

ESG-CV Rapid Rehousing, Shelter, Outreach (RSO) Application

Introduction

The Indiana Housing and Community Development Authority (IHCDA) received communication from the U.S. Department of Housing and Urban Development (HUD) that it would receive special Emergency Solutions Grants (ESG) Program funds allocated to the Indiana Balance of State jurisdiction as authorized by the Coronavirus Aid, Relief, and Economic Security Act (CARES Act), Public Law 116-136.

IHCDA is ESG-CV accepting applications from organizations for rapid rehousing, shelter operations, and/or street outreach (RSO) efforts due to an increased need for services due to the COVID-19 pandemic. These special ESG-CV funds are to be used to prevent, prepare for, and respond to the coronavirus pandemic (COVID-19) among individuals and families who are homeless or receiving homeless assistance; and to support additional homeless assistance and homelessness prevention activities to mitigate the impacts of COVID-19. For example:

- Rapid re-housing funds can be used to assist individuals affected by COVID-19 by providing short-term rental assistance and services that assist them in obtaining housing quickly, increasing self-sufficiency, and staying housed.
- Shelter Operations funds can be used to support emergency shelters that are experiencing increased demand for their services during the COVID-19 pandemic.
- Street Outreach funds can be used to engage unsheltered people to connect individuals with emergency services and other services to mitigate the spread of COVID-19.

Applications for these funds will be available during the late fall/winter months between November and March. Use of the funds are available through September 30, 2022.

Instruction

Please complete this RSO application for funding assistance for rapid rehousing, shelter operations, and/or street outreach and submit to: communityservices@ihcda.in.gov.. Applications can be accepted at any time during the month and must be received by the following dates:

- November 30, 2020, at 5:00 PM ET
- December 31, 2020, at 5:00 PM ET
- January 29, 2020, at 5:00 PM ET
- February 26, 2020, at 5:00 PM ET
- March 26, 2020, at 5:00 PM

If the organization has recently submitted an FY2020 ESG funding application, please complete pages 2-7 of this application. For organizations new to ESG funding or currently not receiving funding in which IHCDA would have collected this documentation, you will need to include the following items with your application:

- General Liability Insurance documentation (Summary page showing coverage is all that is needed)

- Fidelity Bond Insurance documentation (should be equal to 1/2 of the total annual funding provided by the state and should cover all employees/ board members handling funds)
- Copy of Workers Compensation and Unemployment Insurance (summary page only)
- Copy of Automobile Insurance if applicable
- Copy of current building fire inspection (passed) dated within the last year (Shelters)
- Copy of current building health inspection (passed) dated within the past year or official exemption (Shelters)
- Articles of Incorporation
- State Emergency Shelter Grants Program funds provided directly to nonprofit organizations must have the approval of the local government in which the project is located. Please see Appendix B

If the organization has not received ESG funding and did **NOT** submitted an FY2020 ESG funding application, has received other IHEDA funding, e.g. Continuum of Care funding, or has not received previous funding, please complete the entire application (pgs. 2-12)

Decisions will be made and communicated to subrecipients within 14 business days.

Please contact communityservices@iheda.in.gov should you have any questions.

Application Date: _____

Contact Information

Legal Organization Name _____ DUNS # _____
Street Address _____ Federal ID# _____
City, State, Zip _____ County _____
Phone _____

President / Executive
Director _____
Phone _____ Email _____

Contact Person (if different) _____
Title _____
Phone _____ Email _____

Organizational Information

Which kind of funding are you applying for?

- ESG Shelter
- ESG Outreach
- ESG Rapid Rehousing

Do you currently receive regular ESG funding for rapid rehousing, homelessness prevention, shelter operations, and/or street outreach?

Yes No

If yes, which type? Select all that apply.

- ESG Rapid Rehousing and Homelessness Prevention
- ESG Shelter Operations
- ESG Street Outreach
- Other: _____

What type of rental assistance experience does your agency have?

- ESG RR/HP
- Continuum of Care Funding (CoC) – Permanent Supportive Housing, Rapid Rehousing, or Joint Transitional-Rapid Rehousing
- HOPWA
- Section 8
- PSH
- TANF
- Other: _____

Do you participate in the Regional Planning Council in your region? Yes No

Brief description of your organization including summary of programs and services offered:

How has your agency been affected by the COVID-19 outbreak? How is your agency currently responding to the COVID-19 outbreak?

