

CITY OF WORCESTER
2014 ESG PROGRAM GUIDELINES
[June 13, 2013]

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1. Introduction

1.1 In accordance with federal regulations set forth in 24 CFR 576, including but not limited to 24 CFR 576.400(e), the following ESG Program Guidelines (“Guidelines”) for the provision of Emergency Solutions Grant (“ESG”) assistance are adopted for all ESG funded contracts commencing July 1, 2014 between the City of Worcester and its subrecipient agencies. Notwithstanding any provision to the contrary, these Guidelines are intended solely for the convenience of the City’s subrecipients, and not to limit or alter the requirements of applicable federal, state or local laws, regulations or ordinances (collectively “Law”). Additionally, these Guidelines do not limit or alter the requirements of any contract between the City and any subrecipient. In all instances, the subrecipient shall comply fully with the requirements of the applicable contract, as well as applicable Law and the grant agreement between HUD and the City (“Grant Agreement”). In the event of any conflict between these Guidelines and said Law or Grant Agreement requirements, the applicable Law and the requirements of the Grant Agreement shall prevail over these Guidelines.

1.2 The ESG program provides funding to: (1) engage homeless individuals and families living on the street; (2) improve the number and quality of emergency shelters for homeless individuals and families; (3) help operate these shelters; (4) provide essential services to shelter residents; (5) rapidly re-house homeless individuals and families; and (6) prevent families and individuals from becoming homeless.

1.3 ESG subrecipients are required, to the full extent possible, to coordinate ESG activities with other programs targeted towards homeless individuals and families, as well as mainstream housing, health, social services, employment, education and youth programs for which homeless and at-risk families and individuals may be eligible. Agencies with which Subrecipients shall coordinate may include, for example, the Continuum of Care, HUD-Veteran Affairs Supportive Housing, Education for Homeless Children and Youth, Health Care for the Homeless, Runaway and Homeless Youth, Homeless Veterans Reintegration, Section 8, Public Housing, HOME Investment Partnership, the Workforce Investment Act, and Temporary Assistance For Needy Families programs.

2. Minimum Program Eligibility Criteria

2.1 The subrecipient shall conduct an initial evaluation to determine the eligibility of each individual or family for ESG assistance and the types of assistance needed to regain stability in permanent housing.

2.2 ESG assistance is open to individuals and families **from the City of Worcester** who meet the definitions of either being homeless or at-risk of homelessness. Family ESG assistance is reserved for households with children under age 21 or households headed by a pregnant woman who meet the appropriate eligibility criteria. All participants must meet the required income eligibility criteria as follows:

- For **Rapid Re-Housing** assistance, there is no income restriction for households at initial evaluation. However, at re-evaluation – **not less than annually** – household income must be below 30% AMI.
- For **Homelessness Prevention** assistance, households must have an income **below 30% AMI at initial evaluation**, and have no other housing options, financial resources, or support networks. At re-evaluation - **not less than quarterly** - the household must have an annual income below 30% AMI.
- The 30% AMI limit does **not** apply to program participants who are being served under the Emergency Shelter or Street Outreach components.

2.3 Prior to providing services with ESG funds, subrecipients shall evaluate and clearly document each household's income. The subrecipient shall determine the level of funding for each program participant through an initial intake assessment prior to providing services with ESG funds. **Participants are not eligible if they are already receiving the same type of financial assistance** (i.e., prevention, re-housing, or stabilization) **during the same time period from another federal or state source**. When the participant's income or other circumstances change (e.g. changes in household composition), the subrecipient shall re-evaluate the participant's eligibility and the amount and types of assistance the participant needs.

2.4 The subrecipient shall verify and document at the time of intake an individual's/family's homeless status. The priority for verification is as follows: third party documentation first, intake worker observations second, and certification from the person seeking assistance third. However, lack of third party documentation shall not prevent an individual or family from being immediately admitted to emergency shelter, receiving street outreach services, or being immediately admitted to shelter or receiving services provided by a victim service provider. Records contained in an HMIS or comparable database used by victim service or legal service providers **and** intake worker observations are acceptable evidence of third-party documentation **if** the database retains an auditable history of all entries, including the person who entered the data, the date of entry, changes made and if the database prevents overrides or changes of dates.

2.5 HMIS participation is a mandatory ESG requirement except for domestic violence and legal assistance providers as set forth in 24 CFR 576.107. All clients receiving ESG assistance must be reported in an approved HMIS system.

3. Limits of Funding Assistance

3.1 For both prevention and rapid re-housing activities, subrecipients shall provide participants with a fixed amount of financial assistance, **up to a maximum of \$4,000 per household per 24 months**. ESG subrecipients may exercise reasonable discretion within this maximum and in accordance with other applicable regulations regarding the amount of rental and utilities assistance provided, as well as the share that participants are required to pay, based on the financial needs of the individual. Agencies may request a waiver to the \$4,000 maximum per household limit in writing to the City of Worcester under hardship circumstances only. Approval of this waiver is solely at the discretion of the City.

3.2 Within this limit and applying the criteria set forth above, subrecipients may make the assistance available in various forms, including assistance for one-time costs such as first and last month's rent and/or security deposit or in the form of monthly rent supplements. Program participants receiving project-based rental assistance must have a lease for a period not less than one year, regardless of the length of the rental assistance.

3.3 Subrecipients, depending on the resources available for prevention and applying the criteria set forth above, shall determine the extent and type of assistance that will best assist households maintain their tenancies. However, subrecipients using ESG funds **may not authorize any assistance** to households other than immediate emergency shelter **prior to obtaining all required documentation** as specified in the HUD ESG Regulations located at 24 CFR 576.

3.4 Standards for determining the share of rent and utilities that each program participant must pay, if any, will be based on the following:

- Current Fair Market Rent (FMR) limits per 24 CFR 576.106 (d) when rental assistance is provided (only clients receiving security deposit assistance and/or assistance with rental arrears assistance are exempt from this requirement under homeless prevention contracts); and
- Rent reasonableness, which takes the neighborhood into account ;

3.5 The Subrecipient is also required to comply with the following when providing rental assistance:

- Minimum habitability standards;
- Visual lead paint inspections; and
- Rental assistance agreement and lease between property manager and tenants as well as owner of property and agency.

3.6 **The subrecipient is expressly prohibited from providing rental assistance to a client if that client is already receiving rental assistance from another public source for the same time period** (with the exception of a one time payment of up to 6 months of rental arrears).

4. Definitions of Selected Terms

4.1 As set forth in 24 CFR 576.2, **the McKinney-Vento Act defines "homeless" as:**

(1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- (i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping

accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;

(ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or

(iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

(2) An individual or family who will imminently lose their primary nighttime residence, provided that:

(i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;

(ii) No subsequent residence has been identified; and

(iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing;

(3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:

(i) Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)) or section 725 of the McKinney–Vento Homeless Assistance Act (42 U.S.C. 11434a);

(ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;

(iii) Have experienced persistent instability as measured by two moves or more during the 60–day period immediately preceding the date of applying for homeless assistance; and

(iv) Can be expected to continue in such status for an extended period of time because

of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse (including neglect), the presence of a child or youth with a disability, or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment; or

(4) Any individual or family who:

(i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;

(ii) Has no other residence; and

(iii) Lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, to obtain other permanent housing.

4.2 As set forth in 24 CFR 576.2, **the term “At-Risk of Homelessness” is defined as:**

(1) An individual or family who:

(i) Has an annual income below 30 percent of median family income for the area, as determined by HUD;

(ii) Does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place described in paragraph (1) of the “homeless” definition in this section; and

(iii) Meets one of the following conditions:

(A) Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance;

(B) Is living in the home of another because of economic hardship;

(C) Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance;

(D) Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by Federal, State, or local government programs for low-income individuals;

(E) Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons or lives in a larger housing unit in which there reside more than 1.5 persons reside per room, as defined by the U.S. Census Bureau;

(F) Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or

(G) Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient's approved consolidated plan;

(2) A child or youth who does not qualify as “homeless” under this section, but qualifies as “homeless” under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(m)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15)); or

(3) A child or youth who does not qualify as “homeless” under this section, but qualifies as “homeless” under section 725(2) of the McKinney–Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), and the parent(s) or guardian(s) of that child or youth if living with her or him.

5. Eligible Activities

5.1 Emergency Solution Grant funding can be used for five program activities as set forth in 24 CFR 576.100(a): street outreach, emergency shelter, homelessness prevention, rapid re-housing assistance, and HMIS. These activities are further detailed in Sections 6 through 9, below.

6. Street Outreach

6.1 Street outreach, as set forth in 24 CFR 576.101, consists of the costs of providing essential services necessary to reach out to unsheltered homeless people, connect them with emergency shelter, housing, or critical services, and provide urgent, non facility-based care to unsheltered homeless people who are unwilling or unable to access emergency shelter, housing, or an appropriate health facility.

6.2 Eligible Street Outreach Activities (in accordance with federal regulations Part 576 Emergency Solutions Grants Programs, Subpart B) include:

1. Engagement;
2. Case Management;

3. Emergency Mental Health Services; and
4. Transportation

7. Emergency Shelter

7.1 The Emergency Shelter component of ESG, as set forth in 24 CFR 576.102, may be used to provide essential services to homeless families and individuals in emergency shelters, to renovate buildings to be used as emergency shelter for homeless families and individuals, and to operate emergency shelters.

7.2. **Emergency Shelter Services** are essential services to emergency shelter residents. These services may include case management, childcare, employment assistance, life skills, behavioral health services. Individuals and families must be verified as literally homeless or fleeing/attempting to flee domestic violence. There is no income threshold at intake for this activity. ESG funds may be used to provide essential services to homeless individuals and families residing in emergency shelters. An emergency shelter is any facility, the primary purpose of which is to provide a temporary shelter for the homeless in general or for specific populations of the homeless and which does not require occupants to sign leases or occupancy agreements.

7.2.1 Emergency Shelter Services, in accordance with federal regulations Part 576 Emergency Solutions Grants Programs, Subpart B) include:

1. Case management
2. Child care
3. Education services
4. Employment assistance and job training
5. Outpatient health services
6. Legal services
7. Life skills training
8. Mental health services
9. Substance abuse treatment services
10. Transportation.

7.2.2 Where the recipient or subrecipient uses ESG funds solely for essential services or shelter operations, the recipient or subrecipient must provide services or shelter to homeless individuals and families at least for the period during which the ESG funds are provided. The recipient or subrecipient does not need to limit these services or shelter to a particular site or structure, so long as the site or structure serves the same type of persons originally served with the assistance (e.g., families with children, unaccompanied youth, disabled individuals, or victims of domestic violence) or serves homeless persons in the same area where the recipient or subrecipient originally provided the services or shelter.

7.2.3 Subrecipients must comply with all requirements contained within Attachment E, Shelter Support Recordkeeping and Reporting Requirements.

7.3 Shelter Rehabilitation, Renovation and Conversion, as set forth in 24 CFR 576.101(b)(2) includes labor, materials, tools, and other costs for renovation (including major rehabilitation of an emergency shelter or conversion of a building into an emergency shelter). The emergency shelter must be owned by a government entity or private nonprofit organization.

7.3.1 If such activity is included as an eligible cost in Attachments B and C of the particular contract between the ESG subrecipient and the City, then ESG funds may be used for costs of renovating buildings to be used as emergency shelter for homeless families and individuals or to convert a building for use as an emergency shelter. Eligible costs include labor, materials, tools and other costs for renovation (including major rehabilitation of an emergency shelter or conversion of a building into an emergency shelter). The emergency shelter must be owned by a government or private nonprofit organization. For the purposes of this Section, the subrecipient may also be referred to as “lessee”. Grant amounts may not be used to renovate, rehabilitate, or convert buildings owned by primarily religious organizations or entities, unless the following conditions are met:

1. The building (or portion thereof) that is to be improved with HUD assistance has been leased to an existing or newly established wholly secular entity (which may be an entity established by the religious organization);
2. The HUD assistance is provided to the lessee (and not the lessor) to make the improvements;
3. The leased premises will be used exclusively for secular purposes and available to all persons regardless of religion;
4. The lease payments do not exceed the fair market rent of the premises as they were before the improvements are made;
5. The portion of the cost of any improvements that also serves a non-leased part of the building will be allocated to and paid for by the lessor;
6. The lessor enters into a binding agreement requiring that unless the lessee (or a qualified successor lessee) retains the use of the leased premises for a wholly secular purpose for at least the useful life of the improvement, the lessor will pay the lessee an amount equal to the residual value of the improvements. In such an event, the lessee must remit such amount to HUD (or such other original grantee from which the funds to renovate, rehabilitate, or convert the building under this paragraph 24 CFR 576.101(b)(2) were derived). For example, if the funds under this paragraph initially were made available to the State or to a unit of general local government as a formula allocation (Section 575.31) or a reallocation (Section 575.41), then the amount that the lessor pays (through the lessee) is remitted to the State or unit of general local government, as applicable. The original grantee may use this amount to further the objectives of this regulation. If, however, a private nonprofit organization is the lessee as well as the grantee, the organization must remit the amount referred to in this subsection to HUD; and
7. The lessee may also enter into a management contract authorizing the lessor religious organization (if applicable) to operate the facility, including the provisions of essential services, in carrying out the secular purpose. In such case, the religious organization must agree in the management contract to carry out its contractual responsibilities in a manner free of religious influences pursuant to conditions prescribed by HUD.

