructions and a note that a quantity and description must be entered for each requested cost. A table with three columns: 'Eligible Costs', 'Quantity AND Description (max 400 characters)', and 'Annual Assistance Requested'. The table lists five categories: 1. Equipment, 2. Software, 3. Services, 4. Personnel, and 5. Space & Operations. Below the table are summary fields: 'Total Annual Assistance Requested: \$0', 'Grant Term: 1 Year', and 'Total Request for Grant Term: \$0'. A red message states: 'Click the 'Save' button to automatically calculate totals. Total Request for Grant Term must be greater than \$0.' At the bottom, there are buttons for 'Save & Back', 'Save', 'Save & Next', 'Back', and 'Next'.

Steps

1. For each of the five (5) budget categories, enter the following:
 - Narrative description of up to 400 characters under the quantity column. Be brief and use abbreviations as much as possible.
 - Dollar request for each year of the grant term.
2. When you select "Save" on this screen, the "Total Annual Assistance Requested" field is automatically calculated based on the sum of the annual assistance requests entered for each activity.
3. The "Grant Term" field is populated based on the grant term selected on the "Funding Request" screen and is a "read only" field.
4. When you select "Save" on this screen, the "Total Request for Grant Term" field is automatically calculated based on the "Total Annual Assistance Requested" multiplied by the grant term.
5. Select "Save & Next" to proceed to the "Sources of Match" screen.

New Project Application


6I. Sources of Match

The following steps provide instruction on completing the “Sources of Match” screen of the new project applications.

See 24 CFR 578.73 regarding match requirements to ensure in-kind match reported is documented appropriately if this method of match is selected.

The screenshot shows the '6I. Sources of Match' screen in the e.Forms application. The sidebar on the left contains navigation options for 'New Project Application FY2021' and 'FY2019 New Detailed Instructions'. The main content area includes a 'Summary for Match' section with three rows: 'Total Amount of Cash Commitments: \$0', 'Total Amount of In-Kind Commitments: \$0', and 'Total Amount of All Commitments: \$0'. Below this is a dropdown menu for '1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project?' with 'Yes' selected. A callout box points to this dropdown, stating 'Field 1a appears only if field 1 is "Yes."'. Below the dropdown is a text input field for '1a. Briefly describe the source of the program income: (limit 1000 characters)'. Another callout box points to an 'Add' icon (a document with a plus sign) above the table, stating '"Add" icon'. The table has columns for 'Delete', 'View', 'Type', 'Source', 'Name of Source', and 'Amount of Commitments'. There is one row in the table with a '1' in the 'Name of Source' column. At the bottom of the table are buttons for 'Save & Back', 'Save', 'Save & Next', 'Back', and 'Next'.

Steps

1. In field 1, select "Yes" or "No" to indicate whether the project generates program income that will be used as match.
 - If "Yes," field 1a will appear.
In field 1a, describe the source of program income.
2. To add information to the Match list, select the "Add" icon  to open the “Source of Match Details” screen.
3. The “Sources of Match Details” screen will appear.

New Project Application

Sources of Match Detail

The screenshot shows the 'e.Forms' application interface. On the left is a sidebar with the user 'jdoe-02' and application details: 'New Project Application FY2021', 'Applicant Name: City and County of San Francisco', 'Applicant Number: 155440829', 'Project Name: New Project Application Test FY2021', and 'Project Number:'. The main content area is titled 'Sources of Match Detail' and contains four required fields: 1. 'Type of Match commitment' (dropdown menu), 2. 'Source' (dropdown menu), 3. 'Name of Source' (text input with a note: '(Be as specific as possible and include the office or grant program as applicable)'), and 4. 'Amount of Written Commitment' (text input). Below the fields are four buttons: 'Save', 'Save & Add Another', 'Save & Back to List', and 'Back to List'. A 'Logout' link is visible in the top right corner of the application header.

Steps

1. In field 1, from the dropdown menu, enter the type of commitment "Cash" or "In-Kind" to be provided for the project.
 - If "In-Kind" is selected, before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.
 - The MOU can be uploaded as an attachment with your application or submitted to HUD prior to grant execution.
2. In field 2, enter the type of source. Select "Private" or "Government" to denote the source of the contribution.
3. In field 3, enter the name of the entity providing the contribution. Be as specific as possible and include the office or grant program as applicable.
4. In field 4, enter the total dollar value of the written commitment.
5. If this is the project's only source of match, select "Save & Back to List" to go back to the "Sources of Match" screen.
 - If the project has another source of match, select "Save & Add Another" and repeat steps 1 through 4 for each source of match.
 - Once you have completed all of the "Sources of Match Details" screens that your project requires, select "Save & Back to List."