Please describe your organization's capacity to assist an increased number of individuals affected by the COVID-19 pandemic.

What are the main challenges you are facing due to COVID-19 and how would additional funding help with those challenges?

Please describe how you are currently coordinating with other agencies in your region to address the current issues related to the COVID-19 pandemic.

Threshold Requirements

Is your organization a 501(c)(3) organization Yes No

Applicant must be a private non-profit organization (defined as tax-exempt secular or religious organizations described in section 501(c) of the Internal Revenue Code). Documentation of this status must be submitted with the application.

Are you an organization that is currently in good standing with IHCDA, the State of Indiana, and the federal government? Yes No

Applicant must certify that neither it nor its principals nor any of its subcontractors are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from doing business or receiving funds from any federal agency or by any department, agency or political subdivision of the State.

First-Time Applicant Threshold Requirements

If you are a first-time ESG applicant, please complete the following questions and then proceed to page 7 to complete the first time applicant questions.

○ Have you verified your registration with SAM.gov? Yes No

Applicant must take the following steps to confirm its status:

- Visit the following link:
<https://www.sam.gov/SAM/pages/public/searchRecords/search.jsf>
- Type the Applicant's name where it is asked to "Enter your specific search term"
- Press the box entitled "View Details"
- Print the results/ save as a PDF; and
- Submit the results with the application as a PDF along the application and other required supporting documentation.

○ Does your organization have any unresolved findings from IHCDA or HUD or any state or federal recaptured funds due to non-compliance? Yes No

If yes, please provide an explanation and submit any supporting documentation:

○ Are you affiliated with your Regional Planning Council? Are you willing to participate in their on-going meetings?

In order to ensure that the Continuum of Care is obtaining feedback from all of our partners and incorporating that feedback into our goals and work, your attendance and participation in the regional planning council is needed and helps ensure we are listening to all of our state-wide partners.

○ Is your organization located in the Balance of State Continuum of Care (IN-502)? Yes No

All counties except Marion are eligible to apply

- Is your agency following the *Housing First*-required HUD policy? Yes No
Housing First is an approach to connect individuals and families experiencing homelessness quickly and successfully to permanent housing without preconditions and barriers to entry, such as sobriety, treatment, or service participation requirements. Please provide a written copy of your policy regarding Housing First.

If no, please provide an explanation:

- Do you make your nondiscriminatory policies available to your clients? Yes No
In accordance with 24 CFR 576, the Applicant must describe how it will make known that use of the facilities, assistance, and services are available to all on a nondiscriminatory basis and describe how it will take appropriate steps to ensure effective communication with persons with disabilities including, but not limited to, adopting procedures that will make available to interested persons information concerning the location of assistance, services, and facilities that are accessible to persons with disabilities. Consistent with Title VI and Executive Order 13166, The Applicant is also required to take reasonable steps to ensure meaningful access to programs and activities for limited English proficiency (LEP) persons. Please provide a description of non-discrimination policy:

Funding and Budget

Please complete the information below for the requested funding need only. For example, if you indicated above that you would like to receive funding for shelter operations, please only complete the information under emergency shelter. Please provide a budget narrative including justification of the need for additional funding as an attached separate document.

Funding Amount Requested: _____ Proposed Number Served: _____

Is your organization receiving city ESG funds? Yes No

If yes, check all that apply:

- Outreach Shelter Rapid Rehousing

Proposed Service Area (list counties or cities):

Rapid Rehousing and Homelessness Prevention

Financial Assistance-Rapid Rehousing	
Relocation and Stabilization -Rapid Rehousing	
Financial Assistance-Homelessness Prevention	
Relocation and Stabilization-Homelessness Prevention	
Admin (up to 8% of total award)	
Total Amount	

Emergency Shelter:

Essential Services	
Shelter Operations	
Total Shelter Budget	
<i>RRH activities are available to agencies who do not have an ESG funded Rapid Rehousing program in their region. Fill in the amounts below only if applying for Rapid Rehousing under Shelter award.</i>	
Rapid Rehousing Housing- Housing	

