

Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC's project applications that were either approved and ranked, or rejected.

As the Collaborative Applicant, you are responsible for reviewing the following:

1. The FY 2026 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2026 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It

- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2026 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

1A. Continuum of Care (CoC) Identification

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

1A-1. CoC Name and Number: CA-529 - Lake County CoC

1A-2. Collaborative Applicant Name: Lake County

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Lake County

1B. Coordination and Engagement–Accountable Structure and Participation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

1B-1.	Accountable Structure and Participation.	
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In the chart below for the period from June 1, 2025 to May 31, 2026:

1.	select 'Yes' or 'No' in the chart below if the entity listed participated in CoC meetings or select 'Nonexistent' if the entity does not exist in your CoC's geographic area, and
2.	enter the number of persons on the board for each category where you answered 'Yes' in the Participated in CoC Meetings column.

You must click Save at the bottom of the form before entering the number of persons for each category where you answered 'Yes'.

	Entity	Participated in CoC Meetings	Number of Board Members
1.	Affordable Housing Developer(s)	Yes	0
2.	CDBG/HOME/ESG Entitlement Jurisdiction(s)	Yes	0
3.	Certified Community Behavioral Health Clinic (CCBHC)	Yes	0
4.	Community Mental Health Center (CMHC)	Yes	0
5.	Disability Advocate(s)	Yes	2
6.	Disability Service Organization(s)	Yes	2
7.	Emergency Medical Services (EMS)/Crisis Response Team(s)	Yes	2
8.	Employment Assistance Program(s) (e.g., Local Workforce Development, American Job Center)	Yes	1
9.	Faith-based Organization(s)	Yes	1
10.	Homeless or Formerly Homeless Person(s)	Yes	4
11.	Hospital(s)	Yes	1
12.	Other Primary Healthcare Provider(s) (e.g., Federally Qualified Health Center, Healthcare for the Homeless)	Yes	2
13.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Yes	0
14.	Law Enforcement	Yes	0
15.	Local Court Systems, Including Specialty Courts (e.g., Mental Health Court, Drug Court, Care Court)	Yes	1
16.	Local Government Staff/Official(s)	Yes	5

17.	State Government Staff/Official(s)	No	
18.	State or Local Elected Public Official(s)	Yes	3
19.	Local Jail(s)	Yes	0
20.	Mental Health Service Organization(s)	Yes	1
21.	Mental Illness Advocate(s)	Yes	1
22.	Organization(s) led by and serving people with disabilities	Yes	1
23.	Other homeless subpopulation advocate(s)	Yes	10
24.	Other nonprofit homeless assistance provider(s)	Yes	10
25.	Other social service provider(s)	Yes	5
26.	Public Housing Agencies	Yes	1
27.	Recovery Housing or Sober Living Provider(s)	Yes	0
28.	School Administrators/Homeless Liaison(s)	Yes	1
29.	School District(s)	Yes	1
30.	Street Outreach Team(s)	Yes	2
31.	Substance Abuse Advocate(s)	Yes	2
32.	Substance Abuse Service Organization(s)	Yes	1
33.	Universities	Nonexistent	
34.	Veteran Serving Organization(s)	Yes	0
35.	Agencies Serving Survivors of Human Trafficking	Yes	0
36.	Victim Service Provider(s)	Yes	0
37.	Domestic Violence Advocate(s)	Yes	0
38.	Other Victim Service Organization(s)	Yes	0
39.	State Domestic Violence Coalition	Yes	0
40.	State Sexual Assault Coalition	Yes	0
41.	Youth Advocate(s)	Yes	3
42.	Youth Homeless Organization(s)	Yes	3
43.	Youth Service Provider(s)	Yes	3
44.	Other Homeless Assistance Provider(s)	Yes	8
45.	Local Business or Chamber of Commerce or a Member of a Business Improvement District	Yes	0
	Other: (limit 50 characters)		
46.	Emergency Assistance and Safety Services	Yes	1
47.	Community College	Yes	1

1B-2.	Open Invitation for New Members.	
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Describe your CoC's transparent process (e.g., communicated to the public on the CoC's website) to invite new members to join the CoC at least annually.

(limit 2,500 characters)

NEW MEMBERS: Lake County CoC is committed to recruiting a broad membership that reflects the community. We take several actions towards this end. Our CoC employs a senior analyst responsible for an annual email invitation to encourage CoC membership. Our CoC circulates the CoC membership application throughout our existing network of over one hundred thirty (130) subscribers to our listserv and twenty-three (23) organizational partners. Including the annual email, our CoC posts the CoC membership application on our website year-round, CoC Board members recruit new members for their committees, and membership applications are presented at each monthly CoC general meeting.

ANNUALLY - Our CoC annually circulates the CoC membership application throughout our existing network of over one hundred thirty (130) to our listserv and twenty-three (23) organizational partners. Including the annual email, our CoC posts the CoC membership application on our website year-round, CoC Board members recruit new members for their committees, and membership applications are presented at each monthly CoC general meeting. Our annual email recruited four (4) new CoC members to our General Membership. In the 2026 calendar year alone, our CoC has successfully recruited four (4) new members including membership from residential treatment facility and transitional housing provider.

1B-3.	CoC's Strategy to Solicit and Consider Opinions on Preventing and Ending Homelessness.	
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Describe your CoC's transparent process (e.g., communicated to the public on the CoC's website) to solicit and consider opinions regarding the CoC's general performance, strategies, and priority setting process from a broad array of individuals and organizations that have knowledge of homelessness or an interest in preventing or ending homelessness in the CoC's geographic area.

(limit 2,500 characters)

A. SOLICIT – Lake County CoC ensures that communication and access to information are distributed to community members through various formats. CoC staff circulated information via the CoC website, social media, and email Listserv of over one hundred thirty 130 subscribers to solicit opinions from our community members through surveys, Town Halls and training events throughout the year for funding opportunities, Strategic Plans, input, and guidance for improvements to programs and CoC policies, procedures, and practices this year. Our CoC regularly emailed, and posted on our CoC website and social media, to invite commentary from the public, and incorporate feedback from members and the public into our strategic planning processes, and our CE prioritization and assessment planning.

BROAD ARRAY - Lake County CoC has a broad range of participation from community partners and members who are knowledgeable and interested in ending homelessness in Lake County. Our community partners include county and city representatives, law enforcement, social services, housing agencies, nonprofit entities, shelter and transitional housing, sober living, residential treatment facilities, health care providers including local hospitals, clinics, mental health agencies and local behavioral health department. Our CoC staff, Board, and membership took a continuous improvement approach to develop the capacity of our CoC, and its constituent membership entities, and worked diligently with providers to remove silos and the overall ecosystem of service provisions available within our community. This past year we used our community surveys to restructure our CoC's Strategic Plan, our CoC's Governance and By-Laws, and CES vulnerability assessment.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
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Describe your CoC's transparent process to accept and consider proposals from organizations that have not previously received CoC Program funding including faith-based organizations.

(limit 2,500 characters)

PROCESS - Lake County CoC issues all NOFO and Requests for Proposals (RFPs) including our standard County policy and procedure is open to all. CoC staff receive approval for the NOFO/RFP from the CoC Board. The NOFO/RFP is posted to the website, shared on the CoC Facebook page, sent out as a press release, and concurrently sent as an email to the community email listserv of over 350-person, discussed at membership meetings, and responded to any questions in a formal bidders' conference, public process to ensure fairness and consistency. NOFO/RFP materials clearly describe how the CoC will open the application period and accept proposals, including the format and submission requirements. NOFO/RFP materials indicate that proposals from organizations and programs not previously funded will be considered equally.

NEW ORGANIZATIONS: Lake County CoC accepts all eligible applicants, including those who haven't received CoC funding. Our CoC sends a Press Release with the materials indicating that applications from organizations and programs not funded in previous funding rounds will be considered equally. The Press Release is sent out to a community-wide email listserv of over 350 email addresses, CoC members, agencies, organizations, and news outlets and posted on our CoC, the Collaborative Applicant and County websites, and on social media. The CoC's Grants Working Group developed and posted material on the CoC website, with guidance supporting new applicants to be competitive through the application and scoring processes. Our CoC analyst holds office hours for TA on the application requirements and is open to the public, which has been posted on our CoC website and sent to our community listserv of over three hundred twenty (320) organizations and community members.

1B-5	Plan for Comprehensive Strategies for Reducing Homelessness.
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Describe how your CoC will incorporate comprehensive strategies for reducing homelessness, including interventions in 42 U.S.C. 11386b(d) and other targeted projects for specific subpopulations, by providing a plan to address a gap in the CoC's current homelessness system.

(limit 2,500 characters)

Lake County CoC identifies gaps in its homelessness response through annual PIT data, McKinney Vento student homelessness information, local and state housing indicators, Homeless Management Information Systems, and structured stakeholder engagement to update gaps in services, develop our Strategic Plan, assist with Lake County's Housing Element updates and the County's Mental Health Housing Plan. Current data and feedback highlight a gap in low barrier shelter and housing options for individuals in encampments, seniors, and people with mental health and substance abuse disorder needs including treatment and recovery.

To address this gap, the CoC incorporates interventions through outreach, emergency shelter, Rapid Rehousing, and Permanent Supportive Housing—while deploying targeted projects for families, veterans, DV survivors, youth, wildfire displaced households, justice involved individuals, foster care-involved youth, seniors, and persons with disabilities. Strategies include expanding encampment resolution activities, strengthening youth outreach centers, supporting Probation's supportive housing project, and sustaining low barrier emergency shelter operations.

Performance measures include reducing unsheltered homelessness by 10% annually, increasing exits to permanent housing by 15% across CoC projects, expanding HMIS participation to 95% of local homeless serving agencies, and reducing returns to homelessness within 12 months by 8%. Progress will be formally reported each fiscal year in August. Reports will align with HUD and state reporting, PIT results, HMIS Data, CoC performance reviews and supplemented by mid fiscal year updates each December to track program benchmarks and adjust strategies.

Timelines align with HHAP commitments: continuation of the 30 bed shelter and ERF activities (ongoing), the Lakeport Navigation Center development (within 24–36 months), and Housing Element related tasks (within 12–24 months). Funding sources include state HHAP, ERF, NPLH, BHSA, and federal ESG, Section 8, VASH, CalWORKs, Medi Cal, WIC, Child Welfare, and CA OES for DV programs. Oversight is provided by the CoC's Strategic Planning and Encampment Resolution work group, supported by County Community Development and Behavioral Health, the CoC's collaborative applicant, Lake County Board of Supervisors, CoC Executive Committee Chair, ensuring accountability and timely implementation.

1B-5a Confirmation of Plan Coverage.

Select 'Yes' or 'No' in the chart below to indicate whether your narrative in question 1B-5 addresses the following aspects of your plan to address a gap in the CoC's current homelessness system.

1. Identifies the gap, using data or stakeholder feedback	Yes
2. The strategy to address the needs of all relevant subpopulations	Yes
3. Sets quantifiable performance measures	Yes
4. Identifies timelines for the completion of specific tasks	Yes
5. Identifies specific funding sources for planned activities	Yes

6. An individual or body responsible for overseeing implementation of specific strategies	Yes
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1C. Coordination and Engagement

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- Frequently Asked Questions

1C-1.	Treatment and Recovery Services—On-site Substance Use Treatment Availability.	
	You must upload the List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment attachment to the 4A. Attachments Screen.	
	What percent of your TH/RRH/PSH projects have substance use treatment available on site?	40%

If you are a rural CoC, describe what substance use treatment is available in your CoC and how people you serve access those services.

(limit 2,500 characters)

Lake County CoC (LCCoC) serves a rural community of about 65,000 residents. LCCoC's Collaborative Applicant, Lake County Behavioral Health Services (LCBHS), is the primary access point for Substance Abuse Disorder services, operating clinics in Clearlake, Lower Lake, and Lucerne. LCBHS provides assessments, individual and group counseling, crisis intervention, treatment planning, and recovery services for youth and adults. Services can be accessed through the 24/7 Access Line, walk ins at clinic locations, or referrals from outreach teams, hospitals, county agencies, and law enforcement and houses 20 units for PSH in Nice CA. LCBHS also operates treatment and recovery programs for adolescents and adults, including state-approved DUI treatment programs. These programs offer structured counseling, education, case management, and individualized treatment planning to support long term recovery. LCBHS has formal partnerships with residential and intensive outpatient treatment, options are available through Hilltop Recovery Services and Redwood Community Services, which offer sex specific residential programs and an intensive outpatient program at multiple locations in the region. These programs provide structured care, counseling, and supportive services tailored to individual recovery and treatment needs. Additional treatment and recovery resources are available countywide through medical providers, including Adventist Health Clear Lake (AHCL), which operates Hope Center and Project Restoration, two (2) of our TH projects, Lakeview Health Center in Lakeport, Lucerne Community Clinic, Sutter Lakeside Hospital, and independent practitioners. Hope in Humanity, a faith-based recovery house is on our Priority Listing for TH services tailored to treatment and recovery. Scotts Valley Band of Pomo Indians SV Sober Living Environment is a residential unit and provide stabilization to residents.

1C-1a. Treatment and Recovery Services—Outpatient Treatment for Mental Health and Substance Use Disorders.

Describe how your CoC partners with, or has projects that provide, outpatient treatment for mental health and substance use disorders with a range of appropriate levels of care, psychosocial interventions, medication management, suicide prevention, and recovery supports.

(limit 2,500 characters)

OUTPATIENT Lake County CoC (LCCoC) collaborative applicant is Lake County Behavioral Health Services (LCBHS), which provides a comprehensive continuum of outpatient mental health and substance abuse treatment across multiple care settings. Outpatient services are available through clinics in Lucerne, Clearlake, and Lower Lake. These offer assessments, individual and group counseling, crisis intervention, treatment planning, and structured therapeutic approaches including cognitive behavioral therapy (CBT), dialectical behavior therapy (DBT), family therapy, and psychoeducation. Treatment addresses co-occurring disorders and integrates psychosocial interventions tailored to adults, youth, and veterans. Medication management is provided via the Medications Services Team, utilizing telehealth psychiatry, on-site nursing for medication administration, and in-home injection services. All psychiatric and medication-assisted care aligns with Specialty Mental Health Services (SMHS) eligibility. LCBHS provides 24/7 crisis and suicide prevention support through the Access Team and crisis hotlines (e.g., 988, North Bay Suicide Prevention Hotline) and responds collaboratively with law enforcement to emergency mental health situations, including conducting “5150” risk assessments. Substance use outpatient treatment is integrated into these same service sites (Lucerne and Clearlake), offering screening, brief interventions, case management, relapse prevention, adult and youth programs, and referral to residential or dependency drug court services. These programs are staffed by licensed providers and typically span six months. Recovery supports include peer led services via the Full Service Partnership and wraparound models under the Behavioral Health Services Act, providing comprehensive support for individuals with high needs, including housing assistance and coordinated care planning. Access to all services is available to clients through self refer, walk in, call the 24/7 Access Line, or are referred via outreach, hospitals, law enforcement or CE partners. Services are coordinated using LCBHS’s provider directories and involve partnerships with community-based organizations for psychosocial support and referrals.

1C-1b. Treatment and Recovery Services—Peer Support and Recovery Navigation.

Describe how your CoC partners with, or has projects that provide access to, peer recovery specialists or other forms of peer support and recovery navigation.

(limit 2,500 characters)

The Continuum of Care (CoC) embeds peer support and recovery navigation across all system entry points and service pathways to ensure participants receive recovery oriented engagement, treatment linkage, and housing support. Peers are integrated into crisis response, coordinated entry (CE), outreach, shelter operations, and recovery housing.

Lake County Behavioral Health Services (LCBHS) Crisis Teams include peer recovery specialists at the Big Oak center in Clearlake Oaks. Individuals experiencing mental health crises are met by staff with lived experience who help deescalate and facilitate connection to treatment and recovery. RCS provides structured in house training to reinforce recovery oriented practices. LCCoC access points incorporate a recovery focused workforce. Adventist Health, RCS, NCO, LCBHS, Lakeshore center (Clearlake), and Harbor on Main (Lakeport) utilize peer recovery specialists and navigators, family advocates, Community Health Workers, Certified Substance Use Counselors, and staff with lived experience. These peers assist individuals in recovery goals, completing CE assessments, and accessing treatment and recovery resources.

Outreach teams from Adventist Health, the Pathways HUB (HUB), and LCBHS deliver field based recovery navigation. LCBHS team works closely with local law enforcement and Adventist Health Shower Trailer, both operates as a mobile CE Access Point with staff expanding access to recovery support across four communities.

The HUB provides streamlined referrals to LCBHS mental health treatment, substance abuse services, homelessness programs, emergency and transitional housing shelters including Xamitin Haven, Hope Center, Project Restoration and other CoC providers, ensuring participants have access to a full continuum of treatment and recovery supports.

Recovery oriented housing options include Supporting Bright Futures transitional housing with Enhanced Care Management; Hope Center and Project Restoration House transitional beds with case management; and sober living options including Fran's House, Rosie's House, Scotts Valley, and RCS H.O.M.E. Woodland Community College's Reconnect and Recovery Support program offers treatment and recovery focused support for adults returning to school.

Across the system, peers help participants translate initial engagement into coordinated plans and housing plans, strengthening treatment connection, long term recovery and self-sufficiency outcomes.

1C-1c. Treatment and Recovery Services—Connecting Individuals Experiencing Serious Mental Illness with the Services Necessary to Promote Stability.

Describe how your CoC identifies individuals experiencing Serious Mental Illness and connects them with the services necessary to promote stability, such as Assertive Community Treatment teams and other models that combine intensive care coordination and assertive outreach with comprehensive treatment.

(limit 2,500 characters)

The Lake County CoC identifies and connects individuals experiencing Serious Mental Illness (SMI) to stabilizing services through its Collaborative Applicant, Lake County Behavioral Health Services (LCBHS). LCBHS uses a coordinated, multi layered system to ensure individuals with SMI are identified early and linked to effective, long term treatment.

Identification begins with the LCBHS Access Team, which provides countywide screening and assessment for individuals aged five and older. Referrals come through the Coordinated Entry system, self referrals, hospitals, schools, community partners, law enforcement, and the 24/7 crisis line. Once identified, individuals showing symptoms of SMI or significant emotional disturbance receive immediate evaluation and are placed into the appropriate level of care. LCBHS operates a comprehensive crisis continuum to support individuals in acute distress. Crisis Services staff respond 24/7 and partner with law enforcement and hospital emergency departments to assess psychiatric emergencies. They provide safety planning, facilitate emergency evaluations, and conduct follow up outreach, ensuring a seamless connection from crisis stabilization to ongoing treatment.

For individuals requiring intensive and long term care coordination, LCBHS offers Full Service Partnership (FSP) programs for all age groups. FSP teams use a strengths based model to serve those with SMI who are homeless, at risk of homelessness, frequently hospitalized, or involved with the justice system. Services include clinical treatment, case management, housing supports, skill building, medication management, and continuous engagement to prevent future crises.

LCBHS also delivers Specialty Mental Health Services (SMHS), providing psychiatric medication support, telehealth psychiatry, therapy, counseling, and care coordination for adults with moderate to severe mental illness. The Medication Services Team offers psychiatric evaluations, medication management, and in home injectable medication services for individuals needing intensive medical support.

Through its integrated Access Team, Crisis Continuum, FSP programs, and SMHS services, LCBHS ensures that individuals experiencing SMI are connected to assertive, comprehensive, and community based treatment models that promote long term stability, recovery, and improved public safety.

1C-1d. Treatment and Recovery Services—Coordination with Providers in Connection with Drug or Other Specialty Courts.

Identify at least one partnership the CoC has with a provider or entity providing services in connection with Drug Courts and other specialty courts serving individuals with mental and substance use disorders, Assisted Outpatient Treatment (AOT) programs, and inpatient civil commitment.

(limit 500 characters)

COORDINATION Lake County CoC's CE and Collaborative Applicant, Behavioral Health Services which works closely with the courts, and Probation to support individuals in Dependency Drug Court, Veterans Treatment Court, and CARE Court. LCBHS provides court-mandated outpatient treatment, counseling, medication services, and recovery supports. Courts and Probation ensure referrals, monitor compliance, and help clients access needed treatment.

Describe how your CoC coordinates with the provider or entity identified above to support housing stability and movement towards independence, including by leveraging court orders.

(limit 2,500 characters)

COORDINATION The Lake County CoC coordinates closely with its Collaborative Applicant, Lake County Behavioral Health Services (LCBHS), to support housing stability and progress toward independence for individuals involved in Dependency Drug Court, Veterans Treatment Court, and CARE Court. Through these partnerships, the CoC aligns housing interventions with court-mandated treatment requirements, ensuring participants receive consistent clinical care while also securing safe, stable housing. LCBHS provides court-ordered outpatient treatment, counseling, medication management, and recovery supports. These services address behavioral health barriers that commonly interfere with stable housing, allowing individuals to meet treatment milestones required by the courts. Courts and Probation reinforce this progress by ensuring referrals are completed, monitoring compliance, and directing participants to the CoC when housing instability threatens their ability to meet court conditions. The CoC integrates these court mandates into Coordinated Entry prioritization, ensuring individuals under court supervision who demonstrate treatment engagement receive streamlined access to shelter, rapid rehousing, or permanent supportive housing when eligible. When a court order identifies housing as a requirement for compliance or successful program completion, the CoC leverages that order to expedite placement, aligning judicial directives with available housing resources. This coordination helps prevent returns to homelessness that could disrupt recovery or result in further legal consequences. Through shared case staffing, communication between Probation, LCBHS clinicians, and CoC housing providers ensures participants receive wraparound support, connecting court-mandated treatment with housing stabilization services, skills development, and long-term independence planning. This integrated approach allows the CoC to use court orders as supportive tools—reinforcing accountability while enabling sustained recovery and stable housing outcomes for Lake County residents.

1C-1e. Treatment and Recovery Services—Partnership with Local Crisis System of Care.

Identify at least one partnership the CoC has with the local crisis system of care including 988 and crisis contact centers, mobile crisis and outreach services, and crisis stabilization services.

(limit 500 characters)

The Lake County CoC's Collaborative Applicant is Lake County Behavioral Health Services. The CoC partners with LCBHS which provides 24/7 crisis response alongside local law enforcement, including the 988-crisis line. Mobile crisis teams that respond with law enforcement, who secure the scene, ensure safety in crisis and provides on-scene assessment, de-escalation, and safety planning, detailed, and crisis stabilization services that assess and link individuals to ongoing treatment and recovery.

1C-1f.	Treatment and Recovery Services—Availability of Units for Persons Reporting Chronic Substance Use.	
	You must upload the List of CoC Program Projects and the Number of Units that require Substance Abuse Treatment attachment to the 4A. Attachments Screen.	
	Identify the number of CoC Program-funded units that require program participant engagement in substance abuse treatment services as a condition of continued participation in the program in accordance with 24 CFR 578.75.	10

1C-1g.	Treatment and Recovery Services—24/7 Access to Detox, Residential, or Inpatient Treatment.	
Is there 24/7 access to detox, residential, and inpatient behavioral health treatment within the geographic area of your CoC?		Yes

1C-1h. Treatment and Recovery Services—Formal Partnership with Behavioral and Mental Health Facilities.

Identify at least one formal partnership the CoC has with a Certified Community Behavioral Health Clinic (CCBHC), Community Mental Health Center (CMHC), SAMHSA Projects for Assistance in Transition from Homelessness (PATH) provider, Grants for the Benefit of Homeless Individuals (GBHI) provider, or a similar facility if none of the above are located in the geographic area.

(limit 500 characters)

Lake CoC's Colligative Applicant is Lake County Behavioral Health Services. Lake County CoC maintains formal partnerships with local treatment providers such as Hilltop Recovery, Tule House, Adventist Health Clear Lake, Crestwood Behavioral Health, Manzanita House, Skyway House and more. These partnerships support mental health and substance-use treatment, including detox services, residential recovery, and outpatient counseling.

1C-1i. Treatment and Recovery Services—Sober Housing Availability.

Identify at least one new or existing CoC Program-funded project that operates sober housing in accordance with 24 CFR 578.93(b)(5).

(limit 500 characters)

Lake County CoC is pleased to recommend Hope in Humanity's Hope Homes, a faith based, recovery oriented transitional housing program, for inclusion in this year's Priority Listing. Hope Homes provides a supportive, structured living focused on helping residents achieve housing stability, recovery, and build self sufficiency skills. The program integrates sober living practices with individualized case management, employment development, life skill, and connections to treatment and recovery.

1C-1j. Treatment and Recovery Services—Warm Hand-Offs to Stable Housing Providers.

Describe how your CoC coordinates with the programs named in questions 1C-1a through 1C-1i to facilitate warm hand-offs to stable housing providers and prevent entry into homelessness.

(limit 2,500 characters)

The Lake County CoC's collaborative applicant is Lake County Behavioral Health Services (LCBHS). The CoC partners Probation, Hilltop Recovery, Tule House, Adventist Health Clear Lake (AHCL), Hope in Humanity and more to ensure people receive coordinated support and smooth transitions into stable housing. Coordinated Entry (CE), administered by AHCL's Pathways HUB (HUB), provides shared assessment tools and referral pathways across multiple access points such as Harbor on Main, Lakeshore Center, AHCL Shower Trailer, LCBHS Crisis Team and shelters.

Probation collaborates through the Community Corrections Partnership, which incorporates treatment and housing stability as part of rehabilitation planning. Probation officers routinely coordinate with CE and LCBHS to ensure clients exiting custody or entering supervision are referred promptly to supportive services rather than facing homelessness.

Warm hand-offs occur regularly. For example, CES staff may coordinate with a probation client and directly introduce them to Hilltop Recovery's intake counselor, ensuring the individual immediately begins substance abuse treatment supported by housing-related case management and discharge planning.

Similarly, when CE identifies a pregnant or parenting mother in need of residential treatment, staff coordinate with Tule House to arrange an intake time and personally notify the program before the client arrives. This prevents gaps in care and ensures the mother and her children transition smoothly into the residential setting where counseling, parenting support, and case management are available.

Adventist Health Clear Lake also serves as an access point through its outreach programs. For example, during a mobile shower event, staff work with unhoused individuals or family and invite a CE navigator to meet them onsite, creating a direct pathway into mental health services or housing navigation support.

Hope in Humanity's outreach workers provide warm introductions by connecting people encountered during meal distribution to CE assessors. Staff may accompany an individual to an assessment location or call ahead to ensure someone is ready to receive them, strengthening engagement and preventing street homelessness.

Through shared communication, coordinated referrals, and personal warm hand-offs between agencies, the CoC maintains a unified system that helps individuals move smoothly from crisis into supportive programs and ultimately into stable housing.

1C-2.	Supportive Services Investment.	
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	Number
1. Enter your CoC's FY 2026 Annual Renewal Demand (ARD).	\$26,430
2. Of projects your CoC proposed to be funded in the FY 2026 CoC Program Competition, enter the total amount of funding for the supportive services budget line items.	\$440,504
3. Percent of your CoC's FY 2026 ARD (from element 1 above) that is supportive services funding (from element 2 above).	1,667%
4. Enter the amount of funding, leverage, match, and funding commitment from other formal partnerships in supportive services for the projects included in your CoC's FY 2026 ARD.	\$335,370

5. Percent of your CoC's FY 2026 ARD (from element 1 above) that is the supportive services funding in proposed projects (from element 2 above) plus the amount of funding, leverage, match, and funding commitment from other formal partnerships in supportive services (from element 4 above).	2,936%
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1C-3.	Participation Requirements for Supportive Services.
	You must upload the Language from Project Supportive Service Agreements attachment to the 4A. Attachments Screen.

What percent of your housing projects (TH, PH-PSH, PH-RRH, and Joint projects) require program participants to take part in supportive services (e.g. case management, employment training, substance use disorder treatment) in line with 24 CFR 578.75(h)?	100.00%
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1C-4. Consulting with ESG Recipients.

Describe how your CoC has and will continue to consult with ESG recipients in the planning and allocation of ESG funds.

(limit 2,500 characters)

CONSULT - The Lake County CoC coordinates closely with ESG recipients to ensure that individuals and families are immediately connected to CoC assistance, housing resources, and supportive services. The CoC maintains ongoing consultation and collaboration with the ESG recipient through direct communication including email, phone calls, TEAMS meetings, and program surveys focused on CoC planning, CE assessments, and PIT preparation. This coordination supports consistent implementation of ESG and CoC standards across all shelter programs.

COORDINATES - The CoC's Coordinated Entry (CE) system identifies participant needs, complete standardized assessments, and connect households to the most appropriate housing interventions. The CoC has adopted ESG guidelines for all CoC funded and non CoC funded projects, which strengthens alignment across emergency shelters, transitional housing, permanent housing and service providers. Expectations have increased from basic reporting of activities to deeper performance evaluation, including geographic service delivery, participant acceptance processes, and prioritization factors tied to rapid placement into permanent and stable housing.

The CoC works with shelter providers to ensure that families with children and unaccompanied youth receive support consistent with ESG and McKinney Vento requirements. This includes considering educational needs in housing placement decisions, informing families of educational rights, and ensuring children and youth are enrolled in school and receiving appropriate educational services. Coordination occurs with the Department of Social Services, Lake County Office of Education, McKinney Vento Coordinators and Educational Liaisons, and other mainstream providers to remove barriers and stabilize households.

This process outlines how the CoC evaluates shelter projects, reviews case notes and intake documentation, and monitors HMIS accuracy to ensure programs are connecting participants to the full range of CoC housing and treatment resources.

Through consistent communication, shared standards, coordinated assessment, and a structured monitoring approach, the Lake County CoC ensures that shelter providers serve as effective entry points to the broader housing crisis response system and support rapid connection to CoC assistance.

1C-4a. Coordination with Emergency Shelter Providers.

Describe how your CoC coordinates with shelter providers to connect individuals and families with CoC assistance.

(limit 2,500 characters)

Lake County's Continuum of Care (LCCoC) works closely with shelter providers, so every shelter door also opens directly to housing assistance. Coordination starts with shelters serving as Coordinated Entry (CE) Access Points (AP). At Xamitin Haven emergency shelter and Hope Center transitional housing shelter, staff complete the CE Vulnerability Assessment (VA) as soon as a guest arrives and enter them into HMIS on site, preventing lost referrals and eliminating return appointments. Additional APs—including the Adventist Health Shower Trailer, Harbor on Main for youth, and three Lake County Behavioral Health Services (LCBHS) programs such as the Crisis Street Outreach Team, ensuring people can enter CE wherever they present. Using one CE process across all shelters creates a single standard for referrals. Providers receiving CoC, ESG, Homeless Housing Assistance and Prevention, and Encampment Resolution funding rely on the CE assessment score to prioritize housing, treatment, recovery, and stabilization. This ensures individuals and families are matched based on need rather than which program they accessed first.

After CE entry, follow up begins immediately. Housing Navigators meet unhoused people in shelters to develop individualized housing, treatment, workforce, and stabilization plans. They coordinate placements into Rapid Rehousing operated by North Coast Opportunities (NCO) and the Department of Social Services (DSS), as well as Permanent Supportive Housing through LCBHS.

Monthly LCCoC case conferencing strengthens coordination among homeless response providers, connecting shelter staff with housing navigators, and our TH, and PH providers NCO, LCBHS, Catholic Charities of Northwest California, Supporting Bright Futures and DSS to review each CE to help people move from shelter to permanent housing.

After hours agreements allow law enforcement, hospitals, the Pathways HUB (LCCoC's CE), and LCBHS Crisis Teams to place individuals directly at Xamitin Haven, with Crisis Teams entering clients into HMIS. Hope Center and Project Restoration House offer beds for people with medical needs, and Hope Center maintains dedicated youth beds. Supporting Bright Futures and NCO assist families, while DSS provides hotel stays for CalWORKs households. Survivors are supported through Lake Family Resource Center's confidential database that connects to CE.

1C-5. Data Sharing to Inform the Homelessness Response System.

Describe how your CoC has or will share PIT, HIC, HMIS, and System Performance data with state and local government as permitted by law in order to inform the homelessness response system.

(limit 2,500 characters)

DATA - The Lake County Continuum of Care (LCCoC) shares key homelessness data with state and local government partners, as requested and required, to strengthen the countywide homelessness response system. As required by California, the CoC submits HMIS data to the state's Homeless Data Integration System (HDIS), ensuring Lake County's information contributes to statewide analyses of trends, needs, and system performance. HDIS reporting also allows state agencies to monitor outcomes across programs funded through CoC, ESG, Homeless Housing Assistance and Prevention, and Encampment Resolution grants. PIT Count, HIC data are shared as requested to partners and to the CA Continuum of Care Collaborative Applicant Alliance.

Locally, LCCoC provides regular data updates to inform planning and decision making. Each quarter, the CoC presents HMIS and system data at its general membership meeting, giving community partners visibility into enrollment trends, outreach outcomes, shelter utilization, and housing placements. The CoC also releases both preliminary and final PIT and HIC data each year, allowing members to review annual changes in homelessness, available beds, and utilization rates. These reports guide discussions about service gaps, population trends, and resource allocation.

In addition, the CoC prepares and shares its annual System Performance Measures report, which includes data on length of time homeless, returns to homelessness, income growth, exits to permanent housing, and other state and federal metrics. Sharing SPM results helps local governments, providers, and stakeholders evaluate how well the system is functioning and identify strategies to improve throughput and outcomes including in the LCCoCs Strategic Planning Committee.

Through HDIS submissions, quarterly HMIS reporting, annual PIT and HIC releases, and annual System Performance Measures reporting, the Lake County CoC maintains transparent data sharing practices that support informed decision making across the homelessness response system.

1C-5a. Using Other Data Sources Alongside HMIS to Improve Care.

Describe how your CoC utilizes other data sources alongside HMIS to improve care (e.g., health care utilization and claims data, electronic health care record data; admission, discharge, and transfer data; and law enforcement and corrections system data).

(limit 2,500 characters)

Lake County CoC strengthens its homelessness response system by integrating multiple data sources alongside HMIS to create a fuller, more accurate picture of local needs. Census data provide foundational insight into Lake County's demographics, including a population of 68,163, 27,912 households, a median income of \$51,434, and 34,628 housing units. Probation data shows approximately thirteen percent (13%) of individuals supervised are homeless and provide residential data. This information guides targeted outreach and cross system coordination for people involved in the criminal justice system who face heightened barriers to stability and allows for strategic partnerships to increase public safety. Youth homelessness data from McKinney Vento add another critical dimension. The Lake County Office of Education documents how housing instability disrupts education and increases absenteeism, trauma, and academic decline among children and youth. These insights ensure the CoC's planning includes education continuity and youth focused housing resources, identifying gaps where family support, transportation, or documentation assistance are needed. The CoC pairs this external data with provider reported PIT and HIC information to track homeless trends and system capacity. The 2026 PIT count identified 483 unhoused people, including 331 unsheltered individuals, while the HIC documents 767 year round beds across emergency shelter, transitional housing, permanent supportive housing, and rapid rehousing programs. These numbers help the CoC assess whether current resources meet community needs and allocate funding accordingly. Finally, the LCCoC's Performance Review Committee uses system performance data, HMIS outcomes, provider metrics, and these external datasets to monitor program results and recommend adjustments. The committee evaluates project performance, supports technical assistance, and helps prepare HUD submissions, ensuring that funding decisions and system improvements are grounded in comprehensive, cross sector data. By integrating Census, Probation, McKinney Vento, PIT, HIC, provider, and performance review data alongside HMIS, Lake County's CoC makes informed decisions that improve care coordination, identify unmet needs, and strengthen the overall homelessness response system.

1C-6. Employment and Workforce Development Partnership.

Identify at least one partnership the CoC has with employment and workforce development programs and organizations such as the Local Workforce Development Board, State Workforce Agency, American Job Center (also known as One-Stop Career Centers), registered apprenticeship program, community and technical college, union training program, adult education provider, or State Vocational Rehabilitation agency.

(limit 2,500 characters)

The Lake County CoC maintains active partnerships with several employment and workforce development providers to support people exiting homelessness. The CoC collaborates with the Workforce Alliance of the North Bay, the region's Local Workforce Development Board, and its American Job Center, CareerPoint Clearlake. Through this partnership, participants receive job search assistance, resume and interview support, career counseling, and access to training programs that lead to industry-recognized credentials.

The CoC also partners with Woodland Community College, which offers certificate programs, career technical education, adult-education courses, and academic pathways that help participants enter higher-wage fields. CoC staff refer individuals to Woodland's programs and coordinate warm hand-offs so students facing housing instability are connected back to CES.

Lake County Behavioral Health Services' Workforce Education and Training (WET) program provides vocational skill-building, Peer Support Specialist certification, and workforce readiness training for individuals preparing to enter behavioral health or social-service careers.