7.3.2 Each building renovated with ESG funds must be maintained as a shelter for homeless individuals and families for not less than a period of three (3) or ten (10) years (“minimum use period”), depending on the type of renovation and the value of the building. The minimum use period must begin on the date the building is first occupied by a homeless individual or family after the completed renovation. If the rehabilitation cost of the shelter exceeds 75% of the value of the building before rehabilitation (e.g. major rehabilitation) the minimum period of use is ten (10) years. If the cost to convert a building into an emergency shelter exceeds 75% of the value of the building after conversion, the minimum period of use is ten (10) years. In all other cases where ESG funds are used for renovation, the minimum period of use is three (3) years. The minimum period of use of ten (10) years, required for rehabilitation and conversion must be enforced by a recorded deed or use restriction.

7.3.3 Any building renovated, converted or rehabbed using ESG funds must meet local government regulations, including building code and sanitary code.

7.3.4 *Grant amounts may not be used for acquisition or construction of an emergency shelter for the homeless.*

7.4 Emergency Shelter Operations, as set forth in 24 CFR 576.102(b)(3), are the costs of maintenance (including minor or routine repairs), rent, security, fuel, equipment, insurance, utilities, food, furnishings, and supplies necessary for the operation of the emergency shelter. Where no appropriate emergency shelter is available for a homeless family or individual, eligible costs may also include a hotel or motel voucher for that family or individual. There is no income threshold at intake for this activity.

7.4.1 The age of a child under age 18 shall not be a basis for denying any family's admission to an emergency shelter that uses ESG funding or services and provides shelter to families with children under age 18.

7.4.2 Subrecipients shall comply with all requirements Shelter Support Recordkeeping and Reporting Requirements, including as set forth in Attachment E.

7.4.3 Where the subrecipient uses ESG funds solely for essential services or shelter operations, the subrecipient shall provide services or shelter to homeless individuals and families at least for the period during which the ESG funds are provided. The subrecipient does not need to limit these services or shelter to a particular site or structure, so long as the site or structure serves the same type of persons originally served with the assistance (e.g., families with children, unaccompanied youth, disabled individuals, or victims of domestic violence) or serves homeless persons in the same area where the recipient or subrecipient originally provided the services or shelter.

7.4.4 Shelter Support recipients shall comply with the Shelter Support Recordkeeping and Reporting Requirements including as set forth in Attachment F.

8. Homeless Prevention

8.1 Homeless Prevention Assistance, as set forth in 24 CFR 576.103, may be used to provide housing relocation and stabilization services and short- and/or medium-term rental assistance necessary to prevent an individual or family from moving into an emergency shelter or another place described in paragraph (1) of the “homeless” definition in Section 576.2.

8.2 This assistance, referred to as “homelessness prevention”, may be provided to individuals and families who meet the criteria under the “at risk of homelessness” definition, or who meet the criteria in paragraph (2), (3), or (4) of the “homeless” definition in 24 CFR Section 576.2 and have an annual income below 30 percent of median family income for the area, as determined by HUD. At re-evaluation - not less than once every three months - the participant must have an annual income below 30% AMI.

8.3 The costs of homelessness prevention are only eligible to the extent that the assistance is necessary to help the program participant regain stability in the program participant's current permanent housing or move into other permanent housing and achieve stability in that housing. Homelessness prevention must be provided in accordance with the housing relocation and stabilization services requirements in 24 CFR Section 576.105, the short-term and medium-term rental assistance requirements in 24 CFR Section 576.106, and the written standards and procedures established under 24 CFR Section 576.400.

8.4 Eligible Homelessness Prevention activities (in accordance with federal regulations Part 576 Emergency Solutions Grants Programs, Subpart B) include:

- **Financial assistance costs**
 - Rental application fees
 - Security deposits equal to no more than 2 months’ rent
 - Last month’s rent
 - This assistance must not exceed one month's rent and must be included in calculating the program participant's total rental assistance, which cannot exceed 24 months during any 3–year period.
 - Utility deposits
 - Utility payments (up to 24 months including 6 months arrearage per service)
 - A partial payment of a utility bill counts as one month.
 - This assistance may only be provided if the program participant or a member of the same household has an account in his or her name with a utility company or proof of responsibility to make utility payments.
 - Eligible utility services are gas, electric, water, and sewage.
 - Moving costs
 - Temporary storage fees for up to 3 months (no storage fees in arrears)
 - **Note: Late payment penalties are NOT an eligible ESG expense. The recipient or subrecipient is solely responsible for paying late payment penalties that it incurs with non-ESG funds.**

- **Service costs**

- Housing search and placement
 - Housing stability case management - **See Section 10 for eligible activities and requirements**
 - Mediation
 - Must be between the program participant and the owner or person(s) with whom the program participant is living, provided the mediation is necessary to prevent the program participant from losing permanent housing in which the program participant currently resides.
 - Legal services
 - Must include landlord/tenant matters, and services must be necessary to resolve a legal problem that prohibits the program participant from obtaining permanent housing or will likely result in the program participant losing the permanent housing in which the program participant currently resides.
 - Credit repair/Counseling Services
- Short-term (3 months) and medium-term rental assistance (up to 24 months)
 - Payment of rental arrears consists of a one-time payment for up to 6 months of rent in arrears, including any late fees on those arrears.

8.5 Housing/stabilization services must occur at least monthly for 12 months. Prevention assistance will be targeted to families at imminent risk of eviction. Subrecipients will use standard intake/assessment forms intended to determine eligibility and also to highlight other strengths and/or challenges for the household. Prevention services may also be secondarily targeted toward housed individuals for the purposes of eviction prevention. These services would focus on intervention and/or financial assistance as needed to prevent an imminent episode of homelessness.

8.6 The amount of assistance should reflect the cost for the individual or family to stay in place, move, or establish a new tenancy, **up to a maximum of \$4,000 per household within 24 months during any three year period**. Agencies may request a waiver to the \$4,000 maximum per household limit in writing to the City of Worcester under hardship circumstances only. Approval of this waiver is solely at the discretion of the City. This assistance may be in the form of short-term rental assistance, medium-term rental assistance, payment of rental arrears, or any combination of this assistance. Participants must not be receiving the same type of financial assistance (i.e. prevention, re-housing, or stabilization) during the same time period from another Federal or State source. Providers must re-evaluate participants' eligibility and the types and amounts of prevention assistance needed not less than once every three months. Except as provided for housing stability case management, **no program participant may receive more than 24 months of assistance in a three-year period**.

8.7 Subrecipients must conduct an initial eligibility intake and assessment to determine eligibility and level of need. **Re-evaluations of each program participants' eligibility as well as types and amounts of assistance the program participant needs must be conducted on a**

QUARTERLY BASIS for participants receiving rapid re-housing assistance. At a minimum, the re-evaluation must establish that:

- The program participant does not have an annual income that exceeds 30 percent of median family income for the area, as determined by HUD; and
- The program participant lacks sufficient resources and support networks necessary to retain housing without ESG assistance.

Additionally, when notified of a relevant change to the program participant's income or other circumstances that effect the participant's need for assistance under ESG, the recipient or subrecipient must re-evaluate the program participant's eligibility and the amount and types of assistance the program participant needs.

8.8 All assisted units must be documented by a lease. Project-based rental assistance leases must have an initial term of not less than one year. Rental agreements between the subrecipient and the property owner must set forth terms under which assistance will be provided by the subrecipient to the owner on behalf of the participating household. The written lease must include the tenant's name, address of the unit, term of tenancy, move in date, rent amount, who is responsible for the utilities and must be signed by both parties and dated. The Subrecipient **must** have a copy of the signed lease prior to authorizing **any** payments to the property owner.

8.9 The lease is **not** the Rental Assistance Agreement (RA). The RA must be between the Subrecipient and the property owner and must document the terms of assistance, including requirement the property owner submit to the subrecipient a copy of any notice to the tenant that could lead to an eviction. **The RA is required to be executed before any payment is made to the property owner.**

8.10 Assisted units **must be at or below Fair Market Rent (FMR) for area and unit size for rent and utilities.**

8.11 The subrecipient shall document "rent reasonableness" using the form in Attachment D. Rent reasonableness shows that the rent of the unit is reasonable in relation to comparable units and provides documented data for units comparable in size, location and rent amounts.

8.12 Subrecipients must comply with all Homeless Prevention Recordkeeping and Reporting Requirements, including as set forth in Attachment D.

9. Rapid Re-Housing

9.1 Rapid Re-Housing Assistance, as set forth in 24 CFR 576.104, may be used to provide housing relocation and stabilization services and short- and/or medium-term rental assistance as necessary to help a homeless individual or family move as quickly as possible into permanent housing and achieve stability in that housing.

9.2 This assistance, referred to as rapid re-housing assistance, may be provided to program participants who meet the criteria of being homeless and live in an emergency shelter. The rapid re-housing assistance must be provided in accordance with the housing relocation and stabilization services requirements in Section 576.105, the short- and medium-term rental assistance requirements in Section 576.106, and the written standards and procedures established under Section 576.400.

9.3 For Rapid Re-Housing, an income assessment is not required at initial evaluation. However, at annual re-evaluation, the client's income must be below 30% AMI.

9.4 Eligible Rapid Re-housing Assistance activities (in accordance with federal regulations Part 576 Emergency Solutions Grants Programs, Subpart B) include:

- **Financial assistance costs**
 - Rental application fees
 - Security deposits equal to no more than 2 months' rent
 - Last month's rent
 - This assistance must not exceed one month's rent and must be included in calculating the program participant's total rental assistance, which cannot exceed 24 months during any 3-year period.
 - Utility deposits
 - Utility payments (up to 24 months including 6 months arrearage per service)
 - A partial payment of a utility bill counts as one month.
 - This assistance may only be provided if the program participant or a member of the same household has an account in his or her name with a utility company or proof of responsibility to make utility payments.
 - Eligible utility services are gas, electric, water, and sewage.
 - Moving costs
 - Temporary storage fees for up to 3 months (no storage fees in arrears)
 - **Note: Late payment penalties are NOT an eligible ESG expense. The recipient or subrecipient is solely responsible for paying late payment penalties that it incurs with non-ESG funds.**
- **Service costs**
 - Housing search and placement
 - Housing stability case management – **See Section 10 for eligible activities and requirements**
 - Mediation
 - Must be between the program participant and the owner or person(s) with whom the program participant is living, provided the mediation is necessary to prevent the program participant from losing permanent housing in which the program participant currently resides.
 - Legal services
 - Must include landlord/tenant matters, and services must be necessary to resolve a legal problem that prohibits the program participant from

obtaining permanent housing or will likely result in the program participant losing the permanent housing in which the program participant currently resides.

- Credit repair/Counseling Services
- Short-term (3 months) and medium-term rental assistance (up to 24 months)
- Payment of rental arrears consists of a one-time payment for up to 6 months of rent in arrears, including any late fees on those arrears.

9.5 Rapid Re-Housing services can only be provided for 30 days and only while homeless. ESG funds may be used to provide housing relocation and stabilization services and short and/or medium term rental assistance as necessary to help a homeless individual or family move as quickly as possible into permanent housing and achieve stability in that housing. This assistance may be provided to program participants who meet the criteria of the homeless definition and live in an emergency shelter or other place described in the homeless definition. Rapid Re-housing assistance will be targeted to persons living in an emergency shelter or a place not meant for human habitation, which:

- Does not include Transitional Shelter Programs or Transitional Housing;
- Is a shelter where the shelter guest does not have to meet specific criteria other than being homeless with no place else to go;
- Is a shelter where the guests do not have to sign an occupancy agreement or program participation agreement to access the shelter;
- Is a shelter where the average length of stay is less than 90 days.

