

File No. 130976

Committee Item No. 10

Board Item No. 21

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Committee

Date: 10/09/2013

Board of Supervisors Meeting

Date: October 22, 2013

Cmte Board

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| <input type="checkbox"/> | <input type="checkbox"/> | Motion |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Resolution |
| <input type="checkbox"/> | <input type="checkbox"/> | Ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Digest |
| <input type="checkbox"/> | <input type="checkbox"/> | Budget and Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Youth Commission Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Introduction Form |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/> | MOU |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Grant Information Form |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Subcontract Budget |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Contract/Agreement |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Form 126 – Ethics Commission |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Award Letter |
| <input type="checkbox"/> | <input type="checkbox"/> | Application |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Correspondence |

OTHER

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Completed by: Victor Young Date October 4, 2013

Completed by: Victor Young Date 10/16/13

1 [Accept and Expend Grant - FY2013 Housing Opportunities for Persons with AIDS
2 Performance Renewal - \$1,461,622]

3 **Resolution authorizing the Mayor's Office of Housing and Community Development, on**
4 **behalf of the City, to accept and expend the FY2013 Housing Opportunities for Persons**
5 **with AIDS Performance Renewal Grant from the U.S. Department of Housing and Urban**
6 **Development in the amount of \$1,461,622 for the period of December 1, 2013, through**
7 **November 30, 2016.**

8
9 WHEREAS, The U.S. Department of Housing and Urban Development (HUD), under
10 the Continuing Appropriations Act, 2013, Pub. L. 112-175, issued the Standards for Fiscal
11 Year 2013 Expiring Housing Opportunities for Persons with AIDS (HOPWA) Permanent
12 Supportive Housing Renewal Applications on December 20, 2012; and

13 WHEREAS, The Mayor's Office of Housing and Community Development (MOHCD)
14 submitted an application on February 20, 2013, on behalf of the City and County of San
15 Francisco, to request an allocation of \$1,471,200 in HOPWA Permanent Supportive Housing
16 Renewal funding for the Second Start Project; and

17 WHEREAS, The City and County of San Francisco was awarded \$1,461,622 in
18 HOPWA funding for the Second Start Project as evidenced by the FY2013 HOPWA
19 Performance Grant Agreement dated July 12, 2013, with approved program and budget
20 details for the term of the agreement which begins December 1, 2013, and ends on November
21 30, 2016, a copy of which is located in Board File No. 130976; and

22 WHEREAS, The committed leveraging for the term of the three year agreement
23 includes \$450,000 in HOPWA entitlement funding; and

24 WHEREAS, The proposed grant does not require an Annual Salary Ordinance
25 amendment; and

1 WHEREAS, The funding agency (HUD) does not allow use of grant on indirect costs;
2 and

3 WHEREAS, An Environmental Review Record has been prepared by MOHCD and
4 approved by the Certifying Officer for the Second Start Project with the National
5 Environmental Policy Act (NEPA) and other applicable statutes and authorities, in particular
6 those cited in 24 CFR Part 58 §§5 and 6, a copy of which is located in Board File No. 130976;
7 and

8 WHEREAS, The Certifying Officer shall follow the provisions of NEPA to confirm and
9 ensure that all projects funded under the HOPWA Program are in compliance with applicable
10 federal regulations and requirements; now, therefore, be it

11 RESOLVED, That the Director of the Mayor's Office of Housing and Community
12 Development is hereby authorized, on behalf of the Mayor, to accept and expend the FY2013
13 HOPWA Performance Renewal Grant from HUD in the amount of \$1,461,622 in accordance
14 with the purposes and goals for the funding as set forth in the FY2013 HOPWA Performance
15 Grant Agreement; and, be it

16 FURTHER RESOLVED, That the Board of Supervisors hereby waives inclusion of
17 indirect costs in the grant budget; and, be it

18 FURTHER RESOLVED, That the Director of the Mayor's Office of Housing and
19 Community Development is hereby authorized to enter into and execute agreements
20 between the City and County of San Francisco and the various agencies consistent with the
21 ~~FY2013 HOPWA Performance Grant Agreement; and, be it~~

22 FURTHER RESOLVED, That the Director of the Mayor's Office of Housing and
23 Community Development is hereby authorized to submit documentation and certifications as
24 may be requested or required by HUD.

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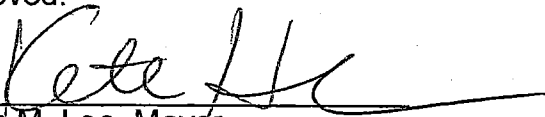
Recommended:

Mayor's Office of Housing and Community Development



Olson Lee, Director

Approved:



Edwin M. Lee, Mayor



For Ben Rosenfield, Controller

**MAYOR'S OFFICE OF HOUSING
and COMMUNITY DEVELOPMENT
CITY AND COUNTY OF SAN FRANCISCO**



EDWIN M. LEE
MAYOR

OLSON LEE
DIRECTOR

TO: Angela Calvillo, Clerk of the Board of Supervisors
FROM: Benjamin McCloskey, Chief Financial Officer
DATE: September 10, 2013
SUBJECT: Accept and Expend Resolution
GRANT TITLE: Housing Opportunities for Persons with AIDS (HOPWA)
Performance Renewal Grant

Attached please find the original and 2 copies of each of the following:

- Proposed resolution, signed
- Grant information form, including disability checklist
- Ethics Form 126
- Grant award letter from funding agency
- Proposed expenditure schedule
- Grant Agreement which includes approved Renewal Application (Exhibit A) and Competition Report Budget (Exhibit B)
- Other (Explain): Environmental Review Record

Departmental representative to receive a copy of the adopted Resolution:

Name: Benjamin McCloskey Phone: 701-5575
Interoffice Mail Address: 1 South Van Ness, 5th Floor
Certified copy required: No.

File Number: _____
(Provided by Clerk of Board of Supervisors)

Grant Resolution Information Form
(Effective July 2011)

Purpose: Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend grant funds.

The following describes the grant referred to in the accompanying resolution:

1. Grant Title: Housing Opportunities for Persons with AIDS Performance Renewal Grant

2. Department: Mayor's Office of Housing and Community Development

3. Contact Person: Benjamin McCloskey Telephone: 415-701-5575

4. Grant Approval Status (check one):

Approved by funding agency

Not yet approved

5. Amount of Grant Funding Approved or Applied for: \$1,461,622

6a. Matching Funds Required: \$150,000 annually for 3 years for a total of \$450,000

b. Source(s) of matching funds (if applicable): HOPWA Entitlement Funds

7a. Grant Source Agency: US Department of Housing and Urban Development

b. Grant Pass-Through Agency (if applicable): N/A

8. Proposed Grant Project Summary: FY2013 HOPWA Performance Grant Agreement attached

9. Grant Project Schedule, as allowed in approval documents, or as proposed:

Start-Date: December 1, 2013

End-Date: November 30, 2016

10a. Amount budgeted for contractual services: None; attached expenditure schedule details grant to be made to nonprofit agency.

b. Will contractual services be put out to bid? N/A

c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements? N/A

d. Is this likely to be a one-time or ongoing request for contracting out? N/A

~~**11a. Does the budget include indirect costs?** Yes No~~

~~**b1. If yes, how much?** \$~~

~~**b2. How was the amount calculated?**~~

~~**c1. If no, why are indirect costs not included?**~~

~~Not allowed by granting agency~~

~~To maximize use of grant funds on direct services~~

~~Other (please explain): HUD allows up to 3% of the grant to be used for administrative expenses~~

~~**c2. If no indirect costs are included, what would have been the indirect costs?**~~

12. Any other significant grant requirements or comments: Grant detail MOPS14, CFDA 14.241

****Disability Access Checklist***(Department must forward a copy of all completed Grant Information Forms to the Mayor's Office of Disability)**

13. This Grant is intended for activities at (check all that apply):

- | | | |
|--|---|---|
| <input type="checkbox"/> Existing Site(s) | <input type="checkbox"/> Existing Structure(s) | <input checked="" type="checkbox"/> Existing Program(s) or Service(s) |
| <input type="checkbox"/> Rehabilitated Site(s) | <input type="checkbox"/> Rehabilitated Structure(s) | <input type="checkbox"/> New Program(s) or Service(s) |
| <input type="checkbox"/> New Site(s) | <input type="checkbox"/> New Structure(s) | |

14. The Departmental ADA Coordinator or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local disability rights laws and regulations and will allow the full inclusion of persons with disabilities. These requirements include, but are not limited to:

1. Having staff trained in how to provide reasonable modifications in policies, practices and procedures;
2. Having auxiliary aids and services available in a timely manner in order to ensure communication access;
3. Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor's Office on Disability Compliance Officers.