North Coast Opportunities' BUILD program adds hands-on job training and employment pathways, including support for construction and trade-related fields. Together, these partnerships give CoC participants access to workforce preparation, credentialing, vocational support, and education—key steps toward long-term housing stability.

1C-7. Street Outreach—Cooperation with First Responders and Law Enforcement.

Describe in the field below how your CoC's street outreach projects (including co-response) cooperate with first responders and law enforcement to increase positive interactions in order to increase housing and service engagement and promote use of CoC services.

(limit 2,500 characters)

The Lake County CoC maintains strong partnerships with key workforce and employment providers to help participants build long term economic stability. Through the Workforce Alliance of the North Bay, Lake County's Local Workforce Development Board and its American Job Center, CareerPoint in Clearlake, participants receive job search assistance, resume and interview coaching, digital literacy training, career counseling, and access to industry recognized training programs that prepare them for high demand fields. Many participants secure full time employment after completing CareerPoint training pathways, and several have earned certifications in wildfire resilience work and other in demand regional occupations.

Woodland Community College expands these opportunities with certificate programs, career technical education, adult education classes, and academic pathways that prepare students for higher wage careers. CoC participants have successfully completed Medical Assistant, Certified Nursing Assistant, and construction related certificate programs, increased their earning potential and reducing the likelihood of returning to homelessness by creating more opportunities for self-sufficiency.

Lake County Behavioral Health Services' Workforce Education & Training (WET) program offers vocational skill building and Peer Support Specialist certification. Participants exiting homelessness often thrive in peer support roles: many have completed certification and secured paid positions within behavioral health and social service agencies.

North Coast Opportunities' BUILD program supports hands on training and paid work experience, including construction and facilities maintenance skills.

Participants have been hired directly by local employers after completing BUILD internships, demonstrating the program's effectiveness in reducing barriers to employment.

Together, these partnerships offer practical training, credentials, supportive coaching, and direct employment pathways. Outcomes for participants include increased income, skill gain, successful job placement, and long term stability and self-sufficiency are key factors in maintaining permanent housing.

1C-8. Family or Support Network Reunification.

Describe how your CoC, or your recipients, assist with family or support-network reunification efforts for individuals experiencing homelessness or living in CoC Program-funded housing (e.g., case management, travel costs, arrangement of assistance in another geographic area).

(limit 2,500 characters)

The Lake County CoC supports family and support network reunification as a core strategy to prevent and resolve homelessness. All CoC providers integrate reunification into housing navigation, case management, and Coordinated Entry (CE), helping individuals reconnect with healthy family or support networks whenever safe and appropriate.

Case managers across shelters, transitional housing, DSS, LCBHS treatment and recovery, youth programs, and outreach teams regularly explore reunification during housing and recovery planning. They help participants contact family through phone calls, virtual meetings, and mediation. When returning home is safe, the CoC assists with travel, documentation, and coordination with services in the receiving area. DSS, LCBHS, and CE navigators manage warm out of county and interstate hand-offs.

Youth reunification is supported through DSS, Harbor on Main Youth Center, and McKinney Vento liaisons, who help reconnect youth with relatives, locate safe adults, and coordinate school transfers, transportation, and stabilization supports.

Rapid Rehousing programs (NCO RRH and DSS CalWORKs RRH) often use reunification to stabilize families. LCBHS Peer Support Specialists help individuals exiting treatment reconnect with healthy support networks, reducing the risk of returning to homelessness.

Throughout the county, outreach programs play a key role. During the annual PIT Count, the CoC partners with Miracle Messages, who plays a specialized role in the CoC's reunification strategy by helping unhoused people reconnect with their families or support networks. During the annual PIT Count, trained volunteers conduct Miracle Messages surveys with unhoused individuals to identify estranged family members they wish to reconnect with. The organization then assists with locating relatives, delivering messages, facilitating mediated conversations, and rebuilding relationships.

Across all programs, reunification is treated as a voluntary, person centered housing intervention. When individuals choose this pathway, the CoC ensures a warm hand-off, coordination with external providers, and supports that make reconnection safe, stable, and sustainable.

1C-9	Partnering with Public Housing Agencies—Agreement to Enable Transition to HUD Assisted Housing.	
	Does your CoC have an agreement with at least one public housing agency to enable participants to transition from Transitional Housing, Rapid Re-Housing, and Permanent Supportive Housing to HUD assisted housing?	Yes

1C-10. Protecting Public Safety—Cooperation with Law Enforcement.

You must upload the Evidence of Coordination and Non-Interference with Local Efforts to Advance Protecting Public Safety attachment to the 4A. Attachments Screen.

Describe how your CoC cooperates and does not interfere with or impede local efforts to advance the objectives below, and assists first responders in providing services to homeless individuals.

(limit 2,500 characters)

EFFORTS – Lake County CoC has a strong relationship with county departments, city council, law enforcement, services providers and outreach teams. In the Lake County Continuum of Care Encampment Response and Law Enforcement Coordination Policy, the LCCoC advances public safety by supporting lawful encampment abatement when health, environmental, fire, or other public-safety concerns are present. The policy promotes coordinated work among law enforcement, local government, outreach teams, behavioral-health providers, and service providers so that people affected by encampment abatement can be connected to shelter, housing, behavioral-health care, substance-misuse treatment, and other supportive services including treatment and recovery.

Specifically, the policy addresses clearing tents and encampments through its support for lawful encampment abatement and removal. It addresses decreasing public use of illicit drugs by encouraging connections to substance-misuse treatment and behavioral-health services treatment and recovery. The LCCoC works with law enforcement and supports data sharing as required by local, state and federal law.

1C-10a. Protecting Public Safety—Plan to Quickly Clear Tents and Encampments.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to quickly clear tents and encampments on public property and connect individuals who are camping in public with appropriate services and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

SAFETY – Lake County CoC's (LCCoC) Encampment Response and Law Enforcement Policy, county parking and vehicle regulations, and California's Executive Order N-1-24, are a few laws and policies Lake County utilizes to enforce public safety and planning to quickly clear tents and encampments. This includes quickly and lawfully clear tents and encampments on public property, while connecting individuals to appropriate services, is shaped by a combination of local ordinances, statewide policies, constitutional requirements, and programmatic resources. The LCCoC has evaluated these factors to determine which policies support efficient and humane encampment resolution and which policies restrict or delay clearance activities. The LCCoC also outlines a mitigation strategy to leverage beneficial policies and overcome the impacts of restrictive ones by the utilization of Encampment Resolution Funding, advocating for the appropriate encampment vehicle parking ordinances, and coordinating with local law enforcement, shelter providers, outreach workers, mental health agencies and provide resources for treatment and recovery when applicable.

1C-10b. Protecting Public Safety—Current Status of Tents and Encampments.

Describe the current status of tents and encampments in the CoC's geographic area.

(limit 2,500 characters)

Lake County CoC (LCCoC) adopted its Encampment Response and Law Enforcement Coordination Policy, aligned with the California Encampment Resolution Funding program and the State's model ordinance. Together with county parking and vehicle regulations and California's Executive Order N 1 24, these policies provide a clear legal structure for protecting public health and safety and ensuring that tents and encampments on public property can be cleared quickly, lawfully, and with appropriate service connections. These laws and practices support a coordinated, safety driven approach. The policy requires advance notification to outreach providers, enabling earlier engagement and more orderly preparation for encampment abatement. As implementation continues, the CoC anticipates increased early contacts with individuals residing in encampments and improved transitions into shelter, interim housing, mental health and treatment and recovery programs. Enhanced coordination among law enforcement, local governments, outreach teams, and service providers is expected to streamline decision making, reduce operational delays, and strengthen public safety and compliance. County parking ordinances and Executive Order N 1 24 also strengthen public safety outcomes by guiding the removal of encampments, posing fire hazards, environmental risks, or threats to community safety. The CoC anticipates that targeted encampment abatement in these high risk areas will reduce emergency service demands, minimize environmental damage, and improve access to critical infrastructure such as roadways, parks, and public spaces. The LCCoC has developed and continues to strengthen mitigation strategies. These include leveraging Encampment Resolution Funding to expand outreach coverage, emergency sheltering programs and strengthening operational coordination with law enforcement, shelters, mental health agencies, and recovery services. The CoC expects these strategies to improve operational efficiency, reduce clearance timelines, and enhance the public safety of both encampment residents and the surrounding community. Through this integrated and safety focused plan, the LCCoC will continue to balance its responsibility to protect public health and safety while ensuring individuals at encampments are connected to appropriate housing solutions, and treatment and recovery resources.

1C-10c. Protecting Public Safety—Plan to Decrease the Public Use of Illicit Drugs.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to decrease the public use of illicit drugs and quickly connect individuals who are using illicit drug in public with appropriate services and/or law enforcement and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

Lake County CoC (LCCoC) supports local laws and policies to quickly and safely clear tents and encampments on public property while ensuring individuals are connected to essential services. The LCCoC Encampment Response and Law Enforcement Coordination Policy establishes structured coordination among law enforcement, outreach teams, shelters, and mental health providers, promoting a unified approach that prioritizes public safety. Local laws strengthen this system. Lake County Code §19 37, prohibiting vehicles from remaining parked for more than 72 hours, and §13 31, authorizing the towing of abandoned or inoperative vehicles, reduce roadside encampments and support timely intervention when encampments pose fire or health risks. These laws allow officers to respond to unsafe conditions more rapidly.

The City of Clearlake, municipal code sections governing police regulations, nuisance abatement, property maintenance, and vehicle abatement allow the city to intervene when encampments obstruct rights of way or threaten critical infrastructure. Staff report improved coordination in high risk situations, though rapid abatement requirements can compress outreach timelines. The City of Lakeport's zoning ordinance, established to protect public health and safety, limits land uses that contribute to unsafe camping and helps prevent encampments in inappropriate public areas.

To leverage beneficial policies, CoC partners activate outreach teams before enforcement, uses vehicle parking limits as structured notice periods, and aligns police and nuisance regulations with service capacity to ensure safer and more orderly clearances. Advance outreach is expected to increase early engagement and voluntary transitions into shelter, interim housing, and treatment and recovery programs. Coordinated practice improves communication, reduces confusion onsite, and supports safer interactions for both residents and responders.

To overcome restrictive elements such as towing deadlines or limited municipal encampment authority, the CoC partners with jurisdictions to implement pre clearance outreach windows, and strengthen cross agency communication during operations.

Through these combined efforts, the LCCoC maintains a public safety centered approach that clears encampments efficiently and lawfully while ensuring individuals receive meaningful connections to housing, shelter, and treatment and recovery.

1C-10d. Protecting Public Safety—Current Status of Overdoses and Illicit Drug Use in Public Spaces.

Describe the current status of overdoses and illicit drug use in public spaces in the CoC's geographic area.

(limit 2,500 characters)

Lake County continues to face significant public safety risks associated with illicit drug use and overdoses in public spaces. The county's opioid overdose rate of 43.8 deaths per 100,000 residents demonstrates an elevated risk level compared with statewide patterns. Drug related crime presents additional concerns, reflected in a rate of 1.932 incidents per 1,000 residents, which is slightly above California's average and contributes to unsafe conditions in public locations frequently occupied by individuals experiencing homelessness. Public space overdoses, visible substance use, and the presence of drug paraphernalia are regularly documented by first responders and outreach teams in parks, encampment areas, and waterfront corridors.

Despite these challenges, Lake County is demonstrating improvement in encampment related public safety conditions. Between January 2024 and January 2025, seven encampments were eliminated and an estimated ten residents were relocated into safer settings, reflecting measurable progress in reducing areas where overdoses and illicit drug activity commonly occur. Local jurisdictions, including Clearlake and Lakeport, continue working with the CoC to address health and safety hazards at encampment sites, including waste disposal and mitigation of environmental contamination. These efforts are especially critical given that many encampments are located along Clear Lake or its tributaries, which are vital to the county's tourism economy and serve as a major domestic water supply.

The CoC is actively implementing California Encampment Resolution Funding (ERF) to support systematic clearance of encampments and placement of residents into temporary and permanent housing. ERF is expected to accelerate these outcomes and further reduce drug related public safety incidents.

Continued development of supportive housing remains a core strategy to reduce exposure to environments where substance use, and overdose risk are heightened.

To ensure compliance with HUD requirements and maintain accurate analysis records, the CoC will maintain data system that includes a public space overdose registry, geocoded mapping of drug related incidents, documentation of encampment resolutions, and coordination efforts with law enforcement, EMS, and public health agencies. These tools will support ongoing monitoring of overdose trends, strengthen public safety interventions, and inform future strategic planning across the CoC's geographic area.

1C-10e. Protecting Public Safety—Standards to Address Danger to Self or Others.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to utilize standards that address homeless individuals who are a danger to themselves or others (e.g., involuntary commitment) and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

Local Lake County policies and practices, including Clearlake and Lakeport, both help and hinder the CoC's ability to reduce public illicit drug use and connect individuals to services. In Lakeport, coordinated outreach between the Police Department, Lake County Behavioral Health (LCBH), Sutter Hospital, and service agencies enables direct engagement with individuals using substances in public. LCBH and Substance Use Navigators provide treatment referrals and follow up care, forming an informal policy framework prioritizing services over enforcement.

Clearlake's Hope Center and Adventist Health's mobile shower trailer provide policies that allow staff to stabilize individuals, assess needs, and connect them to housing and health services, decreasing the likelihood of ongoing public drug use. Lakeport's Navigation Center feasibility study will further formalize policies that include treatment and recovery and enhances rapid engagement for individuals observed using drugs publicly.

Plan: To guide these policy efforts, the CoC incorporates quantitative data from HMIS (service enrollments, outreach contacts, housing placements) and PIT findings (encampment locations, unsheltered concentrations, observed behavioral health needs). HMIS trends highlight high service utilization in Clearlake's emergency programs and repeat interactions with outreach teams in Lakeport, while PIT data reflect qualitative indicators such as visible substance use and barriers reported by unsheltered residents. Qualitative data from resident surveys, frontline staff debriefs, and town halls—especially those held in Clearlake and Lakeport—capture community concerns about public safety, service gaps, and preferred approaches to addressing visible substance use. These forums consistently show public support for service first models and improved coordination with law enforcement.

The CoC will leverage supportive policies by standardizing referral protocols across outreach, law enforcement, and health partners; integrating HMIS and PIT findings into deployment strategies; and using survey and town hall feedback to shape local policy advocacy. The CoC will continue pursuing funding for supportive housing and advocate for treatment first provisions in the forthcoming encampment coordination policy. Where drug specific diversion policies are not documented, the CoC cannot propose additional mitigation beyond strengthening partnerships and advancing emerging supportive policy frameworks.

1C-10f. Protecting Public Safety—Share Information in Accordance with SORNA.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to comprehensively share information, including location information, in accordance with the Sex Offender Registry and Notification Act (SORNA) and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

Lake County's ability to share information consistent with SORNA is shaped by state laws governing sex offender registration and local Continuum of Care (CoC) data management practices. California law requires individuals convicted of specified sex offenses to register with local law enforcement, update their residence within five working days, and comply with routine verification schedules. This information is forwarded daily to the California Department of Justice and published on the Megan's Law website in categories that may include full address, ZIP code, photos, physical description, and offense details. These statewide practices support the CoC's ability to maintain awareness of registrant locations, which is essential for safety planning and ensuring appropriate housing placements.

The California registry's posting of address and ZIP code information helps local housing providers and public safety partners identify location specific considerations when engaging individuals experiencing homelessness. This access to consistent, publicly available information strengthens the CoC's situational awareness, especially when coordinating services for high risk individuals.

Locally, the Lake County CoC's HMIS/CES Committee plays a key role in supporting lawful information sharing. The committee maintains user agreements, privacy and security plans, and HMIS policies that comply with HUD requirements. This internal framework is essential for aligning HMIS data practices with SORNA related expectations for secure, appropriate sharing of location information.

The CoC will leverage supportive state laws by aligning HMIS release of information procedures with publicly available Megan's Law data categories and training staff on legally permissible sharing of location based information. The CoC will also advocate for county level interagency agreements that clarify safe, compliant pathways for sharing data with law enforcement. Additionally, the CoC will support statewide SORNA compliance efforts aimed at improving multi jurisdictional notification systems. Where restrictions are defined by state law and cannot be mitigated locally, the CoC will focus on fully utilizing registry tools and strengthening HMIS governance to ensure maximum compliance within existing constraints.

1C-11. Outreach Strategy.

Describe your CoC's strategy to outreach to all individuals and families experiencing homelessness across your geographic area.

(limit 2,500 characters)

STRATEGY – Lake County CoC has continued to increase our street outreach strategy through partnerships with Adventist Health Clear Lake (AHCL), Redwood Community Services (RCS), Catholic Charities of Northwest California (CCNWC) and Lake County Behavioral Health Services (LCBHS) which is the collaborative applicant for our CoC. RCS and LCBHS have centers in our geographical area equally to all people. The centers act as Coordinated Entry (CE) access points of entry. The centers have information on services and resources and work closely with CCNWC onsite. CCNWC refers homeless people to its housing programs and prevention and diversion programs as needed. LCBHS has a dedicated crisis responder who works closely with the Lakeport Police Department and becomes involved in real-time responses, providing immediate access to referrals for homeless people, referring them to housing resources including treatment and recovery. LCBHS street outreach team respond to both public safety crisis and encampments, providing information on services and resources that are available. AHCL shower trailer project provides basic hygiene and connections to housing and employment resources. Community Health Workers provide outreach and enrollment in community health programs such as Housing Navigation, Recuperative Care, and Shelter, specialty medical services with connections to treatment and recovery, primary care, and resources to food, and clothing. RCS, LCBHS, AHCL, and CCNWC, all attend events with informational booths with services and resources and job fairs to offer opportunities for employment. AHCL is our (CE) and Lake County Community HUB (HUB) Operator. The HUB is a program designed as a closed-loop referral system for both the homeless response systems of care on the medical/behavioral health systems of care. Those who are least likely to seek services are identified through the HUB. RCS, LCBHS, CCNWC, and AHCL build rapport with our homeless people and establish trust to provide safe transitions between outreach and next steps to our CE or HUB.

1C-12.	Collaboration Related to Children and Youth–Written Agreements with Early Childhood Services Providers.	
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Select 'Yes' or 'No' in the chart below to indicate whether your CoC or HUD-funded projects in the CoC have written agreements with the listed providers of educational supports and services for children ages 0-5:

		Written Agreement
1.	Child Care (including Child Care and Development Fund)	Yes
2.	Early Childhood Providers	Yes
3.	Early Head Start	Yes
4.	Home Visiting Program (including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No
5.	Head Start	Yes
6.	Healthy Start	Yes
7.	Public Pre-K	Yes
8.	Tribal Home Visiting Program	No
	Other (limit 150 characters)	
9.	McKinney Vento - Lake County Office of Education	Yes

1C-12a.	Collaboration Related to Children and Youth—Formal Partnerships with Schools and Youth Education Providers.	
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Select 'Yes' or 'No' in the chart below to indicate the youth education providers your CoC has a formal partnership with:

1.	McKinney-Vento Liaison(s) (including State Education Agency (SEA) or Local Education Agency (LEA))	Yes
2.	School District(s)	Yes
3.	General Education Development (GED) Program(s)	Yes
4.	Community College(s)	Yes
5.	Technical College(s)	Yes
6.	Other Post-Secondary Education Provider(s)	Yes

1C-12b. Collaboration Related to Children and Youth—Informing Individuals and Families who Become Homeless about Eligibility for Educational Services.

Describe your CoC's written policies and procedures to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,500 characters)

ELIGIBILITY: Lake County CoC has policies, procedures, and practices consistent with the CoC Program Interim Rule 24 CFR §578.23. Lake County Continuum of Care (LCCoC) Educational Policy encourages all CoC and ESG programs assisting families with children or unaccompanied youth must take the educational needs of children into account when placing families in housing, inform families of educational rights, ensuring that homeless children and youth in their programs are in school and are receiving all educational services they are entitled to; and Coordinating with the CoC, the Department of Social Services, the Lake County Office of Education, the McKinney Vento Coordinator, the McKinney Vento Educational Liaisons, and other mainstream providers as needed. Our LCCoC Educational Policy includes encouraging all agencies serving children and families who have recently become homeless of their rights to educational services per subtitle B of Title VII of the McKinney-Vento Homeless Assistance Act. Our CoC Educational Policy encourages all agencies to consider the needs of accompanied and unaccompanied youth who have recently begun homelessness by making accommodations, as appropriate, to assist those children and youth to meet their educational needs, including public transportation agencies, to provide services and resources to homeless children and youth that will assist them in meeting their educational needs. These policies include individuals and families who have recently begun homelessness to assist with connecting to services within the community and allow parents and unaccompanied youth to make decisions about school placement. Our policy includes a designated staff person(s) responsible for ensuring that children are enrolled in school and connected to the appropriate services within the community, including early childhood education programs such as Head Start, Part C of the Individuals with Disabilities Education Act, and McKinney-Vento education services. This person(s) stays informed about resources and information relevant to children enrolled in school. This person coordinates with the CoC and other youth-serving resources in the community.

1C-12c. Collaboration Related to Children and Youth—Coordination with Foster Care or Child Welfare Services.

Describe how your CoC coordinates with foster care or child welfare services to assist youth transitioning from public systems of care.

(limit 2,500 characters)

Lake County CoC maintains strong coordination with foster care and child welfare services to ensure youth do not exit public systems into homelessness. The CoC works closely with the Lake County Department of Social Services (DSS) Child Welfare Services, and the DSS Director sits on the CoC Executive Committee, giving child welfare a direct role in CoC decision making. Additionally, the CoC has another board chair who work in youth serving fields: the countywide McKinney Vento Liaison from the Lake County Office of Education (LCOE), ensuring education and child welfare perspectives shape policies and practices.

Youth transitioning from foster care begin planning early. DSS social workers and Independent Living Program staff develop transition plans for youth ages 16–21, including extended foster care (AB 12). Youth at risk of exiting care without housing are referred to Coordinated Entry (CE) before discharge. The CoC maintains immediate housing options: DSS contracts youth beds, Hope Center holds a reserved transition age youth bed, LCOE provides housing support for Youth until graduation and Supporting Bright Futures accepts youth, ensuring same day placements.

Harbor on Main Youth Resource Center serves as a youth focused CE Access Point offering assessment, peer mentoring, navigation, and education and employment support. Housing pathways include The NEST for pregnant or parenting youth, up to 15 months of transitional housing; Rapid Rehousing through NCO and DSS; and federal vouchers such as FYI and FUP.

SWIM's Building Bridges program provides sponsorship based transitional housing starting at age 16, helping youth build stability before emancipation. Education is embedded in the stabilization plan. The McKinney Vento program assists students experiencing homelessness with enrollment, transportation, documentation, and referrals. NextUp at Woodland Community College supports current and former foster youth under 26 with counseling, grants, and emergency housing assistance

Coordination continues through shared case planning. DSS participates in monthly case conferencing and enters data into HMIS so housing, benefits, education, and support services align.

Finally, CoC written standards require that youth exiting foster care are not discharged into homelessness and must be offered a CE assessment, reinforcing the countywide commitment to ensuring safe and supported transitions from care.

1C-12d. Collaboration Related to Children and Youth—Coordination with Runaway and Homeless Youth (RHY)-funded Providers.

Describe how your CoC coordinates with RHY-funded providers including Street Outreach Programs, Basic Center Programs, Transitional Living Programs, and Maternity Group Homes where such providers exist.

(limit 2,500 characters)

Lake County CoC coordinates youth homelessness services using an RHY aligned model, even though no HHS Runaway and Homeless Youth (RHY)–funded Street Outreach, Basic Center, Transitional Living, or Maternity Group Home programs operate in the county. To prevent gaps in care, the CoC relies on local providers who fulfill each RHY role and works with nearby RHY grantees in Mendocino and Humboldt counties. RHY coordination is embedded in CoC leadership: two CoC Board Chairs are youth system professionals—the countywide McKinney Vento Liaison and the Director of Social Services. Street outreach services are led by Harbor on Main Youth Center, a CE Access Point serving transition age youth (TAY) 18-24, offers drop in services, peer mentoring, housing navigation, education and employment support, food, and hygiene supplies. Outreach teams CE Access Points LCBHS Crisis Teams, and the Adventist Health Shower Trailer offer CE for assessments. Emergency beds are provided through DSS contracted providers. Unaccompanied (Youth) minors go directly to DSS Child Welfare Services for safety assessment and placement. McKinney Vento liaisons identify unhoused or unaccompanied students and link them to services, including transportation and documentation support. Transitional Living equivalent housing is available through Hope Center, which maintains a reserved TAY bed, and Supporting Bright Futures shared housing program. TAY enters CE and are matched to transitional housing and Rapid Rehousing through North Coast Opportunities and DSS. For maternity group home–equivalent care, The NEST provides up to 15 months of transitional housing for pregnant and parenting TAY and their children. RCS H.O.M.E. adds sober living options for pregnant and parenting people. Regional coordination ensures youth have access to RHY funded services when needed. Mendocino County’s Basic Center Program in Ukiah and Redwood Community Action Agency’s Transitional Living Program in Eureka accept referrals, and RCS operates youth centers in both counties, providing warm handoffs and continuity of care. The CoC also plans to support a local provider applying for HHS RHY funding in the next Family and Youth Services Bureau cycle to strengthen the formal RHY system. Even without RHY grants, Lake County ensures Youth access, youth specific services, McKinney Vento coordination, child welfare involvement, and regional RHY partnerships provide comprehensive support for youth experiencing homelessness

1C-13. Collaboration Related to Families with Children—TH or RRH Project Dedicated to Serving Families with Children.

Identify at least one Rapid Rehousing (RRH) or Transitional Housing (TH) project in the CoC that primarily or exclusively serves families with children experiencing homelessness in accordance with 24 CFR 578.93(b).

(limit 500 characters)

CalWORKs Housing Support Program RRH (Lake County DSS) provides Rapid Rehousing exclusively for CalWORKs families with children, referred through CES. The NEST, operated by Redwood Community Services, offers up to 15 months of Transitional Housing for homeless pregnant and parenting youth ages 18–25 and their children. North Coast Opportunities, our ESG provider, also provides RRH serving families through CES.

1C-13a. Collaboration Related to Families with Children—Supportive Services to Improve Income to Pay Rent.

Describe how the project(s) identified in 1C-13 provides supportive services focused on improving incomes to pay rent, such as workforce development, job training, or registered apprenticeship programs.

(limit 2,500 characters)

Lake County CoC collaborates with partners assisting families with children to improve their income to create a path to self-sufficiency. The NEST (Redwood Community Services) and the CalWORKs Housing Support Program (HSP) Rapid Rehousing (Lake County DSS) treat income growth as a core self sufficiency strategy. Because RRH in Lake County is short term, families must quickly build sustainable income that can carry rent, and both projects begin this work at intake.

CoC partners are encouraged to have every head of household creates a written self sufficiency income plan on day one. Case managers review goals monthly, track income in HMIS, and adjust plans to strengthen employment readiness and long term stability.

Both programs connect families to paid workforce training through North Coast Opportunities (NCO) BUILD program. BUILD provides wage earning pre apprenticeship through Construction Fundamentals at sixteen dollars and ninety cents (\$16.90) per hour and Solar/HVAC at twenty dollars (\$20) per hour. With a ninety percent (90%) employment rate within three (3) months of completion, BUILD helps families achieve economic self reliance, and high performing graduates can advance to NCO apprenticeships for higher earning potential. Education is part of the self sufficiency pathway. Parents enroll in GED, certificates, and degree programs at Woodland Community College. Foster youth parents under twenty six (26) receive additional support through NextUp, strengthening educational attainment and long-term economic independence. CalWORKs Welfare to Work, available to Housing Support Program recipients and eligible NEST parents, provides essential self sufficiency supports: job search assistance, training funds, subsidized employment, transportation, and work related expenses.

Workforce readiness is reinforced through Harbor on Main's resume, interview, and job keeping workshops, while SWIM partners with Coletrain Transformation Station for HVAC and refrigeration skills, creating additional high wage self sufficiency pathways.

Barriers to self sufficiency, especially child care, are addressed through CalWORKs subsidies, Head Start, and Early Head Start. Case managers also help families secure legal documentation, transportation, and SSI/SSDI when disabilities affect work capacity.

1C-13b. Collaboration Related to Families with Children—Leveraging Funding from Mainstream Family Service Systems.

Describe how the project(s) identified in 1C-13 leverages funding from mainstream family service systems, such as Temporary Assistance for Needy Families (TANF).

(limit 2,500 characters)

Lake County CoC collaborates with and encourages partners to assist in leveraging funding from mainstream services. The NEST (Redwood Community Services) and the CalWORKs Housing Support Program (HSP) Rapid Rehousing (Lake County DSS) leverage mainstream family service systems to stabilize families, increase self sufficiency, and stretch CoC dollars. Both projects are intentionally designed to braid TANF, CalWORKs, Medi Cal, CalFresh, WIC, and early childhood supports into one coordinated housing and income stability plan.

CalWORKs HSP Rapid Rehousing is fully TANF funded. Lake County DSS administers HSP through California's CalWORKs program, covering rental assistance, security and utility deposits, moving costs, housing navigation, and case management. By using TANF for core RRH functions, CoC funds remain available for other households.

The NEST leverages CalWORKs to support pregnant and parenting youth. Eligible NEST participants enroll in CalWORKs for monthly cash aid, Welfare to Work activities, childcare, and transportation. Upon completion, NEST program participants are ready to transition to permanent housing. TANF funded RRH assists with transitional housing to a lease, extending housing stability without drawing on additional CoC funds.

CalWORKs Homeless Assistance adds another layer of mainstream support. Families can receive temporary or permanent Homeless Assistance for emergency hotel stays, interim shelter, and moving costs. These funds prevent shelter entry and shorten time from crisis to housing.

Parents and children enroll in Medi Cal are eligible to receive Enhanced Care Management and Community Supports, including tenancy and housing transition services, medically tailored case management, and housing deposits. This reduces the burden on RRH case managers and provides wraparound support outside CoC funding.

Nutrition, early childhood, and family advocacy programs like CalFresh, WIC, Head Start, Early Head Start and Lake County Office of Ed McKinney Vento liaison ensure food security and child development supports while reducing monthly expenses, increasing disposable income, and improving housing retention.

All CoC partners coordinate through CE and case conferencing to ensure families have needed services at assist with developing self-sufficiency.

1C-13c. Collaboration Related to Families with Children—Combining Housing Assistance with Parental Support.

Describe how the project(s) identified in 1C-13 combines housing assistance with childcare, parenting support, pregnancy-related and child healthcare, and education.

(limit 2,500 characters)

Lake COC partners with providers of projects that integrates housing assistance with comprehensive supports for families with children by working closely with key CoC partner programs. Through coordinated entry (CE), families are connected to Rapid Re Housing, Permanent Supportive Housing, and emergency motel stay providers that offer rental assistance, housing navigation, and ongoing tenancy support. This ensures that parents and children can quickly stabilize in safe, permanent housing.

To support childcare needs, the project partners with local Child Care Resource and Referral agencies, Early Head Start and Head Start programs, and community organizations that provide afterschool including the Lake County Office of Education and respite care. These collaborations make it possible for parents to work, attend appointments, or participate in services while knowing their children are in safe, developmentally supportive environments.

Parenting support is delivered through relationships with family resource centers and county social service agencies. Families receive access to evidence based parenting classes, home visiting programs, and family counseling services that strengthen parent child relationships and reduce stress during the transition to stable housing. Case managers coordinate these services, so they align with each family's housing and if needed, treatment and recovery plan.

Pregnancy related and child healthcare needs are addressed through partnerships with community clinics, WIC offices, and county maternal child health programs. Families receive prenatal and postpartum care, well child exams, immunizations, nutrition support, and developmental screenings. Case managers help families schedule and attend appointments and ensure continuity of care.

The project also collaborates with local school districts and McKinney Vento liaisons to ensure children are immediately enrolled in school, receive transportation, and have access to tutoring, counseling, and early childhood education placements. Parents are supported in pursuing GED programs, workforce training, and financial literacy classes to strengthen long term stability.

Through these integrated partnerships, the project provides a comprehensive approach that combines housing assistance with critical family centered support that promote safety, stability, and healthy development for children and their parents.

1C-14. Collaboration with Veteran Serving Organizations—Partnership with the U.S. Department of Veterans Affairs or Veteran Serving Organization.

Identify at least one partnership the CoC has with the Department of Veterans Affairs or other Veteran Serving Organizations.

(limit 500 characters)

The CoC partners with Nation's Finest and the VA to refer veterans for services, coordinate shelter and outreach, and support access to employment resources. Nation's Finest and CoC agencies transport veterans to the VA Clinic in Clearlake and the bus to the VA Hospital in San Francisco. CoC members also join the annual Stand Down, providing food, clothing, healthcare, and job information, helping identify and fill service gaps for veterans.

1C-14a	Collaboration with Veteran Serving Organizations.	
	Select 'Yes' or 'No' in the chart below to indicate whether the partnership(s) identified in 1C-14 does the following:	

1.	Refers veterans identified by the CoC to VA or other Veteran Serving Organizations for assistance?	Yes
2.	Coordinates the provision of emergency shelter, supportive services, and housing for veterans?	Yes
3.	Ensures access to a full spectrum of employment and career pathway opportunities?	Yes
4.	Shares data with the Department of Veterans Affairs as appropriate?	Yes
5.	Identifies service gaps for veterans?	Yes
6.	Fills service gaps for veterans?	Yes

1C-15. Collaboration with Organizations who Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.

Identify at least one partnership your CoC has with victim service providers, state domestic violence coalitions, state sexual assault coalitions, anti-trafficking service providers or other organizations who help provide shelter, housing, and services to individuals and families of persons experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking.

(limit 500 characters)

NEEDS – Lake County CoC partners with the local Victim Service Provider to support survivors needing shelter or housing. Survivors may enroll in Coordinated Entry (CE) after reaching safety, though CE participation is not required. The CE Operator helps identify safe housing or arrange emergency transfers when available. If no immediate unit is available, staff assist survivors in securing a new safe unit as quickly as possible.

1C-16. Collaboration with Justice System Re-entry Partners.

Identify at least one partnership your CoC has to prevent homelessness among people transitioning from prisons, jails, or court-ordered programs.

(limit 500 characters)

Lake County CoC's partners with Adventist Health's Project Restoration, Hope Center TH shelters and Supporting Bright Futures Transitional Shared Housing Model to support unhoused individuals with high medical needs, coordinating medical and respite care and connections to housing that prevent returns to homelessness. These partnerships ensure that medically fragile individuals receive specialized care alongside housing assistance, improving health outcomes, and self-sufficiency.

1C-17. Collaboration with Partners to Address High Utilizers of Healthcare Systems.

Identify at least one partnership or project your CoC has to provide specialized supportive services for homeless individuals with a high level of medical needs.

(limit 500 characters)

Lake County CoC's partners with Adventist Health's Project Restoration, Hope Center TH shelters and Supporting Bright Futures Transitional Shared Housing Model to support unhoused individuals with high medical needs, coordinating medical, and respite care and connections to housing that prevent returns to homelessness. These partnerships ensure that medically fragile individuals receive specialized care alongside housing assistance, improving health outcomes, and long term stability.

1C-18. Collaboration with Partners to Address the Needs of Aging and Elderly Individuals Experiencing Homelessness.

Identify at least one partnership or project your CoC has to serve aging and elderly individuals experiencing homelessness, such as with a provider of residential care, assisted living, or medical respite services.

(limit 500 characters)

Lake County CoC has one of California's highest elderly populations, partly due to lower housing costs. Many seniors provide primary care for grandchildren. The Section 8 Administrative Plan prioritizes elderly households, including disabled elders. Social Services and Behavioral Health have aging-focused policies, and the CoC includes the Area Agency on Aging and Hospice Services to address senior needs.

1C-19. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Project that Prioritizes Individuals Experiencing Chronic Homelessness.

Identify at least one Rapid Rehousing (RRH) or Permanent Supportive Housing (PSH) project that prioritizes individuals experiencing chronic homelessness.

(limit 500 characters)

Lake County CoC uses State No Place Like Home funds to expand permanent supportive housing. In 2022–2023, the county received \$459,308 to support Rural Communities Development Corporation’s 40-unit Pallesen’s Place in Nice. Nineteen units are dedicated to chronically homeless individuals with mental illness, prioritizing those experiencing chronic homelessness.

1C-19a. Permanent Supportive Housing for Chronically Homeless Individuals and Families—On-site Behavioral Healthcare.

Describe how the project(s) identified in 1C-19 provides on-site behavioral healthcare.