Relocation Services:	
Rapid Rehousing Rental Assistance:	
Total Rapid Rehousing Budget Amount:	
Admin (up to 8% of total award)	
Total Requested Budget:	

Outreach:

Engagement	
Emergency Health Services	
Services for Special Populations	
Case Management	
Transportation	
Emergency Mental Health Services	
Admin (up to 8% of total award)	
Total Amount	

Certification

I hereby certify that all information that I have completed and submitted as a part of this application process is true and correct and accurately reflects the agency’s need as directly impacted by the COVID-19 pandemic. Additionally, I certify that I am legally authorized to sign this and submit this information to the Indiana Housing and Community Development Authority on behalf of said agency. I understand that any misrepresentation of information or failure to disclose information requested as a part of this application process and may be grounds for recapture of grant funds awarded or received by the agency based on fraud or omission.

Signature of Authorized Official

Date

Name (Typed or printed)

Title (Typed or printed)

First Time Applicants

Is this your agency's first time applying for ESG funds? Yes No

If yes, please provide a brief description of your organization including summary of programs and services offered.

Is your organization located in the Balance of State Continuum of Care (IN-502)? All counties except Marion are eligible to apply Yes No

Organization Type (check only one program)

- | | |
|--|---|
| <input type="checkbox"/> Emergency Shelter (overnight) | <input type="checkbox"/> Domestic Violence Shelter |
| <input type="checkbox"/> Day Shelter (does not allow overnight stay) | <input type="checkbox"/> Community Mental Health Center |
| <input type="checkbox"/> Community Action Agency | <input type="checkbox"/> Supportive Service Provider |
| <input type="checkbox"/> Other _____ | |

Does your agency currently have a rental assistance program, or do you have other experience provide homelessness services? Yes No

If yes, what types of services and what is the current funding source?

If yes, how many clients are you currently serving and what is your maximum capacity?

RRH Questions

Describe your agency's experience and training with housing needs assessments, housing case management and housing placement services, including the strategy to transition participants from homelessness to permanent housing.

Describe your experience with landlord engagement and what strategies your agency will use to connect landlords. How will program staff act as a mediator with landlords and utility companies on behalf of the program participant? Describe the communication plan for landlord and tenant disputes.

Describe your plan and timeline to ensure that all proposed units meet rent reasonable and habitability standards prior to lease-up.

If the ESG program will be new to your agency give a brief description of your program plan. Please note that if approved, additional information may be requested prior to funding.

Shelter / Outreach

If your program houses or serves children under 18, does your program ever use the age or gender of a child as a basis for denying a family's admission to the shelter? Yes No

If yes, please explain:

Does your program include mandatory services for clients as a requirement for assistance? Yes No

If yes, please explain:

Do 100% of all shelter program clients meet HUD's definition of homeless? (See HUD's homeless definition in Appendix A) Yes No

If no, please explain:

Board of Directors

- How frequently does the Board meet? _____
- Does the Board have members representing at least 4 different fields/ occupations? Yes
 No
- Is there a written set of policies and procedures for the Board? Yes No
- Does the Board have an active fiscal oversight committee? Yes No
Give a brief description of the oversight committee responsibilities

Financial Management

How many years of experience does your organization have with federal grants?

- 5 or more years
- 3-5 years
- 1-3 years
- Less than 1 year

Per the grant agreement, if a sub-recipient expends \$750,000 or more in federal awards during the sub-recipient's fiscal year, it must submit its single audit to IHCDA. If the sub-recipient expends less than \$750,000 in federal awards, it must submit its audited financial statements or 990 (IRS Form 990, (Return of Organization Exempt from Income Tax). Does your agency have a system in place to ensure this requirement is met? Yes No

In the Financial Accounting System are the following books of account used?

- General Ledger
- Cash disbursements (check register)
- Cash Receipts (deposits received)
- Fixed Assets

Are financial records maintained in a software system? Yes No

Are passwords used to access the financial system? Yes No

Is there an off-site back-up system? Yes No

What software system is used?