If such access would be technically infeasible, this is described in the comments section below:

Comments:

Departmental ADA Coordinator or Mayor's Office of Disability Reviewer:

Eugene Flannery
(Name)

Environmental Compliance Manager
(Title)

Date Reviewed: 8-1-13

Eugene J. Flannery
(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Olson Lee
(Name)

Director
(Title)

Date Reviewed: _____

Olson Lee
(Signature Required)



U.S. Department of Housing and Urban Development
San Francisco Regional Office - Region IX
600 Harrison Street
San Francisco, California 94107-1387
www.hud.gov
espanol.hud.gov

CITY & COUNTY OF
SAN FRANCISCO
13 JUL 15 AM 11:57
MAYOR'S OFFICE OF
COMMUNITY INVESTMENT

JUL 12 2013

Mr. Olson Lee
Director, Mayor's Office of Housing
City of San Francisco
1 South Van Ness Avenue, 5th Floor
San Francisco, CA 94103

Dear Mr. Lee:

SUBJECT: Notification of Funding Approval for HOPWA Project Number: CA-H13-0013

Enclosed is the performance grant agreement to implement the award of funds under the Housing Opportunities for Persons With AIDS (HOPWA) program. As you know, your application was selected for funding under the FY2013 renewal process, established under the 2013 HOPWA renewal memorandum, "Standards for Fiscal Year 2013 HOPWA Permanent Supportive Housing Renewal Grant Applications," to undertake housing activities in your community over the next three year period.

In order to expedite the obligation of these funds, HUD has signed a single source signature point of obligation performance grant agreement that constitutes the agreement between you and HUD. The point of obligation occurs once HUD has signed the agreement. However, you will not obtain access to the funding until the agreement is fully executed with both parties signatures and an agreed upon operating period. As addressed in the enclosed information, certain standard conditions on this grant have been identified and must be abided by during your operation of this grant.

Enclosed are two copies of the single source signature point of obligation HOPWA Performance Grant Agreement. Please provide the desired beginning and expiration date, in the spaces provide at the end of the agreement. Your renewal operating period should be coordinated with your existing grants expiration date. Sign both copies and return them to this office or, if needed, please respond within two weeks for an alternative schedule for the submission of these documents. After your operating period is approved by HUD, this office will send you a copy with original signatures for your files.

These funds must also be fully expended within three years following the operating period Begin date of the grant agreement. If justified, you may request an extension from HUD during this period, of up to one year from the grant end date shown on the executed grant agreement. Further, all expenses incurred during your grant operating period must be reconciled within five years from your beginning date or HUD and the recipient will lose access to these funds.

We are available to provide assistance regarding the administration of this grant, as may be needed. If you have any questions, please contact Winston Moy, Community Planning and

Development Representative, at (415) 489-6586. We look forward to working with you on the successful implementation of this grant. Please let us know if we can be of further assistance.

Sincerely,

A handwritten signature in cursive script that reads "Maria Cremer".

Maria F. Cremer
Director, Community Planning
and Development Division

Enclosures

cc: Brian Cheu w/o enclosures
Director of Community Development

FY 2013-2016 Proposed Expenditure Schedule

Agency Name	Expenditure Description	Approved HUD Funding (3 Years)
Mayor's Office of Housing and Community Development	Resource identification costs	\$30,701
Mayor's Office of Housing and Community Development	Grantee's administrative costs	\$39,921
Catholic Charities CYO	Partial rental subsidy program for people with HIV/AIDS	\$1,391,000
	Total Grant Amount	\$1,461,622

Performance Grant Agreement for 2013 Renewal Grants

Grant Number: CA-H13-0013

Official Contact: Olson Lee

Title: Director, Mayor's Office of
Housing

Mailing Address: 1 South Van Ness Avenue, 5th Floor, San Francisco, CA 94103

Telephone: (415) 701-5509

FAX Number: (415) 701-5501

Tax ID No.: 94-6000417

Email Address:
olson.m.lee@sfgov.org

DUNS No.: 796585649

Project Location (City/Co. & State): San Francisco, CA

HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS PERFORMANCE GRANT AGREEMENT FOR FISCAL YEAR 2013

This Performance Renewal Grant Agreement ("Agreement") is made between the United States Department of Housing and Urban Development ("HUD") and the City and County of San Francisco ("Grantee").

Definitions

The terms "Grant" and "Grant Funds" mean the funds provided under this Agreement.

The term "Application" means the application submissions on the basis of which a Grant was originally approved by HUD, including certifications and assurances and any information or documentation required to meet grant award conditions.

The term "Renewal Application" means the application submission on the basis of which the 2013 Grant renewal was approved by HUD, including certifications and assurances, and any information or documentation required to meet renewal grant award conditions.

The term "Project Sponsor" means any private nonprofit organization or governmental housing agency that receives funds under a contract with the Grantee to carry out eligible activities identified in the Application.

Background

This Agreement will be governed by the requirements of the AIDS Housing Opportunity Act, 42 U.S.C. 12901 *et seq.* ("Act"), the Housing Opportunities for Persons with AIDS ("HOPWA") program regulations, 24 C.F.R. part 574 ("Regulations"), and HOPWA renewal memorandum,

Standards for Fiscal Year 2013 HOPWA Permanent Supportive Housing Renewal Grant Applications, issued December 20, 2012. The Regulations are attached hereto as Exhibit C and are incorporated into this Agreement.

Approved Grant Amount

The Application, CA-H10-0004, is incorporated herein, as updated through the "Renewal Application" and, if applicable, through a HUD-approved grant amendment. However, in the event of conflict between a provision of the Application and a provision of this Agreement, the latter shall control.

The Renewal Application, CA-H13-0013, is incorporated herein as part of this Agreement and attached hereto as Exhibit A. In the event of conflict between a provision of the Renewal Application and any provision of this Agreement, the latter shall control.

Upon execution of this Agreement, HUD agrees to provide \$1,461,622, to the Grantee to carry out the project described in the Renewal Application (Exhibit A), and approved in the Competition Report Budget (Exhibit B), both of which are incorporated into this Agreement.

Renewal Grant Purpose and Requirements for Providing Permanent Supportive Housing

As a requirement for the receipt of federal funds for permanent supportive housing, Grantee agrees to, and must ensure that each project sponsor agrees to maintain project eligibility and related documentation on the following:

- (1) Permanent Supportive Housing. At least 51 percent of the HOPWA program activity funds awarded to the project must be used to provide permanent supportive housing support to HOPWA eligible persons. Any new funds, including commitments of other funds, must be utilized to provide permanent supportive housing to eligible persons for the planned annual outputs;
- (2) Commitments. Exhibit B provides the list of commitments of other resources to be used in conjunction with HOPWA funds. If your project relies on other state, local, federal, or private resources to provide the permanent housing or supportive services portion of your project, as documented in the approved HUD 40110-B, HOPWA budget form submitted in the final approved renewal grant application, you must ensure that the other resources will continue to be available for that purpose throughout the commitment period noted in the grant. Failure to use committed resources as documented and approved by HUD will constitute a grant default, which may result in grant sanctions, including reductions in amounts awarded for supportive services;
- (3) Leases and Occupancy Agreements. Maintain evidence that the client has a continuous legal right to remain in the unit or property and has access to ongoing supportive services

provided through qualified providers. Grant files must include a copy of the standard lease form or occupancy agreement used for residents of the project. The lease or occupancy agreement must be for a term of at least one year. The lease or occupancy agreement must also be automatically renewable upon expiration, except on reasonable prior notice by either the tenant or the landlord. Failure to maintain this project documentation of the client's lease or occupancy agreement will constitute a grant default;

- (4) Permanent Housing Placement Costs (PHP). If providing security deposits, such costs are to be reasonable and limited to not more than two months rent and classified as part of the BLI shown as Permanent Housing Placement Costs.
- (5) General Section. The Grantee agrees to comply with the Fiscal Year 2013 General Section, including drug-free workplace standard requirement listed in Section III.C. 5. ;
- (6) Environmental Review. The Grantee agrees to comply with environmental review requirements, as set forth at 24 C.F.R. part 58. Where applicable, Grantee also agrees to provide HUD with information necessary for HUD to perform any required environmental review under 24 C.F.R. part 50. Grantee shall carry out mitigating measures required by HUD or select alternate eligible property resulting from such review. Grantee shall not acquire, rehabilitate, convert, lease, repair or construct property, or commit HUD or local funds to such program activities with respect to any such property, until it has received notice from HUD that the environmental review is complete.