(limit 2,500 characters)

Pallesen’s Place, Lake County’s first dedicated supportive housing project funded through California’s No Place Like Home program, integrates comprehensive on site behavioral healthcare to support chronically homeless individuals and families. Developed by Rural Communities Development Corporation, the 40 unit community includes 19 units reserved for chronically homeless residents with serious mental illness. Its housing and services design ensures behavioral health support is built into daily residential life, removing barriers that typically prevent high needs individuals from accessing care. Lake County Behavioral Health Services, the CoC’s collaborative applicant and primary behavioral health provider, delivers a full range of on site services. Licensed clinicians and substance use treatment staff offer mental health assessments, therapeutic counseling, crisis intervention, treatment for co occurring disorders, medication management, and individualized recovery planning. This on site model ensures consistent, immediate access to care, which is especially critical for residents transitioning from long term homelessness or living with severe mental illness.

Pallesen’s Place also provides on site comprehensive case management. Case managers assist residents in accessing benefits, primary care, transportation, and other stabilizing services. Coordination occurs through the county’s HMIS and CES systems, allowing seamless connection to external supports from other local agencies and nonprofit partners. This helps maintain continuity of care, reduces service gaps, and promotes long term stability.

Additional specialized support is available through the Redwood Coast Community Center, which provides on site case management for households with members who have developmental disabilities. These tailored services address complex behavioral and functional needs that often overlap with mental health and housing challenges.

Together, the integrated behavioral healthcare delivered at Pallesen’s Place ensures that chronically homeless residents receive accessible, individualized, and coordinated support. By embedding clinical services, case management, and specialized disability assistance directly within the housing environment, Lake County has created a comprehensive supportive housing model that promotes stability, recovery, and long term housing success for individuals with serious mental illness.

1C-19b. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Assesses Need for Higher Level of Care.

Describe how the project(s) identified in 1C-19 has a policy for assessing program participant need for higher level of care (i.e., assisted living, residential treatment).

(limit 2,500 characters)

Pallesen's Place, Lake County's No Place Like Home funded permanent supportive housing project, maintains a structured process, supported by the Lake County Continuum of Care (LCCoC), to assess program participants' need for higher levels of care, including assisted living or residential treatment. Lake County Behavioral Health Services (LCBHS), the project's on site behavioral health provider and the LCCoC's collaborative applicant, conducts all clinical assessments using verified departmental tools including the LCCoC coordinated entry vulnerability assessment.

LCBHS case managers are trained to evaluate mental health status, functional capacity, co occurring conditions, and overall stability. Assessments rely on LCBHS's Adult & Youth Screening and Transition of Care Tools (Policy #335), guiding decisions on if residents require more intensive support. Medical necessity criteria for specialty mental health services outlined in Policies #285 and #330 also help determine when higher-level care is needed.

LCBHS uses its Telepsychiatry Services process (Policy #284) to obtain timely psychiatric evaluations as needed. This allows licensed psychiatric providers to remotely assess residents, adjust medication, and determine whether assisted living or residential treatment is appropriate. If in person evaluation is warranted, LCCoC and LCBHS coordinate transportation to Sutter Lakeside Hospital in Lakeport or Adventist Health Hospital in Clearlake, both equipped to assess individuals with complex medical or mental needs and recommend appropriate care transitions.

LCBHS maintains contracted psychiatric providers who can perform crisis assessments, medication reviews, and higher level care recommendations, including conservatorship. Once a resident is determined to need assisted living, inpatient treatment, or another structured placement, LCBHS and hospital care teams collaborate to arrange care settings that meet the resident's clinical needs. For households with developmental disabilities, the Redwood Coast Community Center provides additional on site case management to help identify when specialized residential or clinical placement is necessary.

Through these coordinated efforts Pallesen's Place ensures that residents receive timely evaluations and smooth transitions to higher levels of care when needed, supporting long term stability for individuals with significant behavioral health needs.

1C-19c. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Assesses Readiness for Moving On.

Describe how the project(s) identified in 1C-19 has a policy for assessing program participant readiness for moving on to unsubsidized or other permanent housing.

(limit 2,500 characters)

Pallesen's Place, Lake County's No Place Like Home–funded permanent supportive housing project within the Lake County Continuum of Care (LCCoC), uses a structured, confirmed process to assess residents' readiness to move on to unsubsidized or other permanent housing. The 40 unit development includes 19 units designated for chronically homeless individuals with serious mental illness, making careful readiness assessment essential.

Lake County Behavioral Health Services (LCBHS), the project's on site behavioral health provider and LCCoC's collaborative applicant, conducts ongoing individualized assessments of each resident's stability and independence. Case managers evaluate daily functioning, symptom management, medication adherence, engagement in treatment and support services, and the resident's ability to maintain personal routines. These assessments occur during regular check ins, care coordination meetings, and continuous observation in the housing environment.

Residents are considered ready to transition when they demonstrate consistent behavioral stability, can manage their own routines, engage appropriately with outpatient services, and show sustained reduction in crisis-level needs. When these indicators are present, LCBHS collaborates with the LCCoC to begin formal transition planning. This includes identifying unsubsidized rental options, other permanent housing opportunities, and community based supports needed to maintain long term stability.

LCBHS ensures continuity of care after residents leave supportive housing by arranging outpatient behavioral health follow ups, telehealth appointments when appropriate, and connections to additional local service providers. For households with members who have developmental disabilities, Redwood Coast Community Center provides on site case management that helps determine whether residents can safely transition to independent housing or need longer term supportive services.

If residents do not yet meet readiness benchmarks—due to continuing instability, limited functional capacity, or emerging clinical concerns—LCBHS maintains ongoing on site services until residents reach an appropriate level of stability. In collaboration with the LCCoC, this structured approach ensures transitions occur only when residents are clinically and functionally prepared, supporting successful outcomes and reducing the likelihood of returns to homelessness.

1D. Project Capacity, Review, and Ranking–Local Competition

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- Frequently Asked Questions

1D-1.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question along with the required attachment as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
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You must upload the Local Competition Scoring Tool attachment to the 4A. Attachments Screen.

Select 'Yes' or 'No' in the chart below to indicate how your CoC reviewed, rated, and ranked project applications during your local competition:

1.	Established total points available for each project application type.	Yes
2.	At least 50 percent of the total available points were based on objective criteria to review, rate, and rank project applications.	Yes
3.	At least 25 percent of the total available points were based on system performance measures to review, select and rate project applications.	Yes
4.	Considered returns to homelessness in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes
5.	Considered employment income in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes
6.	Considered supportive service participation requirements in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes

1D-2.	New Proposals.	
	Does your CoC invite new proposals from entities that have not previously received funding, if such eligible entities exist?	Yes

1D-2a.	Web Posting of CoC-Approved Consolidated Application Before the CoC Program Competition Application Submission Deadline.	
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	Enter the date your CoC posted all parts of the CoC-approved Consolidated Application on the CoC's website or partner's website—which included: 1. the CoC Application, and 2. Project Priority Listings.	09/29/2026
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1D-2b.	Notification to Community Members and Key Stakeholders by Email that the CoC-Approved Consolidated Application is Posted on the Website.	
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	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	09/23/2026
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1D-2c.	Local Competition Selection Results for All Projects.	
	You must upload the Local Competition Selection Results attachment to the 4A. Attachments Screen.	

	Does your attachment include: 1. Project Names, 2. Project Scores, 3. Project Rank, 4. Project Status—Accepted, Rejected, Reduced Reallocated, Fully Reallocated, 5. Amount Requested from HUD, and 6. Reallocated Funds +/-.	Yes
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1D-2d.	Projects Rejected/Reduced—Notification Outside of e-snaps.	
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1.	Did your CoC reject or reduce any project application(s) submitted for funding during its local competition?	Yes
2.	If you selected 'Yes' for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.	09/23/2026
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	No

1D-2e.	Projects Accepted—Notification Outside of e-snaps.	
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	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps.	09/23/2026
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1D-3.	Reallocation—Reviewing Performance of Existing Projects.	
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	Describe:
1.	your CoC's reallocation process to reallocate from lower performing projects to create new high performing projects, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed,
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year,
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

PROCESS Lake County CoC follows the Ranking and Reviewing Policy (R&RP) to determine when reallocation is appropriate. R&RP outlines a transparent, data driven process for evaluating performance, compliance, financial capacity, HMIS quality, and community need. Projects may be recommended for reallocation when they fail to meet HUD standards, show persistent low outcomes, have unresolved monitoring findings, demonstrate chronic HMIS deficiencies, lack measurable results, or cannot effectively administer federal funding. The decision- process begins each year with the Grant Selection Working Group scoring all renewal and new projects using the standardized criteria in the R&RP. The Working Group applies these criteria consistently, documents scoring decisions, recuses members when conflicts exist, and reviews HMIS reports, System Performance Measures, financial audits, CE participation, and past monitoring results. After scoring, the Working Group identifies whether any renewal projects meet the threshold for reallocation based on the criteria listed in Section 7 of the R&RP

IDENTIFY During this year's competition, no renewal projects met the threshold due to performance. However, the review process did identify remaining, unused Annual Renewal Demand (ARD) available within renewal projects. The Working Group evaluated options for applying the unused ARD in alignment with the policy's Tier 1 and Tier 2 priorities. Because HMIS and Coordinated Entry are designated Tier 1 system infrastructure essential for HUD compliance and required for all Continuum operations, the CoC examined opportunities to strengthen these functions

NEED The CoC determined that reallocating the remaining ARD to transition the HMIS project into an SSO CE project would best meet system needs and align with HUD priorities. This decision was made collaboratively by the Working Group and the CoC Board after confirming that the reallocation met all procedural requirements in the R&RP. The transition enhances system wide data quality, improves CE coordination, and reinforces core infrastructure that supports every housing project in the CoC

REALLOCATION No renewal projects were reallocated due to poor performance, the CoC did reallocate available funds from the renewal projects' remaining ARD to ensure all funding was applied for and used strategically. This approach maximized resources, improved critical system operations, and adhered fully to CoC policy and HUD requirements

1D-3a.	Reallocation Between FY 2021 and FY 2026.	
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	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2021 and FY 2026?	No
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2A. Homeless Management Information System (HMIS) and System Performance

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

2A-1.	HMIS Vendor.	
	Not Scored–For Information Only	

	Enter the name of the HMIS Vendor your CoC is currently using.(limit 75 characters)	Bonterra-Apricot Social Solutions
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored–For Information Only	

	Select from dropdown menu your CoC's HMIS coverage area.	Single CoC
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2A-3.	PIT Count–Methodology Change.	
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	Describe:
1.	any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2025 and 2026, if applicable, and
2.	how the changes affected your CoC's PIT count results.

(limit 2,500 characters)

Between 2024 and 2026, Lake County CoC strengthened its PIT Count process and improved data quality while continuing its full census methodology. According to HDX data, unsheltered homelessness decreased from 435 people in 2024 to 331 people in 2026, reflecting both improved data reliability and more effective coordination across the county.

Lake County has seven (7) federally recognized Native American Tribes (Tribes). Historically, our CoC has continued to engage Tribes for their numbers of unsheltered homeless during the PIT counts. In 2026 our CoC successfully engaged the Tribes and received unsheltered data from the Tribes. The CoC invested in data quality training for providers and regional leads. The CoC significantly expanded volunteer training of a more comprehensive, hands on curriculum for the Counting Us app equipped volunteers to accurately enter data, use geo location tools for outreach teams to ensure there was more accurate data quality by avoiding duplicated records, and avoiding other common mistakes. For the first time, regional leads were appointed and facilitated onsite mandatory training, coordinated supplies and volunteer outreach zones, and guided volunteers through practice scenarios to ensure consistent counting and safety techniques across all areas. These enhancements helped volunteers safely enter encampments, service locations, and Tribal communities, resulting in more reliable unsheltered data.

The mandatory onsite training included instruction on accurate record keeping, validating survey responses, and for providers with access to HMIS, properly using HMIS to ensure PIT data aligned with year round reporting. Our COC kept the PIT survey open for seven days. By doing this the CoC improved the accuracy of counts, through CoC and CoC partners outreach teams, in known encampments and Native American reservations. Although some areas with historically higher numbers saw decreases, these shifts were better understood through improved data validation.

To further strengthen system-wide accuracy, the CoC increased HMIS licenses and partnered with providers to enroll more participants, improving data capture for Transitional Housing, Permanent Supportive Housing, and Other Permanent Housing programs. Together, these improvements created a more consistent and dependable PIT Count process, supporting the county's ability to track progress and contributing to the documented reduction in unsheltered homelessness from 2024 to 2026.

2A-4. Reduce Encampments—Actions to Reduce Encampments.

Describe in the field below the actions your CoC took to reduce the number of encampments or the number of people residing in encampments during your evaluation period.

(limit 2,500 characters)

During the 2024 calendar year (January 24, 2024–January 24, 2025), the Lake County Continuum of Care (CoC), together with the County of Lake and the cities of Lakeport and Clearlake, implemented coordinated efforts to reduce both the number of encampments and the number of people residing within them. The January 2024 HUD Point in Time (PIT) count identified 22 encampments in Lake County, with an estimated 424 residents. By the January 2025 PIT count, the CoC recorded 14 encampments and approximately 414 residents.

These data demonstrate a 36% reduction in the number of encampments, representing the elimination of more than one third of known encampment sites. Although the overall number of encampment residents decreased only slightly—about 2%—the substantial reduction in encampment locations indicates progress in consolidating, resolving, and relocating encampment populations through coordinated outreach and service engagement. The CoC acknowledges that PIT counts likely underestimate encampment numbers due to Lake County’s remote geography, yet the year over year findings still show measurable improvement.

To strengthen data accuracy and service engagement, the CoC expanded its volunteer base for the 2025 PIT count and increased direct contact with unsheltered residents, gathering information on demographics, causes of homelessness, and housing preferences. This quantitative and qualitative data positioned the CoC to successfully obtain California’s Encampment Resolution Funding (ERF) award in 2024.

The ERF initiative includes individualized outreach to all identified encampment residents, case management with entry into HMIS/Coordinated Entry, emergency health interventions, transportation for appointments, access to the CoC supported mobile shower bus, and options for temporary or permanent relocation. The ERF award also funds a mobile shelter bus capable of serving 20+ residents and pets, staffed by an on board case manager.

Following the documented reduction in encampments in the 2025 PIT count, the CoC submitted a second ERF application—currently pending—to expand these efforts. The proposed expansion includes establishing a safe parking site for up to 20 vehicles with nightly case management, and increasing Rapid Rehousing resources for unsheltered individuals. Through these continued, data driven strategies, the CoC aims to further reduce encampments and increase permanent housing placements in Lake County.

2A-4a.	Reduce Encampments—Number of Encampments.	
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1. Enter the estimated number of encampments in the beginning of your evaluation period.	22
2. Enter the reduction in the number of encampments during your evaluation period.	14

2A-4b.	Reduce Encampments—Number of People in Encampments.	
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1. Enter the estimated number of people in encampments in the beginning of your evaluation period.	424
2. Enter the reduction in the number of people in encampments during your evaluation period.	414

 nbsp;nbsp;

2A-4c. Reduce Encampments—Plans to Reduce Encampments.

If there has been no reduction in encampments or persons in encampments in your CoC, describe the plans your CoC has to participate in efforts to reduce these numbers.

(limit 2,500 characters)

Not applicable.

2A-5. Reducing the Number of First Time Homeless—CoC's Plan.

Describe your CoC's plan to decrease the number of individuals and families becoming homeless for the first time.

(limit 2,500 characters)

Between FY2023 and FY2025, Lake County's HDX data shows a significant reduction in first-time homelessness. In FY2023, 329 individuals experienced homelessness for the first time. That number decreased to 226 in FY2024, and further to 162 in FY2025, representing a reduction of more than 20%. This improvement reflects strengthened system coordination, targeted prevention efforts, and enhanced referral pathways across the CoC.

To continue decreasing the number of individuals and families entering homelessness for the first time, the CoC is implementing a multi layered strategy focused on early identification, increased prevention capacity, and improved service coordination.

The CoC is refining intake processes across transitional housing (TH), and permanent housing (PH) programs to identify households at risk of homelessness earlier. Through Coordinated Entry (CE), at risk households are referred directly to prevention and diversion resources. These include landlord mediation, conflict resolution, financial assistance, and case conferencing aimed at avoiding the loss of current housing. The CoC is also partnering with Catholic Charities of Northwest California and North Coast Opportunities to launch a new diversion and prevention program to further expand these supports. In coordination with local courts, CE is engaged in mediation efforts designed to prevent evictions before they occur.

The CoC has strengthened CE referral pathways to veteran services, health care, mental health treatment, substance use programs, victim service providers (VSPs), and justice-system partners. Veterans identified through CE are connected to the VA and Nation's Finest SSVF. Individuals with medical, mental health, or substance abuse receive direct referrals for treatment and recovery before a crisis occurs. Households experiencing domestic violence are immediately routed to VSPs for confidential and safe intervention. Justice-involved individuals exiting probation, jail, or court supervision receive warm hand-offs to CE housing problem-solving staff to prevent release into homelessness.

Through enhanced CES referrals, expanded prevention resources, stronger coordination with partner systems, and improved identification of households at risk, the CoC will continue to reduce the number of people experiencing homelessness for the first time, building on the progress demonstrated between FY2023 and FY2025.

2A-6. Reducing Length of Time Homeless—CoC's Plan.

Describe your CoC's plan to reduce the length of time individuals and families remain homeless.

(limit 2,500 characters)

Lake County CoC's HDX data from FY2023–FY2025 shows that the average length of time individuals and families remain homeless has increased across most project types excluding data for safe havens (SH) due to our CoC not having SH project types. In FY2023, individuals spent an average of 20.5 days in ES and TH, and 44 days when including TH. Prior to housing move-in, households averaged 138 days in ES and PH, and 165 days when TH was included. In FY2024, the average increased substantially to 93 days in ES and 104 days for TH, with households experiencing 275 days prior to housing move-in. FY2025 reflects modest improvement, with 98 days in ES, 113.5 days for TH, and 260.5 days prior to housing move-in; however, overall the system still shows an upward trend in time spent homeless compared to FY2023. In response, the CoC has developed a comprehensive strategy to reduce the length of time people remain homeless by improving system flow, strengthening treatment and recovery coordination, and increasing the speed at which households connect to housing. Coordinated Entry (CE) has streamlined referrals to housing programs, treatment and recovery services, recognizing that unaddressed mental health and substance abuse needs significantly extend homelessness and are quickly connected to LCBHS, outpatient and residential treatment programs, and recovery support services to stabilize barriers that prolong system stays. For households experiencing medical crises, CE ensures rapid referral to health care providers, so treatment and housing planning occur alongside one another. Whenever possible, CE refers to Catholic Charities of Northwest California's Prevention and Diversion program assisting in shorter shelter stays. Shelters and transitional housing programs incorporate treatment-informed case planning, working directly with mental health and recovery staff to address underlying needs that prevent housing readiness. Providers initiate housing problem-solving at intake, alongside integrating recovery supports and coordination with substance use treatment programs. This blended approach reduces delays related to health or mental stabilization. Warm hand-offs from hospitals, recovery centers, justice-system partners, and victim service providers ensure individuals existing these systems do not fall into homelessness or experience extended shelter stays.

2A-7.	Successful Permanent Housing Placement—Exits to Unsubsidized Housing.	
	Based on HMIS data, what percent of program participants exited from TH/RRH/PSH collectively to unsubsidized housing?	33.64%

Describe how you calculated the data for this response.

(limit 2,500 characters)

Lake County CoC's fiscal year of July 1 through June 30. To calculate the percentage of program participants who exited unsubsidized housing, the Lake County CoC used HMIS data covering the FY25/26 period. A systemwide report was generated that included all Transitional Housing (TH), Rapid Rehousing (RRH), Permanent Housing (PH), and Permanent Supportive Housing (PSH) projects. The report identified a total of one hundred (107) individuals who exited these programs during the fiscal year. Of those, thirty six (36) people exited to "rental by client, no ongoing subsidy," and an additional three (3) people exited to "rental by client, with ongoing housing subsidy." Other permanent housing exits included living with family or friends of a permanent tenure, totaling fifty four (54) exits to a permanent housing situation. When calculating the proportion of exits that resulted specifically in unsubsidized housing, the CoC divided the thirty six (36) unsubsidized rental exits by the total one hundred seven (107) exits, resulting in thirty three . sixty four percent (33.64%) of program participants exiting to unsubsidized housing. This calculation reflects the CoC's interest in understanding how effectively TH, RRH, PH, and PSH programs support sustainable, independent housing outcomes.

This measure provides meaningful insight into system performance. A thirty three . sixty four percent 36.44% unsubsidized housing exit rate indicates that over one third of participants were able to secure independent rental housing without ongoing subsidy at the time of exit. It reflects program efforts to support individuals and families in strengthening income, stabilizing health, mental health needs, and accessing community based supports that contribute to maintaining market rate housing.

The CoC closely monitors this metric to identify where system adjustments, case management strategies, and resource alignment can enhance successful housing placements through provider HMIS data. Staff utilize coordinated problem solving conversations, landlord engagement, and navigation support to help participants secure rental housing in a challenging rural housing market. The CoC further analyzes this data to identify disparities and strengthen equity in outcomes, examining whether certain populations—such as veterans, survivors of violence, or people exiting treatment or the justice system, face unique barriers to securing unsubsidized housing.

2A-8.	Housing Inventory Count (HIC) and Point-in-Time (PIT) Count Date.	
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	Enter the date your CoC conducted its 2026 Housing Inventory Count (HIC) and Point-in-Time (PIT) count.	01/22/2026
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2A-8a.	HIC and PIT Count Data—HDX 2.0 Submission Date.	
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	Did your CoC submit its 2026 Housing Inventory Count (HIC) and Point-in-Time (PIT) count data in HDX 2.0 by April 30, 2026, 8:00 p.m. EDT?	Yes
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2A-8b.	Longitudinal System Analysis (LSA) Data—HDX 2.0 Submission Date.	
You must upload your CoC's FY 2026 HDX Competition Report to the 4A. Attachments Screen.		

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by January 16, 2026, 11:59 p.m. EST?	Yes
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2A-8c.	System Performance Measures (SPM) Data—HDX 2.0 Submission Date.	
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Did your CoC submit its FY 2025 System Performance Measures data in HDX 2.0 by March 4, 2026, 8:00 p.m. EDT?	Yes
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2A-9.	HMIS and Comparable Database Participation—Bed Coverage Rate.	
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Using the FY 2026 HDX Competition Report we issued your CoC, enter data in the chart below by project type:

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds	Adjusted Total Year-Round, Current VSP Beds	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
1. Emergency Shelter (ES) beds	38	20	58	100.00%
2. Safe Haven (SH) beds	0	0	0	0.00%
3. Transitional Housing (TH) beds	105	0	105	100.00%
4. Rapid Re-Housing (RRH) beds	15	6	21	100.00%
5. Permanent Supportive Housing (PSH) beds	82	0	68	82.93%
6. Other Permanent Housing (OPH) beds	486	0	486	100.00%

2A-9a.	Partial Credit for Bed Coverage Rates of 84.99 Percent or Lower for Any Project Type in Question 2A-9.	
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For each project type with a bed coverage rate that is 84.99 percent or lower in question 2A-9, describe:

1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type, and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,500 characters)

STEPS – Lake CoC will take over the next 12 months to increase the PSH bed coverage rate to at least 85 percent by prioritizing increasing HMIS participation for Lake County Behavioral Health Services, the agency operating the CoC’s PSH project. Over the next 12 months, the CoC will provide targeted HMIS training specifically for LCBHS staff, ensuring they receive education on HMIS data entry, inventory management, and the benefits of maintaining full PSH bed coverage. This training will be hands on, allowing staff to practice entering bed inventory, updating occupancy, and correcting common errors.

Lake CoC provides HMIS license for all providers required to enter data into HMIS. This ensures that not only LCBHS staff but all providers can access HMIS as needed. For staff facing workload constraints, the CoC will offer direct data entry support through scheduling meeting to enter HMIS PSH bed inventory until full compliance is achieved. Finally, the CoC is currently working with LCBHS staff, conducting individualized problem solving to identify operational barriers that may be contributing to incomplete bed reporting and assist in resolving them through staffing, workflow adjustments, or technology improvements. As a result, it was identified that another HMIS license was needed for the Housing Program at LCBHS.

IMPLEMENTATION steps to increase the PSH bed coverage rate to at least 85 percent include, the CoC will schedule mandatory hands-on HMIS training sessions for LCBHS staff, including live demonstrations and individualized technical assistance. HMIS Lead staff will add additional licensed users for LCBHS and will remain available for ongoing coaching and troubleshooting. When LCBHS is unable to enter updates promptly, HMIS staff will enter bed inventory and confirm accuracy with the provider until staffing capacity improves. The CoC will track progress through quarterly coverage reports and provide direct follow-up when coverage falls below expectations. Meetings with LCBHS leadership will establish corrective actions such as workflow adjustments or additional staffing support. Through targeted training, subsidized HMIS access, direct data-entry assistance, and consistent monitoring, the CoC will ensure PSH bed coverage surpasses 85 percent within the next 12 months.

3A. Policy Initiatives

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- Frequently Asked Questions

3A-1.	Supporting Activities within an Opportunity Zone.	
	You must upload the HUD-2996 Certification for Opportunity Zone Preference Points attachment to the 4A. Attachments Screen.	

1.	Will the proposed activities/projects occur within Opportunity Zone Census Tracts?	No
2.	Do you expect to use at least 50% of the proposed activities/projects in Opportunity Zones Census Tracts?	No

3A-2	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.
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Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?

No

4A. Attachments Screen For All Application Questions

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

We have provided the following guidance to help you successfully upload attachments and get maximum points:

1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.		
2.	You must upload an attachment for each document listed where 'Required?' is 'Yes'.		
3.	We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.		
4.	Attachments must match the questions they are associated with.		
5.	Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.		
6.	If you cannot read the attachment, it is likely we cannot read it either.		
	. We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).		
	. We must be able to read everything you want us to consider in any attachment.		
7.	After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.		
8.	Only use the 'Other' attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.		
Document Type	Required?	Document Description	Date Attached
01. 1C-1. List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment	Yes	1C-1 On-Site Subs...	09/25/2026
02. 1C-1f. List of CoC Program Projects and Number of Units that require Substance Abuse Treatment	Yes	1C-1f Units Requi...	09/25/2026
03. 1C-3. Language from Project Supportive Service Agreements	Yes	1C3 Language form...	09/29/2026
04. 1C-10. Evidence of Coordination and Non-Interference with Local Efforts to Advance Public Safety	Yes	1C-10 Encampment ...	09/25/2026
05. 1D-1. Local Competition Scoring Tool	Yes	1D1 Local Competi...	09/29/2026

06. 1D-2c. Local Competition Selection Results	Yes	1D-2c CoC Notific...	09/25/2026
07. 2A-8b. FY 2026 HDX Competition Report	Yes	2A-8b FY 2026 HDX...	09/25/2026
08. 3A-1. HUD-2996 Certification for Opportunity Zone Preference Points	No		
09. 3A-2a. Project List for Other Federal Statutes	No		
10. 3A-DP. Your CoC's Policy or Statement to Advance Recovery	No	3A-DP CA-529 Poli...	09/25/2026
11. Other	No		

Attachment Details

Document Description: 1C-1 On-Site Substance Use Treatment

Attachment Details

Document Description: 1C-1f Units Requiring Substance Abuse Treatment

Attachment Details

Document Description: 1C3 Language form Project Supportive Services Agreement

Attachment Details

Document Description: 1C-10 Encampment Response and Law Enforcement Coordination Policy

Attachment Details

Document Description: 1D1 Local Competition Scoring Tool

Attachment Details

Document Description: 1D-2c CoC Notification of Priority Listing

Attachment Details

Document Description: 2A-8b FY 2026 HDX Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: 3A-DP CA-529 Policy on Harm Reduction and Safe Consumption Sites

Attachment Details

Document Description:

Submission Summary

Ensure that the Project Priority List is complete prior to submitting.

Page	Last Updated
1A. CoC Identification	09/25/2026
1B. Coordination and Engagement–Accountable Structure and Participation	09/28/2026
1C. Coordination and Engagement	09/29/2026
1D. Project Review/Ranking	09/29/2026
2A. HMIS Implementation	09/28/2026
3A. Policy Initiatives	09/28/2026
4A. Attachments Screen	09/29/2026
Submission Summary	No Input Required

1C-1 List of TH/RRH/PSH and Treatment Providers with On-Site Substance Use Treatment

Lake County Behavioral Health Services - Pallsen's Place PSH

Adventist Health Clear Lake – Hope Center TH

Adventist Health Clear Lake – Project Restoration House TH

Scotts Valley Band of Pomo Indian's – Sober Living House

Redwood Community Services – Tule House TH

Hope in Humanity TH

Archway Recovery – Treatment Services

Hilltop Treatment Center -Treatment Services

1C-1f - List of CoC Program Projects and the Number of Units that Require Substance Abuse Treatment

Hope in Humanity Hope Homes TH - 10 Units

HOUSE RULES

GENERAL RULES: HOPE IN HUMANITY INC DOES NOT GIVE REFUNDS OF ANY CLIENTS FEES! RELAPSING WITHIN THE FIRST 30 DAYS YOU MUST LEAVE HOPE IN HUMANITY INC NO QUESTIONS ASKED. YOU CAN CALL THE OFFICE AGAIN AFTER 5 DAYS!

OUR MISSION STATEMENT

Our mission at Hope in Humanity Inc. is to empower and uplift men in their journey to recovery, fostering strength, honor, and resilience in a supportive sober living environment. We utilize a service system that emphasizes trust, respect, confidentiality and compassion.

INTRODUCTION

Hope in Humanity Inc is a communal sober living environment. The rules at Hope In Humanity Inc are designed to ensure a safe, healthy, crime free and drug free environment for all residents. For any group of people to live together, it requires organization, teamwork, consideration and respect for one another. It can be tempting to see the rules and regulations as restrictive and punishing, however when we make a point to work with it, not against it, we benefit in personal growth.

1. Disrespecting management or fellow roommates will not be tolerated. I will treat management and other residents as I wish to be treated, with respect and consideration. _____
2. Upon admission to Hope In Humanity Inc., I must unpack and neatly put away my clothing and personal property in my designated area. _____
3. All clients will be dressed appropriately at the house property always. NO EXCEPTIONS. _____
4. To ensure my safety and that of other residents, I understand that my personal belongings may be searched by Hope In Humanity Inc. management at any time for drugs, alcohol, weapons and other contraband. _____
5. House curfew hours are: 10:00 pm Sunday through Thursday, 11 pm on Friday and Saturday (unless pre-approved for a work or school schedule). Residents may take a two-night pass beginning at 9:00 a.m. on any chosen day, and must return by 7:00 p.m. two days later. **I am eligible for a 2 night pass only if I have been a resident of Hope in Humanity Inc. for 30 days or more, and at the house manager's discretion. Overnight passes are available after 7 days. All chores must be completed. SUNDAY NIGHT HOUSE MEETINGS ARE MANDATORY! 7pm.** _____
6. Quiet time rule: 10:00 pm on weeknights and 11pm on Friday and Saturday nights is considered "quiet time". I will be respectful and considerate of other residents in the house during "quiet time" _____
7. I must attend at least 4 recovery meetings per week. Which must include AA/NA, Celebrate Recovery, Church/Bible studies, Native Meetings, or 12 Step meetings. The balance can be approved counseling and/or group therapy meetings. I must get to meetings on time and stay for the entire meeting. If I am working, going to school or disabled, I must attend a minimum of 3 meetings per week. _____
8. Possession and/or use of alcohol or any mind-altering chemicals is prohibited. Anything other than total abstinence is grounds for immediate discharge. _____

9. I will be subject to random urine screenings during my residency. Failure to submit to a urinalysis/breathalyzer will result in immediate discharge. Continuous sobriety is necessary for all residents at Hope in Humanity Inc. ____

10. Client Fees are non-refundable. There are no exceptions to this rule. If I am discharged or choose to leave, I will not receive any refund of my Client Fees. ____

11. Hope In Humanity Inc. Guest/Visitor Policy: non-residents are not allowed to be on the premises for excessive periods of time. This is subject to the discretion of the house manager. All visitors must be approved by the house manager. Visitors are NEVER allowed in bedrooms at any time. ____

12. Physical violence or threats of violence directed toward another resident, management or guest will be grounds for immediate discharge. In addition, any language or gestures determined by management to be abusive or threatening may be grounds for discharge. ____

13. If it does not belong to me, I will not touch it! Using something that does not belong to me is considered stealing. Stealing is grounds for immediate discharge. Everyone has an area for food and personal items, etc. I will respect other resident's belongings as I would like them to respect my own. ____

14. Dishonesty of any kind will not be tolerated. A primary principle in recovery is Rigorous Honesty. We will accept nothing less! ____

15. Sexual activity of any kind in the house or sexual advances towards another resident of Hope In Humanity Inc will be grounds for immediate dismissal. Pornography, explicit movies or pictures of any kind are prohibited ____

16. I am required to be participating in constructive activities that will improve the quality of my life such as recovery meetings, working, seeking employment or going to school. ____

17. I will respect the confidentiality and anonymity of other Hope in Humanity Inc. residents. I can expect the same to be done for me. What is said in the house stays in the house! ____

CLEANING:

18. I am responsible for keeping my room clean and sharing room chores with my roommates. This includes keeping my part of the room picked up and clean. Nothing should be left out on beds. I will work with my roommates to complete joint tasks such as vacuuming, sweeping and emptying trash daily. Rooms will be checked for cleanliness daily. ____

19. I am not allowed to store excessive personal property at the house. If necessary, I need to downsize my belongings or find storage for them elsewhere. ____

20. I will not leave my personal belongings lying around the house. All my belongings will be kept neatly put away. ____

21. I understand that personal towels or any other wet items will be kept on the towel rack or closet area of my room. ____

22. I will be assigned rotating chores for keeping the house and yard clean and in order. All chores are to be done by 6:00pm or when designated by the house manager. If there is a shortage of residents, I will help with open chores. This is the home I live in and I will take pride in keeping it clean. _____

23. If I am unable to do my chores because of a job, illness, court, pass, etc., I am responsible for finding someone to do it for me. It is my responsibility to ensure that my chore is completed. _____

24. I will be obligated to clear my schedule when the House Manager sets a day for "double-scrub". This will be a thorough, top to bottom cleaning of the house. _____

APPLIANCES:

25. All lights and personal appliances such as fans, bedlights etc. must be off when I leave the room. I will be mindful that electricity is expensive, and it is my responsibility to conserve power to keep the utility costs at a minimum. DO NOT LEAVE ANY APPLIANCES ON FOR FIRE HAZARD REASONS. _____

26. The ac/heater thermostat is not to be touched by ANYONE other than the house manager. _____

27. _____ To protect our sewer pump system, only toilet paper is to be flushed. Items like sanitary wipes, q-tips, and paper towels can cause damage. Any violation of this rule may result in a write-up or further disciplinary action, up to and including discharge, at the manager's discretion. _____

MEDICATIONS:

28. ALL MEDICATIONS are to be self-dispensed. They must be kept out of sight of other residents, as well as OUT OF REACH OF CHILDREN. _____

29. Narcotic medications are not permitted. _____

30. I am expected to provide an accurate accounting of the medications I bring and all new medications I obtain while a resident of Hope In Humanity Inc.. All medication must be listed on a Resident Medication Record, with other pertinent information. Whenever the house manager deems necessary, medication may be counted to confirm accuracy of dosages taken. DO NOT LEAVE MEDICATIONS OUT IN THE OPEN. I am personally responsible for the control of my medications and any deviation from prescribed dosages is considered abuse. Abuse of medications will be considered a relapse and is considered grounds for discharge, at the manager's discretion. _____

LAUNDRY:

31. Hope In Humanity Inc. provides laundry facilities as a convenience to residents. Please do not overload washing machines and dryers. Use appliances at your own risk. Hope In Humanity Inc. is not responsible for any damage to clothing. _____

32. I will not leave laundry hanging to dry in any other area except a clothesline and I will not leave laundry hanging for more time than is necessary to dry. _____

33. I am to wash my bed linens at least 2 times per month, along with washing my clothing weekly. I will not use the laundry facilities excessively. The house manager may set specific times for laundry to be done to prevent the machines from disturbing other residents during sleeping hours. _____

HOUSEKEEPING & KITCHEN: NO STOVE OR OVEN USE AFTER 10PM

NO EXCEPTIONS!