9.6 The amount of assistance should reflect the cost for the individual or family to stay in place, move, or establish a new tenancy, **up to a maximum of \$4,000 per household within 24 months during any three year period.** Agencies may request a waiver to the \$4,000 maximum per household limit in writing to the City of Worcester under hardship circumstances only. Approval of this waiver is solely at the discretion of the City. This assistance may be in the form of short-term rental assistance, medium-term rental assistance, payment of rental arrears, or any combination of this assistance. Participants must not be receiving the same type of financial assistance (i.e. prevention, re-housing, or stabilization) during the same time period from another Federal or State source. Providers must re-evaluate participants' eligibility and the types and amounts of prevention assistance needed not less than once every three months. Except as provided for housing stability case management, **no program participant may receive more than 24 months of assistance in a three-year period.**

9.7 Subrecipients must conduct an initial eligibility intake and assessment to determine eligibility and level of need. **Re-evaluations of each program participants' eligibility as well as types and amounts of assistance** the program participant needs **must be conducted not less than ANNUALLY** for participants receiving rapid re-housing assistance. At a minimum, the re-evaluation must establish that:

- The program participant does not have an annual income that exceeds 30 percent of median family income for the area, as determined by HUD; and
- The program participant lacks sufficient resources and support networks necessary to retain housing without ESG assistance.

Additionally, when notified of a relevant change to the program participant's income or other circumstances that affect the participant's need for assistance under ESG, the subrecipient must re-evaluate the program participant's eligibility and the amount and types of assistance the program participant needs.

9.8 All assisted units must be documented by a lease. Project-based rental assistance leases must have an initial term of not less than one year. Rental agreements between the subrecipient and the property owner must set forth terms under which assistance will be provided by the subrecipient to the owner on behalf of the participating household. The written lease must include the tenant's name, address of the unit, term of tenancy, move in date, rent amount, who is responsible for the utilities and must be signed by both parties and dated. The Subrecipient **must** have a copy of the signed lease prior to authorizing **any** payments to the property owner.

9.9 The lease is **not** the Rental Assistance Agreement (RA). The RA must be between the Subrecipient and the property owner and must document the terms of assistance, including requirement that the property owner submit to the Subrecipient a copy of any notice to the tenant that could lead to an eviction. **The RA is required to be executed before any payment is made to the property owner.**

9.10 Assisted units **must be at or below Fair Market Rent (FMR) for area and unit size for rent and utilities.**

9.11 The subrecipient shall document "rent reasonableness" using the form in Attachment D. Rent reasonableness shows that the unit rent is reasonable in relation to comparable units and provides documented data for units comparable in size, location and rent amounts.

9.12 Subrecipients must comply with all Rapid Re-Housing Recordkeeping and Reporting Requirements, set forth in Attachment E.

10. Housing Stability Case Management

10.1 ESG funds may be used to pay cost of assessing, arranging, coordinating, and monitoring the delivery of individualized services to facilitate housing stability for a program participant

who resides in permanent housing or to assist a program participant in overcoming immediate barriers to obtaining housing. This assistance cannot exceed 30 days during the period the program participant is seeking permanent housing and cannot exceed 24 months during the period the program participant is living in permanent housing. Component services and activities consist of:

- a. Using the centralized or coordinated assessment system as required under [§ 576.400\(d\)](#), to evaluate individuals and families applying for or receiving homelessness prevention or rapid re-housing assistance;
- b. Conducting the initial evaluation required under [§ 576.401\(a\)](#), including verifying and documenting eligibility, for individuals and families applying for homelessness prevention or rapid re-housing assistance;
- c. Counseling;
- d. Developing, securing, and coordinating services and obtaining Federal, State, and local benefits;
- e. Monitoring and evaluating program participant progress;
- f. Providing information and referrals to other providers;
- g. Developing an individualized housing and service plan, including planning a path to permanent housing stability; and
- h. Conducting re-evaluations required under [§ 576.401\(b\)](#).

10.2 While providing homelessness prevention or rapid re-housing assistance to a program participant, the recipient or subrecipient must:

- Require the program participant to meet with a case manager not less than once per month to assist the program participant in ensuring long-term housing stability; and
- Develop a plan to assist the program participant to retain permanent housing after the ESG assistance ends, taking into account all relevant considerations, such as the program participant's current or expected income and expenses; other public or private assistance for which the program participant will be eligible and likely to receive; and the relative affordability of available housing in the area.

10.3 The recipient or subrecipient is exempt from the requirement under paragraph (e)(1)(i) of this section if the Violence Against Women Act of 1994 ([42 U.S.C. 13701 et seq.](#)) or the Family Violence Prevention and Services Act ([42 U.S.C. 10401 et seq.](#)) prohibits that recipient or subrecipient from making its shelter or housing conditional on the participant's acceptance of services.

11. Housing Information Management System (HMIS)

11.1 In accordance with regulations set forth at 576 CRF 107, the subrecipient may use ESG funds to pay the costs of contributing data to the HMIS designated by the Continuum of Care for the area, including the costs of:

- Purchasing or leasing computer hardware
- Purchasing software or software licenses
- Purchasing or leasing equipment, including telephones, fax machines, and furniture
- Obtaining technical support
- Leasing office space
- Paying charges for electricity, gas, water, phone service, and high-speed data transmission necessary to operate or contribute data to the HMIS
- Paying salaries for operating HMIS, including:
 - Completing data entry
 - Monitoring and reviewing data quality
 - Completing data analysis
 - Reporting to the HMIS Lead
 - Training staff on using the HMIS or comparable database
 - Implementing and complying with HMIS requirements
- Cost of staff to travel to and attend HUD–sponsored and HUD–approved training on HMIS and programs authorized by Title IV of the McKinney–Vento Homeless Assistance Act
- Costs to conduct intake
- Participation fees charged by the HMIS Lead.

11.2 If the recipient is the HMIS lead agency, as designated by the Continuum of Care, it may also use ESG funds to pay the costs of:

- Hosting and maintaining HMIS software or data
- Backing up, recovering, or repairing HMIS software or data
- Upgrading, customizing, and enhancing the HMIS
- Integrating and warehousing data, including development of a data warehouse for use in aggregating data from subrecipients using multiple software system
- Administering the system
- Reporting to providers, the Continuum of Care, and HUD
- Conducting training on using the system or a comparable database, including traveling to the training

11.3 If the subrecipient is a victim services provider or a legal services provider, it may use ESG funds to establish and operate a comparable database that collects client-level data over

time (i.e., longitudinal data) and generates unduplicated aggregate reports based on the data. Information entered into a comparable database must not be entered directly into or provided to an HMIS.

11.4 Activities funded under this section must comply with HUD's standards on participation, data collection, and reporting under a local HMIS.

12. Ineligible ESG Activities

Ineligible costs include, but are not limited to:

- Assistance where other resources are available
- Recruitment or ongoing staff training
- Depreciation
- Costs associated with the organization rather than the facility (e.g. advertisements, pamphlets about the organization, surveys, etc.)
- Public relations
- Acquisition or new construction of an emergency shelter for the homeless
- Costs associated with the organization rather than the specific program renovation, rehabilitation, or conversion of structures used exclusively for religious purposes or which will otherwise promote religious interests except through the creation or utilization of a wholly secular entity
- Any costs associated with advertisements, pamphlets, surveys, etc.
- Staff training, entertainment, conferences or retreats
- Public relations or fundraising
- Recipient bad debts/late fees
- Program participant mortgage assistance/payments and any issues related to mortgages
- Recipient mortgage/debt service
- Indirect costs
- Legal services for immigration and citizenship matters
- Retainer fee arrangements and contingency fee arrangements
- Substance abuse treatments services for inpatient detoxification and other inpatient drug or alcohol treatment
- Payment of temporary storage fees in arrears
- Late payment penalties
- Purchase of office space
- Subrecipient post due taxes or late fees
- Repayment of utility or security deposits to the subrecipient not tracked as program income
- Construction or rehabilitation
- Credit card or other consumer debt
- Car repairs
- Program participant travel costs
- Medical or dental care and medicines

- Clothing and grooming
- Home furnishings
- Pet care
- Entertainment activities
- Work or education related materials
- Indirect costs
- Cash assistance to program participants
- Develop discharge planning programs in mainstream institutions such as hospitals, jails or prisons
- Funds issued directly to program participants
- Program fees
- Fees charged to the program applicant or participant

13. Case Management Requirements

13.1 In accordance with 576 CRF 576.401(e), while providing homelessness prevention or rapid re-housing assistance to a program participant, the subrecipient must:

- A. Require the program participant to meet with a case manager not less than once per month to assist the program participant in ensuring long-term housing stability; and
- B. Develop a plan to assist the program participant to retain permanent housing after the ESG assistance ends, taking into account all relevant considerations, such as the program participant's current or expected income and expenses; other public or private assistance for which the program participant will be eligible and likely to receive; and the relative affordability of available housing in the area.

13.2 The subrecipient is exempt from the requirement under paragraph (e)(1)(i) of this section if the Violence Against Women Act of 1994 (42 U.S.C. 13701 et seq.) or the Family Violence Prevention and Services Act (42 U.S.C. 10401 et seq.) prohibits that recipient or subrecipient from making its shelter or housing conditional on the participant's acceptance of services.

13.3 Case managers shall help connect households with appropriate services and financial assistance through other public and private homeless assistance and mainstream programs. Case managers shall keep clear and concise case notes documenting the meetings including their goals and outcomes.

14. Habitability Standards and Lead Based Paint Requirements

14.1 In accordance with 24 CFR 576.403, all units in which program participants receiving assistance live must meet HUD Habitability Standards. Subrecipients are required to complete the Emergency Solutions Grant Housing Shelter and Housing Standard Inspection Checklist (also known as the "Habitability Checklist") for all participants receiving financial assistance for their housing units. This checklist can be found in Attachment C. The only exception to this

requirement is in cases where **only** security deposit assistance and/or rental arrearage assistance is being provided.

14.2 All assisted units must meet federal lead paint requirements if the unit was constructed before 1978 and if a child under 6 and/or a pregnant woman is or will be residing in the unit. Subrecipients must document these inspections using the Habitability Checklist , which also addresses lead paint standards. The unit must meet ALL standards on the checklist or MAY NOT be used. The inspection must include, at a minimum:

- Verification of age of structure;
- Visual assessment and confirmation that paint surfaces are not chipping, cracking or peeling using the Habitability Checklist.; and
- Verification that the unit has been de-lead or paint encapsulated from a Massachusetts approved de-leading vendor.

14.3 Subrecipients are highly encouraged to complete an online tutorial on completing lead based paint visual inspections which takes approximately 20 minutes to complete and is located at: <http://www.hud.gov/offices/lead/training/visualassessment/h00101.htm>. If any sub-recipients already had a Habitability Checklist in place, they just need to make sure that the lead based paint assessment is included.

14.4 The habitability and visual lead inspections are not required to be completed by certified inspectors.

14.5 If a HUD approved inspection for Section 8 has been recently completed for the unit, a copy of that inspection report in the client's file is sufficient because the regulations governing Section 8 inspections are more stringent than those governing ESG inspections.

14.6 A lead-free certification for a unit can also be used to satisfy the lead paint requirement.

15. Termination of Assistance

15.1 In accordance with 24 CFR 576.402, if a program participant violates program requirements, the subrecipient may terminate the assistance in accordance with a formal process established by the subrecipient. That process must recognize the rights of individuals affected. The subrecipient must exercise judgment and examine all extenuating circumstances in determining when violations warrant termination so that a program participant's assistance is terminated only in the most severe cases. Subrecipient may terminate assistance to a program participant if the rules of the program are violated. The termination must be preceded by a due process to include, at a minimum:

- Written notification and clear statement of reasons for termination from the program;
- Opportunity to appeal to a third party; and
- Prompt appeal response.

Termination shall only happen in the most severe of cases and shall be clearly documented in the program participant's file.

15.2 With regard to program participants receiving rental assistance or housing relocation and stabilization services, to terminate such assistance or services, the required formal process, at a minimum, must consist of:

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

15.3 Termination under this section does not bar the subrecipient from providing further assistance at a later date to the same family or individual.

16. General Recordkeeping and Reporting Requirements

16.1 The subrecipient must have policies and procedures in place to ensure that ESG funds are used in accordance with the regulatory requirements. In addition, sufficient records must be established and maintained to enable the City and HUD to determine whether ESG requirements are being met.

16.2 In general, all clients receiving ESG assistance must have the following documentation included, but not limited to, in their case file:

- (i) Documentation of Homeless or At-risk Homeless Status (additional details regarding this documentation are provided below);
- (ii) Documentation of income (third-party verification whenever possible, if not- self declaration of income forms will suffice);
- (iii) In the form of case notes, evidence of *at least* an initial in-person consultation with a case manager including a needs assessment and formulation of a long-term plan for housing stability;
- (iv) HMIS Intake form at program entry;
- (v) Quarterly or annual re-evaluations, depending on program component; and
- (vi) HMIS Exit form upon program completion.