Amendments

This constitutes the entire agreement between HUD and the Grantee. This Agreement may not be amended except in a writing executed by authorized officials of HUD and the Grantee. When requesting an amendment to this Agreement, including a transfer of contractual rights via an assignment, the Grantee shall submit a letter of request to the address to the appropriate field office and attach the proposed amendment(s) to the applicable page(s) of this Agreement. The effective date of any amendment to this Agreement shall be the date of execution by HUD.

Pre-award costs

In cases where the original agreement has now expired and all funds expended, eligible costs under the new renewal award may include pre-award costs to support continuation of the approved renewal activities. Pre-award costs are authorized by OMB Circulars A-87 and A-122, which are applicable to the HOPWA program under 24 C.F.R. § 574.605. Pre-award costs are

those costs incurred prior to the effective date of the award directly pursuant to the execution of this Agreement where such costs are necessary to comply with the proposed delivery schedule or period of performance for continued activities. Such costs are allowable only to the extent that they would have been allowable if incurred after the date of the award and only with the written approval of HUD. Renewal Grantees are required to obtain approval of pre-award costs via a written request to the field office prior to incurring costs.

Performance

Grantee agrees, and will ensure that each Project Sponsor agrees to:

- (1) Comply with requirements established by the Office of Management and Budget (OMB) concerning the Dun and Bradstreet Data Universal Numbering System (DUNS), the Central Contractor Registration (CCR) database, and the Federal Funding Accountability and Transparency Act, including Appendix A to part 25 of the Financial Assistance Use of Universal Identifier and Central Contractor Registration, 75 Fed. Reg. 55671 (Sept. 14, 2010) (codified at 2 C.F.R. part 25) and Appendix A to part 170 of the Requirements for Federal Funding Accountability and Transparency Act Implementation, 75 Fed. Reg. 55663 (Sept. 14, 2010) (codified at 2 C.F.R. part 170).
- (2) Comply with requirements established by the Office of Management and Budget (OMB) regarding Reporting and Use of Information Concerning Recipient Integrity and Performance, including Appendix A to Part 35 of the Time-of-Award Responsibilities, 75 Fed. Reg. 7316 (Feb. 18, 2010)(to be codified at 2 CFR part 35).
- (3) Provide housing support to HOPWA eligible persons over the operating period of this grant consistent with the services described in the renewal application and attached as Exhibit A, and applicable HUD regulations;
- (4) Comply with and meet the performance measure benchmark outputs and outcomes established in the Renewal Application HOPWA Budget form HUD 40110-B found in Exhibit B for the implementation and operation of this award;
- (5) Conduct an ongoing assessment of the permanent supportive housing assistance required by the participants in the program, including annual assessments of their housing situations, and report on the annual achievement of HOPWA client outcome goals in achieving stable housing, reducing risks of homelessness and improving access to care for beneficiaries;

- (6) Assure the adequate provision of supportive services to the participants in the program, including support to access health-care, HIV treatment and benefits or other support available under mainstream health and human welfare programs and other public and private resources, as needed. Further, the Grantee shall ensure that grant funds will not be used to make payments for health services for any item or service to the extent that payment has been made, or can reasonably be expected to be made with respect to that item or service: (i) under any State compensation program, under an insurance policy, or under any Federal or State health benefits program; or (ii) by an entity that provides health services on a prepaid basis;
- (7) In the case of projects involving acquisition, grantees and sponsors must comply with HUD disposition instructions located at 24 CFR 84.32 for nonprofits and 24 CFR 85.31 for state, local governments, and federally recognized Indian tribal governments
- (8) The following applies to an application that involves the use of HOPWA funds for supportive service activities aimed at assisting HOPWA clients with substance abuse treatment. Note that, in operating this project, the Grantee and any project sponsor must comply with federal, state and other applicable laws pertaining to the illegal use of a controlled substance. The Grantee and sponsor must undertake reasonable steps to ensure that beneficiaries receive appropriate access to substance abuse treatment and counseling. Admission should be denied, or eviction initiated, for persons engaging in illegal drug activities, where such activities threaten the health, safety, or right to peaceful enjoyment of the premises by other residents. Grantees and project sponsors must establish procedures for project ineligibility and evictions related to illegal drug activities;
- (9) Agree that any program income resulting under this grant be added to the funds committed to the project or other HOPWA program activities under this agreement, to be used to further eligible project or program objectives;
- (10) ~~Agree to maintain records of beneficiary and program activity eligibility,~~
including documentation that evidences compliance with agreements noted above. In the case of participant eligibility records, the Grantee shall update records no less than annually.
- (11) Within 90 days of the date of execution of the Grant Agreement, the grantee agrees, and will ensure that each project sponsor agrees, to either obtain a

certificate of completion of HOPWA Financial Management Online Training (<http://www.hudhre.info/index.cfm?do=viewHopwaFinancialTraining>.) by at least one of its employees.

Disbursement of Funds

Grantee agrees to record the expenditure of funds in a timely manner and implement financial procedures to ensure disbursements for reimbursement of the HOPWA renewal grant award expenses through the IDIS system on at least a quarterly basis, beginning three months after the program commencement date established in this Agreement. The Grantee agrees, and will ensure that any Project Sponsor agrees, to make timely payments to each subrecipient upon request, provided the requesting subrecipient is in compliance with program requirements. A request by the Grantee to draw down Grant Funds under the IDIS system or any other payment system constitutes a representation by the Grantee that it and all participating parties are in compliance with the terms of this Agreement.

Performance Reporting

- (1) In accordance with 24 C.F.R. part 91, the Grantee shall submit an Annual Progress Report (APR) that demonstrates its progress in carrying out its strategic plan and its action plan within 90 days after the close of each program year. The performance report must include the number of individuals assisted, the types of assistance provided, a description of the resources made available, the investment of available resources, the geographic distribution and location of investments, the families and persons assisted (including racial and ethnic status of persons assisted), actions taken to further fair housing. Comply with such other terms and conditions, including record keeping and reports (which must include racial and ethnic data on participants, annual housing outputs and client housing outcomes) for program monitoring and evaluation purposes, as HUD has established for purposes of carrying out the program in an effective and efficient manner;
- (2) Comply with such other terms and conditions, including record keeping and reports (which must include racial and ethnic data on participants, annual housing outputs and client housing outcomes) for program monitoring and evaluation purposes, as HUD has established for purposes of carrying out the program in an effective and efficient manner;

Project Sponsors

The Grantee shall ensure that Project Sponsors are aware of requirements imposed upon them by federal statutes and implementing regulations. Project Sponsor contracts should

include any clauses required by this Agreement and any other applicable federal requirements, including those set forth in Executive Orders and Office of Management and Budget Circulars.