34. It is my responsibility to clean up after myself immediately. Upon using the kitchen, I must rinse dishes before putting them in the dishwasher. Pots and pans must be washed; dried and put away. I must not leave dishes in the sink. If the dishwasher is running, I must wash my dishes by hand. _____

35. Personal belongings will not be used to decorate any common areas, including the bathroom. All personal property must be put in its proper place in drawers or on shelves. _____

DISCRIMINATION:

36. Hope In Humanity Inc. does not discriminate based on race, religion, gender or sexual orientation. We will not tolerate discriminating behavior, including racial slurs. Violation of this rule is grounds for immediate discharge. _

VEHICLES:

37. Motor vehicles may not be parked on Hope In Humanity Inc premises without approval of the house manager. Hope In Humanity Inc. is not responsible for any damage or theft. We do not allow storage of any non-working vehicles. All Vehicles must be registered and Insured. _____

38. I must park my vehicle only in the designated parking area. I will not block driveways or walkways. I must not block our neighbor's driveway. _____

39. We suggest that you do not loan your vehicle to another resident. If you do so, it is at your own risk! _____

CRIMINAL ACTIVITY:

40. Criminal activity of any kind is not permitted, including gambling. For my own protection. I will not share personal information (such as driver's license number, social security number etc.) with any other residents. _____

41. Weapons of any kind will not be permitted on Hope In Humanity Inc. property at any time. _____

MISCELLANEOUS:

42. Candles are not allowed in bedrooms at any time. _____

43. Sleeping and lounging in common areas is not permitted. _____

44. Smoking/Vaping is not allowed in the house or garage. I will smoke out front only. I will not smoke on the back decks. Cigarette butts will be disposed of in ashtrays and butt cans. I will make sure that my cigarette is put out all the way before walking away, in order to prevent fires. Vaping is allowed on decks. _____

45. I will not impose any of my religious, political or other beliefs on other residents at any time. _____

46. I will have the opportunity to have a one-on-one meeting with the house manager at least once a month or as needed. _____

54. If I am discharged, I have 3 days (72 hours) to retrieve all my property or it will be disposed of. I must make an appointment with the house manager to pick up my property. _____

55. Bed assignments and moves will be based upon medical need and/or seniority, at the house manager's discretion. All bed moves must be pre approved by the house manager. _____

56. I understand that "I DIDN'T KNOW" will not be tolerated as an excuse for breaking the rules. It is my responsibility to know and follow the rules. _____

57. No tattooing or Piercing on the Property. Tattooing or Piercing- whether on yourselves or others- is not allowed anywhere in the house or on the property. Lets keep those activities off-site. _____

CONSEQUENCES:

57. Failure to comply with the house rules may result in disciplinary actions, which can include written warnings, extra meetings or chores, or even blackout periods where privileges are temporarily suspended. This helps us maintain a positive and safe living environment for everyone. Consequences for violations of these rules are given on a case by case basis and are at the discretion of the house manager. _____

CHILDREN & FAMILIES:

58. I will ALWAYS supervise my children responsibly if they are visiting. _____

59. I am responsible for cleaning up after my children. . _____

60. Children must eat in designated eating areas. Children are not allowed to eat in the bedrooms or other common areas. _____

61. Children are not allowed to prepare meals in the kitchen. I am to prepare their food for them. _____

62. Babysitting is not allowed without prior approval from the house manager. _____

Note: This is not an all-inclusive list and is subject to change.

Resident Signature

Date

House Manager Signature

Date

Hope In Humanity Inc.

MEDICATION LOG

Client Name: _____ Date Log Started: _____

Please list the name of your medication(s), the prescribed dose and the count/quantity of your meds at the time of listing. Also note if the medication is in pill or liquid form. List the start date of your prescription and the end date, if there is one. Also list the name and phone number of the doctor that prescribed the medication. Please be aware that it is your responsibility to keep this medication log up to date.

[illegible]

Lake County Continuum of Care

Encampment Response and Law Enforcement Coordination Policy

Purpose

The purpose of this policy is to establish the Lake County Continuum of Care's position regarding coordination with local law enforcement agencies during encampment response and abatement activities. The Lake County Continuum of Care recognizes the importance of maintaining public health, public safety, environmental stewardship, and access to housing and supportive services while addressing unsheltered homelessness.

Policy

The Lake County Continuum of Care supports lawful encampment abatement efforts conducted by local law enforcement agencies and other authorized governmental entities in accordance with applicable federal, state, and local laws.

The Lake County Continuum of Care encourages a coordinated approach in which outreach providers, local government, behavioral health providers, and law enforcement work collaboratively to provide individuals who are unhoused with opportunities to access shelter, housing, treatment, and supportive services before, during, and after encampment abatement activities.

Principles

The Lake County Continuum of Care supports the following principles:

- Coordination among law enforcement, local government, service providers, and outreach teams whenever practical and in accordance with federal, state, and local laws.
- Advance notification to outreach providers, when feasible, to allow for engagement with individuals residing in encampments.
- Efforts to connect individuals to available shelter, interim housing, permanent housing, behavioral health services, substance use treatment, employment services, and other community resources.
- Protection of public health and safety through the lawful removal of encampments, prioritizing health, environmental, fire, or public safety concerns.
- Compliance with all applicable constitutional protections, court orders, and federal, state, and local laws governing encampment response and the handling of personal property.

Continuum of Care Role

The Lake County Continuum of Care does not direct or oversee law enforcement operations. Rather, the Continuum's role is to:

- Support collaborative planning among local agencies.
- Encourage communication between service providers and public agencies.
- Promote timely outreach and service engagement.
- Advocate treatment interventions whenever resources are available.
- Coordinate Continuum-funded providers in assisting individuals affected by encampment abatement activities.

Implementation

Recipients of Continuum of Care Program funding are encouraged to cooperate with local outreach coordination efforts associated with encampment response, consistent with grant requirements and agency policies.

Nothing in this policy shall be interpreted as requiring a funded provider to disclose confidential client information except as authorized or required by law.

Effective Date

This policy shall become effective upon approval by the Lake County Continuum of Care Executive Committee and shall remain in effect until amended or repealed by Executive Committee action.



Project Name

Project Type

Contact Name and Email

Scorer Name

Application

Discription	Points Possible	Points
1.) Describe the project's overall design, goals, and objectives. Please include objectifiable references to HUD's new priority centering on treatment services. What treatment services will the proposed project provide? List and describe specific services related to treatment.	10	
2.) Describe why your organization believes this project is needed. Please use quantifiable data sources and explain how the proposed project expects to increase housing stability, treatment services and other client needs. e.g. case management, employment training, substance use treatment. etc.	5	
3.) Describe the project's activities to meet the proposed objective goals and objectives of the project. For CES, starting with referrals to mental health and substance use disorder treatment services and housing, and utilization of the prioritized By-Name list. For Domestic Violence, specify HUD Safety Standards and how the project's goals and objectives are met with project activities.	5	
4.) Describe how the project will collaborate with the HUB for wrap-around services and CoC Member agencies when: a.) Making referrals through the Coordinated Entry System, and b.) Provide client services for mental health, substance use, safety planning for DV survivors that will direct clients to housing and meet the clients' needs including immediate path to housing for elderly and developmentally disabled clients.	5	
5.) Describe how the project will partner and collaborate with local law enforcement agencies on both individual and community public safety, domestic violence, and homeless response to increase housing and service engagement.	5	
6.) Describe how the project will partner and collaborate with local law enforcement agencies on both individual and community public safety, domestic violence, and homeless response to increase housing and service engagement.	5	
7.) Describe the project's key objective activities beginning with the referral and intake process, and data entry. Include the process for the elderly, developmentally disabled, and physically disabled. What services will be provided for this vulnerable population and how will the population be prioritized?	5	
8.) Describe the project's key activities for treatment, safety planning, and/or referrals for individuals with substance use disorder and mental health needs. How will your project identify the needs of each client and assign program participation accordingly.	5	
9.) Describe the key activities to reduce homelessness and the risk of becoming homeless. Describe the activities that will lead to housing stabilization, client needs, and safety of the clients and community. What measurable goals will be used to ensure the proposed project is reducing homelessness, stabilization in safety in the community.	5	
10.) What activities and data implementation will the project use to report on program capacity, coordination, engagement, outcomes, standard performance measures; and tracking individual data for CES and DV client's participants?	5	
11.) Projects anticipated benchmarks for the following: a.) Total number served. b.) Total percentage of entries into the project through all outreach efforts. c.) Total percentage of household exits from the project into permanent housing. d.) Total percentage of households referred to shelter beds. e.) Total percentage referred to treatment services. f.) Total length of time in the project before entry into a permanent housing program.		

g.) Total number of persons returning to homelessness.	
h.) Total number of households expected to increase monthly income and any other financial assistance programs.	
i.) Total percentage of the number of people participating in the annual Housing Inventory Count (HIC).	
j. The anticipated percentage of unduplicated persons in HMIS.	10
12.) Describe the Evidence-Based Practice(s) your project will use and why you've chosen that approach. How the Evidence-Based Practice(s) will help the project meet benchmark goals, including conditions for continued program participation. How will these practices be included in your intake process?	5
13.) Describe your organization's relevant experience in providing the proposed project. If your organization is new, describe the key personnel's relevant experience. Describe how of your staff have experience with substance use, mental health, safety planning, the elderly, the physically disabled, the developmentally disabled, and/or lived experience with homelessness or the homeless response systems of care?	5
14.) Include a list of all expected staff positions and a brief description of duties for each position. Include any verifiable information on training and education that aligns with HUD's priorities.	5
15.) Provide a budget table and a separate line-item narrative. In the budget narrative, please determine the appropriate cost analysis and any leveraged resources for the proposed project (line items, unit costs, and cost justifications). Include the budget in the appendices.	10
16.) Describe how your agency will provide the cash or in-kind matching cost for this project.	5
17.) Describe your project's Administrative Costs and anticipated indirect costs, and how they are determined, and how they meet the requirements of the HUD NOFO.	5

Interview

1.) Please tell us about your planned project and the goals you plan to achieve.	5
2.) Please tell us the methods and processes that will be employed to find and sustain permanent housing for your target population. Will the supportive services require participat requirments?	5
3.) Please give us a scenario of actions you would take upon receiving a call for assistance from an emergency room Dr. for a Transition Aged Yuth	5
4.) Plese tell us how you will provide services for HUD's new priority goals:	
a) Providing treatment and recovery services	5
5.) Please tell us how you will work with the Coordinated Entry System of the CoC and take and make referrals.	5
6.) Please tell us about how the project will measure success and how you will use internal evaluation processes for system delivery	5
7.) Please tell us how your project will meet the required match funding.	5
Total Application Score	100
Total Interview Score	35
Total Score	135



FY2026 Continuum of Care Program Priority Listing Update

From Melissa Kopf <Melissa.Kopf@lakecountyca.gov>

Date Wed 9/23/2026 1:08 PM

Cc Bruno Sabatier <Bruno.Sabatier@lakecountyca.gov>; Caressa Smith <smithcb@ah.org>; Summer Walker <Summer.Walker@lakecountyca.gov>

Bcc Adams <mzjoyze@gmail.com>; iconsult@pacific.net <iconsult@pacific.net>; rebeccabobrow1959@gmail.com <rebeccabobrow1959@gmail.com>; Duncan,Ronni <duncanrl@ah.org>; bfalkenberg@lakecoe.org <bfalkenberg@lakecoe.org>; latoya.fortino@gmail.com <latoya.fortino@gmail.com>; Linda Hedstrom <lmhedstrom@sbcglobal.net>; Carrie Manning <Carrie.Manning@lakecountyca.gov>; Kelli Page <Kelli.Page@lakecountyca.gov>; Ana Santana <asantana@lakecoe.org>; sbartholomew95@gmail.com <sbartholomew95@gmail.com>; tlogan@ulusd.org <tlogan@ulusd.org>; will.vansant-glass@va.gov <will.vansant-glass@va.gov>; Teresa Wold <Teresa.Wold@lakecountyca.gov>; goetzhr@sutterhealth.org <goetzhr@sutterhealth.org>; TreadawayJ@redwoodcommunityservices.org <TreadawayJ@redwoodcommunityservices.org>; aflora@clearlake.ca.us <aflora@clearlake.ca.us>; jholmes@srcharities.org <jholmes@srcharities.org>; Scott Abbott <Scott.Abbott@lakecountyca.gov>; fmcccloud@big-valley.net <fmcccloud@big-valley.net>; kamparo@big-valley.net <kamparo@big-valley.net>; frave@rrcbc-nsn.gov <frave@rrcbc-nsn.gov>; sue.feliz@sv-nsn.gov <sue.feliz@sv-nsn.gov>; aaron.york@sbcglobal.net <aaron.york@sbcglobal.net>; sbalmon@netzero.net <sbalmon@netzero.net>; cchapdirector@live.com <cchapdirector@live.com>; hagoodmary7@gmail.com <hagoodmary7@gmail.com>; cheriecepuch17@gmail.com <cheriecepuch17@gmail.com>; noticenicole0036@gmail.com <noticenicole0036@gmail.com>; lsewell@srcharities.org <lsewell@srcharities.org>; Doreen Gilmore <doreengilmore59@gmail.com>; lester.ransburg11@gmail.com <lester.ransburg11@gmail.com>; Linda Hedstrom <lmhedstrom@sbcglobal.net>; ginaford66@gmail.com <ginaford66@gmail.com>; kingram@cityoflakeport.com <kingram@cityoflakeport.com>; david.j.pray@hud.gov <david.j.pray@hud.gov>; gdonner54@gmail.com <gdonner54@gmail.com>; Melissa Kopf <Melissa.Kopf@lakecountyca.gov>; tomalanadinejones@gmail.com <tomalanadinejones@gmail.com>; nlmodar80@gmail.com <nlmodar80@gmail.com>; mzgloriascott2000@gmail.com <mzgloriascott2000@gmail.com>; bonnieblumenthal@gmail.com <bonnieblumenthal@gmail.com>; ldydrghrt@gmail.com <ldydrghrt@gmail.com>; Jones,Tomala <jonestn02@ah.org>; potentialway1@gmail.com <potentialway1@gmail.com>; appleofhereye@sbcglobal.net <appleofhereye@sbcglobal.net>; katfraundcptsdc@gmail.com <katfraundcptsdc@gmail.com>; lsobieraj@cityoflakeport.com <lsobieraj@cityoflakeport.com>; Edgar Ontiveros <Edgar.Ontiveros@lakecountyca.gov>; KingLJ@ah.org <KingLJ@ah.org>; carmens@lakefrc.org <carmens@lakefrc.org>; Mary Wilson <mwilson@yccd.edu>; kfernandez@lcthc.org <kfernandez@lcthc.org>; imstormee@hotmail.com <imstormee@hotmail.com>; Jbianez@hpultribe-nsn.gov <Jbianez@hpultribe-nsn.gov>; tmunion@hpultribe-nsn.gov <tmunion@hpultribe-nsn.gov>; awillemsen@lcthc.org <awillemsen@lcthc.org>; nat.baker77@yahoo.com <nat.baker77@yahoo.com>; jbandtami@gmail.com <jbandtami@gmail.com>; kellylife@att.net <kellylife@att.net>; Sage Wolf <wolfs@redwoodcommunityservices.org>; piperpatricia576@gmail.com <piperpatricia576@gmail.com>; swankhousing@gmail.com <swankhousing@gmail.com>; wandamarianhz5k@hotmail.com <wandamarianhz5k@hotmail.com>; potentialway1@gmail.com <potentialway1@gmail.com>; Mireya Turner <Mireya.Turner@lakecountyca.gov>; aprilgiambra@aol.com <aprilgiambra@aol.com>; Jessica Anglen <Jessica.Anglen@lakecountyca.gov>; thomas.jordan@sv-nsn.gov <thomas.jordan@sv-nsn.gov>; gregorypinard77@gmail.com <gregorypinard77@gmail.com>; Frawley,Heather <frawlehj@ah.org>; Kimbell-Auth, Shannon <shannon.kimbellauth@redcross.org>; Kimbralee Guerra <guerrak@redwoodcommunityservices.org>; Kelliegato@gmail.com <Kelliegato@gmail.com>; savvystables@me.com <savvystables@me.com>; jacktiff109@gmail.com <jacktiff109@gmail.com>; caedy.minoletti@redcross.org <caedy.minoletti@redcross.org>; americanworkersparty1917@gmail.com <americanworkersparty1917@gmail.com>; Mireya Turner <Mireya.Turner@lakecountyca.gov>; kingram@cityoflakeport.com <kingram@cityoflakeport.com>; Veronica Solvik <vsolvik@lsnc.net>; anjeleyz182@yahoo.com <anjeleyz182@yahoo.com>; Caressa Smith <smithcb@ah.org>; speterson@big-

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Hello,

Please see the updated FY2026 Continuum of Care Program Competition Priority Listing. This update is due to the withdraw of an application for FY2026 CoC Program Application. The Lake County Continuum of Care Grants Selection Workgroup has scored the applications, and the Executive Committee voted on the official ranking at the August 6, 2026, monthly meeting. You can see the ranking on the LCCoC website here:

[HUD CoC Competition NOFO | Lccoc](#)

It will now be up to HUD to determine if the accepted applications are funded. All new applications will be competing with other applications across the country. Part of the judging is dependent on the CoC's Consolidated application the LCCoC is submitting, demonstrating that our CoC is in compliance and meets the quality standards HUD wants from CoCs.

The LCCoC wish you all luck!

Thank you,

Melissa Kopf (She/Her/Hers)
Staff Service Analyst, Senior
Lake County Continuum of Care Analyst
Homeless Management Information System
Administrator
Lake County Behavioral Health Services
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“To improve the quality of life for the people of Lake County experiencing mental illness or substance abuse by offering recovery-oriented services.”

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FY 2026 Continuum of Care Competition Consolidated Application

CoC Announces FY 2026 CoC Program Competition

FY2026 Local Competition Selection Results						
Project Applicant	Score	Status	Ranked	Project Type	Reallocated	Funding
Lake County Behavioral Health Services	Not Scored	NA	NA	Planning		\$50,000.00
FY2026 CoC Competition CoC Bonus Renewal	90%	Accepted	1	HMIS		\$26,430.00
Lake County Behavioral Health Services - CoC Bonus and Reallocation	93%	Accepted	2	SSO-CE	\$17,620 Reallocated from FY26 CoC Competition CoC Bonus Renewal	\$386,824.00
Hope in Humanity - CoC Bonus	81%	Accepted	3	TH		\$125,000.00
Lake County Behavioral Health Services - New DV Bonus and Reallocation	93%	Accepted	4	SSO-CE		\$53,600.00
Swank Housing Supports - CoC Bonus	64%	Rejected	Not Ranked	TH		\$0.00
Swank Housing Supports - DV Bonus	64%	Rejected	Not Ranked	TH		\$0.00

UPDATE

2026 HDX Competition Report

This workbook contains summary information about your CoC's data as it was entered into the HDX for your use as part of the 2026 Competition.

To Print this Workbook:

This document has been configured as printable with preset print areas of relevant sections. To print it, go to "File", then "Print", then select "Print Entire Workbook" or "Print Active Sheets" depending on your needs.

To Save This Workbook as a PDF:

Click the "File" Tab, then click "Save As" or "Save a Copy", then click "Browse" or "More Options" then select "PDF", click "Options", select "Entire Workbook", press "OK", and click "Save". These instructions may differ depending on your version of Microsoft Excel.

On Accessibility, Navigability, and Printability:

This workbook attempts to maximize accessibility, navigability, printability, and ease of use. Merged cells have been avoided. All tables and text boxes have been given names. Extraneous rows and columns outside printed ranges have been hidden.

For Questions:

If you have questions, please reach out to HUD via the "Ask a Question" page, <https://www.hudexchange.info/program-support/my-question/> and choose "HDX" as the topic.

2025 HDX Competition Report

2026 Competition Report - Summary

CA-529 - Lake County CoC

HDX Data Submission Participation Information

Government FY and HDX Module Abbreviation	Met Module Deadline*	Data From	Data Collection Period in HDX
2025 LSA	Yes	Government FY 2025 (10/1/24 - 9/30/25).	November 2025 to January 2026
2025 SPM	Yes	Government FY 2025 (10/1/24 - 9/30/25).**	February 2026 to March 2026
2026 HIC	Yes	Government FY 2026. Exact HIC and PIT dates vary by CoC. For most CoCs, it was within the last 10 days of January, 2026.	March 2026 to April 2026
2026 PIT	Yes	Government FY 2026. Exact HIC and PIT dates vary by CoC. For most CoCs, it was within the last 10 days of January, 2026.	March 2026 to April 2026

1) FY = Fiscal Year

2) *This considers all extensions where they were provided.

3) ***"Met Deadline" in this context refers to FY25 SPM submissions. Resubmissions from FY24 (10/1/2023 - 9/30/2024) were also accepted during the data collection period, but the previous year's submission is voluntary.

2025 HDX Competition Report

2026 Competition Report - LSA Summary & Usability Status

CA-529 - Lake County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

LSA Usability Status 2025

Category	EST AO	EST AC	EST CO	RRH AO	RRH AC	RRH CO	PSH AO	PSH AC*	PSH CO
Fully Usable	☒	☒	☒	☒	☒	☒	☒	N/A	☒
Partially Usable								N/A	
Not Usable								N/A	

Glossary: EST = Emergency Shelter, Save Haven, & Transitional Housing; RRH = Rapid Re-housing; PSH = Permanent Supportive Housing; AO = Persons in Households without Children; AC = Persons in Households with at least one Adult and one Child; CO=Persons in Households with only Children
*Usability was not determined for PSH-AC due to built-in conflicts between HOMES and HMIS. As

2026 Competition Report - SPM Data

CA-529 - Lake County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than the look back stop date or client's date of birth, whichever is later.

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.

Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client’s entry, exit, and bed night dates strictly as entered in the HMIS system.

Metric	Universe (Persons)	Average LOT Homeless (bed nights)	Median LOT Homeless (bed nights)
1.1 Persons in ES-EE, ES-NbN, and SH	135	158.0	98.0
1.2 Persons in ES-EE, ES-NbN, SH, and TH	218	175.5	113.5

b. This measure is based on data element 3.917

This measure includes data from each client’s Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added to the client’s entry date, effectively extending the client’s entry date backward in time. This “adjusted entry date” is then used in the calculations just as if it were the client’s actual entry date.

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-529 - Lake County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Metric	Universe (Persons)	Average LOT Homeless (bed nights)	Median LOT Homeless (bed nights)
1.1 Persons in ES-EE, ES-NbN, SH, and PH (prior to “housing move in”)	196	568.3	260.5
1.2 Persons in ES-EE, ES-NbN, SH, TH, and PH (prior to “housing move in”)	279	566.3	273.0

Measure 2: Returns to Homelessness for Persons who Exit to Permanent Housing (PH) Destinations

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons Exited to a PH Destination (2 Yrs Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)	Returns to Homelessness from 6 to 12 Months (181 - 365 days)	Returns to Homelessness from 13 to 24 Months (366 - 730 days)	Number of Returns in 2 Years				
Metric	Count	Count	% of Returns	Count	% of Returns	Count	% of Returns	Count	% of Returns
Exit was from SO	0	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Exit was from ES	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-529 - Lake County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Exit was from TH	2	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Exit was from SH	0	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Exit was from PH	67	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL Returns to Homelessness	70	0	0.0%	0	0.0%	0	0.0%	0	0.0%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

Please refer to PIT section for relevant data.

Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

Metric	Value
Universe: Unduplicated Total sheltered homeless persons	228
Emergency Shelter Total	136
Safe Haven Total	0
Transitional Housing Total	92

Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-529 - Lake County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

This measure is divided into six tables capturing employment and non-employment income changes for system leavers and stayers. The project types reported in these metrics are the same for each metric, but the type of income and universe of clients differs. In addition, the projects reported within these tables are limited to CoC-funded projects.

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

Metric	Value
Universe: Number of adults (system stayers)	0
Number of adults with increased earned income	0
Percentage of adults who increased earned income	0.0%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

Metric	Value
Universe: Number of adults (system stayers)	0
Number of adults with increased non-employment cash income	0
Percentage of adults who increased non-employment cash income	0.0%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-529 - Lake County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Metric	Value
Universe: Number of adults (system stayers)	0
Number of adults with increased total income	0
Percentage of adults who increased total income	0.0%

Metric 4.4 – Change in earned income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	0
Number of adults who exited with increased earned income	0
Percentage of adults who increased earned income	0.0%

Metric 4.5 – Change in non-employment cash income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	0

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-529 - Lake County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Number of adults who exited with increased non-employment cash income	0
Percentage of adults who increased non-employment cash income	0.0%

Metric 4.6 – Change in total income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	0
Number of adults who exited with increased total income	0
Percentage of adults who increased total income	0.0%

Measure 5: Number of Persons who Become Homeless for the First Time

This measures the number of people entering the homeless system through ES, SH, or TH (Metric 5.1) or ES, SH, TH, or PH (Metric 5.2) and determines whether they have any prior enrollments in the HMIS over the past two years. Those with no prior enrollments are considered to be experiencing homelessness for the first time.

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

Metric	Value
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2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-529 - Lake County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Universe: Person with entries into ES-EE, ES-NbN, SH or TH during the reporting period.	166
Of persons above, count those who were in ES-EE, ES-NbN, SH, TH or any PH within 24 months prior to their entry during the reporting year.	32
Of persons above, count those who did not have entries in ES-EE, ES-NbN, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	134

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

Metric	Value
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	263

2026 Competition Report - SPM Data

CA-529 - Lake County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	37
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	226

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD’s Homeless Definition in CoC Program-funded Projects

Measure 6 is not applicable to CoCs in this reporting period.

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

This measures positive movement out of the homeless system and is divided into three tables: movement off the streets from Street Outreach (Metric 7a.1); movement into permanent housing situations from ES, SH, TH, and RRH (Metric 7b.1); and retention or exits to permanent housing situations from PH (other than PH-RRH).

Metric 7a.1 – Change in SO exits to temp. destinations, some institutional destinations, and permanent housing destinations

Metric	Value
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2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-529 - Lake County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Universe: Persons who exit Street Outreach	0
Of persons above, those who exited to temporary & some institutional destinations	0
Of the persons above, those who exited to permanent housing destinations	0
% Successful exits	0.0%

Metric 7b.1 – Change in ES, SH, TH, and PH-RRH exits to permanent housing destinations

Metric	Value
Universe: Persons in ES-EE, ES-NbN, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	177
Of the persons above, those who exited to permanent housing destinations	60

2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-529 - Lake County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

% Successful exits	33.9%
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Metric 7b.2 – Change in PH exits to permanent housing destinations or retention of permanent housing

Metric	Value
Universe: Persons in all PH projects except PH-RRH who exited after moving into housing, or who moved into housing and remained in the PH project	75
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	75
% Successful exits/retention	100.0%

System Performance Measures Data Quality

Data coverage and quality will allow HUD to better interpret your SPM submissions.

Metric	All ES, SH	All TH	All PSH, OPH	All RRH	All Street Outreach
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2025 HDX Competition Report

2026 Competition Report - SPM Data

CA-529 - Lake County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Unduplicated Persons Served (HMIS)	213	92	79	109	0
Total Leavers (HMIS)	168	59	2	39	0
Destination of Don't Know, Refused, or Missing (HMIS)	2	0	0	25	0
Destination Error Rate (Calculated)	1.2%	0.0%	0.0%	64.1%	0.0%

2025 HDX Competition Report

2026 Competition Report - SPM Notes

CA-529 - Lake County CoC

FY 2025 Reporting Year: 10/1/2024 - 9/30/2025

Notes For Each SPM Measure

Measure		Notes
Measure 1	No notes.	
Measure 2	No notes.	
Measure 3	No notes.	
Measure 4	No notes.	
Measure 5	No notes.	
Measure 6	No Notes. Measure 6 was not applicable to CoCs in this reporting period.	
Measure 7	No notes.	
Data Quality	No notes.	

2026 Competition Report - HIC Summary

CA-529 - Lake County CoC

For HIC conducted in January/February of 2026

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current Non-VSP Beds in HMIS or Comparable Database	Total Year-Round, Current, Non-VSP Beds	Removed From Denominator: OPH EHV ¹ Beds or Beds Affected by Natural Disaster*	Adjusted*** Total Year-Round, Current, Non-VSP Beds	Adjusted*** HMIS Bed Coverage Rate for Year-Round, Current Beds	Total Year-Round, Current, VSP Beds in an HMIS-Comparable Database	Total Year-Round, Current, VSP Beds	Removed From Denominator: OPH EHV ¹ Beds or Beds Affected by Natural Disaster**	Adjusted*** Total Year-Round Current, VSP Beds	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS-Comparable Database	Adjusted*** Total Year-Round, Current, Non-VSP and VSP Beds	HMIS and Comparable Database Coverage Rate
ES	58	38	38	0	38	100.0%	20	20	0	20	100.00%	58	58	100.00%
SH	0	0	0	0	0	NA	0	0	0	0	NA	0	0	NA
TH	105	105	105	0	105	100.0%	0	0	0	0	NA	105	105	100.00%
RRH	21	15	15	0	15	100.0%	6	6	0	6	100.00%	21	21	100.00%
PSH	82	68	82	0	82	82.9%	0	0	0	0	NA	68	82	82.93%
OPH	498	486	498	12	486	100.0%	0	0	0	0	NA	486	486	100.00%
Total	764	712	738	12	726	98.1%	26	26	0	26	100.00%	738	752	98.14%

2026 Competition Report - HIC Summary

CA-529 - Lake County CoC

For HIC conducted in January/February of 2026

- 1) † EHV = Emergency Housing Voucher
- 2) *This column includes Current, Year-Round, Natural Disaster beds not associated with a VSP that are not HMIS-participating. For OPH Beds, this includes beds that are Current, Non-HMIS, and EHV-funded.
- 3) **This column includes Current, Year-Round, Natural Disaster beds associated with a VSP that are not HMIS-participating or HMIS-comparable database participating. For OPH Beds, this includes beds that are Current, VSP, Non-HMIS, and EHV-funded.
- 4) ***Adjusted bed counts exclude non-HMIS participating OPH EHV Beds and Beds Affected by Natural Disaster
- 5) Data included in these tables reflect what was entered into HDX 2.0.
- 6) In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").
- 7) In the HIC, "Current" beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").
- 8) For historical data: Aggregated data from CoCs that merged are not displayed if HIC data were created separately - that is, only data from the CoC into which the merge occurred are displayed. Additional reports can be requested via AAQ for any CoCs that have been subsumed into other CoCs.

2026 Competition Report - PIT Summary

CA-529 - Lake County CoC

For PIT conducted in January/February of 2026

Submission Information

Date of PIT Count	Received HUD Waiver
1/22/2026	Not Applicable

Total Population PIT Count Data

Category	2024	2025	2026
PIT Count Type	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count
Emergency Shelter Total	103	69	59
Safe Haven Total	0	0	0
Transitional Housing Total	66	42	93
Total Sheltered Count	169	111	152
Total Unsheltered Count	435	272	331
Total Sheltered and Unsheltered Count*	604	383	483

1) *Data included in this table reflect what was entered into HDX 2.0. This may differ from what was included in federal reports if the PIT count type was sheltered only.

2) Aggregated data from CoCs that merged is not displayed if PIT data were entered separately - that is, only data from the CoC into which the merge occurred are displayed. Additional reports can be requested via AAQ for any CoCs that have been subsumed into other CoCs.

Total People Experiencing Chronic Homelessness

Category	2024	2025	2026
PIT Count Type	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count
Total Sheltered Count	26	35	14
Total Unsheltered Count	143	103	138
Total	169	138	152

Lake County Continuum of Care

Federal Funding Eligibility Policy – Harm Reduction and Safe Consumption Programs

Purpose

The purpose of this policy is to establish the Lake County Continuum of Care's funding priorities and eligibility requirements for all federal funding administered, recommended, or allocated through the Lake County Continuum of Care.

The Lake County Continuum of Care is committed to directing limited federal homeless assistance funding toward programs that align with the LCCoC's locally adopted priorities, strategic objectives, and performance expectations.

Policy

The Lake County Continuum of Care shall not recommend, award, allocate, or otherwise support the use of Continuum of Care Program Competition federal funding for any project or agency whose proposed project includes the operation, management, sponsorship, or direct provision of:

- Safe consumption sites;
- Supervised consumption facilities;
- Supervised injection facilities;
- Drug consumption rooms;
- Any program whose primary purpose is to provide a location for the supervised consumption of controlled substances prohibited under federal law.

Additionally, the Lake County Continuum of Care shall not recommend Continuum of Care Program Competition federal funding for projects whose primary program activities are centered on harm reduction services when those activities are inconsistent with the funding priorities established by the Lake County Continuum of Care.

Applicant Certification

As part of each Continuum of Care Program Competition, applicants shall certify that the project proposed for funding:

- Does not operate a safe consumption or supervised consumption site;
- Will not use Continuum of Care Program Competition funds to establish or operate such a facility;
- Is consistent with all applicable federal statutes, regulations, and HUD program requirements.

Review Process

During the local competition, the Ranking and Review Committee shall determine whether each application complies with this policy.

Projects determined to be ineligible under this policy shall not be recommended for inclusion in the Lake County Continuum of Care's Priority Listing submitted to HUD.

Reservation of Authority

The LCCoC Executive Committee retains the authority to interpret and administer this policy in a manner consistent with federal law and HUD regulations. If any provision of this policy is determined to conflict with federal requirements governing Continuum of Care funding, the conflicting provision shall be modified only to the extent necessary to maintain compliance while preserving the intent of this policy.

Effective Date

This policy shall become effective upon approval by the Lake County Continuum of Care Executive Committee and shall remain in effect until amended or repealed by Executive Committee action.

Before Starting the Project Application

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

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2026 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Unique Entity Identifier (UEI) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2026 Continuum of Care (CoC) Program Competition. For more information see FY 2026 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2026 CoC Program NOFO.
- Detailed instructions can be found on the hud.gov website https://www.hud.gov/program_offices/comm_planning/coc/competition. The Detailed Instructions contain more comprehensive instructions to help navigate e-snaps.
- Before starting the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- Carefully review each question in the Project Application. Questions from previous competitions may have been changed or removed, or new questions may have been added, and information previously submitted may or may not be relevant. Data from the FY 2026 Project Application will be imported into the FY 2026 Project Application; however, applicants will be required to review all fields for accuracy and to update information that may have been adjusted through the post award process or a grant agreement amendment. Data entered in the post award and amendment forms in e-snaps will not be imported into the project application.
- YHDP projects that are eligible for renewal under the CoC program may only use the YHDP Renewal or YHDP Replacement and Reallocation funding opportunities. Please review the NOFO for eligibility standards.
- Rental assistance projects can only request the number of units and unit size as approved in the final HUD-approved Grant Inventory Worksheet (GIW).
- Transitional housing, permanent supportive housing with leasing, rapid re-housing, supportive services only, renewing safe havens, and HMIS can only request the Annual Renewal Amount (ARA) that appears on the CoC's HUD-approved GIW. If the ARA is reduced through the CoC's reallocation process, the final project funding request must reflect the reduced amount listed on the CoC's reallocation forms.
- HUD reserves the right to reduce or reject any renewal project that fails to adhere to 24 CFR part 578 and the application requirements set forth in the FY 2026 CoC Program Competition NOFO.
- To expedite grant agreement processing, ensure that the UEI does not have an expiration date in the early calendar year (January - May).

1A. SF-424 Application Type

1. Type of Submission: Application

2. Type of Application: Renewal Project Application

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

If "Other", specify:

3. Date Received: 09/24/2026

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier: CA2368

This is the first 6 digits of the Grant Number, known as the PIN, that will also be indicated on Screen 3A Project Detail. This number must match the first 6 digits of the grant number on the HUD approved Grant Inventory Worksheet (GIW).

Check to confirm that the Federal Award Identifier has been updated to reflect the most recently awarded grant number

X

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

- a. Legal Name:** Adventist Health Clearlake Hospital, Inc.
- b. Employer/Taxpayer Identification Number (EIN/TIN):** 68-0395149
- c. Unique Entity Identifier:** QELWY94UYFM5

d. Address

Street 1: 15630 18th Ave
Street 2:
City: Clearlake
County: Lake
State: California
Country: United States
Zip / Postal Code: 95422

e. Organizational Unit (optional)

Department Name: Community Health
Division Name:

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

Prefix: Ms.
First Name: Melissa
Middle Name:
Last Name: Buchholz
Suffix:
Title: Manager, Grants Management
Organizational Affiliation: Adventist Health Clearlake Hospital, Inc.
Telephone Number: (707) 513-3621
Extension:

Applicant: Lake County Continuum of Care

CA-529

Project: FY26 CoC Competition Bonus Renewal for Coordinated Entry

238621

Fax Number: (000) 000-0000

Email: buchhomc@ah.org

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: CPD-2600-DC-0025

Title: Continuum of Care Homeless Assistance
Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (State(s) only): California
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: FY26 CoC Competition Bonus Renewal for Coordinated Entry

16. Congressional District(s):

a. Applicant: CA-004
(for multiple selections hold CTRL key)

b. Project: CA-004
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 07/01/2027

b. End Date: 06/30/2028

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

I AGREE: ☒

21. Authorized Representative

Prefix: Mr.