How many years are fiscal records maintained? HUD ESG regulations require 5 years from the end of the award period. Scoring Section (IHCDA use only)

Are the individuals who handle the organization's funds bonded? Yes No

A copy of the Bond insurance must be submitted with the application. The declaration page is sufficient.

List the name and title of the staff person responsible for the following tasks? IHCD requires at least 3 people be involved in these 4 fiscal duties.

Opens Mail	
Deposits checks and cash	
Posts cash receipts	
Reconciles checkbook with bank statements	

Program Services and Coordination

Does case management staff develop housing plans with residents?

(A housing plan allows residents to identify housing related goals and the steps necessary to achieving them.)

- Yes, housing plans are used to set goals and track progress
- No, we do not use housing plans SOAR training is a best practice model.

Does your agency have a written policy in place to ensure compliance with HUD's Lead Based Paint requirement? Yes No

This should include a system for documentation of inspections and documentation that the Lead Hazards Informational Pamphlet was provided to residents. Please provide a copy of your policy regarding Lead-Based paint.

Is your agency using the required VAWA forms and information? Yes No

(please refer to RFP instructions for details)

Is your agency entering data into HMIS/ DV Client Track within 5 days? Yes No

Is your agency participating in Coordinated Entry? Yes No

On average, how many referrals does your agency make/ receive per month?

Please indicate which programs your program and/or agency coordinates and integrates that target the homeless in your proposed service area to prevent and end homelessness.

- PSH
- Section 8 HUD-VASH
- Education for Homeless Children & Youth Grants Projects for Runaway and Homeless Youth Healthcare for the Homeless (42 CFR part51c)
- Projects for Assistance in Transition from Homelessness (PATH)
- Services in Supportive Housing Grants (section 520a of the Public Health Service Act)
- Emergency Food & Shelter Program (title III of the McKinney-Vento Homeless Assistance Act (42 U.S.C.11331 et seq.)
- Homeless Veterans Reintegration Program
- VA Homeless Providers Grant & Per Diem Program Healthcare for Homeless Veterans
- Program Veterans Justice Outreach Initiative
- Supportive Services for Veterans Families (SSVF)
- Supportive Housing for Persons with Disabilities (Section 811)
- Grants for the Benefit of Homeless Individuals (section 506 of the Public Health Services Act, 42 U.S.C. 290aa-5 Assistance for Victims of Sexual Assault & Domestic Violence
- City ESG Funding

Please indicate which programs your program coordinates and integrates with mainstream resources like health, social services, employment, education, and youth programs for which families and individuals who are homeless may be eligible.

- Public housing programs (section 9 of US Housing Act of 1937) Health Center Program (42 CFR part 51c)
- Section 8 tenant-based or project-based assistance HOME Investment Partnerships Program
- TANF Temporary Assistance for Needy Families) Health Center Program
- Supportive Housing for Persons with Disabilities (Section 811) State Children's Health Insurance Program (SCHIP)
- Head Start
- Mental Health & Substance Abuse Block Grants
- Services funded under the Workforce Investment Act 29 U.S.C. 2801 et seq.)
- Medicare
- Medicaid SSI SSDI
- Food Stamps
- WIC

Supporting Documentation Checklist

(The following items should be returned with your application via E-mail)

All Applicants

- Letter of 501(c) non-profit status determination.
- Budget Narrative with funding justification

First-Time Applicants

- List of current Board of Directors including each member's name, employer, e-mail address, phone number and term commitment.
- Copy of accounting policies & procedures
- General Liability Insurance documentation (Summary page showing coverage is all that is needed)
- Fidelity Bond Insurance documentation (should be equal to 1/2 of the total annual funding provided by the state and should cover all employees/ board members handling funds)
- Copy of Workers Compensation and Unemployment Insurance (summary page only)
- Copy of Automobile Insurance if applicable
- Copy of Housing First Policy (RRH)
- Rental Assistance Budget Worksheet (RRH)
- Copy of current building fire inspection (passed) dated within the last year (Shelter)
- Copy of current building health inspection (passed) dated within the past year or official exemption (Shelter)
- Articles of Incorporation (new applicants only)
- State Emergency Shelter Grants Program funds provided directly to nonprofit organizations must have the approval of the local government in which the project is located. (See Appendix B)
- Certification and Signature Page
- SAMS printout of eligibility verification page (See Threshold question #2.)