Defaults and Remedies

- (1) A default shall occur when the Grantee materially fails to comply with program requirements. A default may consist of using Grant Funds other than as authorized by this Agreement, noncompliance with statutory, regulatory, NOFA, 2013 Renewal Memorandum, or other requirements applicable to this HOPWA award, any other material breach of this Agreement, or any material misrepresentation, which, if known to HUD, would have resulted in the Grant Funds not being provided. If the Grantee fails to comply with any term of this award, HUD may: Temporarily withhold further payments pending corrective action by the Grantee or Project Sponsor;
- (2) Disallow all or part of the cost of an activity or action not in compliance;
- (3) Wholly or partly suspend or terminate the current award for the Grantee's or Project Sponsor's program;
- (4) Withhold further awards for the HOPWA program;
- (5) Reduce or recapture Grant Funds;
- (6) Require the Grantee to reimburse program accounts with non-Federal funds for the amount of ineligible costs; or
- (7) Take other appropriate action, including, but not limited to, any remedial action legally available, such as affirmative litigation seeking declaratory judgment, specific performance, damages, temporary or permanent injunctions and any other available remedies.

Nothing in this paragraph shall limit any remedies otherwise available to HUD in the case of a default by the Grantee. No delay or omissions by HUD in exercising any right or remedy available to it under this Agreement shall impair any such right or remedy or constitute a waiver or acquiescence in any Grantee default. The Grant may be terminated for convenience when both parties agree that the continuation of the award would not produce beneficial results.

The grantee agrees to the terms and conditions of this grant agreement. The term of this Agreement shall begin on 12/01/2013 (mm/dd/yyyy) and end on 11/30/2016 (mm/dd/yyyy), or three years from the beginning date of this agreement, whichever comes first. Notwithstanding the foregoing, the term of this Agreement may not begin until the original grant agreement CA-H10-0004 (insert original grant agreement number) has expired.

The term of performance is acknowledged by HUD. _____ (Initial)

The point of obligation occurs on the dated signature of the Department of Housing and Urban Development representative. This Agreement is hereby executed by the Parties on the dates set forth below their respective signatures, as follows:

UNITED STATES OF AMERICA
Department of Housing and Urban Development
By: The Secretary or HUD designated signatory

By: Maria Cermer
(Signature)
Director,
Community Planning and Development
(Title)

JUL 12 2013

(Date)

GRANTEE

By:

[Signature]
(Authorized signatory)

(Type in name of authorized signatory)

(Title of authorized signatory)

(Date)

EXHIBIT A

OMB Number: 4040-0004
Expiration Date: 03/31/2012

Application for Federal Assistance SF-424		
*1. Type of Submission: <input type="checkbox"/> Preapplication <input checked="" type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application	*2. Type of Application: <input type="checkbox"/> New <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Revision	*If Revision, select appropriate letter(s): _____ *Other (Specify) _____
*3. Date Received: _____	4. Applicant Identifier: _____	
5a. Federal Entity Identifier: _____	*5b. Federal Award Identifier: CA-H03-0011	
State Use Only:		
6. Date Received by State: _____	7. State Application Identifier: _____	
8. APPLICANT INFORMATION		
*a. Legal Name: City and County of San Francisco		
*b. Employer/Taxpayer Identification Number (EIN/TIN): 94-6000479	*c. Organization DUNS: 070384255	
d. Address		
*Street1: Mayor's Office of Housing		
Street2: 1 South Van Ness Ave., 5th Floor		
*City: San Francisco		
County/Parish:		
*State: CA		
Province:		
*Country: USA		
*Zip/Postal Code: 94103		
e. Organizational Unit		
Department Name: Mayor's Office of Housing	Division Name: Community Development Division	
f. Name and contact information of person to be contacted on matters involving this application:		
Prefix: _____	*First Name: Brian	
Middle Name: _____		
*Last Name: Cheu		
Suffix: _____		
Title: Director of Community Development		
Organizational Affiliation: Mayor's Office of Housing		
*Telephone Number: 415-701-5584	Fax Number: 415-701-5501	
*Email: brian.cheu@sfgov.org		

Application for Federal Assistance SF-424

9. Type of Applicant 1: Select Applicant Type:

City

Type of Applicant 2: Select Applicant Type:

County

Type of Applicant 3: Select Applicant Type:

* Other (specify)

10. Name of Federal Agency:

U.S. Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Number

14-241

CFDA Title:

Housing Opportunities for Persons with AIDS (HOPWA)

***12. Funding Opportunity Number:**

***Title:**

Standards for Fiscal Year (FY) 2013 Expiring HOPWA Permanent Supportive Housing Renewal Applications

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

City and County of San Francisco

15. Descriptive Title of Applicant's Project:

Second Start Project

Attach supporting documents as specified in agency instructions.

Application for Federal Assistance SF-424	
16. Congressional Districts Of:	
*a. Applicant <input style="width: 100px;" type="text" value="CA-12"/>	b. Program/Project <input style="width: 100px;" type="text" value="CA-12, CA-14"/>
Attach an additional list of Program/Project Congressional Districts if needed: <input style="width: 100%; height: 20px;" type="text"/>	
17. Proposed Project:	
*a. Start Date: <input style="width: 100px;" type="text" value="Dec. 1, 2013"/>	b. End Date: <input style="width: 100px;" type="text" value="Nov. 30, 2016"/>
18. Estimated Funding(\$): 1, 471,200	
*a. Federal	<input style="width: 100px;" type="text" value="1,471,200"/>
*b. Applicant	<input style="width: 100px;" type="text" value="450,000"/>
*c. State	<input style="width: 100px;" type="text"/>
*d. Local	<input style="width: 100px;" type="text"/>
*e. Other	<input style="width: 100px;" type="text" value="680,000 (in kind)"/>
*f. Program Income	<input style="width: 100px;" type="text"/>
*g. TOTAL	<input style="width: 100px;" type="text" value="2,601,200"/>
*19. Is Application Subject to Review By State Under Executive Order 12372 Process?	
<input type="checkbox"/> a. This application was made available to the State under the Executive Order 12372 Process for review on <input style="width: 50px;" type="text"/> <input type="checkbox"/> b. Program is subject to E.O. 12372 but has not been selected by the State for review. <input checked="" type="checkbox"/> c. Program is not covered by E.O. 12372.	
*20. Is the Applicant Delinquent on Any Federal Debt? (If "Yes", provide explanation in attachment.)	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes", provide explanation and attach.	
21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties (U.S. Code, Title 218, Section 1001)	
<input checked="" type="checkbox"/> ** I AGREE ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.	
a. Authorized Representative	
Prefix: <input style="width: 50px;" type="text"/>	*First Name: <input style="width: 150px;" type="text" value="Olson"/>
Middle Name: <input style="width: 150px;" type="text"/>	
Last Name: <input style="width: 150px;" type="text" value="Lee"/>	
Suffix: <input style="width: 50px;" type="text"/>	
*Title: <input style="width: 150px;" type="text" value="Director, Mayor's Office of Housing"/>	
*Telephone Number: <input style="width: 100px;" type="text" value="415-701-5509"/>	Fax Number: <input style="width: 100px;" type="text" value="415-701-5501"/>
*Email: <input style="width: 150px;" type="text" value="olson.m.lee@sfgov.org"/>	
*Signature of Authorized Representative:	Date Signed: <input style="width: 80px;" type="text" value="2/12/13"/>

Application for Federal Assistance SF-424

*** Applicant Federal Debt Delinquency Explanation**

The following field should contain an explanation if the Applicant organization is delinquent on any Federal Debt. Maximum number of characters that can be entered is 4,000. Try and avoid extra spaces and carriage returns to maximize the availability of space.

[Empty text input area for Applicant Federal Debt Delinquency Explanation]

HOPWA

Competitive Application & Renewal of Permanent Supportive Housing Project Budget Summary

Sponsored by the

**U.S. Department of Housing and Urban Development
Office of Community Planning and Development
Office of HIV/AIDS Housing**

The information collection requirements pertain to grant application submission requirements which will be used to rate applications, determine eligibility, and establish grant amounts:

Selections of applications for funding under the HOPWA Program are based on the rating factors set forth in the SuperNOFA for Housing and Community Development Programs and the criteria established in the annual HOPWA renewal notice for those permanent supportive housing grantee's seeking renewal funding.