First Name: Richard

Middle Name:

Last Name: Riter

Suffix:

Title: Treasurer

Telephone Number: (707) 513-3621
(Format: 123-456-7890)

Fax Number: (000) 000-0000
(Format: 123-456-7890)

Email: riterr@ah.org

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

Date Signed: 09/24/2026

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Number: 2501-0044 Expiration Date: 2/28/2027

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Adventist Health Clearlake Hospital, Inc.

Prefix: Mr.

First Name: Richard

Middle Name:

Last Name: Riter

Suffix:

Title: Treasurer

Organizational Affiliation: Adventist Health Clearlake Hospital, Inc.

Telephone Number: (707) 513-3621

Extension:

Email: riterr@ah.org

City: Clearlake

County: Lake

State: California

Country: United States

Zip/Postal Code: 95422

2. Employer ID Number (EIN): 68-0395149

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received: \$26,430.00

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, City and State) of the project or activity.

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
(For further information, see 24 CFR Sec. 4.3).

2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9. No

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional non-disclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I/We, the undersigned, certify under penalty of perjury that the information provided above is true, correct, and accurate. Warning: If you knowingly make a false statement on this form, you may be subject to criminal and/or civil penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

X

Name / Title of Authorized Official: Richard Riter, Treasurer

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

Date Signed: 09/24/2026

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Adventist Health Clearlake Hospital, Inc.

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

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

Sites for Work Performance.

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

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

X

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

Authorized Representative

Prefix: Mr.

First Name: Richard

Middle Name

Last Name: Riter

Suffix:

Title: Treasurer

Telephone Number: (707) 513-3621
(Format: 123-456-7890)

Fax Number: (000) 000-0000
(Format: 123-456-7890)

Email: riterr@ah.org

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

Date Signed: 09/24/2026

11. CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

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

Applicant's Organization: Adventist Health Clearlake Hospital, Inc.

Name / Title of Authorized Official: Richard Riter, Treasurer

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

Date Signed: 09/24/2026

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES

**Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.
Approved by OMB: 4040-0013 (exp. 06/30/2028)**

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. The requirement related to lobbying as explained in the SF-LLL instructions states: "The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action."

Answer "No" if your organization is NOT engaged in lobbying.

Does the recipient or subrecipient of this CoC grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program? No

Legal Name: Adventist Health Clearlake Hospital, Inc.

Street 1: 15630 18th Ave

Street 2:

City: Clearlake

County: Lake

State: California

Country: United States

Zip / Postal Code: 95422

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete. ☒

Authorized Representative

Prefix: Mr.

First Name: Richard

Middle Name:

Last Name: Riter

Suffix:

Title: Treasurer

Telephone Number: (707) 513-3621
(Format: 123-456-7890)

Fax Number: (000) 000-0000
(Format: 123-456-7890)

Email: riterr@ah.org

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

Date Signed: 09/24/2026

1K. SF-424B

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

OMB Number: 4040-0007
Expiration Date: 07/31/2028

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

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

- | | |
|----|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |

9.	Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327~333), regarding labor standards for federally-assisted construction subagreements.
10.	Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11.	Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12.	Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13.	Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14.	Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15.	Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16.	Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17.	Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18.	Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
19.	Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

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

Authorized Representative for: Adventist Health Clearlake Hospital, Inc.

Prefix: Mr.

First Name: Richard

Middle Name:

Last Name: Riter

Suffix:

Title: Treasurer

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

Date Signed: 09/24/2026

1M. Project Eligibility Certification

1. The project applicant will not engage in racial preferences or other forms of illegal discrimination

X

2. The project applicant will not operate drug injection sites or “safe consumption sites,” knowingly distribute drug paraphernalia on or off of property under their control, permit the use or distribution of illicit drugs on property under their control, or conduct any of these activities under the pretext of “harm reduction.”

X

Information About Submission without Changes

Follow the instructions below making note of the exceptions and limitations to the “Submit Without Changes” process.

In general, HUD expects a project’s proposed project application information will remain the same from year-to-year unless changes are directed by HUD or approved through the grant agreement amendment process. However, HUD expects applicants to carefully review their information to determine if submitting without changes accurately reflects the expiring grant requesting renewal.

The data from previously submitted new and renewal project applications can be imported into a FY 2026 renewal project application. The “Submit without Changes” process is not applicable for first time renewing project applications or for a project application that did not import FY 2025 information and e-snaps will automatically be set to “Make Changes” and all questions on each screen must be updated.

Renewal projects that select “Yes - Individual Application in a Renewal Grant Consolidation” on the Renewal Grant Consolidation or Renewal Grant Expansion Screen may not use the “Submit Without Changes” process and esnaps will automatically be set to “Make Changes”. In addition, esnaps will automatically be set to “Make Changes” if the project applicant indicates on the Renewal Grant Consolidation or Renewal Grant Expansion Screen, this project application is for a “Yes - Stand-Alone Renewal Application in a New Grant Expansion” project application.

The e-snaps screens that remain “open” for required annual updates and do not affect applicants’ ability to select “Submit without Changes” are:

- Recipient Performance Screen
- Consolidation and Expansion
- Screen 3A. Project Detail
- Screen 6A. Funding Request
- Screen 6D. Sources of Match
- Screen 6E. Summary Budget - All of Part 7: Attachments and Certification; and
- All of Part 8: Submission Summary.

All other screens in Part 2 through Part 6 begin in “Read-Only” format and should be reviewed for accuracy; including any updates that were made to the 2024 project during the CoC Post Award Issues and Conditions process or as amended. If all the imported data is accurate and no edits or updates are needed to any screens other than the mandatory screens and questions noted above, project applicants should select “Submit Without Changes” in Part 8. If project applicants imported data and do need to make updates to the information on one or more screens, they must navigate to Part 8: “Submission Without Changes” Screen, select “Make Changes”, and check the box next to each relevant screen title to unlock screens for editing. After project applicants select the screens they intend to edit via checkboxes, click “Save” and those screens will be available for edit. Once a project applicant selects a checkbox and clicks “Save”, the project applicant cannot uncheck the box.

Please refer to the Detailed Instructions and e-snaps navigation guides found on HUD.gov to find more in depth information about applying under the FY 2026 CoC Competition.

Submission Without Changes

1. Are the requested renewal funds reduced from the previous award due to reallocation? Yes
2. Do you wish to submit this application without making changes? Please refer to the guidelines below to inform you of the requirements. Make changes

The applicant has either selected "Yes" to Question #1 , has not brought forward details from a previously awarded renewal project application, or has manually selected "Make Changes" to question #2 and has checked a checkbox. The applicant must therefore make changes to the application information. If this is not a first time renewal and the applicant would like to bring forward information from a previously awarded renewal project application, exit this application, click on the "Projects" link from the left menu, select "Renewal Project Application FY2019" from the "Funding Opportunity Name" dropdown, click on the folder icon to create a renewal project, and select an expiring renewal project from the drop down list next to the "Import Data From" field.

3. Specify which screens require changes by clicking the checkbox next to the name and then clicking the Save button.

Part 2 - Subrecipient Information	
2A. Subrecipients	☒
Part 3 - Project Information	
3A. Project Detail	☒
3B. Description	☒
Part 4 - Housing Services and HMIS	
4A. HMIS Standards	☒
Part 5 - Participants and Outreach Information	
Part 6 - Budget Information	
6A. Funding Request	☒
6D. Match	☒
6E. Summary Budget	☒

Part 7 - Attachment(s) & Certification	
7A. Attachment(s)	☒
7A. In-Kind Match MOU Attachment	☒
7B. Certification	☒

You have selected "Make Changes" to question #2 above. Provide a brief description of the changes that will be made to the project information screens (bullets are appropriate):

***enter budget changes

You have selected "Make Changes." Once this screen is saved, you will be prohibited from "unchecking" any box that has been checked regardless of whether a change to data on the corresponding screen will be made.

Recipient Performance

1. Did you submit your previous year's Annual Performance Report (APR) on time? Not Applicable

1a. If you did not submit your APR on time to the SAGE website, provide an explanation.

Grant end date is 1/31/2027, so APR is not due yet.

2. Do you have any unresolved HUD Monitoring or OIG Audit finding(s) concerning any previous grant term related to this renewal project request? No

3. Do you draw funds quarterly for your current renewal project? No

3a. If no was selected, explain why CoC Program funds are not drawn quarterly.

We are still in the process of receiving eLOCCS logins, and we are working with our HUD representative to obtain access.

4. Have any funds remained available for recapture by HUD for the most recently expired grant term related to this renewal project request? No

Renewal Grant Consolidation or Renewal Grant Expansion

The CoC Competition will continue offering opportunities to expand or consolidate CoC projects.

1. Expansions and Consolidations will no longer be required to submit a combined version of the application.

a. Expansions will be required to ONLY submit a Stand-Alone Renewal and a Stand-Alone New application.

b. Consolidations will be required to ONLY submit a Survivor grant and a terminating grant. Up to 10 grants may be involved in a consolidation (Survivor + 9 Terminating grants)

2. Since no combined version will be submitted for either the Expansion or Consolidation, the combining of data will occur at Post-Award. HUD HQ will combine all units, beds and budgets prior to the Post-Award process. The field office and applicant will then be required to combine remaining project data at C1.9a (recipient step). HUD HQ will provide a data report with the data all combined. All that will be required for applicants to do is a simple copy and paste.

3. Rural Set Aside projects may only consolidate with other Rural Set Aside projects.

We hope this process will simplify and reduce any confusion when submitting expansions or consolidations. If you have any questions, please contact the AAQ.

1. Is this renewal project application requesting to No consolidate or expand?

If "No" click on "Next" or "Save & Next" below to move to the next screen.

2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards:

Organization	Type	Sub-Award Amount
This list contains no items		

3A. Project Detail

1. Expiring Grant Project Identification Number (PIN): CA2368

(e.g., the "Federal Award Identifier" indicated on form 1A. Application Type)

2. CoC Number and Name: CA-529 - Lake County CoC

3. CoC Collaborative Applicant Name: Lake County

4. Project Name: FY26 CoC Competition Bonus Renewal for Coordinated Entry

5. Project Status: Standard

6. Component Type: HMIS

7. Was this project previously awarded as a Unsheltered Homelessness Set Aside or a Rural Set Aside? No

9. Is your organization, or subrecipient, a victim service provider defined in 24 CFR 578.3? No

10. Is this project applying for Rural costs on screen 6A? No

3B. Project Description

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

Adventist Health Clear Lake Hospital, Inc. dba Adventist Health Clear Lake will continue its partnership with the Lake County Continuum of Care to operate and strengthen the Coordinated Entry System (CES), providing an accessible and consistent process for individuals experiencing homelessness to connect with housing, healthcare, behavioral health, and supportive services.

As the lead agency managing the Lake County Community HUB, Adventist Health Clear Lake provides the infrastructure supporting CES and Homeless Management Information System (HMIS) operations. The HUB serves as a centralized platform for referrals, participant tracking, data management, and collaboration among healthcare, behavioral health, housing, social service, and public safety partners.

Throughout the grant period, Adventist Health Clear Lake will fund a Project Manager (1.0 FTE) and Project Coordinator (0.50 FTE) to oversee coordinated entry assessments, prioritization and referrals, HMIS coordination and data quality, partner engagement, participant follow-through, and system performance monitoring.

A key focus of the project is improving access to medical treatment and addressing health-related barriers among individuals experiencing homelessness. Through Adventist Health Clear Lake's healthcare network and community partnerships, participants will be connected to medical care, behavioral health treatment, substance use disorder services, and other resources based on their individual needs.

The project will also strengthen collaboration with law enforcement, probation, and other public safety and justice partners that frequently encounter individuals experiencing homelessness. These partnerships will facilitate referrals into CES and improve connections to healthcare, behavioral health treatment, housing resources, and supportive services for individuals with complex needs or justice-system involvement.

Project goals include expanding access to CES and community resources; improving connections to medical, behavioral health, and substance use treatment; strengthening collaboration with law enforcement, probation, healthcare, housing, and community service partners; maintaining high-quality HMIS and CES data; and supporting participant stability through coordinated, individualized services.

4A. HMIS Standards

1. Is the HMIS currently programmed to collect all Universal Data Elements (UDEs) as set forth in the FY 2026 HMIS Data Standard Notice? Yes
2. Does HMIS produce all HUD-required reports and provide data needed for HUD reporting? (i.e., Annual Performance Report (APR)/CoC reporting, Consolidated Annual Performance and Evaluation Report (CAPER)/ESG reporting, Longitudinal System Analysis (LSA)/Annual Homeless Assessment Report (AHAR), System Performance Measures (SPM), and Data Quality Table, etc.). Yes
3. Is your HMIS capable of generating all reports required by all Federal partners including HUD, VA, and HHS? Yes
4. Does HMIS provide the CoC with an unduplicated count of program participants receiving services in the CoC? Yes
5. Describe your organizations process and stakeholder involvement for updating your HMIS Governance Charters and HMIS Policies and Procedures.

Adventist Health Clear Lake follows all HMIS Governance Charters, Policies and Procedures which are led and updated by Lake County Continuum of Care. The Lake County Continuum of Care publishes these documents on its website, which is accessible to the public. The CoC's policies published include the Coordinated Entry Policies, the Privacy Policy, the Privacy Notice and the FY 2024 HMIS Data Standards Manual, which is published by the U.S. Department of Housing and Urban Development.

At Lake County, the HMIS/CES committee is comprised of five LCCoC members in good standing, who have utilized or utilize HMIS. The Chair is the Adventist Health project manager who is the subject of this proposal; her term is from May 2023 to January 2025. The HMIS Administrator is an employee of the County of Lake. The committee meets every Tuesday and is accessible via Zoom. Per the Lake County Continuum of Care:

"The HMIS committee will (Article III Section 2):

- 1.) Recommend to the LCCoC a single Homeless Management Information System for the geographic area.
- 2.) The HMIS Chair will be responsible for HMIS user agreements.
- 3.) Review, revise and approve a privacy plan, security plan, and data quality plan for HMIS.
- 4.) Ensure consistent participation of recipients and sub-recipients in the HMIS.
- 5.) Ensure the HMIS is administered in compliance with requirements prescribed by HUD."

6. Who is responsible for insuring the HMIS implementation meets all privacy and security standards as required by HUD and other federal partners?

Overall, the HMIS/CES committee described above is responsible for insuring the HMIS implementation meets all privacy and security standards as required by HUD and other federal partners.

**7. Do you update your Privacy Notice annually Yes
and provide a copy to all HMIS users?**

8. What is the CoC's policy and procedures for managing a breach of Personally Identifiable Information (PII) in HMIS?

Lake County CoC's Privacy Policy outlines that organizations that are subject to the Health Insurance Portability and Accountability Act (HIPAA) are not required to comply with the CoC's Privacy Policy. Instead, these organizations should comply with HIPAA rules.

If a breach of Personally Identifiable Information (PII) occurred in HMIS from Adventist Health Clear Lake, then this organization would comply with HIPAA's procedures for data breaches.

However, if the breach occurred from an organization that is not a HIPAA-covered entity, then it would follow the policies set forth by Lake County and the Lake County CoC.

6A. Funding Request

VAWA Budget

The Violence Against Women Act (VAWA) has clarified the use of CoC Program funds for VAWA eligible cost categories. These VAWA cost categories can be added to a new project application to create a CoC VAWA Budget Line Item (BLI) in e-snaps and eLOCCS. The new BLI will be added to grant agreements and utilized the same as other CoC Program BLIs in e-snaps and eLOCCS. Eligible CoC VAWA costs can be identified in one or both of the following CoC VAWA categories. Examples of eligible costs in these cost categories are identified as follows:

- A. VAWA Emergency Transfer Facilitation. Examples of eligible costs include the costs of assessing, coordinating, approving, denying, and implementing a survivor's emergency transfer(s). Additional details of eligible costs include:
- Moving Costs. Assistance with reasonable moving costs to move survivors for an emergency transfer(s).
 - Travel Costs. Assistance with reasonable travel costs for survivors and their families to travel for an emergency transfer(s). This may include travel costs to locations outside of your CoC's geography.
 - Security Deposits. Grant funds can be used to pay for security deposits of the safe unit the survivor is transferring to via an emergency transfer(s).
 - Utilities. Grant funds can be used to pay for costs of establishing utility assistance in the safe unit the survivor is transferring to.
 - Housing Fees. Grant funds can be used to pay fees associated with getting survivors into a safe unit via emergency transfer(s), including but not limited to application fees, broker fees, holding fees, trash fees, pet fees where the person believes they need their pet to be safe, etc.
 - Case Management. Grant funds can be used to pay staff time necessary to assess, coordinate, and implement emergency transfer(s).
 - Housing Navigation. Grant funds can be used to pay staff time necessary to identify safe units and facilitate moves into housing for survivors through emergency transfer(s).
 - Technology to make an available unit safe. Grant funds can be used to pay for technology that the individual believes is needed to make the unit safe, including but not limited to doorbell cameras, security systems, phone, and internet service when necessary to support security systems for the unit, etc.
- B. VAWA Confidentiality Requirements. Examples of eligible costs for ensuring compliance with VAWA confidentiality requirements include:
- Monitoring and evaluating compliance.
 - Developing and implementing strategies for corrective actions and remedies to ensure compliance.
 - Program evaluation of confidentiality policies, practices, and procedures.
 - Training on compliance with VAWA confidentiality requirements.
 - Reporting to CoC Collaborative Applicant, HUD, and other interested parties on compliance with VAWA confidentiality requirements.
 - Costs for establishing methodology to protect survivor information.
 - Staff time associated with maintaining adherence to VAWA confidentiality requirements.

Enter the combined estimated amount(s) you are requesting for this project's Emergency Transfer Facilitation costs and VAWA Confidentiality Requirements costs for one or both of these eligible CoC VAWA cost categories on the summary budget screen. The CoC VAWA BLI Total amount can be expended for any eligible CoC VAWA cost identified above.

1. Will this project use funds from this grant to provide for emergency transfer facilitation, which includes the costs of assessing, coordinating, approving, denying and implementing a survivor's emergency transfer per Section III.B.4.a.(3) (a) of the NOFO? Yes

2. Will this project use funds from this grant to provide for VAWA confidentiality requirements, which includes the costs of ensuring compliance with the VAWA confidentiality requirements per Section III.B.4.a.(3) (b) of the NOFO? Yes

3. Will this project use funds from this grant to provide for short-term emergency lodging, repairs to housing units and staff training per Section III.B.4.b.(3) (a) of the NOFO? No

4. Renewal Grant Term: This field is pre-populated with a one-year grant term and cannot be edited: 1 Year

5. Select the costs for which funding is requested:

HMIS	☒
VAWA	☒
Rural	☐

The VAWA BLI is permanently checked. This allows any project to shift funds up to a 10% shift from another BLI if VAWA emergency transfer costs are needed.

6D. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the  icon. To view or update a Match source already listed, select the  icon.

Summary for Match

Total Amount of Cash Commitments:	\$0
Total Amount of In-Kind Commitments:	\$181,244
Total Amount of All Commitments:	\$181,244

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? **No**

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Type	Source	Contributor	Value of Commitments
In-Kind	Private	Adventist Health ...	\$181,244

Sources of Match Detail

1. Type of Match Commitment: In-Kind

2. Source: Private

3. Name of Source: Adventist Health Clear Lake - CES Operational Support: Cost-match consists of organizational operating expenses attributable to the Coordinated Entry System (CES), including salary, wages, and associated benefits for two employees who manage and support CES operations.
(Be as specific as possible and include the office or grant program as applicable)

4. Amount of Written Commitment: \$181,244

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

6E. Summary Budget

The following information summarizes the funding request for the total term of the project. Budget amounts from the Leased Units, Rental Assistance, and Match screens have been automatically imported and cannot be edited. However, applicants must confirm and correct, if necessary, the total budget amounts for Leased Structures, Supportive Services, Operating, HMIS, and Admin. Budget amounts must reflect the most accurate project information according to the most recent project grant agreement or project grant agreement amendment, the CoC's final HUD-approved FY 2026 GIW or the project budget as reduced due to CoC reallocation. Please note that, new for FY 2026, there are no detailed budget screens for Leased Structures, Supportive Services, Operating, or HMIS costs. HUD expects the original details of past approved budgets for these costs to be the basis for future expenses. However, any reasonable and eligible costs within each CoC cost category can be expended and will be verified during a HUD monitoring.

Eligible Costs (Light gray fields are available for entry of the previous grant agreement, GIW, approved GIW Change Form, or reduced by reallocation)	Applicant CoC Program Costs Requested (1 Year Term)
1a. Leased Units (Screen 6B)	\$0
1b. Leased Structures (Enter)	\$0
2. Rental Assistance (Screen 6C)	\$0
3. Supportive Services (Enter)	\$0
4. Operating (Enter)	\$0
5. HMIS (Enter)	\$25,430
6. VAWA (Enter)	\$1,000
7. Rural (Enter) (Only for HUD CoC Program approved rural areas)	\$0
8. Sub-total of CoC Program Costs Requested	\$26,430
9. Admin (Up to 10% of Sub-total in #8)	\$0
10. HUD funded Sub-total + Admin. Requested	\$26,430
11. Cash Match (From Screen 6D)	\$0
12. In-Kind Match (From Screen 6D)	\$181,244
13. Total Match (From Screen 6D)	\$181,244
14. Total Project Budget for this grant, including Match	\$207,674

Indirect Cost Information

Indirect Cost Information Form
OMB Number: 2501-0044
Expiration Date: 2/28/2027

Program/Activity Receiving Federal Grant Funding: CoC Program

Applicant Name: Adventist Health Clearlake Hospital, Inc.

Indirect Cost Rate Information for the Applicant/Recipient:

Please check the box that applies to the Applicant/Recipient and complete the table only as provided by the instructions accompanying this form.

The Applicant/Recipient will not charge indirect costs using an indirect cost rate.	☐
The Applicant/Recipient will calculate and charge indirect costs under the award by applying a de minimis rate as provided by 2 CFR 200.414(f), as may be amended from time to time.	☒
The Applicant/Recipient will calculate and charge indirect costs under the award using the indirect cost rate(s) in the table below, and each rate in this table is included in an indirect cost rate proposal developed in accordance with the applicable appendix to 2 CFR part 200 and, if required, has been approved by the cognizant agency for indirect costs.	☐

Mark the one (and only one) checkbox that best reflects how the indirect costs of the Applicant/Recipient will be calculated and charged under the award. Do not include indirect cost rate information for subrecipients.

The table following the third checkbox must be completed only if that checkbox is checked. When listing a rate in the table, enter the percentage amount (for example, "15%"), the type of direct cost base to be used (for example, "MTDC"), and the type of rate ("predetermined," "final," "fixed," or "provisional").

If using the Simplified Allocation Method for indirect costs, enter the applicable indirect cost rate and type of direct cost base in the first row of the table.

If using the Multiple Allocation Base Method, enter each major function of the organization for which a rate was developed and will be used under the award, the indirect cost rate applicable to that major function, and the type of direct cost base to which the rate will be applied.

If the Applicant/Recipient is a government and more than one agency or department will carry out activities under the award, enter each agency or department that will carry out activities under the award, the indirect cost rate(s) for that agency or department, and the type of direct cost base to which each rate will be applied.

To learn more about the indirect cost requirements, see 2 CFR part 200, subpart E, and the applicable appendix that is listed under 2 CFR 200.414(e).

Submission Type: Update

Effective Date: 09/22/2026

Certification of Authorized Representative for the Applicant/Recipient:

X

**** Under penalty of perjury, I certify on behalf of the Applicant/Recipient that:**

(1) all information provided on this form is true, complete, and accurate, and

(2) Applicant/Recipient will provide HUD with an update to this form immediately upon learning change in the information provided on this form, and

(3) I am authorized to speak for the Applicant/Recipient regarding all information provided on this

****Warning: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties (18 U.S.C §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. § 3729, 3802; 24 CFR § 28.10(b)(iii)).**

Authorized Representative:

Prefix: Mr.

First Name: Richard

Middle Name:

Last Name: Riter

Suffix:

Title: Treasurer

Telephone Number: (707) 513-3621
(Format: 123-456-7890)

Fax Number: (000) 000-0000
(Format: 123-456-7890)

Email: riterr@ah.org

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

Date Signed: 09/22/2026

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No	Tax Exempt Letter	09/24/2026
2) Other Attachment	No		
3) Other Attachment	No		

Attachment Details

Document Description: Tax Exempt Letter

Attachment Details

Document Description:

Attachment Details

Document Description:

7A. In-Kind Match MOU Attachment

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

Attachment Details

Document Description:

7B. Certification

**Applicant and Recipient Assurances and Certifications - form HUD-424B (Title)
U.S. Department of Housing and Urban Development OMB Approval No.
2501-0044
(expires 02/28/2027)**

As part of your application for HUD funding, you, as the official authorized to sign on behalf of your organization or as an individual must provide the following assurances and certifications. The Responsible Civil Rights Official has specified this form for use for purposes of general compliance with 24 CFR §§ 1.5, 3.115, 8.50, and 146.25, as applicable. The Responsible Civil Rights Official may require specific civil rights assurances to be furnished consistent with those authorities and will specify the form on which such assurances must be made. A failure to furnish or comply with the civil rights assurances contained in this form may result in the procedures to effect compliance at 24 CFR §§ 1.8, 3.115, 8.57, or 146.39. By submitting this form, you are stating that to the best of your knowledge and belief, all assertions are true and correct.

1. Has the legal authority to apply for Federal assistance, has the institutional, managerial and financial capability (including funds to pay the non-Federal share of program costs) to plan, manage and complete the program as described in the application and the governing body has duly authorized the submission of the application, including these assurances and certifications, and authorized me as the official representative of the application to act in connection with the application and to provide any additional information as may be required.

2. Will administer the grant in compliance with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and implementing regulations (24 CFR part 1), which provide that no person in the United States shall, on the grounds of race, color or national origin, be excluded from participation in, be denied the benefits of, or otherwise be subject to discrimination under any program or activity that receives Federal financial assistance OR if the applicant is a Federally recognized Indian tribe or its tribally designated housing entity, is subject to the Indian Civil Rights Act (25 U.S.C. 1301-1303).

3. Will administer the grant in compliance with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and implementing regulations at 24 CFR part 8, the American Disabilities Act (42 U.S.C. §§ 12101 et seq.), and implementing regulations at 28 CFR part 35 or 36, as applicable, and the Age Discrimination Act of 1975 (42 U.S.C. 6101-07) as amended, and implementing regulations at 24 CFR part 146 which together provide that no person in the United States shall, on the grounds of disability or age, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity that receives Federal financial assistance; except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

4. Will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and the implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion sex (including gender identity and sexual orientation), disability, familial status, or national origin and will affirmatively further fair housing; except an applicant which is an Indian tribe or its instrumentality which is excluded by statute from coverage does not make this certification; and further except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

5. Will comply with all applicable Federal nondiscrimination requirements, including those listed at 24 CFR §§ 5.105(a) and 5.106 as applicable.

6. Will comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (42 U.S.C. 4601) and implementing regulations at 49 CFR part 24 and, as applicable, Section 104(d) of the Housing and Community Development Act of 1974 (42 U.S.C. 5304(d)) and implementing regulations at 24 CFR part 42, subpart A.

7. Will comply with the environmental requirements of the National Environmental Policy Act (42 U.S.C. 4321 et seq.) and related Federal authorities prior to the commitment or expenditure of funds for property.

8. That no Federal appropriated funds have been paid, or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress, in connection with the awarding of this Federal grant or its extension, renewal, amendment or modification. If funds other than Federal appropriated funds have or will be paid for influencing or attempting to influence the persons listed above, I shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying. I certify that I shall require all subawards at all tiers (including sub-grants and contracts) to similarly certify and disclose accordingly. Federally recognized Indian Tribes and tribally designated housing entities (TDHEs) established by Federally-recognized Indian tribes as a result of the exercise of the tribe's sovereign power are excluded from coverage by the Byrd Amendment, but State-recognized Indian tribes and TDHs established under State law are not excluded from the statute's coverage.

Name of Authorized Certifying Official: Richard Riter

Date: 09/24/2026

Title: Treasurer

Applicant Organization: Adventist Health Clearlake Hospital, Inc.

PHA Number (For PHA Applicants Only):

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. **WARNING:** Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§287, 1001, 1010, 1012, 1014; 31 U.S.C. §3729, 3802).

X

8B Submission Summary

Page	Last Updated
1A. SF-424 Application Type	09/24/2026
1B. SF-424 Legal Applicant	09/22/2026
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	09/24/2026
1E. SF-424 Compliance	09/22/2026

1F. SF-424 Declaration	09/22/2026
1G. HUD 2880	09/22/2026
1H. HUD-50070	09/23/2026
1I. Cert. Lobbying	09/23/2026
1J. SF-LLL	09/23/2026
1K. SF-424B	09/23/2026
Submission Without Changes	09/24/2026
Recipient Performance	09/24/2026
Renewal Grant Consolidation or Renewal Grant Expansion	09/23/2026
2A. Subrecipients	No Input Required
3A. Project Detail	09/23/2026
3B. Description	09/23/2026
4A. HMIS Standards	09/24/2026
6A. Funding Request	09/24/2026
6D. Match	09/24/2026
6E. Summary Budget	No Input Required
Indirect Cost Information	09/23/2026
7A. Attachment(s)	No Input Required
7A. In-Kind Match MOU Attachment	No Input Required
7B. Certification	09/23/2026

INTERNAL REVENUE SERVICE
DISTRICT DIRECTOR
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **NOV 24 1997**

ADVENTIST HEALTH CLEARLAKE
HOSPITAL INC.
C/O DONALD R. AMMON
2100 DOUGLAS BOULEVARD
ROSEVILLE, CA 95661-9002

Employer Identification Number:
68-0395149

DLN:
957035047

Contact Person:
B. THORNTON

Contact Telephone Number:
(310) 316-9015

Accounting Period Ending:
December 31

Form 990 Required:
yes

Addendum Applies:
yes

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section ~~501(c)~~(3).

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in sections 509(a)(1) and 170(b)(1)(A)(iii).

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, if you are involved in an excess benefit transaction, that transaction might be subject to the excise taxes of section 4958. Additionally, you are not automatically exempt from other federal excise taxes. If you have any questions about excise, employment, or other federal taxes, please contact your key district office.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for federal estate and gift tax purposes if they meet the applicable provisions of Code sections 2055, 2106, and 2522.

Contribution deductions are allowable to donors only to the extent that their contributions are gifts, with no consideration received. Ticket pur-

Letter 947 (DO/CG)

ADVENTIST HEALTH CLEARLAKE

chases and similar payments in conjunction with fundraising events may not necessarily qualify as deductible contributions, depending on the circumstances. See Revenue Ruling 67-246, published in Cumulative Bulletin 1967-2, on page 104, which sets forth guidelines regarding the deductibility, as charitable contributions, of payments made by taxpayers for admission to or other participation in fundraising activities for charity.

In the heading of this letter we have indicated whether you must file Form 990, Return of Organization Exempt From Income Tax. If Yes is indicated, you are required to file Form 990 only if your gross receipts each year are normally more than \$25,000. However, if you receive a Form 990 package in the mail, please file the return even if you do not exceed the gross receipts test. If you are not required to file, simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally \$25,000 or less, and sign the return.

If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. A penalty of \$20 a day is charged when a return is filed late, unless there is reasonable cause for the delay. However, the maximum penalty charged cannot exceed \$10,000 or 5 percent of your gross receipts for the year, whichever is less. For organizations with gross receipts exceeding \$1,000,000 in any year, the penalty is \$100 per day per return, unless there is reasonable cause for the delay. The maximum penalty for an organization with gross receipts exceeding \$1,000,000 shall not exceed \$50,000. This penalty may also be charged if a return is not complete, so be sure your return is complete before you file it.

You are required to make your annual return available for public inspection for three years after the return is due. You are also required to make available a copy of your exemption application, any supporting documents, and this exemption letter. Failure to make these documents available for public inspection may subject you to a penalty of \$20 per day for each day there is a failure to comply (up to a maximum of \$10,000 in the case of an annual return).

You are not required to file federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

In accordance with section 508(a) of the Code, the effective date of this determination letter is August 14, 1996.

ADVENTIST HEALTH CLEARLAKE

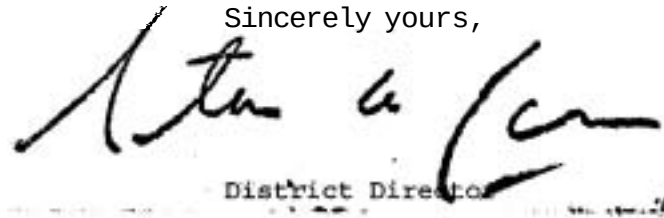
If we have indicated in the heading of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

Because this letter could help resolve any questions about your exempt status and foundation status, you should keep it in your permanent records.

We have sent a copy of this letter to your representative as indicated in your power of attorney.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,



District Director

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ADVENTIST HEALTH CLEARLAKE

This letter supersedes our letter dated June 16, 1997.

Before Starting the Project Application

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

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2026 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Unique Entity Identifier (UEI) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2026 Continuum of Care (CoC) Program Competition. For more information see FY 2026 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2026 CoC Program NOFO and the FY 2026 General Section NOFO.
- Detailed instructions and e-snaps navigation guides can be found on the hud.gov website https://www.hud.gov/program_offices/comm_planning/coc/competition. The Detailed Instructions contain more comprehensive instructions and so should be used in tandem with the navigational guides.
- New projects may only be submitted as either Reallocated, Bonus Projects, Reallocated + Bonus, DV Bonus or DV Reallocation. These funding methods are determined in collaboration with local CoC and it is critical that applicants indicate the correct funding method. Project applicants must communicate with their CoC to make sure that the CoC submissions reflect the same funding method. Please review the NOFO for eligibility standards.
- YHDP projects that are eligible for renewal under the CoC program may only use the YHDP Renewal or YHDP Replacement and Reallocation funding opportunities. Please review the NOFO for eligibility standards.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any new project that fails to adhere to 24 CFR part 578 and application requirements set forth in FY 2026 CoC Program Competition NOFO.

1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application: New Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 09/29/2026

4. Applicant Identifier:

a. Federal Entity Identifier:

5. Federal Award Identifier:

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: County of Lake

b. Employer/Taxpayer Identification Number (EIN/TIN): 94-6000825

c. Unique Entity Identifier: PMJGFQ26A8A8

d. Address

Street 1: 225 North Forbes St

Street 2:

City: Lakepoert

County: Lake

State: California

Country: United States

Zip / Postal Code: 95453

e. Organizational Unit (optional)

Department Name: Behavioral Health Services

Division Name:

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

Prefix:

First Name: Melissa

Middle Name:

Last Name: Kopf

Suffix:

Title: Staff Service Analyst, Senior

Organizational Affiliation: County of Lake

Telephone Number: (707) 274-9101

Extension:

Fax Number: (707) 730-8191

Email: melissa.kopf@lakecountycalifornia.gov

1C. SF-424 Application Details

9. Type of Applicant: B. County Government

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: CPD-2600-DC-0025

Title: Continuum of Care Homeless Assistance
Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): California
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: FY2026 CoC Bonus Project

16. Congressional District(s):

16a. Applicant: CA-004

16b. Project: CA-003, CA-005
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 07/01/2027

b. End Date: 06/30/2028

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? a. Yes

If "YES", enter the date this application was made available to the State for review: 09/22/2026

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

I AGREE: ☒

21. Authorized Representative

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

Telephone Number: (707) 274-9101
(Format: 123-456-7890)

Fax Number: (707) 274-9192
(Format: 123-456-7890)

Email: elise.jones@lakecountycalifornia.gov

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

Date Signed: 09/29/2026

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Number: 2501-0044 Expiration Date: 02/28/2027

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: County of Lake

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

Organizational Affiliation: County of Lake

Telephone Number: (707) 274-9101

Extension:

Email: elise.jones@lakecountycal.gov

City: Lakeport

County: Lake

State: California

Country: United States

Zip/Postal Code: 95453

2. Employer ID Number (EIN): 94-6000825

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received: \$368,824.00

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, City and State) of the project or activity.

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? **Yes**
(For further information, see 24 CFR Sec. 4.3).