16.3 All subrecipients are required to use the forms included in Attachment C.

16.4 All clients provided with ESG assistance in the form of direct financial support (i.e., first last months rent, security deposits, moving costs, rental arrearages, utility arrearages or

medium-term rental subsidies) must **also** have the following documentation included in their case file:

- (i) Lease or Rental Agreement;
- (ii) Rent Reasonableness Checklist;
- (iii) Housing Habitability Standards Checklist; and

16.5 All program participants receiving Housing Relocation and Stabilization Services (i.e., General Case Management, Housing Search and Placement, Outreach and Engagement) must have case files with **detailed case notes** indicating the developments and progress made as a result of the ESG funded services, including clear documentation of the monthly stabilization meetings.

16.6 Subrecipients administering Shelter Support, Homeless Prevention and Rapid Re-housing activities shall use the State Department of Housing and Community Development (DHCD) reporting and recordkeeping requirements contained in Attachments F, G and H respectively as a guide for maintaining client files.

17. Documentation of Homeless Status

17.1 The subrecipient must maintain and follow written intake procedures to ensure compliance with the homeless definition in [§ 576.2](#). The procedures must require documentation at intake of the evidence relied upon to establish and verify homeless status. The procedures must establish the order of priority for obtaining evidence as third-party documentation first, intake worker observations second, and certification from the person seeking assistance third. However, lack of third-party documentation must not prevent an individual or family from being immediately admitted to emergency shelter, receiving street outreach services, or being immediately admitted to shelter or receiving services provided by a victim service provider. Records contained in an HMIS or comparable database used by victim service or legal service providers are acceptable evidence of third-party documentation and intake worker observations if the HMIS retains an auditable history of all entries, including the person who entered the data, the date of entry, and the change made; and if the HMIS prevents overrides or changes of the dates on which entries are made.

17.2 If the individual or family qualifies as homeless under paragraph (1)(i) or (ii) of the homeless definition in [§ 576.2](#), acceptable evidence includes a written observation by an outreach worker of the conditions where the individual or family was living, a written referral by another housing or service provider, or a certification by the individual or head of household seeking assistance.

17.3 If the individual qualifies as homeless under paragraph (1)(iii) of the homeless definition in [§ 576.2](#), because he or she resided in an emergency shelter or place not meant for human habitation and is exiting an institution where he or she resided for 90 days or less, acceptable evidence includes the evidence described in paragraph (b)(1) of this section and one of the following:

- Discharge paperwork or a written or oral referral from a social worker, case manager, or other appropriate official of the institution, stating the beginning and end dates of the time residing in the institution. All oral statements must be recorded by the intake worker; or
- Where the evidence in paragraph (b)(2)(i) of this section is not obtainable, a written record of the intake worker's due diligence in attempting to obtain the evidence described in paragraph (b)(2)(i) and a certification by the individual seeking assistance that states he or she is exiting or has just exited an institution where he or she resided for 90 days or less.

17.4 If the individual or family qualifies as homeless under paragraph (2) of the homeless definition in [§ 576.2](#), because the individual or family will imminently lose their housing, the evidence must include:

- A court order resulting from an eviction action that requires the individual or family to leave their residence within 14 days after the date of their application for homeless assistance; or the equivalent notice under applicable state law, a Notice to Quit, or a Notice to Terminate issued under state law;
 - For individuals and families whose primary nighttime residence is a hotel or motel room not paid for by charitable organizations or federal, state, or local government programs for low-income individuals, evidence that the individual or family lacks the resources necessary to reside there for more than 14 days after the date of application for homeless assistance; or
 - An oral statement by the individual or head of household that the owner or renter of the housing in which they currently reside will not allow them to stay for more than 14 days after the date of application for homeless assistance. The intake worker must record the statement and certify that it was found credible. To be found credible, the oral statement must either: (I) be verified by the owner or renter of the housing in which the individual or family resides at the time of application for homeless assistance and documented by a written certification by the owner or renter or by the intake worker's recording of the owner or renter's oral statement; or (II) if the intake worker is unable to contact the owner or renter, be documented by a written certification by the intake worker of his or her due diligence in attempting to obtain the owner or renter's verification and the written certification by the individual or head of household seeking assistance that his or her statement was true and complete;
- Certification by the individual or head of household that no subsequent residence has been identified; and

- Certification or other written documentation that the individual or family lacks the resources and support networks needed to obtain other permanent housing.

17.5 If the individual or family qualifies as homeless under paragraph (3) of the homeless definition in [§ 576.2](#), because the individual or family does not otherwise qualify as homeless under the homeless definition but is an unaccompanied youth under 25 years of age, or homeless family with one or more children or youth, and is defined as homeless under another Federal statute or section 725(2) of the McKinney–Vento Homeless Assistance Act ([42 U.S.C. 11434a\(2\)](#)), the evidence must include:

- For paragraph (3)(i) of the homeless definition in [§ 576.2](#), certification of homeless status by the local private nonprofit organization or state or local governmental entity responsible for administering assistance under the Runaway and Homeless Youth Act ([42 U.S.C. 5701 et seq.](#)), the Head Start Act ([42 U.S.C. 9831 et seq.](#)), subtitle N of the Violence Against Women Act of 1994 ([42 U.S.C. 14043e et seq.](#)), section 330 of the Public Health Service Act ([42 U.S.C. 254b](#)), the Food and Nutrition Act of 2008 ([7 U.S.C. 2011 et seq.](#)), section 17 of the Child Nutrition Act of 1966 ([42 U.S.C. 1786](#)), or subtitle B of title VII of the McKinney–Vento Homeless Assistance Act ([42 U.S.C. 11431 et seq.](#)), as applicable;
- For paragraph (3)(ii) of the homeless definition in [§ 576.2](#), referral by a housing or service provider, written observation by an outreach worker, or certification by the homeless individual or head of household seeking assistance;
- For paragraph (3)(iii) of the homeless definition in [§ 576.2](#), certification by the individual or head of household and any available supporting documentation that the individual or family moved two or more times during the 60–day period immediately preceding the date of application for homeless assistance, including: recorded statements or records obtained from each owner or renter of housing, provider of shelter or housing, or social worker, case worker, or other appropriate official of a hospital or institution in which the individual or family resided; or, where these statements or records are unobtainable, a written record of the intake worker's due diligence in attempting to obtain these statements or records. Where a move was due to the individual or family fleeing domestic violence, dating violence, sexual assault, or stalking, then the intake worker may alternatively obtain a written certification from the individual or head of household seeking assistance that they were fleeing that situation and that they resided at that address; and

17.6 For paragraph (3)(iv) of the homeless definition in [§ 576.2](#), written diagnosis from a professional who is licensed by the state to diagnose and treat that condition (or intake staff-recorded observation of disability that within 45 days of date of the application for assistance is confirmed by a professional who is licensed by the state to diagnose and treat that condition); employment records; department of corrections records; literacy, English proficiency tests; or other reasonable documentation of the conditions required under paragraph (3)(iv) of the homeless definition.

17.7 If the individual or family qualifies under paragraph (4) of the homeless definition in [§ 576.2](#), because the individual or family is fleeing domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions related to violence, then acceptable evidence includes an oral statement by the individual or head of household seeking assistance that they are fleeing that situation, that no subsequent residence has been identified and that they lack the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other housing. If the individual or family is receiving shelter or services provided by a victim service provider, the oral statement must be documented by either a certification by the individual or head of household; or a certification by the intake worker. Otherwise, the oral statement that the individual or head of household seeking assistance has not identified a subsequent residence and lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain housing must be documented by a certification by the individual or head of household that the oral statement is true and complete, and, where the safety of the individual or family would not be jeopardized, the domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening condition must be verified by a written observation by the intake worker or a written referral by a housing or service provider, social worker, legal assistance provider, health-care provider, law enforcement agency, legal assistance provider, pastoral counselor, or any other organization from whom the individual or head of household has sought assistance for domestic violence, dating violence, sexual assault, or stalking. The written referral or observation need only include the minimum amount of information necessary to document that the individual or family is fleeing, or attempting to flee domestic violence, dating violence, sexual assault, and stalking.

18. Documentation of At-Risk of Homelessness Status

18.1 For each individual or family who receives Emergency Solutions Grant (ESG) homelessness prevention assistance, the records must include the evidence relied upon to establish and verify the individual or family's "at risk of homelessness" status. This evidence must include an intake and certification form that meets HUD specifications and is completed by the recipient or subrecipient. The evidence must also include:

18.2 If the program participant meets the criteria under paragraph (1) of the "at risk of homelessness" definition in [§ 576.2](#):

- The documentation specified under this section for determining annual income;
- The program participant's certification on a form specified by HUD that the program participant has insufficient financial resources and support networks; e.g., family, friends, faith-based or other social networks, immediately available to attain housing stability and meets one or more of the conditions under paragraph (1)(iii) of the definition of "at risk of homelessness" in [§ 576.2](#);
- The most reliable evidence available to show that the program participant does not have sufficient resources or support networks; e.g., family, friends, faith-based or other social

networks, immediately available to prevent them from moving to an emergency shelter or another place described in paragraph (1) of the “homeless” definition. Acceptable evidence includes:

- Source documents (e.g., notice of termination from employment, unemployment compensation statement, bank statement, health-care bill showing arrears, utility bill showing arrears);
 - To the extent that source documents are unobtainable, a written statement by the relevant third party (e.g., former employer, public administrator, relative) or the written certification by the recipient's or subrecipient's intake staff of the oral verification by the relevant third party that the applicant meets one or both of the criteria under paragraph (1)(ii) of the definition of “at risk of homelessness” in [§ 576.2](#); or
 - To the extent that source documents and third-party verification are unobtainable, a written statement by the recipient's or subrecipient's intake staff describing the efforts taken to obtain the required evidence; and
- The most reliable evidence available to show that the program participant meets one or more of the conditions under paragraph (1)(iii) of the definition of “at risk of homelessness” in [§ 576.2](#). Acceptable evidence includes:
 - Source documents that evidence one or more of the conditions under paragraph (1)(iii) of the definition (e.g., eviction notice, notice of termination from employment, bank statement);
 - To the extent that source documents are unobtainable, a written statement by the relevant third party (e.g., former employer, owner, primary leaseholder, public administrator, hotel or motel manager) or the written certification by the recipient's or subrecipient's intake staff of the oral verification by the relevant third party that the applicant meets one or more of the criteria under paragraph (1)(iii) of the definition of “at risk of homelessness”; or
 - To the extent that source documents and third-party verification are unobtainable, a written statement by the recipient's or subrecipient's intake staff that the staff person has visited the applicant's residence and determined that the applicant meets one or more of the criteria under paragraph (1)(iii) of the definition or, if a visit is not practicable or relevant to the determination, a written statement by the recipient's or subrecipient's intake staff describing the efforts taken to obtain the required evidence; or

18.3 If the program participant meets the criteria under paragraph (2) or (3) of the “at risk of homelessness” definition in [§ 576.2](#), certification of the child or youth's homeless status by the agency or organization responsible for administering assistance under the Runaway and

Homeless Youth Act ([42 U.S.C. 5701 et seq.](#)), the Head Start Act ([42 U.S.C. 9831 et seq.](#)), subtitle N of the Violence Against Women Act of 1994 ([42 U.S.C. 14043e et seq.](#)), section 330 of the Public Health Service Act ([42 U.S.C. 254b](#)), the Food and Nutrition Act of 2008 ([7 U.S.C. 2011 et seq.](#)), section 17 of the Child Nutrition Act of 1966 ([42 U.S.C. 1786](#)) or subtitle B of title VII of the McKinney–Vento Homeless Assistance Act ([42 U.S.C. 11431 et seq.](#)), as applicable.

19. Additional Recordkeeping Requirements

19.1 In addition to evidence of homeless status or “at risk of homelessness” status, as applicable, records must be kept for each program participant that document:

- The services and assistance provided to that program participant, including, as applicable, the security deposit, rental assistance, and utility payments made on behalf of the program participant;
- Compliance with the applicable requirements for providing services and assistance to that program participant under the program components and eligible activities provisions at [§ 576.101](#) through [§ 576.106](#), the provision on determining eligibility and amount and type of assistance at [§ 576.401\(a\)](#) and [\(b\)](#), and the provision on using appropriate assistance and services at [§ 576.401\(d\)](#) and [\(e\)](#); and
- Where applicable, compliance with the termination of assistance requirement in [§ 576.402](#).

19.2 The subrecipient must keep documentation evidencing the use of, and written intake procedures for, the centralized or coordinated assessment system(s) developed by the Continuum of Care(s) in accordance with the requirements established by HUD.

19.3 The records must include copies of all leases and rental assistance agreements for the provision of rental assistance, documentation of payments made to owners for the provision of rental assistance, and supporting documentation for these payments, including dates of occupancy by program participants.