The public reporting burden for the collection of information for the **HOPWA Competitive Application & Renewal of Permanent Supportive Housing Projects Budget Summary** is estimated to average 12 hours. This agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless that collection displays a currently valid OMB control number. **OMB Approval No. 2506-0133** (Expiration Date: 10/31/2014)

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

Application Budget Summary (all applicants)

Applicant Name	City and County of San Francisco	Number of Project Sponsors	1	Plan dates for grant agreement and activities	12/1/13 - 11/30/16 (mo./yr.)
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A.	Eligible Activity	HOPWA Request				Leveraged Funds
		A. Year 1	B. Year 2	C. Year 3	D. Total	
Facility Development (new applications only)	1. Acquisition					
	2. Rehabilitation, Repair & Conversion					
	3. New Construction (for Community Residences and SRO dwellings only)					
Facility Operations	4. Operating Costs for Housing Facility					
	5. Leasing					
TBRA	6. Tenant-based Rental Assistance	\$327,833	\$327,833	\$327,834	\$983,500	\$450,000
STRMU	7. Short-term Rent, Mortgage, & Utility Payments to Prevent Homelessness					
Support Services	8. Supportive Services	\$75,500	\$75,500	\$75,500	\$226,500	\$500,000
Other Program Expenses	9. Housing Information Services	\$15,000	\$15,000	\$15,000	\$45,000	
	10. Permanent Housing Placement	\$15,000	\$15,000	\$15,000	\$45,000	
	11. Resource Identification to Establish, Coordinate & Develop Housing Assistance	\$13,333	\$13,333	\$13,334	\$40,000	
	12. Other Housing Costs (please specify in narrative; requires HUD approval)					
13. Total Program Costs: (total of lines 1-12)					\$1,340,000	
Administrative Expenses	14. Grantee's Administrative				\$40,200	
	15. Project Sponsor's Administrative Costs				\$91,000	
16. Total HOPWA Request (total of lines 13-15)					\$1,471,200	

Insert application package page number _____

Detailed Project Budget & Housing Outputs (each organization)

Name of organization:	Catholic Charities CYO			
Type:	Grantee: <input type="checkbox"/>	Project Sponsor: <input checked="" type="checkbox"/>	If applicable:	Faith based: <input type="checkbox"/> Grassroots: <input type="checkbox"/>

B.	Eligible Activity	HOPWA Request				
		Yr. 1	Yr. 2	Yr. 3	Totals:	
Facility Development (new applications only)	1. Acquisition Description:	Budget				
		# of Units				
	2. Rehabilitation/Repair/Conversion Description:	Budget				
		# of Units				
Facility Operations	3. New Construction (Community Residences & SRO dwellings only) Description:	Budget				
		# of Units				
Type of Facility: Short-term shelter <input type="checkbox"/> ; transitional housing <input type="checkbox"/> ; Community residence <input type="checkbox"/> ; SRO dwelling <input type="checkbox"/> ; or other permanent supportive housing <input type="checkbox"/>						
Facility Operations	4. Operating Costs for Housing Facility Description:	Budget				
		# of Units				
TBRM STRMU	5. Leasing Description:	Budget				
		# of Units				
TBRM STRMU	6. Tenant-Based Rental Assistance Payments Description: Partial rent subsidies; transitional housing for homeless people	Budget	\$327,833	\$327,833	\$327,834	\$983,500
		# of Households	105	105	105	211
Support Services	7. Short-Term Rent, Mortgage & Utility Payments to Prevent Homelessness Description:	Budget				
		# of Households				
Support Services	8. Supportive Services Costs Description: Case management, vocational counseling, benefits counseling, eviction prevention, other services.	Budget	\$75,500	\$75,500	\$75,500	\$226,500
		# of Households	105	105	105	211
Other Program Expenses	9. Housing Information Services Description: Housing counseling, housing advocacy, information and referral services, fair housing information, housing search and assistance	Budget	\$15,000	\$15,000	\$15,000	\$45,000
		# of Households	19	19	19	30
	10. Permanent Housing Placement Services Description: Assist households in understanding leases, tenant counseling, making moving arrangements, mediation services related to neighbor/landlord issues that may arise	Budget	\$15,000	\$15,000	\$15,000	\$45,000
		# of Households	9	9	9	27
Administrative Expenses	11. Resource Identification to Establish, Coordinate, & Develop Housing Assistance Description:	Budget				
		# of Units				
Administrative Expenses	12. Other Housing Costs (approved by HUD) Description:	Budget				
		# of Units				
Administrative Expenses	13. Grantee's Administrative Costs Description:	Budget				
		# of Units				
Administrative Expenses	14. Project Sponsor's Administrative Costs Description: Accounting, insurance, office space	Budget	\$30,333	\$30,333	\$30,334	\$91,000
		# of Units				

15. Total HOPWA Request for this Organization

\$1,391,000

Note: Service delivery costs such as salary and overhead costs to deliver a particular budget line item should be represented in the funding amount requested for that particular budget line item.

Detailed Project Budget & Housing Outputs (each organization)

Name of organization:	City and County of San Francisco			
Type:	Grantee: <input checked="" type="checkbox"/>	Project Sponsor: <input type="checkbox"/>	If applicable:	Faith based: <input type="checkbox"/> Grassroots: <input type="checkbox"/>

B.	Eligible Activity	HOPWA Request			
		Yr. 1	Yr. 2	Yr. 3	Totals
Facility Development (New applications only)	1. Acquisition Description:	Budget			
	# of Units				
	2. Rehabilitation/Repair/Conversion Description:	Budget			
	# of Units				
3. New Construction (Community Residences & SRO dwellings only) Description:	Budget				
	# of Units				
Type of Facility: Short-term shelter <input type="checkbox"/> ; transitional housing <input type="checkbox"/> ; Community residence <input type="checkbox"/> ; SRO dwelling <input type="checkbox"/> ; or other permanent supportive housing <input type="checkbox"/>					
Facility Operations	4. Operating Costs for Housing Facility Description:	Budget			
	# of Units				
5. Leasing Description:	Budget				
	# of Units				
TBRA STRMU	6. Tenant-Based Rental Assistance Payments Description:	Budget			
	# of Households				
7. Short-Term Rent, Mortgage & Utility Payments to Prevent Homelessness Description:	Budget				
	# of Households				
Support Services	8. Supportive Services Costs Description:	Budget			
	# of Households				
Other Program Expenses	9. Housing Information Services Description:	Budget			
	# of Households				
	10. Permanent Housing Placement Services Description:	Budget			
	# of Households				
11. Resource Identification to Establish, Coordinate, & Develop Housing Assistance Description: Alignment and coordination housing services and activities with CoC, participation in planning body meetings, development and participation in centralized assessment system (HMIS) and point in time housing inventory counts.	Budget	\$13,333	\$13,333	\$13,334	\$40,000
	# of Households				
12. Other Housing Costs (approved by HUD) Description:	Budget				
	# of Units				
Administrative Expenses	13. Grantee's Administrative Costs Description:	Budget			
	14. Project Sponsor's Administrative Costs Description: HUD reporting, APR reporting, drawdowns	Budget	\$13,400	\$13,400	\$13,400

15. Total HOPWA Request for this Organization	\$80,200
--	-----------------

Insert application package page number _____

Note: Service delivery costs such as salary and overhead costs to deliver a particular budget line item should be represented in the funding amount requested for that particular budget line item.

Transparency Act Compliance

Instructions: Charts 1 and Chart 2 below should be completed for the grantee and each project sponsor. Chart 1 should be completed with the general information requested. Chart 2 should be completed for each sub-contractor (other than your project sponsor/s) who receives over \$25,000.00 per the Transparency Act of 2006 (Public Law 109-282). If the sub-contractor information requested for Chart 2 is not known at the time of application submission, check the unknown check box. If the project is approved, this information will be collected and reported in the Annual Performance Report (APR).