New Project Application




Completion of Sources of Match

After completing all of the “Sources of Match Detail” screens, the “Sources of Match” screen will auto-populate with the information you entered.

1. Review the following items on the “Sources of Match” screen.
 - The “Sources of Match” screen should have been calculated with your total sources of match amounts.
 - Each "Match Detail" screen you entered will appear as a separate entry.
2. Select “Save & Next” to proceed to the next budget form.

NOTE:

After completing the "Sources of Match Detail" screen(s) and reviewing the "Sources of Match" screen, you may want to make changes.

- *If you want to view and edit any of the “Sources of Match Detail” screens, select the “View” icon  next to the appropriate entry.*
- *If you find that you have created a "Sources of Match Detail" screen in error and want to delete it, select the "Delete" icon  next to the appropriate entry.*
- *If the list seems to be missing one or more items, select the “Add” icon.  and complete a "Sources of Match Detail" screen as discussed in the navigational steps.*

New Project Application

6J. Summary Budget

The "Summary Budget" screen summarizes the funding requested for each year of the grant term. You will see all of the possible activities for which you can request new project funding, but amounts will show only for those activities for which you completed individual budgets.

You will not enter any information in the gray-shaded fields, as these fields will be automatically populated from the information you entered into the individual budget screens; however, the appropriate amount of administrative costs must be entered in the applicable fields.

The following screenshot is for the New Project Application "Summary Budget" screen.

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

Eligible Costs	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Total Assistance Requested for Grant Term (Applicant)
1a. Acquisition			\$0
1b. Rehabilitation			\$0
1c. New Construction			\$0
2a. Leased Units	\$0	1 Year	\$0
2b. Leased Structures	\$0	1 Year	\$0
3. Rental Assistance	\$0	1 Year	\$0
4. Supportive Services	\$0	1 Year	\$0
5. Operating	\$0	1 Year	\$0
6. HMIS	\$0	1 Year	\$0
7. Sub-total Costs Requested			\$0
8. Admin (Up to 10%)			
9. Total Assistance Plus Admin Requested			\$0
10. Cash Match			\$0
11. In-Kind Match			\$0
12. Total Match			\$0
13. Total Budget			\$0

Click the 'Save' button to automatically calculate totals.

Buttons: Save & Back, Save, Save & Next, Back, Next

Steps

1. Review the funding amounts in the gray-shaded fields. If they are not correct, navigate to the individual budget screens and update them. You cannot edit gray-shaded fields on the Summary Budget screen.
2. In the "Admin." field (line 8 for new projects), enter the amount of administrative costs for which you are applying. Administrative costs may not exceed 10 percent of the line "Sub-total Costs Requested."
3. "Save & Next" at the bottom of the screen. You will proceed to the Part 7 - "Attachment(s) & Certification" screen.

NOTE:

*The total value of the sum of "Cash Match" and "In-Kind Match" must equal 25 percent of the total amount requested for all activities **except for leased units and leased structures, but including administration costs.***

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.

The screenshot shows the '7A. Attachment(s)' screen in the e.Forms application. On the left, a sidebar displays user information for 'jdoe-02' and application details for 'New Project Application FY2021'. The main area features a table with the following data:

Delete	Document Type	Required?	Download	Document Description	Date Attached
	1) Subrecipient Nonprofit Documentation	No	--		No Attachment
	2) Other Attachment(s)	No	--		No Attachment
	3) Other Attachment(s)	No	--		No Attachment

Below the table are 'Back' and 'Next' buttons. A 'Select a link' box is positioned above the first row of the table.

Steps

1. Select the document name under "Document Type."
2. The "Attachment Details" screen will appear.

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.


The screenshot shows the 'Attachment Details' form in the e.Forms application. The sidebar on the left displays user information (jdoe-02) and application details (New Project Application FY2021, Applicant Name: City and County of San Francisco, Applicant Number: 155440829, Project Name: New Project Application Test FY2021, Project Number: 137110). The main form area includes a 'Document Description' field, a 'File Name' field with a 'Choose File' button, and a 'Maximum Size' of 5 MB. A callout box points to the 'Document Description' field with the text 'Enter the Description, including the Project Number'. Below the fields are buttons for 'Save', 'Save & Back to List', and 'Back to List'.