19.4 The records must document the monthly allowance for utilities (excluding telephone) used to determine compliance with the rent restriction.

19.5 The records must include documentation of compliance with the shelter and housing standards in [§ 576.403](#), including habitability checklists.

19.6 The subrecipient must keep records of the participation in HMIS or a comparable database by all projects of the recipient and its subrecipients.

19.7 The subrecipient must keep records of the source and use of contributions made to satisfy the matching requirement in [§ 576.201](#). The records must indicate the particular fiscal year grant for which each matching contribution is counted. The records must show how the value placed

on third-party, noncash contributions was derived. To the extent feasible, volunteer services must be supported by the same methods that the organization uses to support the allocation of regular personnel costs.

19.8 The subrecipient must document its compliance with the homeless participation requirements under [§ 576.405](#).

19.9 The subrecipient must develop and implement written procedures to ensure:

- All records containing personally identifying information (as defined in HUD's standards for participation, data collection, and reporting in a local HMIS) of any individual or family who applies for and/or receives ESG assistance will be kept secure and confidential;
- The address or location of any domestic violence, dating violence, sexual assault, or stalking shelter project assisted under the ESG will not be made public, except with written authorization of the person responsible for the operation of the shelter; and
- The address or location of any housing of a program participant will not be made public, except as provided under a preexisting privacy policy of the recipient or subrecipient and consistent with state and local laws regarding privacy and obligations of confidentiality.

19.10 The confidentiality procedures of the recipient and its subrecipients must be in writing and must be maintained in accordance with this section.

19.11 For each individual and family determined ineligible to receive Emergency Solutions Grant (ESG) assistance, the record must include documentation of the reason for that determination.

- Annual income. For each program participant who receives homelessness prevention assistance, or who receives rapid re-housing assistance longer than one year, the following documentation of annual income must be maintained:
 - Income evaluation form containing the minimum requirements specified by HUD and completed by the recipient or subrecipient; and
 - Source documents for the assets held by the program participant and income received over the most recent period for which representative data is available before the date of the evaluation (e.g., wage statement, unemployment compensation statement, public benefits statement, bank statement);
 - To the extent that source documents are unobtainable, a written statement by the relevant third party (e.g., employer, government benefits administrator) or the written certification by the recipient's or subrecipient's intake staff of the oral verification by the relevant third party of the income the program participant

received over the most recent period for which representative data is available; or

- To the extent that source documents and third party verification are unobtainable, the written certification by the program participant of the amount of income the program participant received for the most recent period representative of the income that the program participant is reasonably expected to receive over the 3-month period following the evaluation.

20. Match Requirements

20.1 In accordance with 24 CFR 576.201, a subrecipient is required to make matching contributions to supplement its ESG program in an amount that equals the amount of ESG funds provided by the City.

20.2 Matching contributions may be obtained from any source, including any Federal source other than the ESG program, as well as state, local, and private sources. However, the following requirements apply to matching contributions from a Federal source of funds:

(i) The subrecipient must ensure the laws governing any funds to be used as matching contributions do not prohibit those funds from being used to match ESG funds.

(ii) If ESG funds are used to satisfy the matching requirements of another Federal program, then funding from that program may not be used to satisfy the matching requirements under this section.

20.3 In order to meet the matching requirement, the matching contributions must meet all requirements that apply to the ESG funds provided by HUD, except for the expenditure limits in Section 576.100.

20.4 The matching contributions must be provided after the date that HUD signs the grant agreement and must be expended within the expenditure deadline for the grant.

20.5 Contributions used to match a previous ESG grant may not be used to match a subsequent ESG grant.

20.6 Contributions that have been or will be counted as satisfying a matching requirement of another Federal grant or award **may not count** as satisfying the matching requirement of this section.

20.7 The matching requirement may be met by one or both of the following:

(i) Cash contributions. Cash expended for allowable costs, as defined in OMB Circulars A-87 (2 CFR part 225) and A-122 (2 CFR part 230), of the subrecipient;

(ii) Noncash contributions. The value of any real property, equipment, goods, or services

contributed to the subrecipient's ESG program, provided that if the subrecipient had to pay for them with grant funds, the costs would have been allowable. Noncash contributions may also include the purchase value of any donated building. To determine the value of any donated material or building, or of any lease, the recipient must use a method reasonably calculated to establish the fair market value. Services provided by individuals must be valued at rates consistent with those ordinarily paid for similar work in the recipient's or subrecipient's organization. If the recipient or subrecipient does not have employees performing similar work, the rates must be consistent with those ordinarily paid by other employers for similar work in the same labor market. Some noncash contributions are real property, equipment, goods, or services that, if the recipient or subrecipient had to pay for them with grant funds, the payments would have been indirect costs. Matching credit for these contributions must be given only if the recipient or subrecipient has established, along with its regular indirect cost rate, a special rate for allocating to individual projects or programs the value of those contributions.

21. Key Monitoring Elements

When monitoring subrecipients, the City shall be reviewing, at a minimum, the following:

- Proper policies and procedures for determining and documenting participant eligibility, administering financial assistance and providing services to participants.
- Proper and consistent use of all required forms in Attachment C.
- Proper documentation of participant eligibility including homeless/at risk of homelessness status and income eligibility.
- Proper documentation of assessed need including proper intake assessments and proof of lack of other resources available to participants.
- Activity-specific documentation including clear, detailed case notes that include referrals and services provided, rental documentation, utility records, writ of summary process and complaint, etc.
- Data collection/HMIS data sets
- Staff time records including detailed, signed ESG time tracked using time and effort logs.
- Financial documentation including back-up documentation for all program expenditures that can be specifically tied to the ESG grant.
- 100% of the award must be matched with **documented** cash or leveraged resources clearly tracked with appropriate back-up.
- Lease documents, copies of checks paid to landlords and Habitability Checklists for all assisted units.

ESG Participant Eligibility Documentation Checklist

ESG Participant Head of Household Name: _____

Initial or Re-Assessment: <input checked="" type="checkbox"/>	Date:	ESG Staff Initials:
<input type="checkbox"/> Initial Eligibility Assessment		
<input type="checkbox"/> Eligibility Re-Assessment		

In File (Always Applicable) <input checked="" type="checkbox"/>	<i>Documentation</i>
<input type="checkbox"/>	COMPLETED INITIAL/RECERTIFICATION CONSULTATION – ESG staff assessment with applicant/participant to determine eligibility and appropriate assistance type and amount (or recertify eligibility and reassess appropriate assistance type and amount).

Applicable <input checked="" type="checkbox"/>	In File <input checked="" type="checkbox"/>	HOUSEHOLD INCOME – Documentation of each identified source of current income for the household and documentation of household income calculation indicating household income at or below 30% Area Median Income
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	WAGES & SALARY <input type="checkbox"/> Written Third Party: Copy of most recent paystub(s) OR other written verification from employer -- OR -- <input type="checkbox"/> Oral Third Party: Verification of income form or other case file record of income information obtained verbally by ESG staff <input type="checkbox"/> Brief, written explanation by ESG staff for using oral third party -- OR -- <input type="checkbox"/> Self-Declaration: Applicant self-declaration of income statement <input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	SELF EMPLOYMENT/BUSINESS INCOME <input type="checkbox"/> Written Third Party: Copy of most recent federal or state tax return showing net business income -- OR -- <input type="checkbox"/> Self-Declaration: Applicant self-declaration of income statement <input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	INTEREST & DIVIDEND INCOME <input type="checkbox"/> Written Third Party: Copy of most recent interest or dividend income statement OR Copy of most recent federal or state tax return showing interest, dividend or other net income -- OR -- <input type="checkbox"/> Self-Declaration: Applicant self-declaration of income statement <input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration
<input type="checkbox"/> YES	<input type="checkbox"/>	PENSION/RETIREMENT INCOME <input type="checkbox"/> Written Third Party: Copy of most recent payment statement OR benefit notice OR bank deposit statement OR other written verification from income source

Applicable <input checked="" type="checkbox"/>	In File <input checked="" type="checkbox"/>	HOUSEHOLD INCOME – Documentation of each identified source of current income for the household and documentation of household income calculation indicating household income at or below 30% Area Median Income
<input type="checkbox"/> NO		-- OR -- <input type="checkbox"/> Oral Third Party: Verification of income form or other case file record of income information obtained by ESG staff <input type="checkbox"/> Brief, written explanation by ESG staff for using oral third party -- OR -- <input type="checkbox"/> Self-Declaration: Applicant self-declaration of income statement <input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	UNEMPLOYMENT & DISABILITY INCOME <input type="checkbox"/> Written Third Party: Copy of most recent payment statement OR benefit notice OR bank deposit statement OR other written verification from income source -- OR -- <input type="checkbox"/> Oral Third Party: Verification of income form or other case file record of income information obtained by ESG staff <input type="checkbox"/> Brief, written explanation by ESG staff for using oral third party -- OR -- <input type="checkbox"/> Self-Declaration: Applicant self-declaration of income statement <input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	TANF/PUBLIC ASSISTANCE <input type="checkbox"/> Written Third Party: Copy of most recent payment statement OR benefit notice OR bank deposit statement OR other written verification from income source -- OR -- <input type="checkbox"/> Oral Third Party: Verification of income form or other case file record of income information obtained by ESG staff <input type="checkbox"/> Brief, written explanation by ESG staff for using oral third party -- OR -- <input type="checkbox"/> Self-Declaration: Applicant self-declaration of income statement <input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	ALIMONY, CHILD SUPPORT AND FOSTER CARE INCOME <input type="checkbox"/> Written Third Party: Copy of most recent payment statement OR benefit notice OR bank deposit statement OR other written verification from income source -- OR -- <input type="checkbox"/> Oral Third Party: Verification of income form or other case file record of income information obtained by ESG staff <input type="checkbox"/> Brief, written explanation by ESG staff for using oral third party -- OR -- <input type="checkbox"/> Self-Declaration: Applicant self-declaration form <input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration
<input type="checkbox"/> YES	<input type="checkbox"/>	ARMED FORCES INCOME <input type="checkbox"/> Written Third Party: Copy of most recent paystub(s) OR other written verification from employer

Applicable <input checked="" type="checkbox"/>	In File <input checked="" type="checkbox"/>	HOUSEHOLD INCOME – Documentation of each identified source of current income for the household and documentation of household income calculation indicating household income at or below 30% Area Median Income
<input type="checkbox"/> NO		-- OR -- <input type="checkbox"/> Oral Third Party: Verification of income form or other case file record of income information obtained by ESG staff <input type="checkbox"/> Brief, written explanation by ESG staff for using oral third party -- OR -- <input type="checkbox"/> Self-Declaration: Applicant self-declaration form <input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	NO INCOME <input type="checkbox"/> Self-Declaration: Applicant self-declaration form <input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration (e.g., "Applicant reports no current income.")

In File (Always Applicable) <input checked="" type="checkbox"/>	HOUSEHOLD INCOME – Documentation of each identified source of current income for the household and documentation of household income calculation indicating household income at or below 30% Area Median Income
<input type="checkbox"/>	INCOME CALCULATION WORKSHEET – Documentation showing income calculation (estimated annual income based on current income) and comparison to Area Median Income.