Grantee: ; Project Sponsor:

Chart 1: General Information			
Name and Address of Organization			
City and County of San Francisco, 1 South Van Ness, 5 th Floor			
City	State	Zip	County
San Francisco	CA	94103	San Francisco
Congressional District of Organization		EIN/TIN of Organization*	Organization's Website Address
CA-12		94-6000479	www.sf-moh.org
Parent Company Name and Address (If Applicable)			
Service Area (community, Metropolitan Statistical Area (MSA) or State in which this program is operating)			
Within City and County of San Francisco			
City and County of Primary Service Area(s)		Zip Code of Primary Service Area(s)	Congressional District of Primary Service Area(s)
City and County of San Francisco		All Zip Codes within San Francisco	CA-12 and CA- 14

Chart 2: Sub-contractors receiving \$25,000 or more (Unknown <input type="checkbox"/>)			
Contract Recipient Business Name Address			
City	State	Zip	County
Congressional District of Contract Recipient		NAICS Code*	EIN/TIN of Organization*
Parent Company Name and Address (If Applicable)			
Service Area (community, Metropolitan Statistical Area (MSA) or State in which this program is operating)			
City and County of Primary Service Area(s)		Zip Code of Primary Service Area(s)	Congressional District of Primary Service Area(s)

*Employer Identification Number or Tax Identification Number

*North American Industry Classification System code

Transparency Act Compliance

Instructions: Charts 1 and Chart 2 below should be completed for the grantee and each project sponsor. Chart 1 should be completed with the general information requested. Chart 2 should be completed for each sub-contractor (other than your project sponsor/s) who receives over \$25,000.00 per the Transparency Act of 2006 (Public Law 109-282). If the sub-contractor information requested for Chart 2 is not known at the time of application submission, check the unknown check box. If the project is approved, this information will be collected and reported in the Annual Performance Report (APR).

Grantee: ; Project Sponsor:

Chart 1: General Information			
Name and Address of Organization			
Catholic Charities CYO, 180 Howard Street, Suite 100			
City	State	Zip	County
San Francisco	CA	94109	San Francisco
Congressional District of Organization		EIN/TIN of Organization*	Organization's Website Address
CA-12		94-1498472	www.ccyo.org
Parent Company Name and Address (If Applicable)			
Service Area (community, Metropolitan Statistical Area (MSA) or State in which this program is operating)			
Within City and County of San Francisco			
City and County of Primary Service Area(s)	Zip Code of Primary Service Area(s)		Congressional District of Primary Service Area(s)
City and County of San Francisco	94102 94103 94107 94108 94109 94110 94111 94112 94113 94114 94116 94117 94118 94121 94122 94124 94127 94131 94132 94137 94124		CA-12 and CA-14

Chart 2: Sub-contractors receiving \$25,000 or more (Unknown <input type="checkbox"/>)			
Contract Recipient Business Name Address			
City	State	Zip	County
Congressional District of Contract Recipient	NAICS Code*	EIN/TIN of Organization*	Organization's Website Address
Parent Company Name and Address (If Applicable)			
Service Area (community, Metropolitan Statistical Area (MSA) or State in which this program is operating)			
City and County of Primary Service Area(s)	Zip Code of Primary Service Area(s)		Congressional District of Primary Service Area(s)

*Employer Identification Number or Tax Identification Number

*North American Industry Classification System code

HOPWA Applicant Certifications

The following certified statements are required by law.

The Applicant hereby assures and certifies that:

1. Fair Housing. It will comply with Title VI of the Civil Rights Act of 1964, 42 U.S.C. 2000d and implementing regulations at 24 CFR part 1; Fair Housing Act, 42 U.S.C. 3601-3619, which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives federal financial assistance. Applicant will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, the transferee, for the period during which the real property and structure(s) are used for a purpose for which the federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

(b) It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, handicap, familial status or national origin, and administer its programs and activities relating to housing in a manner to affirmatively further fair housing. For Indian tribes, it will comply with the Indian Civil Rights Act (25 U.S.C. 1301 *et seq.*), instead of Title VI and the Fair Housing Act and implementing regulations.

(c) It will comply with the Americans with Disabilities Act, 42 U.S.C. 12101 *et seq.*, and Title IX of the Education Amendments Act of 1972 (20 U.S.C. 1681 *et seq.*).

(d) It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with federal financial assistance.

(e) It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 135.11(e).

(f) It will comply with Section 3 of the Housing and Urban Development Act of 1968, (12 U.S.C. 1701(u)), as amended, and implementing regulations at 24 CFR part 135, which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

(g) It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and implementing regulations at 24 CFR part 8, which prohibit discrimination based on handicap in federally-assisted programs and activities.

(h) It will comply with the accessibility requirements of Section 504 of the Rehabilitation Act of 1973, and where applicable, the design and construction requirements of the Fair Housing Act.

Insert application package page number _____

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Form HUD-40110-B (Expiration Date 10/31/2014)

(i) It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-6107), as amended, and implementing regulations at 24 CFR part 146, which prohibit discrimination because of age in projects and activities receiving federal financial assistance.

(j) It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

(k) If potentially eligible persons of particular race, color religion, sex, age, national origin, familial status, or handicap are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance.

2. Environmental Requirements. The grantee, its project sponsors and their contractors may not acquire, rehabilitate, convert, lease, repair, dispose of, demolish, or construct property for a project, or commit or expend HUD or local funds for eligible activities, until the responsible entity (as defined in §58.2) has completed the environmental review procedures required by 24 CFR part 58 and the environmental certification and HUD approval of form HUD-7015.15, "Request for Release of Funds and Certification" (RROF) of compliance with the National Environmental Policy Act and implementing regulations at 24 CFR part 58 (Environmental Review Procedures for Entities Assuming HUD Environmental Responsibilities). HUD will not release grant funds if the recipient or any other party commits grant funds (i.e., incurs any costs or expenditures to be paid or reimbursed with such funds) before the recipient submits and HUD approves its RROF (where such submission is required).

3. HOPWA Facility Use Period Requirement. Any building or structure assisted with amounts under this part will be maintained as a facility to provide assistance for eligible persons: (i) for not less than 10 years in the case of assistance involving new construction, substantial rehabilitation or acquisition of a building or structure; and (ii) for not less than three years in cases involving non-substantial rehabilitation or repair of a building or structure.

4. Client Confidentiality. The grantee and project sponsor must comply with the confidentiality requirements, as mandated by Section 856 of the AIDS Housing Opportunity Act and implemented in HOPWA regulation at 574.440: "The Grantee shall agree, and shall ensure that each project sponsor agrees, to ensure the confidentiality of the name of any assisted under this part and any other information regarding individuals receiving assistance".

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.
Warning: HUD will refer for prosecution false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012, 31 U.S.C. 3729, 3802)

HOPWA Applicant Certifications

Name with Signature of Authorized Certifying Official & Date

Olson Lee

Olson Lee 1/24/13

Title

Director

Name of Applicant

City and County of San Francisco

Grantee

<p><u>Staff Costs:</u></p> <p><i>Position: Senior Community Development Specialist (.109 FTE)</i> Activities: Resource identification, implement alignment and coordination of housing services and activities with CoC, participate in planning body meetings and development and participation in centralized assessment system, participate in the utilization of the local Homeless Management Information System (HMIS,) and point in time housing inventory counts.</p>	<p>(\$89,960/year plus 36% fringe/benefits) x (.108981 FTE) x 3 years =</p>	<p>\$40,000</p>
<p>Grantee Administration (3%)</p> <p><i>Position: Senior Community Development Specialist (.11 FTE)</i> Activities: HUD reporting, APR reporting, drawdowns</p>	<p>(\$89,960/year plus 36% fringe/benefits) x (.109526 FTE) x 3 years =</p>	<p>\$40,200</p>
<p>Total Grantee Costs</p>		<p>\$80,200</p>

Project Sponsor Costs

Tenant-Based Rental Assistance:

<u>Staff Costs:</u>		
Position: Housing Specialist (.60 FTE) Activities: Ensures client eligibility, conducts HQS inspections based on HUD guidelines and generates the monthly payment to landlords.	(\$41,530/year plus 30% fringe/benefits) x (.60 FTE) x 3 years =	\$97,180
<u>Direct Service Costs:</u>		
<i>Partial Rent Subsidies:</i> Rent payments for 90 units with average subsidy of \$250 per month.	\$250/month x 90 units* x 36 months =	\$810,000
<u>Direct Service Costs:</u>		
<i>Deep Rent Subsidies:</i> Rent payments for 15 hotel/housing units with average subsidy of \$141.33 per month.	\$141.33/month x 15* x units x 36 months =	\$76,320
Total Tenant-Based Rental Assistance		\$983,500