2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9. **Yes**

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
Lake County Behavioral Health Services	SSO-CE	\$386,824.00	Continue the Coordinated Entry System.
Lake County Behavioral Health Services	SSO-CE	\$53,680.00	Coordinate Domestic Violence victims through Coordinated Entry.

Note: If additional sources of Government Assistance, please use the "Other Attachments" screen of the project applicant profile.

Part III Interested Parties

Do you need to disclose interested parties for this grant according to the criteria below? No

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional non-disclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I/We, the undersigned, certify under penalty of perjury that the information provided above is true, correct, and accurate. Warning: If you knowingly make a false statement on this form, you may be subject to criminal and/or civil penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

☒

Name / Title of Authorized Official: Elise Jones, Director

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

Date Signed: 09/29/2026

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: County of Lake
Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

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

2. Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application.
Refer to addresses entered into the attached project application.

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

☒

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

Authorized Representative

Prefix: Miss

First Name: Elise

Middle Name

Last Name: Jones

Suffix:

Title: Director

Telephone Number: (707) 274-9101
(Format: 123-456-7890)

Fax Number: (707) 274-9192
(Format: 123-456-7890)

Email: elise.jones@lakecountycal.gov

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

Date Signed: 09/29/2026

11. CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

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

Applicant's Organization: County of Lake

Name / Title of Authorized Official: Elise Jones, Director

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

Date Signed: 09/29/2026

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES Complete this form to disclose
lobbying activities pursuant to 31 U.S.C. 1352
Approved by OMB: 4040-0013 (exp. 06/30/2028)

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. The requirement related to lobbying as explained in the SF-LLL instructions states: "The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action."

Answer "No" if your organization is NOT engaged in lobbying.

Does the recipient or subrecipient of this CoC grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program? No

Legal Name: County of Lake

Street 1: 225 North Forbes St

Street 2:

City: Lakepoert

County: Lake

State: California

Country: United States

Zip / Postal Code: 95453

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete. ☒

Authorized Representative

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

Telephone Number: (707) 274-9101
(Format: 123-456-7890)

Fax Number: (707) 274-9192
(Format: 123-456-7890)

Email: elise.jones@lakecountyca.gov

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

Date Signed: 09/29/2026

IK. SF-424B

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

OMB Number: 4040-0007
Expiration Date: 07/31/2028

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

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

- | | |
|----|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |

9.	Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327~333), regarding labor standards for federally-assisted construction subagreements.
10.	Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11.	Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12.	Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13.	Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14.	Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15.	Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16.	Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17.	Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18.	Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
19.	Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

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

Authorized Representative for: County of Lake

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

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

Date Signed: 09/29/2026

1L. SF-424D

Are you requesting CoC Program funds for No
construction costs in this application?

No SF-424D is required. Select "Save and Next" to move to the next screen.

1M. Project Eligibility Certification

1. The project applicant will not engage in racial preferences or other forms of illegal discrimination ☒

2. The project applicant will not operate drug injection sites or “safe consumption sites,” knowingly distribute drug paraphernalia on or off of property under their control, permit the use or distribution of illicit drugs on property under their control, or conduct any of these activities under the pretext of “harm reduction.” ☒

2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards: \$163,539

Organization	Type	Sub-Award Amount
Adventist Health Clear Lake	M. Nonprofit with 501C3 IRS Status	\$163,539

2A. Project Subrecipients Detail

a. Organization Name: Adventist Health Clear Lake

b. Organization Type: M. Nonprofit with 501C3 IRS Status
If "Other" specify:

c. Employer or Tax Identification Number: 68-0395149

d. Unique Entity Identifier: QELWY94UYFM5

e. Physical Address

Street 1: 15630 18Th Ave

Street 2:

City: Clearlake

State: California

Zip Code: 95422

f. Congressional District(s): CA-004
(for multiple selections hold CTRL key)

g. Is the subrecipient a Faith-Based Organization? Yes

h. Has the subrecipient ever received a federal grant, either directly from a federal agency or through a State/local agency? No

i. Expected Sub-Award Amount: \$163,539

j. Contact Person

Prefix: Miss

First Name: Melissa

Middle Name:

Last Name: Buchholz

Suffix:

Title: Manager, Market Grants / Grants Management

E-mail Address: buchhomc@ah.org

Confirm E-mail Address: buchhomc@ah.org

Phone Number: 707-335-5752

Extension:

Fax Number:

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

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

Lake County Behavioral Health Services has extensive experience administering federal funding and implementing behavioral health, substance use disorder, housing, outreach, care coordination, and supportive service programs. The Department manages federal funding received through programs such as the Substance Use Prevention, Treatment, and Recovery Services Block Grant, Medicaid/Medi-Cal federal financial participation, and other federal or federally supported initiatives. This experience includes developing program budgets, procuring and managing contracted services, reviewing and approving expenditures, monitoring service delivery, completing required fiscal and programmatic reports, and ensuring that costs are allowable, reasonable, allocable, and supported by appropriate documentation.

Lake County Behavioral Health Services has experience overseeing community-based providers and other subrecipients that perform services on the County's behalf. Subrecipient and contractor oversight includes establishing written scopes of work, performance expectations, reporting requirements, invoicing standards, and compliance provisions; reviewing invoices and supporting documentation; monitoring expenditures against approved budgets and contract maximums; and coordinating with program, fiscal, quality assurance, compliance, and contracting staff to address performance or compliance concerns. This administrative and operational experience positions the County to effectively implement the activities proposed in this application and meet applicable federal requirements.

If awarded, a portion of this funding will be allocated to a subrecipient, Adventist Health Clear Lake. Adventist Health Clearlake Hospital, Inc. dba Adventist Health Clear Lake, is one of several hospitals within the nonprofit Adventist Health system located in the City of Clearlake, an HRSA-designated rural city. It is a 25-bed acute-care hospital with emergency, laboratory, medical imaging services, and a Birth Center.

Adventist Health Clear Lake has been the recipient of grant awards ranging from \$20,000 to over \$11 million, the majority of which are federal awards or pass-throughs. Adventist Health has a dedicated grants management department that oversees all grant awards to ensure compliance with all federal and/or grantor requirements and deadlines. This department collaborates with the corporate accounting team, which has staff dedicated to grants who also ensure grant monies are allocated and managed according to grant restrictions, internal policies, and GAAP principles. The two teams receive uniform guidance training and annually update Adventist Health policies and procedures accordingly.

For years, Adventist Health Clear Lake has co-led Coordinated Entry with the County of Lake. The proposed project is a natural expansion of that work.

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

Lake County Behavioral Health Services routinely coordinates multiple funding sources to support comprehensive behavioral health and community-based services. The Department leverages federal Medicaid funding, federal block grants, State General Fund allocations, Behavioral Health Services Act funding, realignment revenues, and other state and federal grant funds to sustain programs and maximize available services. Funding is assigned based on program eligibility, allowable-use requirements, service type, population served, and the availability of reimbursement from other sources.

The Department works closely with County departments, healthcare providers, community-based organizations, tribal and regional partners, schools, housing providers, and other local stakeholders to coordinate resources and avoid unnecessary duplication of services. When appropriate and allowable, grant funds are used to supplement—not supplant—existing resources, address identified service gaps, support infrastructure or one-time implementation needs, and expand the reach or quality of existing programs. This braided funding approach allows the County to make efficient use of limited resources while maintaining appropriate accounting, reporting, and documentation for each funding source.

Adventist Health Clear Lake adheres to a review process for every grant submission. Approvals for grant submissions include key leadership, including but not limited to hospital and corporate executives. This process ensures that projects are pursued for their alignment to the organization's and the system's strategic priorities. This alignment is key in leveraging Federal, State, local and private sector funds.

The proposed project, for example, is part of a larger community health initiative supported by a variety of funding sources, including Federal, State, and local. The team at Adventist Health Clear Lake parses the different parts of this initiative into separate projects and seeks funders in that manner to ensure there is no overlap in funding or scope. Each successful project, in turn, allows the initiative to further develop, so the team can scaffold additional growth.

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

Lake County Behavioral Health Services maintains a structured financial management system that operates within the broader fiscal policies and internal controls of the County of Lake. The Department's fiscal team is responsible for budget development and monitoring, grant accounting, contract and purchase-order tracking, invoice review, accounts payable coordination, revenue and receivable monitoring, financial reporting, reconciliations, and oversight of federal, state, and local funding sources. Fiscal responsibilities are separated among staff to support appropriate review, approval, and segregation of duties.

Department fiscal staff coordinate with program managers to confirm that expenditures are consistent with approved program activities, grant budgets, contracts, and funding requirements. Financial activity is recorded in the County's accounting system and supported through grant-specific tracking tools, contract spend-down schedules, invoice documentation, service and claiming records, and regular budget-to-actual reviews. Transactions are also subject to review by applicable County functions, including the Auditor-Controller, Purchasing, County Counsel, and the Board of Supervisors, as required. The Department's financial management practices are designed to provide accurate reporting, safeguard public funds, identify variances or compliance concerns, and maintain documentation necessary for monitoring, audits, and grant closeout.

Adventist Health Clear Lake's leadership is involved in the review process for every grant submission. Upon award, the corporate grants accounting team creates a restricted cost center unique to each grant. This cost center houses all financial transactions from the deposits of grant payments to the release of funds. The Grants team also works directly with project team members to ensure any restrictions around allowable costs or procurement are followed. The corporate grants accounting team reviews the fund transfer requests and releases funds as appropriate. They ensure GAAP principles, federal requirements, and internal policies are followed. The Grants team and the corporate grants accounting team review the restricted grant cost centers and complete all the reconciliations possible. The network Treasurer and local finance directors receive updates on grants management on at least a quarterly basis. This occurs until close-out.

4. Are there any unresolved HUD monitoring or No
OIG audit findings for any HUD grants (including
ESG) under your organization?

3A. Project Detail

1. CoC Number and Name: CA-529 - Lake County CoC

2. CoC Collaborative Applicant Name: Lake County

3. Project Name: FY2026 CoC Bonus Project

4. Project Status: Standard

5. Component Type: SSO

5a. Select the type of SSO Project: Coordinated Entry

6. What type of CoC funding is this project applying for in this CoC Program Competition? Bonus + Reallocation

A Transition project can only be funded by Reallocation and DV Reallocation.

7. Is your organization or expected subrecipient a victim service provider defined in 24 CFR 578.3 and uses a comparable HMIS database? No

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

8a. List all expiring project(s) involved in the transition:

Grant PIN	Operating Start Date	Expiration Date	Component Type
CA2368	02/01/2026	01/01/2027	HMIS

Update: IMPORTANT: For all expiring projects listed above, be sure to attach a copy of the most recently approved e-snaps project application(s) on Screen 7A (e.g., if the project was funded in the FY 2025 CoC Program Competition, a copy of the FY 2025 CoC Program Competition project application).

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

Lake County Behavioral Health Services is the Lake County CoC's Lead HMIS agency. During the first year of operation, the project will transition core responsibilities from HMIS reporting on CES from our Coordinated Entry Operator, Adventist Health Clear Lake, to incorporate functions of Coordinated Entry System (CES) service delivery. This transition will focus on restructuring workflows to support CES access, assessment, referral, and prioritization duties while maintaining continuity of required HMIS data inputs.

A key component of this shift will be the reprioritization of vulnerability assessments to better align with HUD's emphasis on ensuring that individuals with significant treatment and recovery needs are efficiently identified and connected to appropriate services. Assessment tools and scoring criteria will be adjusted to elevate indicators related to behavioral health, substance use treatment needs, and recovery support requirements, ensuring that referrals through CES more accurately reflect HUD's priority populations.

During this first-year transition, the work will include updating policies and procedures, training CES partners on revised assessment criteria, refining referral pathways to treatment and recovery programs, and integrating HMIS data elements needed to support CES operations. These efforts will ensure a coordinated, compliant, and equitable approach to prioritizing households with acute vulnerabilities and aligning CES resources with HUD's system wide expectations.

9. Will funds requested in this new project application replace state or local government funds (24 CFR 578.87(a))? Yes

11. Is this project applying for Rural costs on screen 6A? No

3B. Project Description

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

Scope- The proposed project supports the operation and administration of the Lake County Continuum of Care (LCCoC) Coordinated Entry (CE) System, ensuring compliance with FY2026 CoC Program and HUD requirements. Funding supports qualified personnel, HMIS infrastructure, consultant services, technical assistance, and HMIS licenses. Key staff include a 0.9 FTE HMIS Lead, 0.75 FTE CE Program Manager, and 0.88 FTE CE Coordinator who oversee system administration, compliance, data quality, reporting, referrals, training, and coordination among the CoC's seven (7) CE Access Points, ensuring an efficient and compliant countywide homeless response system.

Target Population- CE serves individuals and families experiencing homelessness throughout Lake County, prioritizing households with the greatest documented needs in accordance with HUD requirements and project eligibility. Priority populations include older adults, veterans, families with children, youth, survivors of domestic violence, individuals with developmental, intellectual, chronic, or disabling health conditions, and people experiencing chronic homelessness.

Services- CE provides standardized assessment, prioritization, referral, and connection to permanent housing and supportive services. Through coordinated referrals, households access behavioral health, substance use disorder treatment, healthcare, recovery supports, employment services, and other community resources that promote housing stability and self-sufficiency. The project also supports HMIS administration, user training, technical support, data quality monitoring, federal reporting, software updates, system configuration, and implementation of HUD HMIS Data Standards.

Outcomes- The project strengthens coordination, improves data quality and accountability, enhances provider collaboration, supports timely housing referrals, and maintains HUD compliance. Based on historical CE outcomes, approximately 20–30% of participants are expected to increase self-sufficiency through engagement in treatment, improved housing stability, and employment-related supports. Overall, the project helps individuals and families obtain permanent housing and achieve long-term stability.

Coordination- Consistent with FY2026 CoC priorities, CE partners with behavioral health providers, substance use treatment programs, healthcare organizations, faith-based organizations, law enforcement, Victim Service Providers, outreach teams, shelters, housing providers, and other community partners. CE leadership coordinates participating agencies and the seven (7) CE Access Points, while the HMIS Lead ensures data quality, reporting compliance, system security, and technical support.

Need- A successful CE System requires qualified staff, reliable HMIS infrastructure, technical assistance, and strong community partnerships. Continued investment is essential to maintain HUD compliance, support participating agencies, improve data quality and system performance, and ensure people experiencing homelessness are efficiently connected to housing, treatment, recovery, and supportive services throughout Lake County.

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

Project Milestones	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement
	A	B	C	D
Begin hiring staff or expending funds	30			
Begin program participant enrollment		15		
Program participants occupy leased or rental assistance units or structure(s), or supportive services begin				
Leased or rental assistance units or structure, and supportive services near 100% capacity				
Closing on purchase of land, structure(s), or execution of structure lease				
Start rehabilitation				
Complete rehabilitation				
Start new construction				
Complete new construction				

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

(Select ALL that apply)

N/A - Project Serves All Subpopulations	☐	Survivors	☐
Veterans	☐	Substance Abuse	☒
Youth (under 25)	☒	Mental Illness	☒
Families	☒	HIV/AIDS	☐
		Chronic Homeless	☒
		Other (Click 'Save' to update)	☐

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

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

4b. Will the coordinated entry process be easily available and reachable by individuals and families seeking assistance? Yes

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

The Lake County Continuum of Care (LCCoC) uses a comprehensive and proactive advertisement strategy to ensure its Coordinated Entry (CE) system, delivered through the Pathways HUB program, reaches people across the country, especially those with the highest barriers to assistance. Because Lake County is rural with limited transportation and significant needs among families, unaccompanied youth, chronically homeless individuals, and people experiencing mental illness or substance use disorders, CE outreach is intentionally broad and designed to meet people where they are.

To ensure full geographic coverage, CE information is distributed across Lucerne, Clearlake, Lakeport, Middletown, Upper Lake, and remote areas where people may be living in vehicles, encampments, RVs, or doubled up. Materials use clear, simple language and are placed both in traditional service locations and non traditional community spaces to ensure access for high barrier populations.

The LCCoC has seven (7) dedicated access points including outreach channels so individuals can connect with CE in ways that are realistic. Information is available at seven CE access points, Behavioral Health Services sites, school district offices, community colleges, social service agencies, and food distribution centers. Street outreach teams visit remote and high need areas to share CE information directly with people unlikely to seek services on their own. Flyers and posters are placed at shelters, clinics, libraries, churches, food banks, public transit hubs, and social service lobbies. CE updates are shared regularly at CoC meetings, provider coalitions, and community gatherings to support consistent referrals. Access points are located near bus routes and ADA accessible buildings, and the HUB phone number provides an alternative for those with transportation or mobility barriers.

Specialized access points support families with young children, unaccompanied youth up to age 24, and individuals with high service needs. Family resource centers, early childhood programs, McKinney Vento liaisons, and Head Start partners help connect families. Youth are engaged through youth friendly providers such as Adventist Health Clear Lake, Harbor on Main Youth Center, and Woodland Community College, using trauma informed and privacy focused practices. Chronically homeless individuals are prioritized through outreach teams and behavioral health partners who link them to intensive services and housing.

The LCCoC practices affirmative marketing, actively promoting CE through outreach workers, mainstream providers, schools, hospitals, law enforcement, local social media, radio, community fairs, and partner newsletters. Messaging emphasizes that CE is low barrier and designed to connect people to assistance quickly.

All CE advertising clarifies that emergency services—including shelter, warming and cooling centers, crisis intervention, and safety referrals—are available at any time, even outside formal intake hours.

Overall, LCCoC's CE advertising strategy is multi-channel, inclusive, and proactive, ensuring individuals and families with the greatest barriers can easily connect to support.

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

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

Assessment and Referrals- Lake County CoC (LCCoC) has a standardized assessment created by CoC and Coordinated Entry (CE) staff and community providers to identify and address the most vulnerable homeless individuals and families in Lake County. The standardized assessment and referral process is a consistent, coordinated method used to evaluate a household's housing needs and connect them with the most appropriate housing and support services. The process typically begins with an intake interview at one of LCCoC's seven (7) access points located throughout the county. Using the standardized assessment tool, providers gather information about housing history, income, health, safety concerns, and other factors affecting stability.

LCCoC's CE Operator prioritizes households based on need and vulnerability using the scoring process and prioritization scheme established by the CoC, and maintains a Bynames List. Households identified as the most vulnerable are prioritized for available housing and services. This includes prioritization for households with seniors, disabilities, individuals who are developmentally disabled, and households experiencing domestic violence, as these groups often face heightened challenges in securing safe and stable housing.

All programs and provider agencies are required to use the CE system to link households to housing and supportive services that promote self sufficiency. Based on assessment results, households are referred to programs that best meet their needs, such as emergency shelter, rapid rehousing, permanent housing, homelessness prevention, mental health treatment, substance use treatment, and mainstream community resources that support long-term stability. CE staff and partner agencies also provide referrals to services that promote self-sufficiency, including employment resources, benefits assistance, life-skills support, and ongoing case management.

The CE system ensures that households are connected to behavioral health services when needed, including mental health counseling, crisis intervention, and treatment for substance use. These referrals help address underlying issues that may contribute to homelessness and support long-term housing retention. Survivors of domestic violence are connected to confidential, trauma-informed services and safe housing resources that protect their wellbeing.

Overall, the coordinated assessment and referral process ensures fair and consistent access to housing and supportive services, reduces duplication of efforts among providers, and helps individuals and families receive timely, appropriate assistance through a unified, organized system of care.

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

Yes

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

6A. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 15, 2027? Yes

4. Select a grant term: 1 Year

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

Supportive Services	☒
HMIS	☒
VAWA	☒

The VAWA BLI is permanently checked. This allows any project to shift funds up to a 10% shift from another BLI if VAWA emergency transfer costs are needed.

6. If conditionally awarded, is this project requesting an initial grant term greater than 12 months? No
(13 to 18 months)

6F. Supportive Services Budget

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

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs	.10 FTE Program Coordinator	\$5,668
2. Assistance with Moving Costs		
3. Case Management		
4. Child Care		
5. Education Services		
6. Employment Assistance		
7. Food		
8. Housing/Counseling Services		
9. Legal Services		
10. Life Skills		
11. Mental Health Services		
12. Outpatient Health Services		
13. Outreach Services		
14. Substance Abuse Treatment Services		
15. Transportation		
16. Utility Deposits		
17. Operating Costs		
Total Annual Assistance Requested		\$5,668
Grant Term		1 Year
Total Request for Grant Term		\$5,668

Click the 'Save' button to automatically calculate totals.

6H. HMIS Budget

Instructions:

Enter the quantity and total budget request for each HMIS cost. The request entered should be equivalent to the cost of one year of the relevant HMIS activity. The system populates a list of eligible costs associated with the implementation of an HMIS and for which CoC funds can be requested.

Quantity Detail: This is a required field. A quantity AND description must be entered for each requested cost. Enter the quantity in detail (eg. .75 FTE hours and benefits for staff, utility types, monthly allowance for food and supplies) for each HMIS cost for which funding is being requested. Please note that simply stating "1FTE" is NOT providing "Quantity AND Detail" and restricts understanding of what is being requested. Failure to enter adequate "Quantity AND Detail" may result in conditions being placed on the award and a delay of grant funding.

Annual Assistance Requested: This is a required field. For each grant year, enter the amount funds requested for each activity.

Total Annual Assistance Requested: This field is automatically calculated based on the sum of the annual assistance requests entered for each activity.

Grant term: This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

Total Request for Grant Term: This field is automatically calculated based on the total amount requested for each eligible cost multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange:
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

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

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Equipment		
2. Software	Bonterra Social Solutions HMIS subscription 1 @ \$33,494.14	\$33,494
3. Services	Tredwell HMIS Consulting FY27/28 @\$25,000.	\$25,000
4. Personnel	CoC Analyst @.367 FTE, CES Program Manager @.451 FTE, CES Program Specialist @.182 FTE	\$270,648
5. Space & Operations		
Total Annual Assistance Requested:		\$329,142
Grant Term:		1 Year
Total Request for Grant Term:		\$329,142

Click the 'Save' button to automatically calculate totals.

VAWA Budget

VAWA Budget

The Violence Against Women Act (VAWA) has clarified the use of CoC Program funds for VAWA eligible cost categories. These VAWA cost categories can be added to a new project application to create a CoC VAWA Budget Line Item (BLI) in e-snaps and eLOCCS. The new BLI will be added to grant agreements and utilized the same as other CoC Program BLIs in e-snaps and eLOCCS. Eligible CoC VAWA costs can be identified in one or both of the following CoC VAWA categories. Examples of eligible costs in these cost categories are identified as follows:

A. VAWA Emergency Transfer Facilitation. Examples of eligible costs include the costs of assessing, coordinating, approving, denying, and implementing a survivor's emergency transfer(s). Additional details of eligible costs include:

- Moving Costs. Assistance with reasonable moving costs to move survivors for an emergency transfer(s).
- Travel Costs. Assistance with reasonable travel costs for survivors and their families to travel for an emergency transfer(s). This may include travel costs to locations outside of your CoC's geography.
- Security Deposits. Grant funds can be used to pay for security deposits of the safe unit the survivor is transferring to via an emergency transfer(s).
- Utilities. Grant funds can be used to pay for costs of establishing utility assistance in the safe unit the survivor is transferring to.
- Housing Fees. Grant funds can be used to pay fees associated with getting survivors into a safe unit via emergency transfer(s), including but not limited to application fees, broker fees, holding fees, trash fees, pet fees where the person believes they need their pet to be safe, etc.
- Case Management. Grant funds can be used to pay staff time necessary to assess, coordinate, and implement emergency transfer(s).
- Housing Navigation. Grant funds can be used to pay staff time necessary to identify safe units and facilitate moves into housing for survivors through emergency transfer(s).
- Technology to make an available unit safe. Grant funds can be used to pay for technology that the individual believes is needed to make the unit safe, including but not limited to doorbell cameras, security systems, phone, and internet service when necessary to support security systems for the unit, etc.

B. VAWA Confidentiality Requirements. Examples of eligible costs for ensuring compliance with VAWA confidentiality requirements include:

- Monitoring and evaluating compliance.
- Developing and implementing strategies for corrective actions and remedies to ensure compliance.
- Program evaluation of confidentiality policies, practices, and procedures.
- Training on compliance with VAWA confidentiality requirements.
- Reporting to CoC Collaborative Applicant, HUD, and other interested parties on compliance with VAWA confidentiality requirements.
- Costs for establishing methodology to protect survivor information.
- Staff time associated with maintaining adherence to VAWA confidentiality requirements.

Enter the estimated amount(s) you are requesting for this project's Emergency Transfer Facilitation costs and VAWA Confidentiality Requirements costs for one or both of these eligible CoC VAWA cost categories. The CoC VAWA BLI Total amount can be expended for any eligible CoC VAWA cost identified above.

Eligible Costs	Annual Assistance Requested
Estimated budget amount for VAWA Emergency Transfer Facilitation:	
Estimated budget amount for VAWA Confidentiality Requirements:	\$1,000

Applicant: Lake County Behavioral Health Services

71554760

Project: FY2026 CoC Bonus Project

231099

CoC VAWA BLI Total:	\$1,000
Grant Term	1 Year
Total Request for Grant Term	\$1,000

Click the 'Save' button to automatically calculate totals.

6I. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the  icon. To view or update a Match source already listed, select the  icon.

Summary for Match

Total Amount of Cash Commitments:	\$0
Total Amount of In-Kind Commitments:	\$96,956
Total Amount of All Commitments:	\$96,956

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Type	Source	Name of Source	Amount of Commitments
In-Kind	Government	Lake County Behav...	\$96,956

Sources of Match Detail

1. Type of Match commitment: In-Kind

2. Source: Government

3. Name of Source: Lake County Behavioral Health Service will
(Be as specific as possible and include the office provide Cash Match from the Housing Homeless
or grant program as applicable) Incentive and Homeless Housing Assistance
Programs

4. Amount of Written Commitment: \$96,956

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

6J. Summary Budget

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

Eligible Costs (Light gray fields are available for entry of the previous grant agreement, GIW, approved GIW Change Form, or reduced by reallocation)	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Applicant CoC Program Costs Requested
1a. Acquisition (Screen 6B)			\$0
1b. Rehabilitation (Screen 6B)			\$0
1c. New Construction (Screen 6B)			\$0
2a. Leased Units (Screen 6C)	\$0	1 Year	\$0
2b. Leased Structures (Screen 6D)	\$0	1 Year	\$0
3. Rental Assistance (Screen 6E)	\$0	1 Year	\$0
4. Supportive Services (Screen 6F)	\$5,668	1 Year	\$5,668
5. Operating (Screen 6G)	\$0	1 Year	\$0
6. HMIS (Screen 6H)	\$329,142	1 Year	\$329,142
7. VAWA	\$1,000	1 Year	\$1,000
8. Rural (Only for HUD CoC Program approved rural areas)	\$0	1 Year	\$0
9. Sub-total of CoC Program Costs Requested			\$335,810
10. Admin (Up to 10% of Sub-total in #9)			\$33,014
11. HUD funded Sub-total + Admin. Requested			\$368,824
12. Cash Match (From Screen 6I)			\$0
13. In-Kind Match (From Screen 6I)			\$96,956
14. Total Match (From Screen 6I)			\$96,956
15. Total Project Budget for this grant, including Match			\$465,780

Click the 'Save' button to automatically calculate totals.

Indirect Cost Information

Indirect Cost Information Form
OMB Number: 2501-0044
Expiration Date: 2/28/2027

Program/Activity Receiving Federal Grant Funding: CoC Program

Applicant Name: County of Lake

Indirect Cost Rate Information for the Applicant/Recipient:

Please check the box that applies to the Applicant/Recipient and complete the table only as provided by the instructions accompanying this form.

The Applicant/Recipient will not charge indirect costs using an indirect cost rate.	☒
The Applicant/Recipient will calculate and charge indirect costs under the award by applying a de minimis rate as provided by 2 CFR 200.414(f), as may be amended from time to time.	☐
The Applicant/Recipient will calculate and charge indirect costs under the award using the indirect cost rate(s) in the table below, and each rate in this table is included in an indirect cost rate proposal developed in accordance with the applicable appendix to 2 CFR part 200 and, if required, has been approved by the cognizant agency for indirect costs.	☐

Submission Type: Update

Effective Date: 07/27/2026

Certification of Authorized Representative for the Applicant/Recipient:

X

**** Under penalty of perjury, I certify on behalf of the Applicant/Recipient that:**

(1) all information provided on this form is true, complete, and accurate, and

(2) Applicant/Recipient will provide HUD with an update to this form immediately upon learning change in the information provided on this form, and

(3) I am authorized to speak for the Applicant/Recipient regarding all information provided on this

****Warning: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties (18 U.S.C §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. § 3729, 3802; 24 CFR § 28.10(b)(iii)).**

Authorized Representative:

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

Telephone Number: (707) 274-9101
(Format: 123-456-7890)

Fax Number: (707) 274-9192
(Format: 123-456-7890)

Email: elise.jones@lakecountycalifornia.gov

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

Date Signed: 07/27/2026

7A. Attachment(s)

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

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

7A. In-Kind MOU Attachment

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

Attachment Details

Document Description:

7D. Certification

**Applicant and Recipient Assurances and Certifications - form HUD-424B (Title)
U.S. Department of Housing and Urban Development OMB Approval No.
2501-0017
(expires 01/31/2026)**

As part of your application for HUD funding, you, as the official authorized to sign on behalf of your organization or as an individual must provide the following assurances and certifications. The Responsible Civil Rights Official has specified this form for use for purposes of general compliance with 24 CFR §§ 1.5, 3.115, 8.50, and 146.25, as applicable. The Responsible Civil Rights Official may require specific civil rights assurances to be furnished consistent with those authorities and will specify the form on which such assurances must be made. A failure to furnish or comply with the civil rights assurances contained in this form may result in the procedures to effect compliance at 24 CFR §§ 1.8, 3.115, 8.57, or 146.39. By submitting this form, you are stating that to the best of your knowledge and belief, all assertions are true and correct.

1. Has the legal authority to apply for Federal assistance, has the institutional, managerial and financial capability (including funds to pay the non-Federal share of program costs) to plan, manage and complete the program as described in the application and the governing body has duly authorized the submission of the application, including these assurances and certifications, and authorized me as the official representative of the application to act in connection with the application and to provide any additional information as may be required.

2. Will administer the grant in compliance with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and implementing regulations (24 CFR part 1), which provide that no person in the United States shall, on the grounds of race, color or national origin, be excluded from participation in, be denied the benefits of, or otherwise be subject to discrimination under any program or activity that receives Federal financial assistance OR if the applicant is a Federally recognized Indian tribe or its tribally designated housing entity, is subject to the Indian Civil Rights Act (25 U.S.C. 1301-1303).

3. Will administer the grant in compliance with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and implementing regulations at 24 CFR part 8, the American Disabilities Act (42 U.S.C. §§ 12101 et seq.), and implementing regulations at 28 CFR part 35 or 36, as applicable, and the Age Discrimination Act of 1975 (42 U.S.C. 6101-07) as amended, and implementing regulations at 24 CFR part 146 which together provide that no person in the United States shall, on the grounds of disability or age, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity that receives Federal financial assistance; except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

4. Will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and the implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion sex (including gender identity and sexual orientation), disability, familial status, or national origin and will affirmatively further fair housing; except an applicant which is an Indian tribe or its instrumentality which is excluded by statute from coverage does not make this certification; and further except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

5. Will comply with all applicable Federal nondiscrimination requirements, including those listed at 24 CFR §§ 5.105(a) and 5.106 as applicable.

6. Will comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (42 U.S.C. 4601) and implementing regulations at 49 CFR part 24 and, as applicable, Section 104(d) of the Housing and Community Development Act of 1974 (42 U.S.C. 5304(d)) and implementing regulations at 24 CFR part 42, subpart A.

7. Will comply with the environmental requirements of the National Environmental Policy Act (42 U.S.C. 4321 et seq.) and related Federal authorities prior to the commitment or expenditure of funds for property.

8. That no Federal appropriated funds have been paid, or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress, in connection with the awarding of this Federal grant or its extension, renewal, amendment or modification. If funds other than Federal appropriated funds have or will be paid for influencing or attempting to influence the persons listed above, I shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying. I certify that I shall require all subawards at all tiers (including sub-grants and contracts) to similarly certify and disclose accordingly. Federally recognized Indian Tribes and tribally designated housing entities (TDHEs) established by Federally-recognized Indian tribes as a result of the exercise of the tribe's sovereign power are excluded from coverage by the Byrd Amendment, but State-recognized Indian tribes and TDHs established under State law are not excluded from the statute's coverage.

Name of Authorized Certifying Official: Elise Jones

Date: 09/29/2026

Title: Director

Applicant Organization: County of Lake

PHA Number (For PHA Applicants Only):

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. **WARNING:** Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§287, 1001, 1010, 1012, 1014; 31 U.S.C. §3729, 3802).

X

8B. Submission Summary

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

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

Page		Last Updated
1A. SF-424 Application Type		No Input Required
New Project Application FY2026	Page 55	09/29/2026

1B. SF-424 Legal Applicant	09/28/2026
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	09/28/2026
1E. SF-424 Compliance	09/28/2026
1F. SF-424 Declaration	09/28/2026
1G. HUD 2880	09/28/2026
1H. HUD 50070	09/28/2026
1I. Cert. Lobbying	09/28/2026
1J. SF-LLL	09/28/2026
IK. SF-424B	09/28/2026
1L. SF-424D	09/28/2026
2A. Subrecipients	09/28/2026
2B. Experience	09/28/2026
3A. Project Detail	09/29/2026
3B. Description	09/29/2026
6A. Funding Request	09/28/2026
6F. Supp Srvcs Budget	09/29/2026
6H. HMIS Budget	09/29/2026
VAWA Budget	No Input Required
6I. Match	09/28/2026
6J. Summary Budget	No Input Required
Indirect Cost Information	09/28/2026
7A. Attachment(s)	No Input Required
7A. In-Kind MOU Attachment	No Input Required
7D. Certification	09/28/2026

Before Starting the Project Application

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

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2026 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Unique Entity Identifier (UEI) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2026 Continuum of Care (CoC) Program Competition. For more information see FY 2026 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2026 CoC Program NOFO and the FY 2026 General Section NOFO.
- Detailed instructions and e-snaps navigation guides can be found on the hud.gov website https://www.hud.gov/program_offices/comm_planning/coc/competition. The Detailed Instructions contain more comprehensive instructions and so should be used in tandem with the navigational guides.
- New projects may only be submitted as either Reallocated, Bonus Projects, Reallocated + Bonus, DV Bonus or DV Reallocation. These funding methods are determined in collaboration with local CoC and it is critical that applicants indicate the correct funding method. Project applicants must communicate with their CoC to make sure that the CoC submissions reflect the same funding method. Please review the NOFO for eligibility standards.
- YHDP projects that are eligible for renewal under the CoC program may only use the YHDP Renewal or YHDP Replacement and Reallocation funding opportunities. Please review the NOFO for eligibility standards.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any new project that fails to adhere to 24 CFR part 578 and application requirements set forth in FY 2026 CoC Program Competition NOFO.

1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application: New Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 09/28/2026

4. Applicant Identifier:

a. Federal Entity Identifier:

5. Federal Award Identifier:

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: Hope in Humanity Inc.

b. Employer/Taxpayer Identification Number (EIN/TIN): 93-3197458

c. Unique Entity Identifier: PFUHXF48Q4Q3

d. Address

Street 1: 13505 Arrowhead Rd.

Street 2:

City: Clearlake

County: Lake

State: California

Country: United States

Zip / Postal Code: 95422

e. Organizational Unit (optional)

Department Name:

Division Name:

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

Prefix: Ms.

First Name: Brendi

Middle Name: Linda

Last Name: Velasquez

Suffix:

Title: Program Coordinator

Organizational Affiliation: Hope in Humanity Inc.

Telephone Number: (925) 812-3326

Extension:

Applicant: Hope In Humanity Inc.

76651114

Project: Hope Home-2026

239810

Fax Number:

Email: bvelasquez@berkeley.edu

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: CPD-2600-DC-0025

Title: Continuum of Care Homeless Assistance
Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): California
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: Hope Home-2026

16. Congressional District(s):

16a. Applicant: CA-004

16b. Project: CA-004
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 07/01/2027

b. End Date: 06/30/2028

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? a. Yes

If "YES", enter the date this application was made available to the State for review: 09/22/2026

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

I AGREE: ☒

21. Authorized Representative

Prefix: Mr.

First Name: Eli

Middle Name: Kenneth

Last Name: Andrews

Suffix:

Title: President

Telephone Number: (707) 295-0866
(Format: 123-456-7890)

Fax Number:
(Format: 123-456-7890)

Email: hopeinhumanityinc@gmail.com

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

Date Signed: 09/28/2026

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Number: 2501-0044 Expiration Date: 02/28/2027

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Hope in Humanity Inc.

