

Before Starting the Project Listings for the CoC Priority Listing

Collaborative Applicants must rank or reject all Project Applications –new projects created through reallocation, renewal projects, CoC planning projects, and UFA Costs projects - submitted through e-snaps from project applicants prior to submitting the CoC Project Listings.

Permanent Supportive Housing (PSH) Bonus projects must also be ranked on the New Project Listing using 999. Collaborative Applicants can only submit 1 PSH Bonus project.

Additional training resources are available online on the CoC Training page of the OneCPD Resource Exchange at: <https://www.onecpd.info/e-snaps/guides/coc-program-competition-resources/> .

Things to Remember

- There are four separate forms in e-snaps that make up the Priority Listings, which lists the new projects created through reallocation, renewal, CoC planning, and UFA Costs project applications that the Collaborative Applicant intends to submit on behalf of the CoC. The Priority Listing ranks the projects in order of priority and identifies any project applications rejected by the CoC. All renewal and new projects created through reallocation, CoC planning, and UFA Costs project applications must be accepted and ranked or rejected by the Collaborative Applicant. Ranking numbers must be unique for each project application submitted.
 - Collaborative Applicants are strongly encouraged to list all project applications on the FY2014 CoC Ranking Tool located on the OneCPD Resource Exchange to ensure a ranking number is used only once. The FY 2014 CoC Ranking Tool will assist the Collaborative Applicant during the ranking process among the four Project Listings.
 - Any project applications rejected by the Collaborative Applicant must select the reason for rejection.
 - Collaborative Applicants are required to notify all project applicants no later than 10 days before the application deadline regarding whether their project applications would be included as part of the CoC Consolidated Application submission.
 - If the Collaborative Applicant needs to amend a project for any reason after ranking has been completed, the ranking of other projects will not be affected; however, the Collaborative Applicant must be sure to rank the amended project once it is returned to the Project Listing and verify that the rank number assigned has not been assigned to another project on a different Project Listing.
 - Only 1 CoC Planning project can be ranked on the CoC Planning Project Listing.
 - Only 1 UFA cost project can be ranked on the UFA Cost Project Listing.
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- Only 1 PSH Bonus project can be ranked, using 999, on the New Project Listing.

1A. Continuum of Care (CoC) Identification

Instructions:

The fields on this screen are read only and reference the information entered during the CoC Registration process. Updates cannot be made at this time. If the information on this screen is not correct, contact the One CPD Resource Exchange Ask A Question at <https://www.hudexchange.info/ask-a-question/>.

Collaborative Applicant Name: Orange County, NC

2. Reallocation

Instructions:

FY 2014 CoC Priority Listing Detailed Instructions URL: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources> .

2-1 Is the CoC reallocating funds from one or more eligible expiring grant(s) into one or more new permanent supportive housing projects dedicated to chronically homeless persons? No

2-2 Is the CoC reallocating funds from one or more eligible expiring grant(s) into one or more new rapid re-housing project for families? No

**2-2.1 If the CoC is planning to reallocate funds to create one or more new rapid re-housing project for families, describe how the CoC is already addressing chronic homelessness through other means and why the need to create new rapid re-housing for families is of greater need than creating new permanent supportive housing for chronically homeless persons.
(limit 1000 characters)**

2-3 If the CoC responded 'Yes' to either of the questions above, has the recipient of the eligible renewing project being reallocated been notified? Not Applicable

3. Reallocation - Grant(s) Eliminated

CoCs planning to reallocate into new permanent supportive housing projects for the chronically homeless or rapid re-housing for households with children may do so by eliminating one or more expiring eligible renewal projects. CoCs that are eliminating projects entirely must identify those projects on this form.

Amount Available for New Project: (Sum of All Eliminated Projects)				
Eliminated Project Name	Grant Number Eliminated	Component Type	Annual Renewal Amount	Type of Reallocation
This list contains no items				

4. Reallocation - Grant(s) Reduced

CoCs planning to reallocate into new permanent supportive housing projects for the chronically homeless or rapid re-housing for households with children may do so by reducing one or more expiring eligible renewal projects. CoCs that are reducing projects must identify those projects on this form.

Amount Available for New Project (Sum of All Reduced Projects)					
Reduced Project Name	Reduced Grant Number	Annual Renewal Amount	Amount Retained	Amount available for new project	Reallocation Type
This list contains no items					

5. Reallocation - New Project(s)

CoCs must identify the new project(s) it plans to create and provide the requested information for each project.

Sum of All New Reallocated Project Requests
(Must be less than or equal to total amount(s) eliminated and/or reduced)

Current Priority #	New Project Name	Component Type	Transferred Amount	Reallocation Type
This list contains no items				

6. Reallocation: Balance Summary

6-1 Below is the summary of the information entered on the reallocated forms. The last field "Remaining Reallocation Balance" should equal '0'. If there is a positive balance remaining, this means that more funds are being eliminated or reduced than the new project(s) requested. If there is a negative balance remaining, this means that more funds are being requested for the new reallocated project(s) than have been reduced or eliminated from other eligible renewal projects.