Applicable <input checked="" type="checkbox"/>	In File <input checked="" type="checkbox"/>	HOUSING STATUS - Documentation of the current living situation of the household.
<i>HOMELESS SITUATIONS [RAPID RE-HOUSING]</i>		
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	EMERGENCY SHELTER <input type="checkbox"/> Written Third Party: HMIS record of shelter stay OR homeless certification form OR emergency shelter provider letter
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	PLACE NOT MEANT FOR HUMAN HABITATION <input type="checkbox"/> Written Third Party: Homeless certification form OR homeless street outreach provider or referral source letter -- OR -- <input type="checkbox"/> Self-Declaration: Applicant self-declaration of homelessness form <input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	HOSPITAL OR OTHER INSTITUTION (if stay is 180 days or less and was in emergency shelter or place not meant for human habitation prior to admission) <input type="checkbox"/> Written Third Party: Letter from hospital or other institution -- AND -- <input type="checkbox"/> Written Third Party: HMIS record of shelter stay (if previously sleeping in emergency shelter) OR homeless certification form OR emergency shelter or homeless street outreach provider letter -- OR -- <input type="checkbox"/> Self-Declaration: Applicant self-declaration of homelessness form <input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration

Applicable <input checked="" type="checkbox"/>	In File <input checked="" type="checkbox"/>	HOUSING STATUS - Documentation of the current living situation of the household.
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	TRANSITIONAL HOUSING (if graduating from or timing out of) <input type="checkbox"/> Written Third Party: Homeless certification form OR transitional housing provider letter
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	DOMESTIC VIOLENCE <input type="checkbox"/> Third Party verification (if available- Restraining order; Police report) Or <input type="checkbox"/> Self-Declaration: Applicant self-declaration of homelessness form <input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration (i.e., "Applicant is fleeing domestic violence situation.")
<i>HOUSED SITUATIONS [HOMELESSNESS PREVENTION]</i>		
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	COPY OF CURRENT LEASE OR OTHER WRITTEN OCCUPANCY AGREEMENT – For applicant, if renting OR for their host family/friend if doubled up. NOTE: "N/A" should only be checked if applicant (or their host) is a homeowner or if applicant is staying in a hospital, other institution, or hotel/motel. <i>-- OR (if applicant is doubled up and attempt to obtain copy of host lease is unsuccessful) --</i> <input type="checkbox"/> Self-Declaration: Applicant self-declaration of housing status form <input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	RENTED BY APPLICANT (select applicable situation) <u>POTENTIAL HOUSING LOSS DUE TO NON-PAYMENT OF RENT OR OTHER VIOLATION</u> <input type="checkbox"/> Written Third Party: Copy of eviction notice or letter indicating intent to evict (typed or handwritten) from landlord/owner OR court order <u>POTENTIAL HOUSING LOSS DUE TO UTILITY NON-PAYMENT</u> <input type="checkbox"/> Written Third Party: Copy of utility shut-off notice <i>-- AND --</i> <input type="checkbox"/> Lease indicates applicant is responsible for utilities and utility shut-off will cause eviction <i>-- OR --</i> <input type="checkbox"/> Other evidence of housing being unfit for habitation due to utility shut-off (e.g., other third party provider assessment or ESG staff assessment) <u>POTENTIAL HOUSING LOSS DUE TO FORECLOSURE ON RENTAL PROPERTY</u> <input type="checkbox"/> Written Third Party: Copy of foreclosure notice from landlord/owner or other public record/publication <u>POTENTIAL HOUSING LOSS DUE TO UNINHABITABLE CONDITIONS</u> <input type="checkbox"/> Written Third Party: Copy of notice from landlord/property manager, public health, code enforcement, fire marshal, child welfare or other government entity that housing is condemned RECERTIFICATION ONLY (if other situations do not apply at recertification) <u>POTENTIAL HOUSING LOSS DUE TO PRESENCE OF HOUSING RETENTION BARRIERS (e.g. insufficient income to pay housing costs, behavior that will potentially cause lease non-compliance, etc.).</u> <input type="checkbox"/> Self-Declaration: Brief, written description by ESG staff indicating current housing retention barriers and

Applicable <input checked="" type="checkbox"/>	In File <input checked="" type="checkbox"/>	HOUSING STATUS - Documentation of the current living situation of the household.
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	<p>justification for continued ESG assistance, as recorded on assessment form</p> <p>OTHER HOUSING OCCUPIED BY APPLICANT WITHOUT PAYING RENT (INCLUDING HOUSING SHARED WITH FRIENDS OR FAMILY) (select applicable situation)</p> <p><u>POTENTIAL HOUSING LOSS DUE TO EVICTION (REQUEST TO LEAVE) BY HOST FRIEND OR FAMILY</u></p> <p><input type="checkbox"/> Written Third Party: Copy of eviction notice or letter indicating request to leave (typed or handwritten) from host friend or family -- OR --</p> <p><input type="checkbox"/> Self-Declaration: Applicant self-declaration of housing status form</p> <p><input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration</p> <p><u>POTENTIAL HOUSING LOSS DUE TO FORECLOSURE ON RENTAL PROPERTY</u></p> <p><input type="checkbox"/> Written Third Party: Copy of foreclosure notice from landlord/owner or other public record/publication</p> <p><u>POTENTIAL HOUSING LOSS DUE TO UNINHABITABLE CONDITIONS</u></p> <p><input type="checkbox"/> Written Third Party: Copy of notice from landlord/property manager, public health, code enforcement, fire marshal, child welfare or other government entity that housing is condemned</p>
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	<p>OWNED BY APPLICANT</p> <p><u>POTENTIAL HOUSING LOSS DUE TO FORECLOSURE ON OWNER-OCCUPIED PROPERTY</u></p> <p><input type="checkbox"/> Written Third Party: Copy of foreclosure notice from lending institution</p>
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	<p>HOSPITAL OR OTHER INSTITUTION (if stay greater than 180 days and/or not previously in emergency shelter or place not meant for human habitation prior to admission)</p> <p><u>POTENTIAL HOUSING LOSS DUE TO INSTITUTIONAL DISCHARGE</u></p> <p><input type="checkbox"/> Written Third Party: Statement from hospital or other institution</p>
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	<p>HOTEL/MOTEL (NOT PAID FOR BY FEDERAL, STATE OR LOCAL GOVERNMENT OR CHARITABLE PROGRAMS)</p> <p><u>POTENTIAL HOUSING LOSS DUE TO NON-PAYMENT OF HOTEL/MOTEL COSTS</u></p> <p><input type="checkbox"/> Self-Declaration: Applicant self-declaration of housing status form</p> <p><input type="checkbox"/> Brief, written explanation by ESG staff for using self-declaration</p>

In File (Always Applicable) <input checked="" type="checkbox"/>	OTHER HOUSING OPTIONS, FINANCIAL RESOURCES AND SUPPORT NETWORKS - Documentation of whether household will become or remain homeless "but for" ESG assistance.
<input type="checkbox"/>	<p>OTHER SUBSEQUENT HOUSING OPTIONS</p> <p><input type="checkbox"/> Self-Declaration: Description of lack of other housing options as recorded on assessment form or other case file documentation (e.g., case notes)</p> <p><input type="checkbox"/> Brief, written description by ESG staff indicating absence of appropriate and/or reasonable housing options sufficient to prevent or end homelessness</p>

Applicable 	In File 	HOUSING STATUS - Documentation of the current living situation of the household.
<input type="checkbox"/>		<p>FINANCIAL RESOURCES AND SUPPORT NETWORKS</p> <p><input type="checkbox"/> Self-Declaration: Description of lack of other financial resources and support networks as recorded on assessment form or other case file documentation (e.g., case notes)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Self-declaration includes current bank account balance(s) <input type="checkbox"/> Assessment and documentation (if applicable) of other assets, per ESG grantee asset policy, indicating allowable amount <input type="checkbox"/> Brief, written description by ESG staff indicating absence of financial resources and support networks sufficient to prevent or end homelessness
Notes:		<div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px;"></div>

STAFF SIGNATURE: _____

DATE: _____

ESG Financial Assistance & Housing Unit Documentation Checklist

ESG Participant(s) Name _____

In File (Always Applicable) 	Documentation
<input type="checkbox"/>	HOUSEHOLD MEMBER IDENTIFICATION – Verification of each household member’s identity, per requirement/standard set by ESG grantee.
<input type="checkbox"/>	ESG FINANCIAL ASSISTANCE NOT USED FOR SAME COST TYPE AND SAME PERIOD AS OTHER FEDERAL, STATE, LOCAL PROGRAM ASSISTANCE – ESG staff assessment with participant to identify if other federal, state, local program is assisting with same cost type for same period.

Applicable 	In File 	ESG FINANCIAL ASSISTANCE – Documentation showing eligible use of ESG Financial Assistance. NOTE: indicate where documentation is kept if not in participant case file (e.g., “supporting documentation for expenses kept in accounts payable file”).
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	<p>RENTAL ASSISTANCE</p> <ul style="list-style-type: none"> <input type="checkbox"/> Supporting documentation for expense (e.g., eviction letter, court documents, bill/invoice, etc.) <ul style="list-style-type: none"> <input type="checkbox"/> Rental arrears – supporting documentation <input type="checkbox"/> Current/ongoing rental assistance – supporting documentation <input type="checkbox"/> Rental application fees – supporting documentation <input type="checkbox"/> Other ESG eligible fees/penalties (see ESG guidance/FAQs) – supporting documentation -- AND -- <input type="checkbox"/> Copy of rental lease or occupancy agreement for unit assisted with ESG <ul style="list-style-type: none"> <input type="checkbox"/> Rental arrears – copy of lease or occupancy agreement <input type="checkbox"/> Current/ongoing rental assistance – copy of lease or occupancy agreement -- AND -- <input type="checkbox"/> Documentation indicating arrears assistance not greater than 6 months total -- AND -- <input type="checkbox"/> Documentation indicating total assistance (including arrears) not greater than 18 months total
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	<p>UTILITY PAYMENT</p> <ul style="list-style-type: none"> <input type="checkbox"/> Supporting documentation for expense (e.g., shut-off notice, print-out from utility company, bill/invoice, etc.) <ul style="list-style-type: none"> <input type="checkbox"/> Utility arrears – supporting documentation <input type="checkbox"/> Current/ongoing utility assistance – supporting documentation <input type="checkbox"/> Other ESG eligible fees/penalties (see ESG guidance/FAQs) – supporting documentation -- AND -- <input type="checkbox"/> If utility not in ESG participant name, other documentation indicating ESG participant responsibility for utility -- AND -- <input type="checkbox"/> Documentation indicating arrears assistance not greater than 6 months total -- AND --

Applicable <input checked="" type="checkbox"/>	In File <input checked="" type="checkbox"/>	ESG FINANCIAL ASSISTANCE – Documentation showing eligible use of ESG Financial Assistance. NOTE: indicate where documentation is kept if not in participant case file (e.g., “supporting documentation for expenses kept in accounts payable file”).
		<input type="checkbox"/> Documentation indicating total assistance (including arrears) not greater than 18 months total
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	SECURITY DEPOSIT <input type="checkbox"/> Supporting documentation for expense (e.g., current lease, letter from landlord, bill/invoice, etc.)
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	MOVING COSTS <input type="checkbox"/> Supporting documentation for expense (e.g., bill/invoice, etc.) -- AND – <input type="checkbox"/> Supporting documentation that vendor had best/most reasonable cost (e.g., newspaper ads, quotes, etc.) -- AND (for storage costs)– <input type="checkbox"/> Documentation indicating assistance not greater than three months or until participant is in housing, which ever occurs sooner
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	HOUSING VOUCHER <input type="checkbox"/> Supporting documentation for expense (e.g., bill/invoice, etc.) -- AND – <input type="checkbox"/> Supporting documentation that vendor had best/most reasonable cost (e.g., newspaper ads, quotes, etc.) -- AND – <input type="checkbox"/> Documentation indicating no appropriate shelter bed(s) available (e.g., ESG staff description of attempt to secure placement in emergency shelter and lack of available, appropriate bed(s))
Notes:		

Applicable <input checked="" type="checkbox"/>	In File <input checked="" type="checkbox"/>	HOUSING UNIT - Documentation showing ESG assistance used for eligible housing unit.
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	RENT REASONABLENESS – If receiving ESG Financial Assistance (current/ongoing rent or security deposit) AND staying in current unit or moving to new housing unit. <input type="checkbox"/> Documentation indicating rent charged for unit is comparable with unassisted units with similar amenities.
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	HABITABILITY STANDARDS INSPECTION – If receiving ESG Financial Assistance (any type) AND moving to new housing unit. <input type="checkbox"/> Documentation indicating unit meets HUD Habitability Standards for ESG (or higher standard if set by grantee, e.g. Housing Quality Standards (HQS)).
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	LEAD-BASED PAINT INSPECTION – If receiving ESG Financial Assistance (any type) AND staying in current housing unit or moving to new housing unit AND unit built before 1978 AND child under 6 years old or pregnant woman in household. <input type="checkbox"/> Documentation indicating unit passed lead-based paint inspection.
Notes:		

Applicable 	In File 	HOUSING UNIT - Documentation showing ESG assistance used for eligible housing unit.

ESG Housing Options and Resources Eligibility

“But For” Certification

Applicant Name: _____

This document is to certify that the above named applicant or household has explored all re-housing options and all available resources. The case manager also certifies that a comprehensive assessment was completed and that the findings are such that the above named applicant or household would remain homeless **but** for ESG RRH assistance. (see attached assessment)

Client Certification

Under penalty of perjury I, _____ affirm the following statements to be true.

- a. I affirm that I have explored all housing options, (family, friends, public housing, and private housing), and that I have not been able to secure housing.
- b. I affirm that I have accurately reported my family composition and total family income.
- c. I affirm that my household lacks the financial resources and support networks needed to obtain immediate housing (i.e. start up costs, etc.) .
- d. I affirm that I am not receiving financial assistance for the same reason that I am applying for ESG funds.
- e. I affirm that I would re-main homeless **but** for ESG assistance.

Applicant’s Signature

Date:

Case Manager Certification

Under penalty of perjury I, _____ affirm the following statements to be true.