Prefix: Mr.

First Name: Eli

Middle Name: Kenneth

Last Name: Andrews

Suffix:

Title: President

Organizational Affiliation: Hope in Humanity Inc.

Telephone Number: (707) 295-0866

Extension:

Email: hopeinhumanityinc@gmail.com

City: Clearlake

County: Lake

State: California

Country: United States

Zip/Postal Code: 95422

2. Employer ID Number (EIN): 93-3197458

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received: \$125,000.00

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, City and State) of the project or activity.

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
(For further information, see 24 CFR Sec. 4.3).

2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9. No

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional non-disclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I/We, the undersigned, certify under penalty of perjury that the information provided above is true, correct, and accurate. Warning: If you knowingly make a false statement on this form, you may be subject to criminal and/or civil penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

X

Name / Title of Authorized Official: Eli Andrews, President

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

Date Signed: 09/28/2026

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Hope in Humanity Inc.

Program/Activity Receiving Federal Grant CoC Program

Funding:

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

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

2. Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application.

Refer to addresses entered into the attached project application.

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

☒

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

Authorized Representative

Prefix: Mr.

First Name: Eli

Middle Name: Kenneth

Last Name: Andrews

Suffix:

Title: President

Telephone Number: (707) 295-0866
(Format: 123-456-7890)

Fax Number:
(Format: 123-456-7890)

Email: hopeinhumanityinc@gmail.com

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

Date Signed: 09/28/2026

11. CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

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

Applicant's Organization: Hope in Humanity Inc.

Name / Title of Authorized Official: Eli Andrews, President

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

Date Signed: 09/28/2026

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES Complete this form to disclose
lobbying activities pursuant to 31 U.S.C. 1352
Approved by OMB: 4040-0013 (exp. 06/30/2028)

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. The requirement related to lobbying as explained in the SF-LLL instructions states: "The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action."

Answer "No" if your organization is NOT engaged in lobbying.

Does the recipient or subrecipient of this CoC grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program? No

Legal Name: Hope in Humanity Inc.

Street 1: 13505 Arrowhead Rd.

Street 2:

City: Clearlake

County: Lake

State: California

Country: United States

Zip / Postal Code: 95422

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete. ☒

Authorized Representative

Prefix: Mr.

First Name: Eli

Middle Name: Kenneth

Last Name: Andrews

Suffix:

Title: President

Telephone Number: (707) 295-0866
(Format: 123-456-7890)

Fax Number:
(Format: 123-456-7890)

Email: hopeinhumanityinc@gmail.com

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

Date Signed: 09/28/2026

IK. SF-424B

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

OMB Number: 4040-0007
Expiration Date: 07/31/2028

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

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

- | | |
|----|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |

9.	Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327~333), regarding labor standards for federally-assisted construction subagreements.
10.	Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11.	Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12.	Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13.	Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14.	Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15.	Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16.	Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17.	Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18.	Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
19.	Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

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

Authorized Representative for: Hope in Humanity Inc.

Prefix: Mr.

First Name: Eli

Middle Name: Kenneth

Last Name: Andrews

Suffix:

Title: President

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

Date Signed: 09/28/2026

1L. SF-424D

Are you requesting CoC Program funds for No
construction costs in this application?

No SF-424D is required. Select "Save and Next" to move to the next screen.

1M. Project Eligibility Certification

1. The project applicant will not engage in racial preferences or other forms of illegal discrimination

☒

2. The project applicant will not operate drug injection sites or "safe consumption sites," knowingly distribute drug paraphernalia on or off of property under their control, permit the use or distribution of illicit drugs on property under their control, or conduct any of these activities under the pretext of "harm reduction."

☒

2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards: \$0

Organization	Type	Sub-Award Amount
This list contains no items		

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

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

Hope in Humanity Inc. has experience managing grant and charitable funding to support programs serving individuals and families impacted by homelessness, substance use, incarceration, poverty, and other barriers to stability. Our organization has established processes for budgeting, tracking expenditures, maintaining supporting documentation, and ensuring that funds are used for their approved purposes. We understand the importance of fiscal accountability, accurate recordkeeping, timely reporting, and compliance with funding requirements.

Our leadership and board provide oversight of organizational spending and program implementation, while program staff maintain documentation related to services delivered, participant needs, partnerships, and program outcomes. Hope in Humanity Inc. has successfully coordinated community-based programs including food distribution, recovery housing, transportation assistance, youth outreach, and resource navigation. These activities require careful coordination of funding, community partnerships, volunteers, purchasing, and service delivery.

Although Hope in Humanity Inc. is continuing to expand its experience with direct Federal funding, our organization has demonstrated the administrative capacity and community partnerships necessary to responsibly implement funded programs. We are committed to following all applicable Federal requirements, maintaining strong internal controls, documenting allowable costs, monitoring performance, and completing required financial and programmatic reporting. The activities proposed in this application build directly upon services we are already providing and our established experience working with individuals experiencing homelessness, justice involvement, substance use challenges, and other barriers to long-term stability.

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

Hope in Humanity Inc. has experience combining and leveraging private, local, State, and other available funding sources to support programs serving individuals and families impacted by homelessness, substance use, incarceration, poverty, and other barriers to stability. Our organization has developed partnerships with community-based organizations, local agencies, health care partners, probation and reentry partners, faith communities, private donors, foundations, and other stakeholders to expand the reach and impact of our services.

We use a diversified funding approach that includes private foundation grants, charitable donations, community partnerships, in-kind contributions, volunteer support, and public funding opportunities. These resources are used strategically to support recovery housing, food distribution, transportation assistance, outreach, reentry support, resource navigation, and other stabilization services. By combining financial and in-kind resources from multiple partners, Hope in Humanity is able to stretch available funding and reduce duplication of services.

As our organization grows, we continue to pursue Federal, State, and local funding opportunities that align with our mission and existing programs. We are committed to using each funding source for its approved purpose while coordinating resources across programs to maximize impact, strengthen sustainability, and increase access to services for vulnerable populations.

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

Hope in Humanity Inc. maintains a financial management structure designed to promote accountability, transparency, and responsible stewardship of organizational funds. Financial oversight is provided by organizational leadership and the Board of Directors, with expenditures reviewed to ensure they are reasonable, allowable, properly documented, and consistent with approved budgets and funding requirements.

The organization maintains financial records for income, expenses, grants, donations, and program-related expenditures. Supporting documentation, including invoices, receipts, contracts, and other records, is maintained to support financial transactions and reporting. Organizational leadership monitors budgets and expenditures throughout the grant period to help prevent overspending and ensure funds remain aligned with approved program activities.

Hope in Humanity also uses internal oversight and board review to strengthen fiscal accountability and reduce the risk of misuse of funds. As the organization expands its public funding portfolio, it is committed to maintaining financial policies and procedures that comply with applicable Federal, State, local, and funder-specific requirements, including accurate recordkeeping, segregation of duties when feasible, timely financial reporting, and retention of supporting documentation.

**4. Are there any unresolved HUD monitoring or
OIG audit findings for any HUD grants (including
ESG) under your organization?** No

3A. Project Detail

1. CoC Number and Name: CA-529 - Lake County CoC

2. CoC Collaborative Applicant Name: Lake County

3. Project Name: Hope Home-2026

4. Project Status: Standard

5. Component Type: TH

6. What type of CoC funding is this project applying for in this CoC Program Competition? Bonus

7. Is your organization or expected subrecipient a victim service provider defined in 24 CFR 578.3 and uses a comparable HMIS database? No

8. Is this new project application requesting to transition from eligible renewal project(s) that was awarded to the same recipient and fully eliminated through reallocation in this CoC Program Competition? (Attachment Requirement) No

9. Will funds requested in this new project application replace state or local government funds (24 CFR 578.87(a))? No

10. Will this project include replacement reserves in the Operating budget? No

11. Is this project applying for Rural costs on screen 6A? No

3B. Project Description

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

Hope in Humanity Inc.'s proposed project is a treatment-centered recovery and supportive housing program designed to serve individuals impacted by substance use disorders, homelessness, incarceration, poverty, and other barriers to stability. The project focuses on creating a structured and supportive environment where participants can strengthen their recovery, engage in treatment, and work toward long-term stability and independence.

Participants will receive individualized support based on their treatment and recovery needs. Services may include substance use disorder counseling, recovery planning, case management, relapse prevention, peer support, referrals to higher levels of treatment when needed, transportation to treatment and recovery-related appointments, benefits navigation, employment support, life-skills development, and connections to medical and behavioral health services. The program will emphasize accountability, consistency, and active participation in recovery while recognizing that each participant's treatment path may look different.

Hope in Humanity will use trauma-informed, strengths-based, and participant-centered approaches to help individuals address the underlying factors that contribute to substance use and instability. Staff will work with participants to identify treatment goals, reduce barriers to care, strengthen coping skills, build healthy support systems, and develop the practical tools necessary to maintain recovery and stable housing.

The project will also collaborate with treatment providers, health care organizations, probation and reentry partners, behavioral health providers, community organizations, and other local resources to ensure participants receive coordinated and comprehensive support. When services cannot be provided directly by Hope in Humanity, participants will be connected to appropriate outside providers.

The overall goal of the project is to support sustained recovery, reduce relapse and housing instability, improve access to treatment, and help participants develop the skills and stability needed to successfully transition into long-term independent living. Hope in Humanity will track participation, treatment engagement, referrals, recovery progress, housing stability, and other relevant outcomes to evaluate program effectiveness and improve services over time.

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

Project Milestones	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement
	A	B	C	D
Begin hiring staff or expending funds	1			
Begin program participant enrollment	1			
Program participants occupy leased or rental assistance units or structure(s), or supportive services begin	1			
Leased or rental assistance units or structure, and supportive services near 100% capacity	90			
Closing on purchase of land, structure(s), or execution of structure lease				
Start rehabilitation	1			
Complete rehabilitation	1			
Start new construction				
Complete new construction				

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

Hope in Humanity Inc. has already completed the installation of the air-conditioning system at the project property using financing obtained by the organization. The improvement was necessary to maintain a safe and habitable residential environment for participants in the treatment-centered recovery housing program. Hope in Humanity is currently responsible for repayment of the loan associated with this completed improvement and for the ongoing maintenance of the system and property.

If permitted under the CoC Program award and approved by HUD, requested funds would be applied only in accordance with applicable federal requirements related to eligible capital and pre-award costs. Hope in Humanity will maintain documentation regarding the completed work, financing, invoices, payments, contractor records, and property maintenance. No new construction or property acquisition is proposed as part of this project.

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

(Select ALL that apply)

N/A - Project Serves All Subpopulations	☐	Survivors	☒
Veterans	☒	Substance Abuse	☒
Youth (under 25)	☐	Mental Illness	☐
Families	☐	HIV/AIDS	☒

Chronic Homeless	☒
Other (Click 'Save' to update)	☐

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

3C. Project Expansion Information

1. Is this a “Project Expansion” of an eligible renewal project? No

4A. Supportive Services for Participants

1a. What prior experience does the applicant have operating transitional housing or other projects that have successfully helped homeless individuals and families exit homelessness within 24 months or has a plan in place to ensure homeless individuals and families will exit homelessness within 24 months?

Hope in Humanity Inc. has experience serving individuals and families impacted by homelessness, substance use disorders, incarceration, poverty, and other barriers to housing stability. Through its outreach, recovery support, resource navigation, transportation assistance, and Hope Home recovery housing program, the organization has worked with participants to address the underlying challenges that often contribute to repeated homelessness. Hope in Humanity's approach is treatment-centered and focuses on helping participants stabilize their recovery, strengthen life skills, increase income and employment readiness, and connect with community resources that support long-term housing stability.

Because Hope in Humanity is still building its formal transitional housing track record, the organization has developed a clear plan to help participants move toward permanent housing within 24 months. Each participant will work with staff to develop an individualized treatment and housing stability plan that identifies barriers, recovery goals, income and employment needs, benefits eligibility, and steps toward permanent housing. Progress will be reviewed regularly, and participants will receive case management, recovery support and referrals to behavioral and physical health services, employment and benefits assistance, transportation support, and housing navigation.

The program will begin discharge and permanent-housing planning early rather than waiting until the end of a participant's stay. Hope in Humanity will coordinate with local housing providers, landlords, public agencies, reentry partners, treatment providers, and other community organizations to identify appropriate permanent housing opportunities. The goal is for participants to leave the transitional program within 24 months with sustained recovery supports, increased stability, and a realistic plan for maintaining permanent housing.

1b. The applicant has previously operated or currently operates transitional housing or another homelessness project, or has a plan in place to ensure that at least 50 percent of participants exit to a positive destination within 24 months and at least 50 percent of participants exit with employment income as reflected in HMIS or another data system used by the applicant.

Since Hope in Humanity is still building the formal data history needed to demonstrate those exact HMIS outcomes, I would answer this as a clear plan to meet both 50% benchmarks rather than claiming you already have documented results.

Hope in Humanity Inc. currently operates a recovery-focused housing program serving individuals impacted by homelessness, substance use disorders, incarceration, and other barriers to stability. The organization will implement a structured plan to ensure that at least 50 percent of participants exit the program to a positive housing destination within 24 months and at least 50 percent exit with employment income.

Upon enrollment, each participant will complete an individualized treatment, housing, and self-sufficiency plan identifying barriers to permanent housing, substance use treatment and recovery needs, employment goals, income needs, benefits eligibility, and other factors affecting long-term stability. Staff will regularly review participant progress and provide case management, substance use disorder counseling and recovery support, housing navigation, employment preparation, transportation assistance, benefits navigation, and referrals to behavioral health, medical, educational, and community-based services.

Permanent housing planning will begin early in the participant's stay. Staff will assist participants with identifying affordable housing opportunities, completing applications, obtaining necessary documentation, addressing rental barriers, and connecting with landlords and community housing resources. The program will work toward ensuring that at least 50 percent of participants exit to permanent or other positive housing destinations within the 24-month transitional housing period.

Employment and income development will also be a core component of the program. Participants who are able to work will receive assistance with employment readiness, résumé development, job searches, applications, interview preparation, vocational resources, and connections with local employers and workforce programs. Hope in Humanity's goal is for at least 50 percent of participants to have employment income at program exit.

Hope in Humanity will document participant enrollment, services, income, employment, housing status, and exit destinations through HMIS or another approved data-management system. Program outcomes will be reviewed regularly so staff can identify participants who are not progressing toward housing or employment goals and adjust services and referrals accordingly.

1c. Demonstrate that the project will provide and/or partner with other organizations to provide eligible supportive services that are necessary to assist program participants to obtain and maintain housing (i.e., case management, behavioral healthcare, employment training, etc.)

Hope in Humanity Inc. currently provides and coordinates supportive services that help participants obtain and maintain stable housing. Because the program is treatment-centered, services address both immediate housing needs and the underlying substance use, behavioral health, employment, and stability issues that can interfere with long-term housing success.

Hope in Humanity provides direct case management, individualized treatment and recovery planning, relapse-prevention support, life-skills development, transportation assistance, benefits navigation, housing navigation, and employment-readiness support. Staff work with each participant to identify barriers to housing and develop individualized goals related to recovery, income, employment, housing, and overall stability.

Hope in Humanity is already connected with outside providers and community resources to ensure participants can access services that are not provided directly by the organization. These partnerships and referral relationships include behavioral health and mental health providers, medical providers, substance use treatment programs, workforce and employment resources, probation and reentry partners, housing providers, benefits programs, and other community-based organizations. Staff assist participants with referrals, help coordinate access to services, and follow up to support continued engagement.

These existing partnerships allow Hope in Humanity to provide a more comprehensive continuum of support. By combining in-house case management, recovery support, and housing stabilization services with established community resources, the project is able to address the multiple barriers that can affect housing stability and help participants move toward permanent housing, employment, sustained recovery, and long-term self-sufficiency.

2. How will this project be supplemented with resources from other public or private sources, that may include mainstream health, social, and employment programs such as Medicare, Medicaid, SSI, and SNAP.

Hope in Humanity Inc. will supplement CoC Program funding by connecting participants to existing public benefits, health care, employment resources, and private community supports that can help meet needs beyond the scope of the grant. Staff will assist participants with accessing and maintaining benefits such as Medi-Cal/Medicaid, Medicare when eligible, SSI/SSDI, SNAP/CalFresh, General Assistance, and other income or health-related programs for which they may qualify.

The project will also leverage existing relationships with community-based organizations, health care providers, behavioral health and substance use treatment providers, workforce and employment programs, probation and reentry partners, housing resources, faith and community organizations, and private donors. These partnerships help provide services, referrals, transportation support, employment assistance, food, clothing, household items, and other resources that support recovery and housing stability.

By combining CoC funding with mainstream benefits and existing public and private resources, Hope in Humanity will be able to address participants' medical, behavioral health, income, food, employment, and basic-needs barriers without relying on a single funding source. This coordinated approach allows project funds to be used more efficiently while helping participants build the financial and community supports necessary to maintain permanent housing and long-term stability.

3. TH Service Requirements

3a. How will this projects assess the service needs of program participants?

Hope in Humanity Inc. will assess the service needs of each participant at program entry and throughout their participation in the transitional housing program. The assessment process will be individualized, participant-centered, and focused on identifying both immediate needs and barriers that may affect recovery, housing stability, employment, income, health, and long-term self-sufficiency.

At intake, staff will meet with each participant to review housing history, substance use and recovery needs, physical and behavioral health needs, income and benefits, employment history, transportation, legal or reentry barriers, family responsibilities, and other factors that may affect stability. Information gathered during the assessment will be used to develop an individualized service and housing plan with clear goals and identified supports. Participant needs will be reassessed regularly through ongoing case management, progress reviews, and direct communication with the participant. Staff will update service plans as circumstances change and make referrals to existing community partners and outside providers when additional services are needed. This ongoing assessment process will help ensure that services remain responsive to each participant's needs and support progress toward recovery, increased income, permanent housing, and successful program exit.

3b. Describe how this project will provide individualized services for program participants during their time in Transitional Housing that will result in at least 20 hours per week of engagement in services, activities or employment for all program participants, except for a program participant over age 62 or who is an individual with handicaps as defined in 24 CFR 8.3 or a with a developmental disability as defined under 24 CFR 578.3?

(examples of services or activities include case management, counseling, treatment, volunteering, work therapy, education, job training, community-building activities, etc.) Employment may contribute to the 20 hours per week of engagement. The project description provided here does not constitute a reporting or documentation requirement.

Hope in Humanity Inc. will provide individualized services based on each participant's treatment, recovery, housing, employment, education, and personal stability goals. At intake, staff will work with each participant to develop an individualized service plan that identifies the combination of activities most appropriate to their needs, strengths, and stage of recovery.

Participants will engage in at least 20 hours per week of services, structured activities, education, volunteering, job training, employment, or other approved activities, unless they meet one of the applicable exemptions. These hours may include case management meetings, treatment and recovery activities, relapse-prevention programming, life-skills development, housing planning, employment preparation, vocational training, educational activities, volunteer service, community-building activities, medical or behavioral health appointments, and paid employment.

The 20-hour expectation will not be a one-size-fits-all schedule. Staff will work with each participant to create a weekly plan that reflects their individual needs and goals. For example, one participant may meet the requirement primarily through employment and case management, while another may participate in treatment, job training, education, volunteering, and housing-focused activities while preparing to enter the workforce.

Staff will review participation and progress regularly and adjust the service plan as the participant's circumstances change. This individualized approach is intended to keep participants actively engaged in recovery and personal development while helping them build the skills, income, supports, and stability necessary to successfully transition from transitional housing to permanent housing.

4. Indicate that the proposed project will create service plans for each program participant that include the services to be provided, when and how often services will be provided, by whom all services will be provided. Select the checkbox that your project will follow these requirements.

☒

5. Indicate that the proposed project will create service plans for each program participant that include program participant goals, strategies for achieving those goals, and target dates for achievement to focus on improved health and wellness, housing stability, and increased employment income leading to financial stability and self-sufficiency. Select the checkbox that your project will follow these requirements.

☒

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

Supportive Services		Provider	Frequency
Assessment of Service Needs		Applicant	Monthly
Assistance with Moving Costs		Partner	As needed
Case Management		Applicant	Weekly
Child Care		Partner	As needed
Education Services		Partner	As needed
Employment Assistance and Job Training		Partner	As needed
Food		Partner	Daily
Housing Search and Counseling Services		Applicant	As needed
Legal Services		Partner	As needed
Life Skills Training		Partner	As needed
Mental Health Services		Partner	As needed
Outpatient Health Services		Partner	As needed
Outreach Services		Applicant	As needed
Substance Abuse Treatment Services		Partner	As needed
Transportation		Applicant	As needed
Utility Deposits		Partner	As needed

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the  icon. To view or update a housing site already listed, select the  icon.

Total Units: 1

Total Beds: 10

Housing Type	Housing Type (JOINT)	Units	Beds	Dedicated CH Beds
Shared housing	---	1	10	0

4B. Housing Type and Location Detail

1. Housing Type: Shared housing

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

2a. Units: 1

2b. Beds: 10

3. Address:

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

Street 1: 13505 Arrowhead Rd.

Street 2:

City: Clearlake

State: California

ZIP Code: 95422

*4. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered.
(for multiple selections hold CTRL key)

069033 Lake County

5A. Project Participants - Households

Note: These fields should reflect full capacity on one night. For additional guidance, please refer to the Detailed Instructions.

Households Table

	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Number of Households		10		10
Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Persons over age 24		9		9
Persons ages 18-24		1		1
Accompanied Children under age 18				0
Unaccompanied Children under age 18				0
Total Persons	0	10	0	10

Click Save to automatically calculate totals

5B. Project Participants - Subpopulations

Note: These fields should reflect full capacity on one night. For additional guidance, please refer to the Detailed Instructions.

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Substance Use Disorders	HIV/A IDS	Mental Illness	Surviv ors	Physical Disability	Developm ental Disability	Persons Not Represent ed by a Listed Subpopula tion
Persons over age 24										
Persons ages 18-24										
Children under age 18										
Total Persons	0	0	0	0	0	0	0	0	0	0

Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans- (Not CH)	Substance Use Disorders	HIV/A IDS	Mental Illness	Surviv ors	Physical Disability	Developm ental Disability	Persons Not Represent ed by a Listed Subpopula tion
Persons over age 24				9						
Persons ages 18-24				1						
Total Persons	0	0	0	10	0	0	0	0	0	0

Click Save to automatically calculate totals

Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Substance Use Disorders	HIV/A IDS	Mental Illness	Surviv ors	Physical Disability	Developm ental Disability	Persons Not Represent ed by a Listed Subpopula tion
Accompanied Children under age 18										
Unaccompanied Children under age 18										
Total Persons	0			0	0	0	0	0	0	0

Data on this screen should be based on Maximum Occupancy at a single point in time. It should not be based on the estimated amount of participants that will be served throughout the grant term.

6A. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 15, 2027? Yes

4. Select a grant term: 1 Year

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

Acquisition/Rehabilitation/New Construction	☐
Leased Units	☐
Leased Structures	☐
Rental Assistance	☐
Supportive Services	☒
Operating	☒
HMIS	☒
VAWA	☒

The VAWA BLI is permanently checked. This allows any project to shift funds up to a 10% shift from another BLI if VAWA emergency transfer costs are needed.

6. If conditionally awarded, is this project requesting an initial grant term greater than 12 months? No
(13 to 18 months)

6F. Supportive Services Budget

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

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs		
2. Assistance with Moving Costs		
3. Case Management		
4. Child Care		
5. Education Services	Workforce development- program manager at .25	\$12,000
6. Employment Assistance		
7. Food		
8. Housing/Counseling Services		
9. Legal Services		
10. Life Skills		
11. Mental Health Services		
12. Outpatient Health Services		
13. Outreach Services	Community Outreach	\$12,000
14. Substance Abuse Treatment Services	Program Coordinator at .25	\$24,000
15. Transportation		
16. Utility Deposits		
17. Operating Costs	Rent	\$61,000
Total Annual Assistance Requested		\$109,000
Grant Term		1 Year
Total Request for Grant Term		\$109,000

Click the 'Save' button to automatically calculate totals.

6G. Operating

Instructions:

Enter the quantity and total budget request for each operating cost. The request entered should be equivalent to the cost of one year of the relevant operations activity.

Eligible Costs: The system populates a list of eligible operating costs for which funds can be requested. The costs listed are the only costs allowed under 24 CFR 578.55.

Quantity AND Detail: This is a required field. A quantity AND description must be entered for each requested cost. Enter the quantity in detail (e.g. .75 FTE hours and benefits for staff, utility types, monthly allowance for supplies) for each operating cost for which funding is being requested. Please note that simply stating "1FTE" is NOT providing "Quantity AND Detail" and restricts understanding of what is being requested. Failure to enter adequate "Quantity AND Detail" may result in conditions being placed on the award and a delay of grant funding.

Annual Assistance Requested: This is a required field. For each grant year, enter the amount of funds requested for each activity. The amount entered must only be the amount that is DIRECTLY related to operating the housing or supportive services facility.

Total Annual Assistance Requested: This field is automatically calculated based on the sum of the annual assistance requests entered for each activity.

Grant Term: This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

Total Request for Grant Term: This field is automatically calculated based on the total amount requested for each eligible cost multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange:
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

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

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Maintenance/Repair		
2. Property Taxes and Insurance	insurance	\$15,000
3. Replacement Reserve		
4. Building Security		
5. Electricity, Gas, and Water		
6. Furniture		
7. Equipment (lease, buy)		
Total Annual Assistance Requested		\$15,000
Grant Term		1 Year
Total Request for Grant Term		\$15,000

Click the 'Save' button to automatically calculate totals.

6H. HMIS Budget

Instructions:

Enter the quantity and total budget request for each HMIS cost. The request entered should be equivalent to the cost of one year of the relevant HMIS activity. The system populates a list of eligible costs associated with the implementation of an HMIS and for which CoC funds can be requested.

Quantity Detail: This is a required field. A quantity AND description must be entered for each requested cost. Enter the quantity in detail (eg. .75 FTE hours and benefits for staff, utility types, monthly allowance for food and supplies) for each HMIS cost for which funding is being requested. Please note that simply stating "1FTE" is NOT providing "Quantity AND Detail" and restricts understanding of what is being requested. Failure to enter adequate "Quantity AND Detail" may result in conditions being placed on the award and a delay of grant funding.

Annual Assistance Requested: This is a required field. For each grant year, enter the amount funds requested for each activity.

Total Annual Assistance Requested: This field is automatically calculated based on the sum of the annual assistance requests entered for each activity.

Grant term: This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

Total Request for Grant Term: This field is automatically calculated based on the total amount requested for each eligible cost multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange:
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

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

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Equipment		
2. Software		
3. Services		
4. Personnel	HMIS data entry	\$1,000
5. Space & Operations		
Total Annual Assistance Requested:		\$1,000
Grant Term:		1 Year
Total Request for Grant Term:		\$1,000

Click the 'Save' button to automatically calculate totals.

VAWA Budget

VAWA Budget

The Violence Against Women Act (VAWA) has clarified the use of CoC Program funds for VAWA eligible cost categories. These VAWA cost categories can be added to a new project application to create a CoC VAWA Budget Line Item (BLI) in e-snaps and eLOCCS. The new BLI will be added to grant agreements and utilized the same as other CoC Program BLIs in e-snaps and eLOCCS. Eligible CoC VAWA costs can be identified in one or both of the following CoC VAWA categories. Examples of eligible costs in these cost categories are identified as follows:

A. VAWA Emergency Transfer Facilitation. Examples of eligible costs include the costs of assessing, coordinating, approving, denying, and implementing a survivor's emergency transfer(s). Additional details of eligible costs include:

- Moving Costs. Assistance with reasonable moving costs to move survivors for an emergency transfer(s).
- Travel Costs. Assistance with reasonable travel costs for survivors and their families to travel for an emergency transfer(s). This may include travel costs to locations outside of your CoC's geography.
- Security Deposits. Grant funds can be used to pay for security deposits of the safe unit the survivor is transferring to via an emergency transfer(s).
- Utilities. Grant funds can be used to pay for costs of establishing utility assistance in the safe unit the survivor is transferring to.
- Housing Fees. Grant funds can be used to pay fees associated with getting survivors into a safe unit via emergency transfer(s), including but not limited to application fees, broker fees, holding fees, trash fees, pet fees where the person believes they need their pet to be safe, etc.
- Case Management. Grant funds can be used to pay staff time necessary to assess, coordinate, and implement emergency transfer(s).
- Housing Navigation. Grant funds can be used to pay staff time necessary to identify safe units and facilitate moves into housing for survivors through emergency transfer(s).
- Technology to make an available unit safe. Grant funds can be used to pay for technology that the individual believes is needed to make the unit safe, including but not limited to doorbell cameras, security systems, phone, and internet service when necessary to support security systems for the unit, etc.

B. VAWA Confidentiality Requirements. Examples of eligible costs for ensuring compliance with VAWA confidentiality requirements include:

- Monitoring and evaluating compliance.
- Developing and implementing strategies for corrective actions and remedies to ensure compliance.
- Program evaluation of confidentiality policies, practices, and procedures.
- Training on compliance with VAWA confidentiality requirements.
- Reporting to CoC Collaborative Applicant, HUD, and other interested parties on compliance with VAWA confidentiality requirements.
- Costs for establishing methodology to protect survivor information.
- Staff time associated with maintaining adherence to VAWA confidentiality requirements.

Enter the estimated amount(s) you are requesting for this project's Emergency Transfer Facilitation costs and VAWA Confidentiality Requirements costs for one or both of these eligible CoC VAWA cost categories. The CoC VAWA BLI Total amount can be expended for any eligible CoC VAWA cost identified above.

Eligible Costs	Annual Assistance Requested
Estimated budget amount for VAWA Emergency Transfer Facilitation:	
Estimated budget amount for VAWA Confidentiality Requirements:	
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Applicant: Hope In Humanity Inc.

76651114

Project: Hope Home-2026

239810

CoC VAWA BLI Total:	\$0
Grant Term	1 Year
Total Request for Grant Term	\$0

Click the 'Save' button to automatically calculate totals.

6I. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the  icon. To view or update a Match source already listed, select the  icon.

Summary for Match

Total Amount of Cash Commitments:	\$0
Total Amount of In-Kind Commitments:	\$31,250
Total Amount of All Commitments:	\$31,250

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Type	Source	Name of Source	Amount of Commitments
In-Kind	Private	Private Grants	\$31,250

Sources of Match Detail

1. Type of Match commitment: In-Kind

2. Source: Private

3. Name of Source: Private Grants

(Be as specific as possible and include the office
or grant program as applicable)

4. Amount of Written Commitment: \$31,250

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

6J. Summary Budget

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

Eligible Costs (Light gray fields are available for entry of the previous grant agreement, GIW, approved GIW Change Form, or reduced by reallocation)	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Applicant CoC Program Costs Requested
1a. Acquisition (Screen 6B)			\$0
1b. Rehabilitation (Screen 6B)			\$0
1c. New Construction (Screen 6B)			\$0
2a. Leased Units (Screen 6C)	\$0	1 Year	\$0
2b. Leased Structures (Screen 6D)	\$0	1 Year	\$0
3. Rental Assistance (Screen 6E)	\$0	1 Year	\$0
4. Supportive Services (Screen 6F)	\$109,000	1 Year	\$109,000
5. Operating (Screen 6G)	\$15,000	1 Year	\$15,000
6. HMIS (Screen 6H)	\$1,000	1 Year	\$1,000
 7. VAWA	\$0	1 Year	\$0
8. Rural (Only for HUD CoC Program approved rural areas)	\$0	1 Year	\$0
9. Sub-total of CoC Program Costs Requested			\$125,000
10. Admin (Up to 10% of Sub-total in #9)			
11. HUD funded Sub-total + Admin. Requested			\$125,000
12. Cash Match (From Screen 6I)			\$0
13. In-Kind Match (From Screen 6I)			\$31,250
14. Total Match (From Screen 6I)			\$31,250
15. Total Project Budget for this grant, including Match			\$156,250

Click the 'Save' button to automatically calculate totals.

Indirect Cost Information

Indirect Cost Information Form

OMB Number: 2501-0044

Expiration Date: 2/28/2027

Program/Activity Receiving Federal Grant Funding: CoC Program

Applicant Name: Hope in Humanity Inc.

Indirect Cost Rate Information for the Applicant/Recipient:

Please check the box that applies to the Applicant/Recipient and complete the table only as provided by the instructions accompanying this form.

The Applicant/Recipient will not charge indirect costs using an indirect cost rate.	☒
The Applicant/Recipient will calculate and charge indirect costs under the award by applying a de minimis rate as provided by 2 CFR 200.414(f), as may be amended from time to time.	☐
The Applicant/Recipient will calculate and charge indirect costs under the award using the indirect cost rate(s) in the table below, and each rate in this table is included in an indirect cost rate proposal developed in accordance with the applicable appendix to 2 CFR part 200 and, if required, has been approved by the cognizant agency for indirect costs.	☐

Submission Type: Initial Submission

Effective Date: 09/25/2026

Certification of Authorized Representative for the Applicant/Recipient:

X

**** Under penalty of perjury, I certify on behalf of the Applicant/Recipient that:**

(1) all information provided on this form is true, complete, and accurate, and

(2) Applicant/Recipient will provide HUD with an update to this form immediately upon learning change in the information provided on this form, and

(3) I am authorized to speak for the Applicant/Recipient regarding all information provided on this

****Warning: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties (18 U.S.C §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. § 3729, 3802; 24 CFR § 28.10(b)(iii)).**

Authorized Representative:

Prefix: Mr.

First Name: Eli

Middle Name: Kenneth

Last Name: Andrews

Suffix:

Title: President

Telephone Number: (707) 295-0866
(Format: 123-456-7890)

Fax Number:
(Format: 123-456-7890)

Email: hopeinhumanityinc@gmail.com

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

Applicant: Hope In Humanity Inc.

76651114

Project: Hope Home-2026

239810

Date Signed: 09/25/2026

7A. Attachment(s)

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

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

7A. In-Kind MOU Attachment

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

Attachment Details

Document Description:

7D. Certification

**Applicant and Recipient Assurances and Certifications - form HUD-424B (Title)
U.S. Department of Housing and Urban Development OMB Approval No.
2501-0017
(expires 01/31/2026)**

As part of your application for HUD funding, you, as the official authorized to sign on behalf of your organization or as an individual must provide the following assurances and certifications. The Responsible Civil Rights Official has specified this form for use for purposes of general compliance with 24 CFR §§ 1.5, 3.115, 8.50, and 146.25, as applicable. The Responsible Civil Rights Official may require specific civil rights assurances to be furnished consistent with those authorities and will specify the form on which such assurances must be made. A failure to furnish or comply with the civil rights assurances contained in this form may result in the procedures to effect compliance at 24 CFR §§ 1.8, 3.115, 8.57, or 146.39. By submitting this form, you are stating that to the best of your knowledge and belief, all assertions are true and correct.

1. Has the legal authority to apply for Federal assistance, has the institutional, managerial and financial capability (including funds to pay the non-Federal share of program costs) to plan, manage and complete the program as described in the application and the governing body has duly authorized the submission of the application, including these assurances and certifications, and authorized me as the official representative of the application to act in connection with the application and to provide any additional information as may be required.

2. Will administer the grant in compliance with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and implementing regulations (24 CFR part 1), which provide that no person in the United States shall, on the grounds of race, color or national origin, be excluded from participation in, be denied the benefits of, or otherwise be subject to discrimination under any program or activity that receives Federal financial assistance OR if the applicant is a Federally recognized Indian tribe or its tribally designated housing entity, is subject to the Indian Civil Rights Act (25 U.S.C. 1301-1303).

3. Will administer the grant in compliance with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and implementing regulations at 24 CFR part 8, the American Disabilities Act (42 U.S.C. §§ 12101 et seq.), and implementing regulations at 28 CFR part 35 or 36, as applicable, and the Age Discrimination Act of 1975 (42 U.S.C. 6101-07) as amended, and implementing regulations at 24 CFR part 146 which together provide that no person in the United States shall, on the grounds of disability or age, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity that receives Federal financial assistance; except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

4. Will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and the implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion sex (including gender identity and sexual orientation), disability, familial status, or national origin and will affirmatively further fair housing; except an applicant which is an Indian tribe or its instrumentality which is excluded by statute from coverage does not make this certification; and further except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

5. Will comply with all applicable Federal nondiscrimination requirements, including those listed at 24 CFR §§ 5.105(a) and 5.106 as applicable.