Steps

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.
 - The allowable formats are: zip, xls, xlsx, wpd, pdf, zipx, doc, ZIP*, docx, rtf, txt.
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.

New Project Application

7A. In-Kind MOU Attachment

Screen 7A appears when Project Applicants add a match entry for "In-Kind" match (6l. Sources of Match Detail screen, question 3. "Type of Source").

- 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.

The screenshot shows the e.Forms application interface. At the top left is the 'e.Forms' logo. On the right is a 'Logout' button. A sidebar on the left contains the user's name 'jdoe-02', the application title 'New Project Application FY2021', and applicant information: 'Applicant Name: City and County of San Francisco' and 'Applicant Number: 155440829'. The main content area is titled '7A. In-Kind MOU Attachment'. It features a table with the following columns: 'Delete', 'Document Type', 'Required?', 'Download', 'Document Description', and 'Date Attached'. A single row is visible with 'In-Kind Match MOU' in the 'Document Type' column, 'No' in the 'Required?' column, and 'No Attachment' in the 'Date Attached' column. A 'Back' button is located below the 'Required?' column, and a 'Next' button is below the 'Date Attached' column. A callout box with the text 'Select the link.' points to the 'In-Kind Match MOU' link in the table.

Delete	Document Type	Required?	Download	Document Description	Date Attached
	In-Kind Match MOU	No	--		No Attachment

Steps

1. Select the document name under "Document Type."
2. The "Attachment Details" screen will appear. Follow the instructions for uploading attachments under 7A. Attachments.

New Project Application

7D. Certification

The Project Applicant must certify that the proposed program will comply with the various laws as outlined in the CoC Program Competition NOFO. 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.

7D. Certification
Part 8 - Submission Summary
8B. Summary

View Applicant Profile

Export to PDF
Get PDF Viewer

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).

* Active SAM Status Requirement.
I certify that our organization has an active System for Award Management (SAM) registration as required by 2 CFR 200.300(b) at the time of project application submission to HUD and will ensure this SAM registration will be renewed annually to meet this requirement.

Steps

1. Review sections A and B on the screen.
 - If you are unable to certify to any of the statements in this certification, provide an explanation in the text box.
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 the check box to certify your organization has an active System for Award Management (SAM) registration.
9. 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 navigational 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.

The Submission Summary screen for the HMIS Project Application looks different because it has different screens specific to HMIS.

eForms Logout

8B. Submission Summary

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

Complete	Page	Last Updated	Mandatory
--	1A. SF-424 Application Type	No Input Required	No
--	1B. SF-424 Legal Applicant	No Input Required	No
--	1C. SF-424 Application Details	No Input Required	No
✓	1D. SF-424 Congressional District(s)	06/01/2021	Yes
✓	1E. SF-424 Compliance	06/01/2021	Yes
✓	1F. SF-424 Declaration	06/01/2021	Yes
✓	1G. HUD 2880	06/01/2021	Yes
✓	1H. HUD 50070	06/01/2021	Yes
✓	1I. Cert. Lobbying	06/01/2021	Yes
✓	1J. SF-LLL	06/02/2021	Yes
✗	2A. Subrecipients	Please Complete	Yes
✗	2B. Experience	Please Complete	Yes
✗	3A. Project Detail	Please Complete	Yes
✗	3B. Description	Please Complete	Yes
✓	3C. Expansion	06/04/2021	Yes
✗	4A. Services	Please Complete	Yes
✗	4B. Housing Type	Please Complete	Yes
✗	5A. Households	Please Complete	Yes
--	5B. Subpopulations	No Input Required	No
✗	6A. Funding Request	Please Complete	Yes
✗	6C. Operating	Please Complete	Yes
✗	6I. Match	Please Complete	Yes
--	6J. Summary Budget	No Input Required	No
--	7A. Attachment(s)	No Input Required	No
--	7A. In-Kind MOU Attachment	No Input Required	No
✗	7D. Certification	Please Complete	Yes

Notes:

- DUNS number must be only 9 digits, or 13 digits with a 4-digit extension
- 2A. Subrecipients list contains 1 incomplete item.
- Enter a value greater than zero for at least one project milestone.
- Please enter all values for at least one line item and leave no incomplete line items.
- At least 1 Geo must be selected
- 4B. Housing Type list contains 1 incomplete item.
- At least one person in the Households Grid must be served.
- Total Assistance Requested Amount has to be greater than \$0.
- 6I. Match list contains 2 incomplete items. [12]

Back Next

Export to PDF
Get PDF Viewer
Submit

Inactive "Submit" button

New Project Application

Steps

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

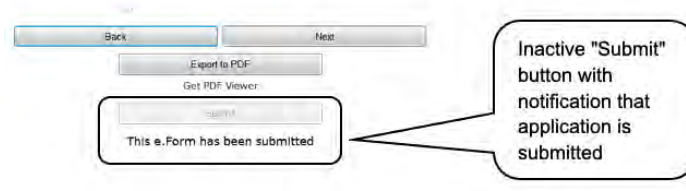
The following image shows an active "Submit" button on the Project Application "Submission Summary."