Reallocation Chart: Reallocation Balance Summary

Reallocated funds available for new project(s):	\$0
Amount requested for new project(s):	
Remaining Reallocation Balance:	\$0

Continuum of Care (CoC) New Project Listing

Instructions:

Prior to starting the CoC New Project Listing, Collaborative Applicants should carefully review the "CoC Priority Listing Instructions" which are available at <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/> .

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Rank	Comp Type
This list contains no items						

Continuum of Care (CoC) Renewal Project Listing

Instructions:

Prior to starting the CoC Renewal Project Listing, Collaborative Applicants should carefully review the "CoC Priority Listing Instructions" which are available at <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>.

The Collaborative Applicant certifies that there is a demonstrated need for all renewal permanent supportive housing and rapid re-housing projects listed on the Renewal Project Listing.

The Collaborative Applicant does not have any renewal permanent supportive housing or rapid re-housing renewal projects.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Rank	Comp Type
PSH Concern of Du...	2014-10-28 09:32:...	1 Year	Cardinal Innovati...	\$302,607	W7	PH
UNC XDS Leasing P...	2014-10-03 12:02:...	1 Year	University of Nor...	\$36,517	W4	PH
UNC XDS Leasing P...	2014-10-03 12:06:...	1 Year	University of Nor...	\$18,258	W3	PH
UNC XDS Leasing P...	2014-10-03 11:58:...	1 Year	University of Nor...	\$9,129	W2	PH
UNC XDS Leasing P...	2014-10-03 11:56:...	1 Year	University of Nor...	\$9,129	W1	PH
PSH C Renewal 2014	2014-10-28 09:57:...	1 Year	Cardinal Innovati...	\$36,463	W6	PH
PSH C 2 Renewal 2014	2014-10-28 09:46:...	1 Year	Cardinal Innovati...	\$9,116	W8	PH
PSH C 3 Renewal 2014	2014-10-28 09:29:...	1 Year	Cardinal Innovati...	\$9,116	W9	PH
PSH RA/Operating ...	2014-10-28 15:19:...	1 Year	Cardinal Innovati...	\$118,725	W5	PH

Continuum of Care (CoC) Planning Project Listing

Instructions:

Prior to starting the CoC Planning Project Listing, Collaborative Applicants should carefully review the "CoC Priority Listing Instructions" which are available at <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>.

Project Name	Date Submitted	Project Type	Applicant Name	Budget Amount	Grant Term	Rank	Comp Type
NC-513 CoC Planni...	2014-10-28 16:27:...	--	Orange County, NC	\$6,759	1 Year	C10	CoC Planning Proj...

Funding Summary

Instructions

For additional information, carefully review the "CoC Priority Listing Instructions" and the "CoC Priority Listing" training guide, both of which are available at: <https://www.onecpd.info/e-snaps/guides/coc-program-competition-resources/>.

This page contains the total budget summaries for each of the project listings for which the Collaborative Applicant approved and ranked or rejected project applications. The Collaborative Applicant must review this page to ensure the totals for each of the categories is accurate. The "Total CoC Request" indicates the total funding request amount the Collaborative Applicant will submit to HUD for funding consideration. As stated previously, 1 UFA Cost project and only 1 CoC Planning project can be submitted and only the Collaborative Applicant is eligible to request these funds.

Title	Total Amount
Renewal Amount	\$549,060
New Amount	
Reallocated Amount	
CoC Planning Amount	\$6,759
UFA Costs	
Rejected Amount	\$0
TOTAL CoC REQUEST	\$555,819

Maximum CoC project planning amount: \$6,872

Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan	Yes	NC-513 Certificat...	10/28/2014
FY2013 HUD-approved Grant Inventory Worksheet	Yes	GIW NC-513 FINAL ...	10/28/2014
FY2014 Chronic Homeless Project Prioritization List	Yes	NC-513 2014 CH-Pr...	10/28/2014
FY2014 Rank (from Project Listing)	No		
Other	No		

Attachment Details

Document Description: NC-513 Certification Consistency Con Plan

Attachment Details

Document Description: GIW NC-513 FINAL 082914

Attachment Details

Document Description: NC-513 2014 CH-Prioritization

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

Page	Last Updated
Before Starting	No Input Required
1A. Identification	09/22/2014
2. Reallocation	10/28/2014
3. Grant(s) Eliminated	No Input Required
4. Grant(s) Reduced	No Input Required
5. New Project(s)	No Input Required
6. Balance Summary	No Input Required
7A. CoC New Project Listing	No Input Required
7B. CoC Renewal Project Listing	10/28/2014
7D. CoC Planning Project Listing	10/28/2014
Attachments	10/28/2014
Submission Summary	No Input Required