- a. Upon completion of assessment, I affirm that the above named applicant has proven that they have explored all housing options and have not been successful with securing housing .
- b. Upon completion of assessment, I affirm that the above named applicant/household lacks the financial resources and support networks needed to obtain immediate housing.
- c. I certify that I have completed a thorough assessment, including alternative housing options, income and asset verifications and homeless verifications, and believe that the above named applicant or household would re-main homeless **but** the ESG assistance.

Case Manager’s Signature

Date:

ESG Income Eligibility Calculation Worksheet

To be eligible for ESG Homelessness Prevention, households must be at or below 30% of the Area Median Income (and meet other ESG eligibility requirements, as outlined in the Notice). Households receiving Rapid Re-housing services must be at or below 30% of the Area Median Income(AMI) at recertification. A copy of this worksheet must be kept in the client's file.

Household Member Number	Household Member Name		Age of Household Member		
1	Jane Smith		50		
2	Bob Smith		16		
3	Joe Smith		19		
4					
5					
6					
7					
8					
9					
10					
11					
	Total Household Members (Household size)		3		
	30% of Area Median Income (AMI) for Household Size		\$ 26,450		
Household Member Number/Name	Sources of Household Income	Gross Documented Current Income Amount	Frequency of Income	Number of Payments per Year	Annual Gross Income (gross income amount X # of payments per year)
1/Jane Smith	Earned Income (for ADULT household members only)	\$ 120	Weekly	52	\$ 6,240
3/Joe Smith	Earned Income (for ADULT household members only)	\$ 400	Bi-Weekly	26	\$ 10,400
	Earned Income (for ADULT household members only)	\$ -			\$ -
	Self-employment/business income	\$ -			\$ -
	Self-employment/business income	\$ -			\$ -
	Interest & Dividend Income	\$ -			\$ -
	Interest & Dividend Income	\$ -			\$ -
	Pension/Retirement Income	\$ -			\$ -
	Pension/Retirement Income	\$ -			\$ -
	Unemployment & Disability Income	\$ -			\$ -
	Unemployment & Disability Income	\$ -			\$ -
	TANF/Public Assistance	\$ -			\$ -
	TANF/Public Assistance	\$ -			\$ -
1/Jane Smith	Alimony, Child Support and Foster Care Income	\$ 250	Monthly	12	\$ 3,000
	Alimony, Child Support and Foster Care Income	\$ -			\$ -
	Armed Forces Income	\$ -			\$ -
	Armed Forces Income	\$ -			\$ -
	Other (specify):	\$ -			\$ -
	Other (specify):	\$ -			\$ -
	Total Annual Gross Income from all Sources				\$ 19,640
	30% of Area Median Income for Household Size:				\$ 26,450
	Variance (If income less than AMI, then household is income eligible)				\$ (6,810)
	Is the household at or below 30% Area Median Income?				YES-Income Eligible

Emergency Solutions Grants Program (ESG)

VERIFICATION OF INCOME

ESG Applicant(s) Name: _____

Instructions for Employer/Payment Source Representative: This is to certify the income received by the above named individual for purposes of participating in the ESG program. This information will be used only to determine the eligibility status and level of benefit of the household. **Complete only the selected section below that includes an authorization to release information.**

Please return this form to:

Name & Title: _____

Phone: _____

Address: _____

Fax: _____

Email: _____

Employment Income

ESG Applicant Release: I hereby authorize the release of the following employment information.

ESG Applicant Signature: _____ Date: _____

Employer representative to complete this section:

The person named above is employed by _____ since _____. He/she is paid \$ _____ on a _____ basis and is currently working an average of _____ hours per _____.

Additional compensation please specify (if any): _____

Probability of continued employment: _____

Authorized Employer Representative Signature: _____ Date: _____

Name, Title: _____

Address and Phone: _____

Payments and/or Benefit Income (complete one form for each distinct source of income for person named above)

CIRCLE ONE: Social Security/SSI Pension/Retirement TANF
 Public Assistance Unemployment Compensation Workers Compensation
 Alimony Payments Foster Care Payments Child Support Payments
 Armed Forces Income
 Other (pls. specify): _____

ESG Applicant Release: I hereby authorize the release of the following payment and/or benefit information.

ESG Applicant Signature: _____ Date: _____

Payment source representative to complete this section:

Payments or benefits in the amount of \$ _____ are paid on a _____ basis. The expected duration of the payments or benefits is _____.

Authorized Payment Source Representative Signature: _____ Date: _____

Name, Title: _____

Address and Phone: _____

SELF-DECLARATION OF INCOME

Applicant Name: _____

***This form should only be used if third party verification of income is unavailable. ESG providers are expected to have exhausted all alternative options for verifying income prior to use of a self-declaration of income.**

This is to certify the income status for the above named individual. Income includes but is not limited to:

- The full amount of gross income earned before taxes and deductions.
- The net income earned from the operation of a business, i.e., total revenue minus business operating expenses. This also includes any withdrawals of cash from the business or profession for your personal use.
- Monthly interest and dividend income credited to an applicant's bank account and available for use.
- The monthly payment amount received from Social Security, annuities, retirement funds, pensions, disability and other similar types of periodic payments.
- Any monthly payments in lieu of earnings, such as unemployment, disability compensation, SSI, SSDI, and worker's compensation.
- Monthly income from government agencies excluding amounts designated for shelter, and utilities, WIC, food stamps, and childcare.
- Alimony, child support and foster care payments received from organizations or from persons not residing in the dwelling.
- All basic pay, special day and allowances of a member of the Armed Forces excluding special pay for exposure to hostile fire.

Check only one box and complete only that section

I certify, under penalty of perjury, that I currently receive the following income:

Source: _____ Amount: _____ Frequency: _____
Source: _____ Amount: _____ Frequency: _____
Source: _____ Amount: _____ Frequency: _____

Applicant Signature: _____ Date: _____

I certify, under penalty of perjury, that I do not have any income from any source at this time.

Applicant Signature: _____ Date: _____

Staff Verification

I understand that third-party verification is the preferred method of certifying income for HPRP assistance. I understand self declaration is only permitted when I have attempted to but cannot obtain third party verification.

Documentation of attempt made for third-party verification:

Staff Signature: _____ Date: _____

EMERGENCY SOLUTIONS GRANTS (ESG) PROGRAM

SELF-DECLARATION OF HOUSING STATUS

ESG Applicant Name: _____

- Household without dependent children (complete one form for each adult in the household)
- Household with dependent children (complete one form for household)
- Number of persons in the household: _____

This is to certify that the above named individual or head of household is currently homeless or at-risk of homelessness, based on the following and other indicated information and the signed declaration by the applicant.

Check only one:

- I [and my children] am/are currently homeless and living on the street (i.e. a car, park, abandoned building, bus station, airport, or camp ground).
- I [and my children] am/are the victim(s) of domestic violence and am/are fleeing from abuse.
- I [and my children] am/are being evicted from the housing we are presently staying in and must leave this housing within the next ____ days.
- I [and my children] am/are at risk of being evicted from the housing we are presently staying in.

I certify that the information above and any other information I have provided in applying for ESG assistance is true, accurate and complete.

ESG Applicant Signature: _____ Date: _____

ESG Staff Certification

I understand that third-party verification is the preferred method of certifying homelessness or risk for homelessness for an individual who is applying for ESG assistance. I understand self declaration is only permitted when I have attempted to but cannot obtain third party verification.

Documentation of attempt made for third-party verification:

ESG Staff Signature: _____ Date: _____

Notice of Ineligibility for ESG Homelessness Prevention Assistance

Date: _____

Name: _____

Address, City and Zip: _____

Your household does not meet the minimum eligibility or qualification standards for ESG assistance for the reason(s) stated below. If you disagree with this decision, you have the right to an informal review (See below).

- Incomplete Documentation;** household failed to provide all required supporting documentation. Missing documentation was _____
- Over Income;** total household income exceeds program eligibility income limits. Maximum household income for your household is \$_____ and your income is \$_____
- Does not meet ESG guidelines for at risk of homelessness;** household does not have a writ of summary process and complaint
- No members of the household meet the additional criteria for ESG services;** history of homelessness, history of domestic violence, household member with disability
- Property Owner not willing to Participate;** household's landlord refused to accept RAFT payments offered by Agency on behalf of the household.
- Receiving other benefits;** household is receiving other benefits of the same type at the same time
- Does not have sufficient financial resources to maintain the housing based on current income.**
- Other;** _____

Administrative Review: If you disagree with this decision, you have the right to request a review.

To request a review, you must send a written request **specifically** stating why you believe our determination is incorrect. This **written request** must be mailed or hand delivered within 10 calendar days of the notice of ineligibility and addressed to: *ESG Agency address*.

You may submit additional documentation or written arguments with your request for review. Reviews will be performed by a supervisor who is familiar with the program but unfamiliar with your particular case. Administrative Review is different from a hearing, no testimony will be taken so you **must submit** any additional documentation (i.e. increased income, etc.), and the explanation of your circumstance or legal argument **with your request** to have this information included in this review.

A written ESG review will be conducted within 15 calendar days of your request for a review. You will be notified at the address you provided and a written finding will be placed in your file. There is no appeal to the City of Worcester pending this finding.

RENT REASONABLENESS CHECKLIST AND CERTIFICATION

	Proposed Unit	Unit #1	Unit #2	Unit #3
Address				
Number of Bedrooms				
Square Feet				
Type of Unit/Construction				
Housing Condition				
Location/Accessibility				
Amenities Unit: Site: Neighborhood:				
Age in Years				
Utilities (type)				
Unit Rent Utility Allowance Gross Rent				
Handicap Accessible?				

CERTIFICATION:

A. Compliance with Payment Standard

_____ + _____ = _____
Proposed Contract Rent + Utility Allowance = Proposed Gross Rent

Approved rent does not exceed applicable Payment Standard of

\$_____.

B. Rent Reasonableness

Based upon a comparison with rents for comparable units, I have determined that the proposed rent for the unit [] is [] is not reasonable.

Name:	Signature:	Date:
-------	------------	-------

ESG-RRH LANDLORD ACKNOWLEDGEMENT FORM

Date: _____

This is to confirm that _____ will rent an
(Tenant's Name)

apartment from me at _____

_____ for a monthly rent amount of:

\$ _____. The start date for this tenancy will be: _____.

Number of Bedrooms _____ Year Constructed _____, (Prior to 1978) attached De-Lead Certification

Square Feet _____ Handicap Accessible Yes No

Type of House/Apartment: Elevator/High-Rise

Single Family Detached Semi Detached/Row House Manufactured Home Garden Walkup

Who is responsible for Utilities and Appliances? (Please Check One).

Utility	Landlord will pay	Tenant will pay
Heating		
Hot Water		
Gas		
Trash		
Electric		
Stove		
Refrigerator		

Rent Reasonable: Under Funding regulations, the program required that the landlord certify that the rent charged to the above named tenant is not more than the rent charged for other unassisted comparable units.

Address and Unit Number	Square Feet	# of Bedrooms	Handicap Accessible	Year Constructed	Date Rented	Rental Amount
			Y N			\$
			Y N			\$
			Y N			\$

Shallow Subsidy: If the tenant will be receiving short-term help towards his or her rent, I acknowledge receipt of the attached Shallow Subsidy Agreement. I understand a copy of this agreement is being provided to me for informational purposes only. It is not a guarantee of a subsidy. If a subsidy is put into place, it will be effective for up to 12 months. I understand that if the tenancy should end before the 12 months is up, the subsidy will also end at that time. I also understand that the subsidy is contingent upon the tenants compliance with the program. I understand that this agreement is also contingent upon the unit's compliance with HUD habitability standards. I do agree to notify the case manager/contact identified below if tenant fails to remit rental payment within five (5) days of due date.

Landlord Contact Information: Address _____

Phone: _____ Fax: _____

Check Payable To: _____

Sincerely,

Signature _____ Date _____

(Landlord Signature)

ESG Housing Habitability Standards and Lead-Based Paint Inspection Checklist

The new ESG Shelter and Housing Standards are described in Section 576.403 of the ESG Interim Rule. These habitability standards **apply any time ESG funds are used to assist an ESG participant retain or move into a housing unit.** Inspections must be conducted upon initial assistance and then on an annual basis for the term of ESG assistance. In contrast to the Housing Quality Standards (HQS), the habitability standards **do not require a certified inspector.** This checklist also addresses the ESG requirement on determining that a unit is in compliance with federal laws regarding lead based paint if the unit where an ESG participant household is residing/intends to reside was constructed prior to 1978 **and** the household includes a pregnant woman or a child under the age of 6. The ESG grantee must conduct the inspections using this form to document compliance.

Instructions: Mark each statement as ‘A’ for approved or ‘D’ for deficient. The property must meet all standards before ESG funds are authorized. The checklist must be kept in the ESG Participant’s record.