Steps

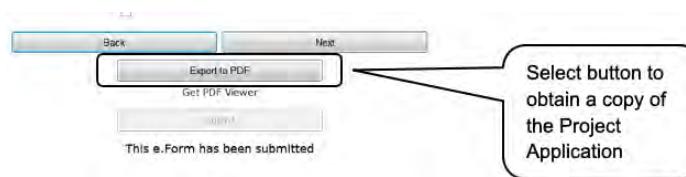
1. If you are not already on the "Submission Summary" screen, select it on the left menu bar.
2. Select the "Submit" button.
3. Notify the Collaborative Applicant that you have submitted your Project Application.

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.



Steps

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

Troubleshooting 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
✓	1E. SF-424 Compliance	06/01/2021	Yes
✓	1F. SF-424 Declaration	06/01/2021	Yes
✓	1G. HUD 2880	06/01/2021	Yes
✓	1H. HUD 50070	06/01/2021	Yes
✓	1I. Cert. Lobbying	06/01/2021	Yes
✓	1J. SF LLL	06/02/2021	Yes
✗	2A. Subrecipients	Please Complete	Yes
✗	2B. Experience	Please Complete	Yes
✗	3A. Project Detail	Please Complete	Yes
✗	3B. Description	Please Complete	Yes
✓	3C. Expansion	06/04/2021	Yes
✗	4A. Services	Please Complete	Yes
✗	4B. Housing Type	Please Complete	Yes
✗	5A. Households	Please Complete	Yes
--	5B. Subpopulations	No Input Required	No
✗	6A. Funding Request	Please Complete	Yes
✗	6G. Operating	Please Complete	Yes
✗	6I. Match	Please Complete	Yes
--	6J. Summary Budget	No Input Required	No
--	7A. Attachment(s)	No Input Required	No
--	7A. In-Kind MOU Attachment	No Input Required	No
✗	7D. Certification	Please Complete	Yes

Notes:

- DUNS number must be only 9 digits, or 13 digits with a 4-digit extension
- 2A. Subrecipients list contains 1 incomplete item.
- Enter a value greater than zero for at least one project milestone.
- Please enter all values for at least one line item and leave no incomplete line items.
- At least 1 Geo must be selected
- 4B. Housing Type list contains 1 incomplete item.
- At least one person in the Households Grid must be served.
- Total Assistance Requested Amount has to be greater than \$0.
- 6I. Match list contains 2 incomplete items. [12]

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

New Project Application

Steps

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:

Steps

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.

Steps—Who


1. Either Collaborative Applicant or Project Applicant

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 e-snaps.

 - 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.
 - If the Collaborative Applicant requests a change, the Collaborative Applicant should contact the applicant.
2. Collaborative Applicant

The Collaborative Applicant will notify the Project Applicant (via email or phone) that the Project Application has been sent back for changes.
3. Project Applicant

After the Project Application has been sent back for amendment, any person who is an authorized e-snaps user with the Project Applicant's organization will be able to reopen the project.

 - The following actions are taken by the applicant once the Collaborative Applicant has released the Project Application:
 - Log in to e-snaps.
 - Select “Submissions” on the left menu bar.
 - Find the Project Application that was sent back to the applicant.
 - Review the list under the Project Name column, or use the Project Name dropdown menu and “Filter” button.
 - The Project Name for the Project Application will be listed, but it will no longer have a date under the “Date Submitted” column.
 - Select the “Open Folder” icon  to the left of the project with no submission date.
 - Make the required change(s), saving each form as it is revised.
 - Select the “Submit” button.
 - Notify the Collaborative Applicant that the Project Application has been re-submitted.
4. Collaborative Applicant

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.

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 2021 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 HUD.gov and *e-snaps* webpages at:

- https://www.hud.gov/program_offices/comm_planning/coc/competition
- <https://www.hudexchange.info/programs/e-snaps/>