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: UNC Center for Excellence in Community Mental Health

Project Name: UNC XDS Leasing Project 1

Location of the Project: Orange County, North Carolina

Name of the Federal Program to which the applicant is applying: Continuum of Care Program

Name of Certifying Jurisdiction: Orange County, NC

Certifying Official of the Jurisdiction Name: Bonnie Hammersley

Title: County Manager

Signature: 

Date: 10/27/14

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing
and Urban Development

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(Type or clearly print the following information:)

Applicant Name: UNC Center for Excellence in Community Mental Health

Project Name: UNC XDS Leasing Project 2

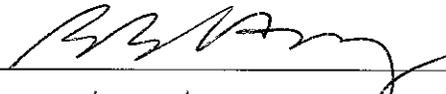
Location of the Project: Orange County, North Carolina

Name of the Federal Program to which the applicant is applying: Continuum of Care Program

Name of Certifying Jurisdiction: Orange County, NC

Certifying Official of the Jurisdiction Name: Bonnie Hammersley

Title: County Manager

Signature: 

Date: 10/27/14

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: UNC Center for Excellence in Community Mental Health

Project Name: UNC XDS Leasing Project 3

Location of the Project: Orange County, North Carolina

Name of the Federal Program to which the applicant is applying: Continuum of Care Program

Name of Certifying Jurisdiction: Orange County, NC

Certifying Official of the Jurisdiction Name: Bonnie Hammersley

Title: County Manager

Signature: 

Date: 10/27/14

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: UNC Center for Excellence in Community Mental Health

Project Name: UNC XDS Leasing Project 5 SSO Reallocation

Location of the Project: Orange County, North Carolina

Name of the Federal Program to which the applicant is applying: Continuum of Care Program

Name of Certifying Jurisdiction: Orange County, NC

Certifying Official of the Jurisdiction Name: Bonnie Hammersley

Title: County Manager

Signature: 

Date: 10/22/14

Certification of Consistency with the Consolidated Plan

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and Urban Development

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(Type or clearly print the following information:)

Applicant Name: Cardinal Innovations Health Care Solutions - OPC

Project Name: Permanent Supportive Housing RA/Operating

Location of the Project: Orange County, North Carolina

Name of the Federal Program to which the applicant is applying: Continuum of Care Program

Name of Certifying Jurisdiction: Orange County, NC

Certifying Official of the Jurisdiction Name: Bonnie Hammersley

Title: County Manager

Signature: 

Date: 10/22/14

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: Cardinal Innovations Health Care Solutions - OPC

Project Name: Permanent Supportive Housing C

Location of the Project: Orange County, North Carolina

Name of the Federal Program to which the applicant is applying: Continuum of Care Program

Name of Certifying Jurisdiction: Orange County, NC

Certifying Official of the Jurisdiction Name: Bonnie Hammersley

Title: County Manager

Signature: 

Date: 20/22/14

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: Cardinal Innovations Health Care Solutions - OPC

Project Name: Permanent Supportive Housing Concern of Durham

Location of the Project: Orange County, North Carolina

Name of the Federal Program to which the applicant is applying: Continuum of Care Program

Name of Certifying Jurisdiction: Orange County, NC

Certifying Official of the Jurisdiction Name: Bonnie Hammersley

Title: County Manager

Signature: 

Date: 10/27/14

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: Cardinal Innovations Health Care Solutions - OPC

Project Name: Permanent Supportive Housing C2

Location of the Project: Orange County, North Carolina

Name of the Federal Program to which the applicant is applying: Continuum of Care Program

Name of Certifying Jurisdiction: Orange County, NC

Certifying Official of the Jurisdiction Name: Bonnie Hammersley

Title: County Manager

Signature: 

Date: 10/22/14

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: Cardinal Innovations Health Care Solutions - OPC

Project Name: Permanent Supportive Housing C3

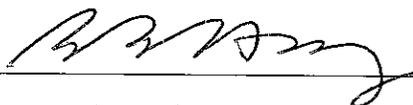
Location of the Project: Orange County, North Carolina

Name of the Federal Program to which the applicant is applying: Continuum of Care Program

Name of Certifying Jurisdiction: Orange County, NC

Certifying Official of the Jurisdiction Name: Bonnie Hammersley

Title: County Manager

Signature: 

Date: 20/22/14

**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: Orange County, NCProject Name: Orange County CoC Planning GrantLocation of the Project: Orange County, North CarolinaName of the Federal
Program to which the
applicant is applying: Continuum of Care ProgramName of
Certifying Jurisdiction: Orange County, NCCertifying Official
of the Jurisdiction
Name: Bonnie HammersleyTitle: County ManagerSignature: Date: 2012/14