Approved or Deficient	Element
	1. <i>Structure and materials:</i> The structures must be structurally sound so as not to pose any threat to the health and safety of the occupants and so as to protect the residents from hazards.
	2. <i>Access:</i> Structures must provide alternate means of egress in case of fire.
	3. <i>Space and security:</i> Each resident must be afforded adequate space and security for themselves and their belongings. Each resident must be provided with an acceptable place to sleep.
	4. <i>Interior air quality:</i> Every room or space must be provided with natural or mechanical ventilation. Structures must be free of pollutants in the air at levels that threaten the health of residents.
	5. <i>Water Supply:</i> The water supply must be free from contamination.
	6. <i>Sanitary Facilities:</i> Residents must have access to sufficient sanitary facilities that are in proper operating condition, may be used in privacy, and are adequate for personal cleanliness and the disposal of human waste.
	7. <i>Thermal environment:</i> The housing must have adequate heating and/or cooling facilities in proper operating condition.
	8. <i>Illumination and electricity:</i> The housing must have adequate natural or artificial illumination to permit normal indoor activities and to support the health and safety of residents. Sufficient electrical sources must be provided to permit use of essential electrical appliances while assuring safety from fire.

	9. <i>Food preparation and refuse disposal:</i> All food preparation areas must contain suitable space and equipment to store, prepare, and serve food in a sanitary manner.
	10. <i>Sanitary condition:</i> The housing and any equipment must be maintained in sanitary condition.
	<p>11. <i>Fire safety:</i> Both conditions below must be met to meet this standard.</p> <p>b. Each unit must include at least one battery-operated or hard-wired smoke detector, in proper working condition, on each occupied level of the unit. Smoke detectors must be located, to the extent practicable, in a hallway adjacent to a bedroom. If the unit is occupied by hearing-impaired persons, smoke detectors must have an alarm system designed for hearing-impaired persons in each bedroom occupied by a hearing-impaired person.</p> <p>a. The public areas of all housing must be equipped with a sufficient number, but not less than one for each area, of battery-operated or hard-wired smoke detectors. Public areas include, but are not limited to, laundry rooms, day care centers, hallways, stairwells, and other common areas.</p>
	<p>12. Required in buildings constructed prior to 1978 and where an ESG participant household intends to reside and the household includes a child under the age of 6.</p> <p>Visual assessment means looking for, as applicable: (1) Deteriorated paint (chipping, loose, crumbling); (2) Visible surface paint dust, debris and residue as part of a risk assessment or clearance examination; and (3) The completion or failure of a hazard reduction measure.</p> <p><input type="checkbox"/> The unit or non DHCD funded shelter has no observable loose, chipping, or deteriorated paint; or</p> <p><input type="checkbox"/> The landlord presented a report from a licensed inspector showing the site is lead free, or the lead has been removed or encapsulated as required under MA state law. (If so, check this box)</p>

CERTIFICATION STATEMENT

I certify that I am not a HUD certified inspector and I have evaluated the property located at the address below to the best of my ability and find the following:

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

Therefore, I make the following determination:

- Property is approved.

Property is not approved.

ESG Participant Head of Household Name:			
Street Address:			
Apartment:	City:	State:	Zip:
Evaluator's Signature:	_____		Date: _____
Please Print Evaluator Name: _____			
Exec. Dir. Initials: _____			

Emergency Solutions Grants (ESG) Performance Report

Project Sponsor:	Project Name:
Sponsor Address: City: State: Zip Code	
Contact Person: Email	Telephone #
Report for Period Ending: <input type="checkbox"/> June 30 th due July 15 th <input type="checkbox"/> September 30 th due October 15 th <input type="checkbox"/> December 30 th due January 15 th <input type="checkbox"/> March 31 st due April 15 th	

ESG Activity:

- Emergency Shelter Homeless Prevention HMIS
 Street Outreach Rapid Re-Housing

ESG Program Type:

- Emergency Shelter Scattered Site Child Care Services
 Day Shelter Legal Services Hotel/Motel/SRO/Group Home
 Health Care Provider Mediation Services Domestic Violence Services
 Substance Abuse Program Employment Services Other _____
 Housing Search Program HIV/AIDS Services

Accomplishment Narrative: Describe your ESG funded program's accomplishment for the year. (No more than 250 words)

Number Served:

A. Number Proposed to be Served on Scope of Work.	Number of singles not in families	Number of adults in families	Number of children in families	Number of families
Annually				
B. Number Served for the Program Year.	Number of singles not in families	Number of adults in families	Number of children in families	Number of families
Annually				

	Number of individuals	Number of families
C. Number on the first day of the program year.		

D. Number entering program during the program year.		
E. Number who exited the program during the program year.		

F. Number of Single Individuals Served	Male	Female	Total
Unaccompanied under 18			
Adults 18 to 25			
Adults over 25			
Total			

G. Families Served	Total
Two parent households with children	
Family households with no children	
Single parent household with children	
Households with all children	
Total	

Population Served: (total persons served)

A. Race:

Hispanic

(Please indicate if this person is of Hispanic/Latino origin)

American Indian/Alaskan Native		
Asian		
Black/African American		
Native Hawaiian/Other Pacific Islander		
White		
American Indian/Alaskan Native & White		
Asian & White		
Black/African American & White		
American Indian/Alaskan Native & Black/African American		
Other Multi-Racial		

B. Subpopulations Served: (only one category per persons served)

Chronically Homeless (emergency shelter only)	
Severely Mentally ill	
Chronic Substance Abuse	
Other Disability	
Persons with HIV/AIDS and related diseases	
Veterans	
Elderly	
Domestic violence	
Other (please specify)	

Reasons for service request (households served –includes individuals not in families and families served)

Eviction proceedings	
Loss of or sudden reduction in family income	

Divorce	
Change in Family Composition	
Unable to pay/rent/mortgage/utilities	
Argument with family /friends	
Family Violence	
Prison/Jail	
Welfare time Limits	
Physical/Mental Disability	
Alcohol/Drug Abuse	
Other :	

V. Destination at Exit: (households served –includes individuals not in families and families served)

Transitional housing	
Permanent housing	
Emergency shelter	
Institution (hospital, inpatient substance abuse treatment facility, jail/prison)	
Retained Tenancy/Housing	
Other (please specify)	
Unknown/disappeared	

VI. Services Provided (total served):

A. Homeless Assistance: (Please indicate total number served for the program year)

	Adults	Children
Outreach		
Life Skills		
Needs Assessments		
Child Care		
Transportation		
Job Training		
Assistance in obtaining income support		
Legal Services		
Food Pantry		
Case Management		
Client Advocacy		
Nutritional Services		
Alcohol/Drug Abuse Treatment		
Job Placement		
Housing Search		
Rapid Re-Housing		
Day Services		
Medical/Mental Health Services		
Other (please indicate)		

B. Homeless Prevention: (Please indicate total number served for the program year)

	Adults	Children
Rental Assistance		
Short Term Subsidies to defray rent and utility arrearages		
Security deposits or first month rent to enable them to move into permanent housing		
Utility Assistance		
Mediation Services for landlord/tenant disputes		
Legal services in eviction proceedings		
Diversion from Shelter		
Stabilization Services		
Tenancy Preservation		
Other (please indicate)		

Outcomes: (Using the projected numbers on the Scope of Work document, please indicate the progress for each goal achieved during the program year)

Outcomes:

A. Rapid-Re-Housing/Emergency Shelter: (households served –includes individuals not in families and families served during the contract period)

	%	#
Reduction of the number of households in shelter		
Reduction in average length of shelter stay		
Rapidly Re-Housed those entering the shelter system		
Placed into permanent affordable housing		
Provided stabilization services for those exiting shelter to permanent Housing		
Linked program participants to asset development resources that resulted in an increase in income (education, job training, employment, mainstream resources)		

B. Street Outreach (households served –includes individuals not in families and families served during the contract period)

	%	#
Reduced the Number of Unsheltered single adults in the Boston CoC		
Placed Unsheltered single adults into any type of housing		
Unsheltered Adults received a service for an identified physical or mental health condition for which they were not receiving services at program entry		

C. Homeless Prevention: (households served –includes individuals not in families and families served during the contract period)

	%	#
Diverted from Shelter		
Tenancies preserved		
Evictions prevented		
Provided stabilization Services for households at imminent risk of becoming homeless		
Linked program participants to asset development resources that resulted in an increase in income (education, job training, employment, mainstream resources)		
Provided Landlord-Tenant mediation		
Provided Financial Assistance		

VIII. Financial:
ESG Expenditures – By Component Type

Component Type	ESG Funds	Match	Match Source	Total Expenditures
Street Outreach				
Emergency Shelter				
Rapid Re-Housing				
Homelessness Prevention				
Total				

ESG Expenditures – By Service Type

Expenditure Type	ESG Funds	Match	Match Source	Total Expenditures
Emergency Shelter				
Day Shelter				
Health Care				
Substance Abuse Program				
Housing Search				
Street Outreach				
Meal Services				
Mental Health Services				
Employment Search				
Homeless Prevention				
Rapid Re-Housing				
Vouchers for Shelter				
Rental Assistance				
HIV/AIDS Services				
Child Care				
Financial Assistance				
Stabilization Services				
Moving Costs				
Total				

SUBRECIPIENT MONTHLY/ QUARTERLY TIMESHEET

Please Select:	FISCAL YEAR 2012 <input type="checkbox"/>	FISCAL YEAR 2013 <input type="checkbox"/>	FISCAL YEAR 2014 <input type="checkbox"/>
Please Select:	CDBG Program <input type="checkbox"/>	HOME Program <input type="checkbox"/>	ESG Program <input type="checkbox"/>
ORGANIZATION NAME:			HOPWA <input type="checkbox"/>
PROGRAM NAME:			CoC Program <input type="checkbox"/>
REQUEST PERIOD:	TO:	PERCENTAGE RATE: (According to Application)	0.00%

Sub-Recipient / Employee Time Sheet for Program Personnel

EMPLOYEE NAME	ACTIVITY	DATE	PAY RATE	Day of Week (Week 1)							Total Number of Hours	Total Program Hours Worked	PROGRAM REIMBURSEABLE PAY
				M	T	Wed.	Th.	Fri.	Sa.	Su.			
			\$0.00	<input type="checkbox"/>	0	0	\$0.00						
			\$0.00	<input type="checkbox"/>	0	0	\$0.00						
			\$0.00	<input type="checkbox"/>	0	0	\$0.00						
			\$0.00	<input type="checkbox"/>	0	0	\$0.00						
			\$0.00	<input type="checkbox"/>	0	0	\$0.00						
			\$0.00	<input type="checkbox"/>	0	0	\$0.00						
			\$0.00	<input type="checkbox"/>	0	0	\$0.00						
Total Number of Hours Worked -											0.0	0.0	\$0.00

Total Number of Hours	0.0
Total Number of Program Hours	0.0
Rate of Pay Per Hour	\$0.00
Percentage Rate - According to Application	0.0%
Total Pay Period 1 Amount	\$0.00

Sub-Recipient / Employee Time Sheet for Program Personnel

EMPLOYEE NAME	ACTIVITY	DATE	PAY RATE	Day of Week (Week 2)							Total Number of Hours	Total Program Hours Worked	PROGRAM REIMBURSEABLE PAY
				M	T	Wed.	Th.	Fri.	Sa.	Su.			
			\$0.00	<input type="checkbox"/>	0	0	\$0.00						
			\$0.00	<input type="checkbox"/>	0	0	\$0.00						
			\$0.00	<input type="checkbox"/>	0	0	\$0.00						
			\$0.00	<input type="checkbox"/>	0	0	\$0.00						
			\$0.00	<input type="checkbox"/>	0	0	\$0.00						
			\$0.00	<input type="checkbox"/>	0	0	\$0.00						
			\$0.00	<input type="checkbox"/>	0	0	\$0.00						
Total Number of Hours Worked -											0.0	0.0	\$0.00

Total Number of Hours	0.0
Total Number of Program Hours	0.0
Rate of Pay Per Hour	\$0.00
Percentage Rate - According to Application	0.0%
Total Pay Period 2 Amount	\$0.00

Date & Signature of Staff Personnel	Signature: _____	Date: _____
Date & Signature of Staff Supervisor	Signature: _____	Date: _____

**Note: Please be sure to attach the approved timesheets and pay stub together when submitting program reimbursements to the Division of Grants Management for either CDBG, HOME, ESG and HOPWA programs.*

TIME AND EFFORT LOG

Employee's Name _____

Social Security # or Employee # _____ Pay Period Dates _____

DAY	Funding Source 1	Funding Source 2	Funding Source 3	Funding Source 4	TOTALS
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
TOTALS					
%					

Employee's Signature/Date: _____

Supervisor's Signature/Date: _____