Supportive Services:

<u>Staff Costs:</u>		
Position: Case Manager (.46 FTE) Activities: Case management, vocational counseling, benefits counseling, eviction prevention, mediation services related to neighbor/landlord issues that may arise, other services	(\$46,010/year plus 29.7% fringe/benefits) x (.46 FTE) x 3 years =	\$82,350
Position: Housing Specialist (.90 FTE) Activities: crisis intervention counseling and support services, vocational and benefits counseling, information and referral, and coordination of service to address the clients' immediate needs.	(\$41,163/year plus 29.7% fringe/benefits) x (.90 FTE) x 3 years =	\$144,150
Total Supportive Services		\$226,500

Housing Information Services:

<u>Staff Costs:</u>		
Position: Case Manager (.27 FTE) Activities: Housing counseling, housing advocacy,	(\$46,010/year plus	

information and referral services, fair housing information, housing search and assistance	20.7% fringe/benefits) x (.27010446 FTE) x 3 years =	\$45,000
Total Housing Information Services		\$45,000

Permanent Housing Placement Services:

<i>Staff Costs:</i>		
<i>Position: Case Manager (.27 FTE)</i> Activities: Assists households in understanding leases, tenant counseling, making moving arrangements	(\$46,010/year plus 20.7% fringe/benefits) x (.27010446 FTE) x 3 years =	\$45,000
Total Permanent Housing Placement Services		\$45,000

Budget Summary:

Tenant-Based Rental Assistance	\$983,500
Supportive Services	\$226,500
Housing Information Services	\$45,000
Permanent Housing Placement	\$45,000
Total Program Cost	\$1,300,000
Project Sponsor Administration (7%)	\$91,000
Total Budget	\$1,391,000

* Reflects historical capacity levels. Previous application in 2010 has mislabeled household numbers and unduplicated totals in the Detailed Project Budget & Housing Outputs document.

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing
and Urban Development

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.
(Type or clearly print the following information:)

Applicant Name: City and County of San Francisco

Project Name: Second Start Program

Location of the Project: Catholic Charities CYO
180 Howard St., Ste. 100
San Francisco, CA 94105

Name of the Federal
Program to which the
applicant is applying: Housing Opportunities for Persons with AIDS (HOPWA)

Name of
Certifying Jurisdiction: City and County of San Francisco

Certifying Official
of the Jurisdiction
Name: Brian Cheu

Title: Director of Community Development

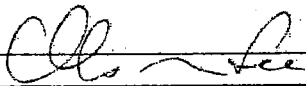
Signature: 

Date: January 24, 2013

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

Approved by OMB
0348-0046

1. Type of Federal Action: <input checked="" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input checked="" type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: San Francisco Mayor's Office of Housing 1 South Van Ness Ave., 5th Floor San Francisco, CA 94103 Congressional District, if known: CA -12		5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:
6. Federal Department/Agency: U.S. Department of Housing and Urban Development	7. Federal Program Name/Description: HOPWA CFDA Number, if applicable: 14.241	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): No services were requested nor performed.	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI): See 10 a:	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature:  Print Name: <u>D'son Lee</u> Title: <u>Director, Mayor's Office of Housing</u> Telephone No.: <u>(415) 701-5509</u> Date: <u>1/24/2013</u>	
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MAYOR'S OFFICE OF HOUSING
CITY AND COUNTY OF SAN FRANCISCO



EDWIN M. LEE
MAYOR

OLSON LEE
DIRECTOR

February 14, 2013

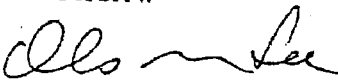
Olson Lee
Director, Mayor's Office of Housing
1 South Van Ness, 5th Floor
San Francisco, CA 94103

Re: Fiscal Year (FY) 2013-16 HOPWA Permanent Supportive Housing Renewal Application -
Second Start Program.

Dear Director Lee:

Through this letter, the Mayor's Office of Housing and San Francisco's Continuum of Care declares that our two entities will coordinate any awarded resources through this grant into local CoC planning efforts; participate in the development of or implementation of the City's CoC's centralized or coordinated assessment system to ensure that the housing and service needs of individuals and households with HIV/AIDS are captured and assessed; participate in the utilization of the local Homeless Management Information System (HMIS); and coordinate efforts to engage in rapid-rehousing of homeless persons in your community.

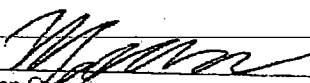
The CoC planning body commits to mutually participate in the planning and coordination of program activities occurring through this grant. During the first year of this grant, representatives from both offices will meet on a quarterly basis, with the first meeting occurring during the month of December, 2013, and the next three meetings occurring in March, June, and September of 2014.



Olson Lee
Director
Mayor's Office of Housing

2/20/13

Date



Megan Owens
Local Homeless Coordinating Board Policy Analyst
Human Services Agency

2/21/13

Date

1 South Van Ness Avenue, Fifth Floor, San Francisco, CA 94103
Phone: (415) 701-5500 Fax: (415) 701-5501 TDD: (415) 701-5503 <http://sf-moh.org/>



June 26, 2013

Velma Navarro
Office of Public and Indian Housing
U.S. Department of Housing and Urban Development
SENT VIA EMAIL TO Martha.E.Ruiz@HUD.gov

Dear Ms. Navarro,

The San Francisco Housing Authority ("the Authority") submits this letter in lieu of submitting a Family Self-Sufficiency Program eLogic model for FY 2010.

The Authority received a grant for a Family Self-Sufficiency Coordinator for FY 2010. At the time of application and award of the grant, the Authority was subject to restrictions of troubled status under SEMAP. Thus, use of the grant funds was conditioned on the City and County of San Francisco ("the City") functioning as the contract administrator.

The City did not perform work under this agreement. The Authority made no payments to the City under this agreement. The Authority did not use the FY 2010 grant for its intended purpose, and as a result, cannot submit an eLogic model for FY 2010.

If you have questions about the eLogic model or FY 2010 grant, please contact Nicole McCray-Dickerson at (415) 715-3283 or mccrayn@sfha.org.

Sincerely,

Barbara Smith
Acting Executive Director

EXHIBIT B

Applicant Name	Grant Number
San Francisco Mayor's Office of Housing	CA-H130013

Grantee Contact		CPD Field office Representative	
Name	Brian Cheu	Name	Winston Moy
Title	Director, Mayor's Office of Housing	Title	CPD Representative
Address	1 South Van Ness Avenue	Email	Winston.D.Moy@hud.gov
Address 2	5 th Floor	Phone	(415) 489-6586
City	San Francisco		
State	CA		
Zip	94103		
Email	olson.m.lee@sfgov.org		
Phone	415-701-5509		

Alerts: As a result of sequestration, each grantee's approved request is reduced by a fair share of .65%. Reductions are taken from Resource ID first and then the Supportive Services line items with appropriate reductions in Admin amounts. The grantee may present an alternative plan of adjustments to address the required reduction. However, the alternative adjustment must be approved by HUD Headquarters before implementation.

Conditions: The grantee must operate activities in coordination with local COC programs as instructed in the 2013 Renewal Memorandum.

Budget Line Item	Requested	Approved	Difference
Operating Costs	\$0.00	\$0.00	\$0.00
Leasing	\$0.00	\$0.00	\$0.00
TBRA	\$983,500	\$983,500	\$0.00
STRMU	\$0.00	\$0.00	\$0.00
Supportive Services	\$226,500	\$226,500	\$0.00
Housing Info	\$45,000	\$45,000	\$0.00
PHP	\$45,000	\$45,000	\$0.00
Resource ID	\$40,000	\$30,701	(\$9,299)
Other Housing	\$0.00	\$0.00	\$0.00
Grantee Admin	\$40,200	\$39,921	(\$279)
Project Sponsor Admin	\$91,000	\$91,000	\$0.00
Total	\$1,471,200	\$1,461,622	(\$9,578)

Approved Housing and Service Output goals				
Budget Line Item	Year 1	Year 2	Year 3	Total
TBRA	105	105	105	211
Sup Serv	105	105	105	211
Housing Info	19	19	19	30
PHP	9	9	9	27

Committed Leveraging	
Budget Line Item	Leveraged Resources
TBRA	\$450,000
Sup Serv	\$500,000



U.S. Department of Housing and Urban Development
 San Francisco Regional Office - Region IX
 600 Harrison Street
 San Francisco, California 94107-1387
 www.hud.gov
 espanol.hud.gov

LEVEL OF ENVIRONMENTAL REVIEW (2013)

(Use this form to document an environmental level of review decision for activities that are exempt or categorically excluded from NEPA, i.e. not subject to an Environmental Assessment.)