Appendix A: SUB-RECIPIENT REQUIREMENTS

If Applicant is selected to receive an ESG award it will be considered a sub-recipient and will need to also comply with requirements that are applicable to “subrecipients” of ESG funding:

- 1) Subrecipients must be actively providing services to homeless persons as defined by HUD in paragraph below.
 - a. An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
 - i. Has a primary nighttime residence that is a public or private place not meant for human habitation;
 - ii. Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government program); or
 - iii. Is exiting an institution where (s) he has 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.
 - b. Individual or family who will imminently lose their primary nighttime residence, provided that:
 - i. 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 needed to obtain other permanent housing
 - c. 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 related to violence against the individual or 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
- 2) Data Collection:
 - a. HMIS: Subrecipients of the Emergency Solutions Grant are required to enter all HMIS required data for homeless clients into Client Track, please contact the HMIS helpdesk hmishelpdesk@ihcda.in.gov. Domestic Violence Shelters are exempt from the HMIS requirement.
 - b. Domestic Violence Shelters: Domestic violence shelters are required to operate a comparable database. A comparable database must collect client-level data over time (i.e., longitudinal data), generate unduplicated aggregate reports from that data, and collect all of the HMIS universal data elements listed in Section F of this RFP. Information entered into a comparable database cannot be entered directly into or provided to HMIS. To sign up for the DV Version of Client Track, please contact the DV ClientTrack helpdesk at dvhelpdesk@ihcda.in.gov. The data provided into the system will be restricted to each organization and will be in compliance with the Violence Against Women’s Act. The system will collect client-level data over time including, but not limited to all of HMIS’s universal data elements, and generate unduplicated aggregate reports based on the data. Information entered into this comparable database will not be

entered directly into or provided to an HMIS.

- 3) Subrecipient must coordinate and integrate, to the maximum extent practicable, ESG-funded activities with other programs targeted to homeless people in the area covered by the Continuum of Care or area over which the services are coordinated to provide a strategic, community-wide system to prevent and end homelessness for that area.
- 4) Subrecipient must to the maximum extent practicable, have a person on the Board of Directors with lived experience in a homeless situation, (homeless or previously homeless) and involve homeless individuals and families in maintaining, and operating facilities assisted under ESG, in providing services assisted under ESG, and in providing services for occupants of facilities assisted under ESG. This involvement may include employment or volunteer services.
- 5) Subrecipients must have Internet access with regular availability of e-mail and use a financial software system for accounting purposes.
- 6) Subrecipient must sign an award agreement with IHCDA.
- 7) Subrecipients will be required to complete 4 quarterly Match/Spending Reports, due 30 days after the end of each quarter.
- 8) Only one ESG-Shelter proposal may be submitted per organization.
- 9) Subrecipient is required to participate in HUD's annual homeless Point-In-Time count held in late January.
- 10) Subrecipient is required to attend all IHCDA Award Training Webinar and any other ESG related trainings required by ESG Analyst. Dates and registration information will be e-mailed to the Subrecipient.
- 11) Subrecipient must comply with the requirements set forth in HUD's Equal Access Rule. See below for details.
- 12) Appropriate Placement for Transgender Persons in Single-Sex Emergency Shelters and Other Facilities

On February 3, 2012, HUD published the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity final rule (Equal Access Rule) (77 FR 20 5662). This final rule requires that HUD's housing programs be made available to individuals and families without regard to actual or perceived sexual orientation, gender identity, or marital status. The rule defines "gender identity" to mean "actual or perceived gender-related characteristics." 24 CFR 5.100; 77 FR at 5665. The final rule also prohibits owners and administrators of HUD-assisted or HUD-insured housing, approved lenders in an FHA mortgage insurance program, and any other recipients or subrecipients of HUD funds from inquiring about sexual orientation or gender identity to determine eligibility for HUD-assisted or HUD-insured housing. The rule does not, however, prohibit voluntary self-identification of sexual orientation or gender identity, and it provides a limited exception for inquiries about the sex of an individual to determine eligibility for temporary, emergency shelters with shared sleeping areas or bathrooms, or to determine the number of bedrooms to which a household may be entitled. 24 CFR 5.105(a)(2).

- 13) HUD Guidance for Single-Sex Emergency Shelters or Other Facilities that Receive ESG, HOPWA, or CoC Funds Assignments

HUD assumes that a recipient or subrecipient ("provider") that makes decisions about eligibility for or placement into single-sex emergency shelters or other facilities will place a potential client (or current client seeking a new assignment) in a shelter or facility that corresponds to the gender with which the person identifies, taking health and safety concerns into consideration. A client's or potential client's own views with respect to personal health and safety should be given serious consideration in making the placement. For instance, if the potential client requests to be placed based on his or her sex assigned at birth, HUD assumes that the provider will place the individual in accordance with that request, consistent with health, safety, and privacy concerns. HUD assumes that a provider will not make an assignment or re-assignment based on complaints of another person when the sole stated basis of the complaint is a client or potential client's non-

conformance with gender stereotypes.

Appropriate and Inappropriate Inquiries Related to Sex

For temporary, emergency shelters with shared sleeping areas or bathrooms, the Equal Access Rule permits shelter providers to ask potential clients and current clients seeking a new assignment their sex. Best practices suggest that where the provider is uncertain of the client's sex or gender identity, the provider simply informs the client or potential client that the agency provides shelter based on the gender with which the individual identifies. There generally is no legitimate reason in this context for the provider to request documentation of a person's sex in order to determine appropriate placement, nor should the provider have any basis to deny access to a single-sex emergency shelter or facility solely because the provider possesses identity documents indicating a sex different than the gender with which the client or potential client identifies. The provider may not ask questions or otherwise seek information or documentation concerning the person's anatomy or medical history. Nor may the provider consider the client or potential client ineligible for an emergency shelter or other facility because his or her appearance or behavior does not conform to gender stereotypes.

Privacy

If a client expresses safety or privacy concerns, or if the provider otherwise becomes aware of privacy or safety concerns, the provider must take reasonable steps to address those concerns. This may include, for example: responding to the requests of the client expressing concern through the addition of a privacy partition or curtain; provision to use a nearby private restroom or office; or a separate changing schedule. The provider must, at a minimum, permit any clients expressing concern to use bathrooms and dressing areas at a separate time from others in the facility. The provider should, to the extent feasible, work with the layout of the facility to provide for privacy in bathrooms and dressing areas. For example, toilet stalls should have doors and locks and there should be separate showers stalls to allow for privacy. The provider should ensure that its policies do not isolate or segregate clients based upon gender identity.

Example as it relates to Domestic Violence Providers

A recipient that operates a sex-segregated or sex-specific program should assign a beneficiary to the group or service which corresponds to the gender with which the beneficiary identifies, with the following considerations. In deciding how to house a victim, a recipient that provides sex-segregated housing may consider on a case-by-case basis whether a particular housing assignment would ensure the victim's health and safety. A victim's own views with respect to personal safety deserve serious consideration. The recipient should ensure that its services do not isolate or segregate victims based upon actual or perceived gender identity. A recipient may not make a determination about services for one beneficiary based on the complaints of another beneficiary when those complaints are based on gender identity.

14) Violence Against Women Reauthorization Act ("VAWA") OF 2013:

The following requirements apply to emergency shelters funded under §576.102:

- a. No individual or family may be denied admission to or removed from the emergency shelter on the basis or as a direct result of the fact that the individual or family is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, if the individual or family otherwise qualifies for admission or occupancy.
- b. The terms "affiliated individual," "dating violence," "domestic violence," "sexual assault," and "stalking" are defined in 24 CFR 5.2003.

Appendix B: EMERGENCY SOLUTIONS GRANT SHELTER PROGRAM

**CERTIFICATION OF LOCAL APPROVAL
FOR NONPROFIT ORGANIZATIONS**

I,

Name and Title (local elected official or chief executive officer of local unit of government)
duly authorized to act on behalf of the:

Name of the Jurisdiction

Hereby approve the following project(s) proposed by:

Name of Nonprofit

Which is (are) to be located in:

Name of Jurisdiction

Shelter Program:

--

By:

Printed Name and Title

Signature

Date