1) Project Description

Grant Number: CA-H13-0013

Project Name: HOPWA Permanent Supportive Housing Renewal Grant

Address or Location: Various Locations

Activities (include maximum contemplated number, scope, magnitude and duration): Resource identification; grantee's administrative costs; and partial rental subsidy program for people with HIV/AIDS

Amount: \$1,461,622

2) Choose one of the two Level of Environmental Review determinations:

Exempt per 24 CFR 58.34 or categorically excluded per 24 CFR 58.35(b) or 24 CFR 50.19.

Cite specific provision (e.g., "24 CFR 58.35(b)(5), Activities to assist homebuyers to purchase existing dwellings"):

- 24 CFR 58.34(a)(1): Environmental and other studies, resource identification and the development of plans and strategies;
- 24 CFR 58.34(a)(3): Administrative and management activities;
- 24 CFR 58.35(b)(1): Tenant-based rental assistance;
- 24 CFR 58.35(b)(2). Supportive services including, but not limited to, health care, housing services, permanent housing placement, day care, nutritional services, short-term payments for rent/mortgage/utility costs, and assistance in gaining access to local, State, and Federal government benefits and services.

Complete section 3, below. OR

Categorically excluded per 24 CFR 58.35(a) or 24 CFR 50.20, and subject to laws and regulations at 24 CFR 58.5 or 50.4. Cite specific provision (e.g., "24 CFR 58.35(a)(3)(ii), Rehabilitation of multifamily buildings"):

Complete section 3, below, and complete the Statutory Worksheet for Part 58 reviews or HUD 4128 Part A for Part 50 reviews.

3) Flood Insurance, Airport Clear Zone, and Coastal Barrier Resource Compliance

(24 CFR 58.6 or 24 CFR 50.4(b)(1), 50.4(c)(1), and 50.4(k))

FLOOD INSURANCE / FLOOD DISASTER PROTECTION ACT

1. Does the project involve the acquisition, construction or rehabilitation of insurable structures, buildings or mobile homes?

No; flood insurance is not required. The review of this factor is completed.

Yes; continue.

2. Is the structure or part of the structure located in a FEMA designated Special Flood Hazard Area?

No. Source Document (FEMA/FIRM floodplain zone designation, panel number, date):

(Factor review completed).

Yes. Source Document (FEMA/FIRM floodplain zone designation, panel number, date):

(Continue review).

3. Is the community participating in the National Insurance Program (or has less than one year passed since FEMA notification of Special Flood Hazards)?

Yes - Flood Insurance under the National Flood Insurance Program must be obtained and maintained for the economic life of the project, in the amount of the total project cost. A copy of the flood insurance policy declaration must be kept in the Environmental Review Record.

No (**Federal assistance may not be used in the Special Flood Hazards Area**).

AIRPORT RUNWAY CLEAR ZONES AND CLEAR ZONES DISCLOSURES

1. Does the project involve the sale or acquisition of existing property?

No. This factor review is completed.

Yes, continue.

2. Is the proposed location within 3,000 ft. of a civil airport runway or within 15,000 ft. of a military airfield?

No. Attach map. This element is completed.

Yes, continue.

3. Is the proposed location within a Civil Airport's Runway Clear Zone, Approach Protection Zone or a Military Installation's Clear Zone?

No; attach signed statement from airport or airfield operator to that effect, or attach FAA or DOD map. Project complies with 24 CFR 51.303(a)(3).

Yes; **Disclosure statement must be provided** to buyer and a copy of the signed disclosure statement must be maintained in this Environmental Review Record.

COASTAL BARRIERS RESOURCES ACT

1. Is the project located in HUD Region IX (CA, AZ, NV, HI, Guam)?

Yes. This element is completed; there are no designated coastal barrier resources in HUD Region IX.

No, continue.

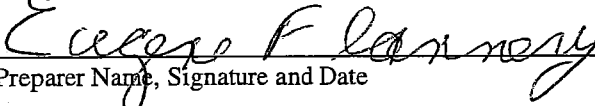
2. Is the project located in a coastal barrier resource area? (See <http://www.fema.gov/business/nfip/cbrs/cbrs.shtml>).

No; cite Source Documentation:

(This element is completed).

Yes - **Federal assistance may not be used in such an area.**

Eugene Flannery, Environmental Compliance Manager, MOHCD, August 1, 2013



Preparer Name, Signature and Date

Brian Chen, Director of Community Development, MOHCD, August 1, 2013



HUD Official or Responsible Entity Official or HUD Approving Official – Name, Title, Signature and Date

City and County of San Francisco, Mayor's Office of Housing and Community Development, California

HUD Field Office or Responsible Entity (City, County, State) or HUD Field Office

**FORM SFEC-126:
NOTIFICATION OF CONTRACT APPROVAL
(S.F. Campaign and Governmental Conduct Code § 1.126)**

City Elective Officer Information <i>(Please print clearly.)</i>	
Name of City elective officer(s): Members, Board of Supervisors	City elective office(s) held: Members, Board of Supervisors

Contractor Information <i>(Please print clearly.)</i>	
Name of contractor: Catholic Charities CYO	
<i>Please list the names of (1) members of the contractor's board of directors; (2) the contractor's chief executive officer, chief financial officer and chief operating officer; (3) any person who has an ownership of 20 percent or more in the contractor; (4) any subcontractor listed in the bid or contract; and (5) any political committee sponsored or controlled by the contractor. Use additional pages as necessary.</i>	
(1) Board of Directors: Carlos Alvarez, Nicholas Andrade, Rev. Paul Arnoult, Jeffrey Bialik, Gregory Bullian, Kathleen Cardinal, Salvatore Cordileone, Deborah Dasovich, Ellen Egan, Herbert Foedisch, Cecilia Herbert, Steven Kane, John Knight, Simon Manning, Maura Markus, James McCabe, Sharon McCarthy-Allen, Kathleen McEligot, Robert McGrath, Ann Miller, Nanette Miller, Stephen Molinelli, Katherine Munter, Maureen O'Brien Sullivan, Mark Okashima, D. Paul Regan, William Ring, Rita Semel, Timothy Simon, Pierre Theodore, Kenneth Weare (2) Chief Executive Officer: Jeffrey V. Bialik; Chief Financial Officer: Keith Spindle	
Contractor address: 180 Howard Street, San Francisco, CA 94105	
Date that contract was approved: Contract will begin December 1, 2013	Amount of contract: Contract total \$1,391,000
Describe the nature of the contract that was approved: HOPWA grant to nonprofit organizations to serve people with HIV/AIDS	
Comments: Attached form includes requested information	

This contract was approved by (check applicable):

the City elective officer(s) identified on this form

a board on which the City elective officer(s) serves: San Francisco Board of Supervisors
Print Name of Board

the board of a state agency (Health Authority, Housing Authority Commission, Industrial Development Authority Board, Parking Authority, Redevelopment Agency Commission, Relocation Appeals Board, Treasure Island Development Authority) on which an appointee of the City elective officer(s) identified on this form sits

Print Name of Board

Filer Information <i>(Please print clearly.)</i>	
Name of filer: Angela Calvillo, Clerk of the Board	Contact telephone number: (415) 554-5184
Address: City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102	E-mail: Board.of.Supervisors@sfgov.org

Signature of City Elective Officer (if submitted by City elective officer)

Date Signed

Signature of Board Secretary or Clerk (if submitted by Board Secretary or Clerk)

Date Signed