6. Will comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (42 U.S.C. 4601) and implementing regulations at 49 CFR part 24 and, as applicable, Section 104(d) of the Housing and Community Development Act of 1974 (42 U.S.C. 5304(d)) and implementing regulations at 24 CFR part 42, subpart A.

7. Will comply with the environmental requirements of the National Environmental Policy Act (42 U.S.C. 4321 et seq.) and related Federal authorities prior to the commitment or expenditure of funds for property.

8. That no Federal appropriated funds have been paid, or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress, in connection with the awarding of this Federal grant or its extension, renewal, amendment or modification. If funds other than Federal appropriated funds have or will be paid for influencing or attempting to influence the persons listed above, I shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying. I certify that I shall require all subawards at all tiers (including sub-grants and contracts) to similarly certify and disclose accordingly. Federally recognized Indian Tribes and tribally designated housing entities (TDHEs) established by Federally-recognized Indian tribes as a result of the exercise of the tribe's sovereign power are excluded from coverage by the Byrd Amendment, but State-recognized Indian tribes and TDHs established under State law are not excluded from the statute's coverage.

Name of Authorized Certifying Official: Eli Andrews

Date: 09/28/2026

Title: President

Applicant Organization: Hope in Humanity Inc.

PHA Number (For PHA Applicants Only):

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. **WARNING:** Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§287, 1001, 1010, 1012, 1014; 31 U.S.C. §3729, 3802).

X

8B. Submission Summary

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

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

Page	Last Updated
1A. SF-424 Application Type	No Input Required
1B. SF-424 Legal Applicant	09/28/2026
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	09/28/2026
1E. SF-424 Compliance	09/28/2026
1F. SF-424 Declaration	09/28/2026
1G. HUD 2880	09/28/2026
1H. HUD 50070	09/28/2026
1I. Cert. Lobbying	09/28/2026
1J. SF-LLL	09/28/2026
IK. SF-424B	09/28/2026
1L. SF-424D	09/28/2026
2A. Subrecipients	No Input Required
2B. Experience	09/28/2026
3A. Project Detail	09/28/2026
3B. Description	09/28/2026
3C. Expansion	09/28/2026
4A. Services	09/28/2026
4B. Housing Type	09/28/2026
5A. Households	09/28/2026
5B. Subpopulations	No Input Required
6A. Funding Request	09/28/2026
6F. Supp Svcs Budget	09/28/2026
6G. Operating	09/28/2026
6H. HMIS Budget	09/28/2026
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VAWA Budget	No Input Required
6I. Match	09/28/2026
6J. Summary Budget	No Input Required
Indirect Cost Information	09/28/2026
7A. Attachment(s)	No Input Required
7A. In-Kind MOU Attachment	No Input Required
7D. Certification	09/28/2026

Before Starting the Project Application

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

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2026 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Unique Entity Identifier (UEI) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2026 Continuum of Care (CoC) Program Competition. For more information see FY 2026 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2026 CoC Program NOFO and the FY 2026 General Section NOFO.
- Detailed instructions and e-snaps navigation guides can be found on the hud.gov website https://www.hud.gov/program_offices/comm_planning/coc/competition. The Detailed Instructions contain more comprehensive instructions and so should be used in tandem with the navigational guides.
- New projects may only be submitted as either Reallocated, Bonus Projects, Reallocated + Bonus, DV Bonus or DV Reallocation. These funding methods are determined in collaboration with local CoC and it is critical that applicants indicate the correct funding method. Project applicants must communicate with their CoC to make sure that the CoC submissions reflect the same funding method. Please review the NOFO for eligibility standards.
- YHDP projects that are eligible for renewal under the CoC program may only use the YHDP Renewal or YHDP Replacement and Reallocation funding opportunities. Please review the NOFO for eligibility standards.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any new project that fails to adhere to 24 CFR part 578 and application requirements set forth in FY 2026 CoC Program Competition NOFO.

1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application: New Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 09/29/2026

4. Applicant Identifier:

a. Federal Entity Identifier:

5. Federal Award Identifier:

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: County of Lake

b. Employer/Taxpayer Identification Number (EIN/TIN): 94-6000825

c. Unique Entity Identifier: PMJGFQ26A8A8

d. Address

Street 1: 225 North Forbes St

Street 2:

City: Lakepoert

County: Lake

State: California

Country: United States

Zip / Postal Code: 95453

e. Organizational Unit (optional)

Department Name: Behavioral Health Services

Division Name:

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

Prefix:

First Name: Melissa

Middle Name:

Last Name: Kopf

Suffix:

Title: Staff Service Analyst, Senior

Organizational Affiliation: County of Lake

Telephone Number: (707) 274-9101

Extension:

Fax Number: (707) 730-8191

Email: melissa.kopf@lakecountycalifornia.gov

1C. SF-424 Application Details

9. Type of Applicant: B. County Government

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: CPD-2600-DC-0025

Title: Continuum of Care Homeless Assistance
Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): California
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: FY2026 Coordinated Entry DV Bonus

16. Congressional District(s):

16a. Applicant: CA-004

16b. Project: CA-003, CA-005
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 07/01/2027

b. End Date: 06/30/2028

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? a. Yes

If "YES", enter the date this application was made available to the State for review: 09/22/2026

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

I AGREE: ☒

21. Authorized Representative

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

Telephone Number: (707) 274-9101
(Format: 123-456-7890)

Fax Number: (707) 274-9192
(Format: 123-456-7890)

Email: elise.jones@lakecountycalifornia.gov

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

Date Signed: 09/29/2026

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Number: 2501-0044 Expiration Date: 02/28/2027

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: County of Lake

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

Organizational Affiliation: County of Lake

Telephone Number: (707) 274-9101

Extension:

Email: elise.jones@lakecountycal.gov

City: Lakeport

County: Lake

State: California

Country: United States

Zip/Postal Code: 95453

2. Employer ID Number (EIN): 94-6000825

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received: \$53,680.00

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, City and State) of the project or activity.

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
(For further information, see 24 CFR Sec. 4.3).

2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
Lake County Behavioral Health Services	SSO-CE	\$386,824.00	Continue the Coordinated Entry System.
Lake County Behavioral Health Services	SSO-CE	\$53,680.00	Coordinate Domestic Violence victims through Coordinated Entry.

Note: If additional sources of Government Assistance, please use the "Other Attachments" screen of the project applicant profile.

Part III Interested Parties

Do you need to disclose interested parties for this grant according to the criteria below? No

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional non-disclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I/We, the undersigned, certify under penalty of perjury that the information provided above is true, correct, and accurate. Warning: If you knowingly make a false statement on this form, you may be subject to criminal and/or civil penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

☒

Name / Title of Authorized Official: Elise Jones, Director

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

Date Signed: 09/29/2026

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: County of Lake
Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

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

2. Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application.
Refer to addresses entered into the attached project application.

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

☒

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

Authorized Representative

Prefix: Miss

First Name: Elise

Middle Name

Last Name: Jones

Suffix:

Title: Director

Telephone Number: (707) 274-9101
(Format: 123-456-7890)

Fax Number: (707) 274-9192
(Format: 123-456-7890)

Email: elise.jones@lakecountycal.gov

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

Date Signed: 09/29/2026

11. CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

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

Applicant's Organization: County of Lake

Name / Title of Authorized Official: Elise Jones, Director

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

Date Signed: 09/29/2026

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES Complete this form to disclose
lobbying activities pursuant to 31 U.S.C. 1352
Approved by OMB: 4040-0013 (exp. 06/30/2028)

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. The requirement related to lobbying as explained in the SF-LLL instructions states: "The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action."

Answer "No" if your organization is NOT engaged in lobbying.

Does the recipient or subrecipient of this CoC grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program? No

Legal Name: County of Lake

Street 1: 225 North Forbes St

Street 2:

City: Lakepoert

County: Lake

State: California

Country: United States

Zip / Postal Code: 95453

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete. ☒

Authorized Representative

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

Telephone Number: (707) 274-9101
(Format: 123-456-7890)

Fax Number: (707) 274-9192
(Format: 123-456-7890)

Email: elise.jones@lakecountyca.gov

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

Date Signed: 09/29/2026

IK. SF-424B

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

OMB Number: 4040-0007
Expiration Date: 07/31/2028

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

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

- | | |
|----|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |

9.	Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327~333), regarding labor standards for federally-assisted construction subagreements.
10.	Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11.	Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12.	Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13.	Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14.	Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15.	Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16.	Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17.	Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18.	Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
19.	Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

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

Authorized Representative for: County of Lake

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

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

Date Signed: 09/29/2026

1L. SF-424D

Are you requesting CoC Program funds for No
construction costs in this application?

No SF-424D is required. Select "Save and Next" to move to the next screen.

1M. Project Eligibility Certification

1. The project applicant will not engage in racial preferences or other forms of illegal discrimination ☒

2. The project applicant will not operate drug injection sites or “safe consumption sites,” knowingly distribute drug paraphernalia on or off of property under their control, permit the use or distribution of illicit drugs on property under their control, or conduct any of these activities under the pretext of “harm reduction.” ☒

2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards: \$0

Organization	Type	Sub-Award Amount
This list contains no items		

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

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

Experience - Lake County Behavioral Health Services has extensive experience administering federal funding and implementing behavioral health, substance use disorder, housing, outreach, care coordination, and supportive service programs. The Department manages federal funding received through programs such as the Substance Use Prevention, Treatment, and Recovery Services Block Grant, Medicaid/Medi-Cal federal financial participation, and other federal or federally supported initiatives. This experience includes developing program budgets, procuring and managing contracted services, reviewing and approving expenditures, monitoring service delivery, completing required fiscal and programmatic reports, and ensuring that costs are allowable, reasonable, allocable, and supported by appropriate documentation.

Utilization - Lake County Behavioral Health Services has experience overseeing community-based providers and other subrecipients that perform services on the County's behalf. Subrecipient and contractor oversight includes establishing written scopes of work, performance expectations, reporting requirements, invoicing standards, and compliance provisions; reviewing invoices and supporting documentation; monitoring expenditures against approved budgets and contract maximums; and coordinating with program, fiscal, quality assurance, compliance, and contracting staff to address performance or compliance concerns. This administrative and operational experience positions the County to effectively implement the activities proposed in this application and meet applicable federal requirements.

Activities - For years, Lake County Behavioral Health has co-led Coordinated Entry with Advintest Health Clear Lake in assisting survivors of domestic violence, dating violence, sexual assault and stalking. The proposed project is a natural expansion of that work to better assist domestic violence victims navigate fleeing from unsafe situations and begin establishing housing self sufficiency through the CE program, connecting to services and supports.

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

Lake County Behavioral Health Services routinely coordinates multiple funding sources to support comprehensive behavioral health and community-based services. The Department leverages federal Medicaid funding, federal block grants, State General Fund allocations, Behavioral Health Services Act funding, realignment revenues, and other state and federal grant funds to sustain programs and maximize available services. Funding is assigned based on program eligibility, allowable-use requirements, service type, population served, and the availability of reimbursement from other sources.

The Department works closely with County departments, healthcare providers, community-based organizations, tribal and regional partners, schools, housing providers, and other local stakeholders to coordinate resources and avoid unnecessary duplication of services. When appropriate and allowable, grant funds are used to supplement—not supplant—existing resources, address identified service gaps, support infrastructure or one-time implementation needs, and expand the reach or quality of existing programs. This braided funding approach allows the County to make efficient use of limited resources while maintaining appropriate accounting, reporting, and documentation for each funding source. The proposed project, for example, is part of a larger community health initiative supported by a variety of funding sources, including Federal, State, and local. Each successful project, in turn, allows the initiative to further develop, so the team can scaffold additional growth.

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

Lake County Behavioral Health Services maintains a structured financial management system that operates within the broader fiscal policies and internal controls of the County of Lake. The Department's fiscal team is responsible for budget development and monitoring, grant accounting, contract and purchase-order tracking, invoice review, accounts payable coordination, revenue and receivable monitoring, financial reporting, reconciliations, and oversight of federal, state, and local funding sources. Fiscal responsibilities are separated among staff to support appropriate review, approval, and segregation of duties.

Department fiscal staff coordinate with program managers to confirm that expenditures are consistent with approved program activities, grant budgets, contracts, and funding requirements. Financial activity is recorded in the County's accounting system and supported through grant-specific tracking tools, contract spend-down schedules, invoice documentation, service and claiming records, and regular budget-to-actual reviews. Transactions are also subject to review by applicable County functions, including the Auditor-Controller, Purchasing, County Counsel, and the Board of Supervisors, as required. The Department's financial management practices are designed to provide accurate reporting, safeguard public funds, identify variances or compliance concerns, and maintain documentation necessary for monitoring, audits, and grant closeout.

**4. Are there any unresolved HUD monitoring or
OIG audit findings for any HUD grants (including
ESG) under your organization?** No

3A. Project Detail

1. CoC Number and Name: CA-529 - Lake County CoC

2. CoC Collaborative Applicant Name: Lake County

3. Project Name: FY2026 Coordinated Entry DV Bonus

4. Project Status: Standard

5. Component Type: SSO

5a. Select the type of SSO Project: Coordinated Entry

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

6a. Will the project serve exclusively households who are eligible to be served with DV Bonus funding (survivors of domestic violence, dating violence, sexual assault, and/or stalking)? Yes
(Projects that are focused on other populations, including survivors of human trafficking should select "No" unless the project will be limited specifically to survivors of domestic violence, dating violence, sexual assault, and/or stalking.)

7. Is your organization or expected subrecipient a victim service provider defined in 24 CFR 578.3 and uses a comparable HMIS database? No

8. Is this new project application requesting to transition from eligible renewal project(s) that was awarded to the same recipient and fully eliminated through reallocation in this CoC Program Competition? No
(Attachment Requirement)

9. Will funds requested in this new project application replace state or local government funds (24 CFR 578.87(a))? No

11. Is this project applying for Rural costs on screen 6A? No

3B. Project Description

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

Scope- The Lake County Continuum of Care (LCCoC) Coordinated Entry (CE) for Domestic Violence (DV) Survivors project ensures survivors of domestic violence, dating violence, sexual assault, and stalking have safe, confidential access to CE while meeting HUD and FY2026 CoC Program requirements. Funding supports staff training, a one-time stipend for HUD-compliant comparable databases, technical assistance, and coordination with Victim Service Providers (VSPs). The project removes barriers to housing through survivor-centered assessment, prioritization, referral, and navigation to permanent housing and supportive services while protecting survivor confidentiality.

Target Population- The project serves households fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, and other dangerous situations throughout Lake County. Priority is given to survivors experiencing or at risk of homelessness, including households with children, youth, older adults, veterans, and individuals with chronic health conditions or disabilities. Services are delivered using trauma-informed, victim-centered practices that promote safety, choice, and equitable access.

Services- The project provides confidential screening, standardized assessment, housing navigation, case conferencing, safety planning, and referrals to emergency shelter, rapid rehousing, permanent housing, legal advocacy, behavioral health, healthcare, employment, treatment services, and other community resources. A one-time stipend supports the VSP comparable database to meet HUD data standards while protecting survivor information and coordinating with the CoC's HMIS when appropriate.

Outcomes- The project expands equitable access to CE, strengthens connections to housing and supportive services, and improves housing stability through coordinated referrals. At least 15% of survivors are expected to secure permanent housing while reducing service barriers and increasing engagement in supportive, treatment, and employment services. The project also strengthens collaboration between victim service and homeless service providers and maintains HUD compliance.

Coordination- The LCCoC partners with local VSPs, behavioral health providers, healthcare organizations, legal services, law enforcement, tribal partners, housing providers, schools, nonprofits, and other community agencies. While maintaining survivor confidentiality, CE staff coordinate with VSPs through case conferencing, referrals, and community planning to ensure timely access to housing and services without compromising safety, providing survivors equitable access to CoC housing resources.

Need- CoC Program funding is essential to maintain a confidential CE process that complies with HUD requirements and protects survivor safety. Survivors often face trauma, financial instability, safety concerns, and limited housing options. Funding supports specialized staff training, the HUD-required comparable database, technical assistance, and coordinated partnerships that local resources alone cannot sustain, ensuring survivors have safe access to housing, supportive services, and permanent housing while strengthening the CoC's response to homelessness.

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

Project Milestones	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement
	A	B	C	D
Begin hiring staff or expending funds	30			
Begin program participant enrollment		15		
Program participants occupy leased or rental assistance units or structure(s), or supportive services begin				
Leased or rental assistance units or structure, and supportive services near 100% capacity				
Closing on purchase of land, structure(s), or execution of structure lease				
Start rehabilitation				
Complete rehabilitation				
Start new construction				
Complete new construction				

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

(Select ALL that apply)

N/A - Project Serves All Subpopulations	☐	Survivors	☒
Veterans	☐	Substance Abuse	☐
Youth (under 25)	☐	Mental Illness	☐
Families	☐	HIV/AIDS	☐
		Chronic Homeless	☐
		Other (Click 'Save' to update)	☐

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

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

4b. Will the coordinated entry process be easily available and reachable by individuals and families seeking assistance? Yes

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

Strategies and Barriers – The Lake County Continuum of Care (LCCoC) Coordinated Entry (CE) system is designed to ensure that survivors of domestic violence, dating violence, sexual assault, and stalking have safe, fair and confidential access to housing and supportive services. LCCoC works collaboratively with victim service providers and community partners to ensure survivors are informed about available resources through survivor-centered, trauma-informed, and outreach strategies.

Information about Coordinated Entry and available housing resources is shared through domestic violence service providers, emergency shelters, transitional housing programs, healthcare and behavioral health providers, legal assistance organizations, faith-based organizations, schools, and other trusted community partners that regularly interact with survivors. Providers explain how survivors can safely access services while prioritizing confidentiality, privacy, and participant choice. Accommodations are available for survivors who have disabilities, are older adults, have developmental disabilities, or experience barriers related to technology, transportation, or communication.

Victim advocates and outreach staff play a central role in connecting survivors with housing resources. Recognizing that survivors may not seek services through traditional homeless assistance programs due to safety concerns, advocates provide flexible and confidential access to Coordinated Entry. When appropriate, assessments may be completed in secure locations, by telephone, or through other survivor-preferred methods to reduce safety risks and eliminate barriers to participation. Staff work closely with survivors to identify safe methods of communication and ensure that no information is shared in a manner that could compromise their safety or confidentiality.

LCCoC also partners with our victim service provider organization to ensure survivors are informed about housing opportunities during outreach events and community resource fairs. Public education efforts include community meetings, town halls, and collaborative trainings where healthcare providers, behavioral health professionals, law enforcement, educators, faith-based organizations, homeless service providers, and other community stakeholders receive information about Coordinated Entry and survivor housing resources. Public-facing information is available through the LCCoC website and social media; however, outreach to survivors emphasizes safe, confidential referral pathways rather than requiring survivors to publicly identify themselves or disclose their experiences.

These strategies combine broad community education with targeted, trauma-informed outreach that minimizes barriers related to safety, confidentiality, technology, transportation, accessibility, and fear of retaliation. By prioritizing survivor choice, confidentiality, and coordinated partnerships with victim service providers, the LCCoC seeks to ensure that survivors of domestic violence, dating violence, sexual assault, and stalking can safely access housing assistance and supportive services without increasing their risk of harm.

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

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

Assessment and Referrals – The Lake County Continuum of Care’s (LCCoC) Coordinated Entry (CE) works with victim service providers to ensure survivors of domestic violence, dating violence, sexual assault, and stalking have safe, confidential, fair and trauma-informed access to housing and supportive services. Survivors may access services through emergency shelters, transitional housing facilities, street outreach teams, mobile crisis responders, and other trusted community partners without being required to participate in the Homeless Management Information System (HMIS). Comparable databases and confidential recordkeeping practices are used by victim service providers to protect survivor privacy and comply with federal confidentiality requirements.

The assessment and referral process is designed to identify each survivor's unique housing and safety needs. The process begins through a confidential intake conducted by trained advocates or other qualified providers in a safe setting selected by the survivor. Rather than relying solely on vulnerability scoring, assessments consider each survivor's immediate safety risks, housing needs, accessibility needs, support systems, and personal goals. Information is collected using trauma-informed, survivor-centered practices that minimize retraumatization and prioritize confidentiality throughout the process.

All survivors are referred not only to our local victim service provider, but to the housing and supportive services that best meet their individual circumstances. Referrals may include emergency shelter, confidential emergency safe housing, rapid rehousing, permanent housing, homelessness prevention assistance, legal advocacy, protective order assistance, healthcare, behavioral health services, sexual assault advocacy, and other community resources. Whenever possible, referrals are made through warm handoffs between providers to reduce barriers and ensure continuity of care through these services and moving to housing self-sufficiency. Referrals may also include employment services, public benefits assistance, childcare resources, transportation assistance, financial empowerment programs, life-skills education, and ongoing case management. Survivors are connected to behavioral health services, including trauma-informed mental health counseling and treatment, crisis intervention, substance use treatment, and other supportive services that promote healing and long-term housing self-sufficiency.

The CE operator agency collaborates closely with victim service provider (VSP) to ensure survivors have access to housing resources while maintaining strict confidentiality. Survivors are not required to disclose details of their victimization beyond what is necessary to determine eligibility and identify appropriate services. Housing and service referrals prioritize survivor safety, and the need to minimize the risk of future harm.

Overall, the assessment and referral process ensures that survivors of domestic violence, dating violence, sexual assault, and stalking receive fair, and timely access to housing and supportive services through a coordinated, survivor-centered system of care. By emphasizing confidentiality, trauma-informed practices, participant choice, and collaboration among our victim service provider and housing partners, the LCCoC’s CE helps survivors achieve safe, stable housing while supporting their long-term safety, recovery, and self-sufficiency.

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

Yes

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

3C. Project Expansion Information

1. Is this a “Project Expansion” of an eligible No
renewal project?

6A. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 15, 2027? Yes

4. Select a grant term: 1 Year

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

Supportive Services	☐
HMIS	☒
VAWA	☒

The VAWA BLI is permanently checked. This allows any project to shift funds up to a 10% shift from another BLI if VAWA emergency transfer costs are needed.

6. If conditionally awarded, is this project requesting an initial grant term greater than 12 months? No
(13 to 18 months)

6H. HMIS Budget

Instructions:

Enter the quantity and total budget request for each HMIS cost. The request entered should be equivalent to the cost of one year of the relevant HMIS activity. The system populates a list of eligible costs associated with the implementation of an HMIS and for which CoC funds can be requested.

Quantity Detail: This is a required field. A quantity AND description must be entered for each requested cost. Enter the quantity in detail (eg. .75 FTE hours and benefits for staff, utility types, monthly allowance for food and supplies) for each HMIS cost for which funding is being requested. Please note that simply stating "1FTE" is NOT providing "Quantity AND Detail" and restricts understanding of what is being requested. Failure to enter adequate "Quantity AND Detail" may result in conditions being placed on the award and a delay of grant funding.

Annual Assistance Requested: This is a required field. For each grant year, enter the amount funds requested for each activity.

Total Annual Assistance Requested: This field is automatically calculated based on the sum of the annual assistance requests entered for each activity.

Grant term: This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

Total Request for Grant Term: This field is automatically calculated based on the total amount requested for each eligible cost multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange:
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

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

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Equipment		\$0
2. Software		\$0
3. Services	One-time cost to provide domestic violence assessment training for three (3) staff members @ \$300 per person	\$900
4. Personnel		\$0
5. Space & Operations		\$0
Total Annual Assistance Requested:		\$900
Grant Term:		1 Year
Total Request for Grant Term:		\$900

Click the 'Save' button to automatically calculate totals.

VAWA Budget

VAWA Budget

The Violence Against Women Act (VAWA) has clarified the use of CoC Program funds for VAWA eligible cost categories. These VAWA cost categories can be added to a new project application to create a CoC VAWA Budget Line Item (BLI) in e-snaps and eLOCCS. The new BLI will be added to grant agreements and utilized the same as other CoC Program BLIs in e-snaps and eLOCCS. Eligible CoC VAWA costs can be identified in one or both of the following CoC VAWA categories. Examples of eligible costs in these cost categories are identified as follows:

A. VAWA Emergency Transfer Facilitation. Examples of eligible costs include the costs of assessing, coordinating, approving, denying, and implementing a survivor's emergency transfer(s). Additional details of eligible costs include:

- Moving Costs. Assistance with reasonable moving costs to move survivors for an emergency transfer(s).
- Travel Costs. Assistance with reasonable travel costs for survivors and their families to travel for an emergency transfer(s). This may include travel costs to locations outside of your CoC's geography.
- Security Deposits. Grant funds can be used to pay for security deposits of the safe unit the survivor is transferring to via an emergency transfer(s).
- Utilities. Grant funds can be used to pay for costs of establishing utility assistance in the safe unit the survivor is transferring to.
- Housing Fees. Grant funds can be used to pay fees associated with getting survivors into a safe unit via emergency transfer(s), including but not limited to application fees, broker fees, holding fees, trash fees, pet fees where the person believes they need their pet to be safe, etc.
- Case Management. Grant funds can be used to pay staff time necessary to assess, coordinate, and implement emergency transfer(s).
- Housing Navigation. Grant funds can be used to pay staff time necessary to identify safe units and facilitate moves into housing for survivors through emergency transfer(s).
- Technology to make an available unit safe. Grant funds can be used to pay for technology that the individual believes is needed to make the unit safe, including but not limited to doorbell cameras, security systems, phone, and internet service when necessary to support security systems for the unit, etc.

B. VAWA Confidentiality Requirements. Examples of eligible costs for ensuring compliance with VAWA confidentiality requirements include:

- Monitoring and evaluating compliance.
- Developing and implementing strategies for corrective actions and remedies to ensure compliance.
- Program evaluation of confidentiality policies, practices, and procedures.
- Training on compliance with VAWA confidentiality requirements.
- Reporting to CoC Collaborative Applicant, HUD, and other interested parties on compliance with VAWA confidentiality requirements.
- Costs for establishing methodology to protect survivor information.
- Staff time associated with maintaining adherence to VAWA confidentiality requirements.

Enter the estimated amount(s) you are requesting for this project's Emergency Transfer Facilitation costs and VAWA Confidentiality Requirements costs for one or both of these eligible CoC VAWA cost categories. The CoC VAWA BLI Total amount can be expended for any eligible CoC VAWA cost identified above.

Eligible Costs	Annual Assistance Requested
Estimated budget amount for VAWA Emergency Transfer Facilitation:	\$25,000
Estimated budget amount for VAWA Confidentiality Requirements:	\$22,949

Applicant: Lake County Behavioral Health Services

71554760

Project: FY2026 Coordinated Entry DV Bonus

233423

CoC VAWA BLI Total:	\$47,949
Grant Term	1 Year
Total Request for Grant Term	\$47,949

Click the 'Save' button to automatically calculate totals.

6I. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the  icon. To view or update a Match source already listed, select the  icon.

Summary for Match

Total Amount of Cash Commitments:	\$13,420
Total Amount of In-Kind Commitments:	\$0
Total Amount of All Commitments:	\$13,420

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Type	Source	Name of Source	Amount of Commitments
Cash	Government	County of Lake	\$13,420

Sources of Match Detail

1. Type of Match commitment: Cash

2. Source: Government

3. Name of Source: County of Lake

(Be as specific as possible and include the office
or grant program as applicable)

4. Amount of Written Commitment: \$13,420

6J. Summary Budget

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

Eligible Costs (Light gray fields are available for entry of the previous grant agreement, GIW, approved GIW Change Form, or reduced by reallocation)	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Applicant CoC Program Costs Requested
1a. Acquisition (Screen 6B)			\$0
1b. Rehabilitation (Screen 6B)			\$0
1c. New Construction (Screen 6B)			\$0
2a. Leased Units (Screen 6C)	\$0	1 Year	\$0
2b. Leased Structures (Screen 6D)	\$0	1 Year	\$0
3. Rental Assistance (Screen 6E)	\$0	1 Year	\$0
4. Supportive Services (Screen 6F)	\$0	1 Year	\$0
5. Operating (Screen 6G)	\$0	1 Year	\$0
6. HMIS (Screen 6H)	\$900	1 Year	\$900
7. VAWA	\$47,949	1 Year	\$47,949
8. Rural (Only for HUD CoC Program approved rural areas)	\$0	1 Year	\$0
9. Sub-total of CoC Program Costs Requested			\$48,849
10. Admin (Up to 10% of Sub-total in #9)			\$4,831
11. HUD funded Sub-total + Admin. Requested			\$53,680
12. Cash Match (From Screen 6I)			\$13,420
13. In-Kind Match (From Screen 6I)			\$0
14. Total Match (From Screen 6I)			\$13,420
15. Total Project Budget for this grant, including Match			\$67,100

Click the 'Save' button to automatically calculate totals.

Indirect Cost Information

Indirect Cost Information Form

OMB Number: 2501-0044

Expiration Date: 2/28/2027

Program/Activity Receiving Federal Grant Funding: CoC Program

Applicant Name: County of Lake

Indirect Cost Rate Information for the Applicant/Recipient:

Please check the box that applies to the Applicant/Recipient and complete the table only as provided by the instructions accompanying this form.

The Applicant/Recipient will not charge indirect costs using an indirect cost rate.	☒
The Applicant/Recipient will calculate and charge indirect costs under the award by applying a de minimis rate as provided by 2 CFR 200.414(f), as may be amended from time to time.	☐
The Applicant/Recipient will calculate and charge indirect costs under the award using the indirect cost rate(s) in the table below, and each rate in this table is included in an indirect cost rate proposal developed in accordance with the applicable appendix to 2 CFR part 200 and, if required, has been approved by the cognizant agency for indirect costs.	☐

Submission Type: Update

Effective Date: 07/27/2026

Certification of Authorized Representative for the Applicant/Recipient:

X

**** Under penalty of perjury, I certify on behalf of the Applicant/Recipient that:**

(1) all information provided on this form is true, complete, and accurate, and

(2) Applicant/Recipient will provide HUD with an update to this form immediately upon learning change in the information provided on this form, and

(3) I am authorized to speak for the Applicant/Recipient regarding all information provided on this

****Warning: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties (18 U.S.C §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. § 3729, 3802; 24 CFR § 28.10(b)(iii)).**

Authorized Representative:

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

Telephone Number: (707) 274-9101
(Format: 123-456-7890)

Fax Number: (707) 274-9192
(Format: 123-456-7890)

Email: elise.jones@lakecountycalifornia.gov

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

Applicant: Lake County Behavioral Health Services

71554760

Project: FY2026 Coordinated Entry DV Bonus

233423

Date Signed: 07/27/2026

7A. Attachment(s)

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

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

7D. Certification

**Applicant and Recipient Assurances and Certifications - form HUD-424B (Title)
U.S. Department of Housing and Urban Development OMB Approval No.
2501-0017
(expires 01/31/2026)**

As part of your application for HUD funding, you, as the official authorized to sign on behalf of your organization or as an individual must provide the following assurances and certifications. The Responsible Civil Rights Official has specified this form for use for purposes of general compliance with 24 CFR §§ 1.5, 3.115, 8.50, and 146.25, as applicable. The Responsible Civil Rights Official may require specific civil rights assurances to be furnished consistent with those authorities and will specify the form on which such assurances must be made. A failure to furnish or comply with the civil rights assurances contained in this form may result in the procedures to effect compliance at 24 CFR §§ 1.8, 3.115, 8.57, or 146.39. By submitting this form, you are stating that to the best of your knowledge and belief, all assertions are true and correct.

1. Has the legal authority to apply for Federal assistance, has the institutional, managerial and financial capability (including funds to pay the non-Federal share of program costs) to plan, manage and complete the program as described in the application and the governing body has duly authorized the submission of the application, including these assurances and certifications, and authorized me as the official representative of the application to act in connection with the application and to provide any additional information as may be required.

2. Will administer the grant in compliance with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and implementing regulations (24 CFR part 1), which provide that no person in the United States shall, on the grounds of race, color or national origin, be excluded from participation in, be denied the benefits of, or otherwise be subject to discrimination under any program or activity that receives Federal financial assistance OR if the applicant is a Federally recognized Indian tribe or its tribally designated housing entity, is subject to the Indian Civil Rights Act (25 U.S.C. 1301-1303).

3. Will administer the grant in compliance with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and implementing regulations at 24 CFR part 8, the American Disabilities Act (42 U.S.C. §§ 12101 et seq.), and implementing regulations at 28 CFR part 35 or 36, as applicable, and the Age Discrimination Act of 1975 (42 U.S.C. 6101-07) as amended, and implementing regulations at 24 CFR part 146 which together provide that no person in the United States shall, on the grounds of disability or age, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity that receives Federal financial assistance; except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

4. Will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and the implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion sex (including gender identity and sexual orientation), disability, familial status, or national origin and will affirmatively further fair housing; except an applicant which is an Indian tribe or its instrumentality which is excluded by statute from coverage does not make this certification; and further except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

5. Will comply with all applicable Federal nondiscrimination requirements, including those listed at 24 CFR §§ 5.105(a) and 5.106 as applicable.

6. Will comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (42 U.S.C. 4601) and implementing regulations at 49 CFR part 24 and, as applicable, Section 104(d) of the Housing and Community Development Act of 1974 (42 U.S.C. 5304(d)) and implementing regulations at 24 CFR part 42, subpart A.

7. Will comply with the environmental requirements of the National Environmental Policy Act (42 U.S.C. 4321 et seq.) and related Federal authorities prior to the commitment or expenditure of funds for property.

8. That no Federal appropriated funds have been paid, or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress, in connection with the awarding of this Federal grant or its extension, renewal, amendment or modification. If funds other than Federal appropriated funds have or will be paid for influencing or attempting to influence the persons listed above, I shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying. I certify that I shall require all subawards at all tiers (including sub-grants and contracts) to similarly certify and disclose accordingly. Federally recognized Indian Tribes and tribally designated housing entities (TDHEs) established by Federally-recognized Indian tribes as a result of the exercise of the tribe's sovereign power are excluded from coverage by the Byrd Amendment, but State-recognized Indian tribes and TDHs established under State law are not excluded from the statute's coverage.

Name of Authorized Certifying Official: Elise Jones

Date: 09/29/2026

Title: Director

Applicant Organization: County of Lake

PHA Number (For PHA Applicants Only):

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. **WARNING:** Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§287, 1001, 1010, 1012, 1014; 31 U.S.C. §3729, 3802).

X

8B. Submission Summary

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

Page	Last Updated
1A. SF-424 Application Type	No Input Required
1B. SF-424 Legal Applicant	09/29/2026
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	09/29/2026
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1E. SF-424 Compliance	09/29/2026
1F. SF-424 Declaration	09/29/2026
1G. HUD 2880	09/29/2026
1H. HUD 50070	09/29/2026
1I. Cert. Lobbying	09/29/2026
1J. SF-LLL	09/29/2026
IK. SF-424B	09/29/2026
1L. SF-424D	09/29/2026
2A. Subrecipients	No Input Required
2B. Experience	09/29/2026
3A. Project Detail	09/29/2026
3B. Description	09/29/2026
3C. Expansion	09/29/2026
6A. Funding Request	09/29/2026
6H. HMIS Budget	09/29/2026
VAWA Budget	No Input Required
6I. Match	09/29/2026
6J. Summary Budget	No Input Required
Indirect Cost Information	09/29/2026
7A. Attachment(s)	No Input Required
7D. Certification	09/29/2026

Before Starting the Project Application

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

Things to Remember:

- Only Collaborative Applicants may apply for CoC Planning funds using this application, and only one CoC Planning application may be submitted during the FY 2026 CoC Program grant competition.
- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2026 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Unique Entity Identifier (UEI) number and an active registration in the Central Contractor Registration (CCR)/System for Award management (SAM) in order to apply for funding under the Continuum of Care (CoC) Program Competition. For more information see the FY 2026 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2026 CoC Program Competition NOFO.
- Detailed instructions and e-snaps navigation guides can be found on the hud.gov website https://www.hud.gov/program_offices/comm_planning/coc/competition. The Detailed Instructions contain more comprehensive instructions and so should be used in tandem with the navigational guides.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any new or renewal project that fails to adhere to 24 CFR Part 578 and application requirements set forth in the FY 2026 CoC Program NOFO.

1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application: CoC Planning Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 09/24/2026

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: County of Lake

b. Employer/Taxpayer Identification Number (EIN/TIN): 94-6000825

c. Unique Entity Identifier: PMJGFQ26A8A8

d. Address

Street 1: 225 North Forbes St

Street 2:

City: Lakepoert

County: Lake

State: California

Country: United States

Zip / Postal Code: 95453

e. Organizational Unit (optional)

Department Name: Behavioral Health Services

Division Name:

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

Prefix:

First Name: Melissa

Middle Name:

Last Name: Kopf

Suffix:

Title: Staff Service Analyst, Senior

Organizational Affiliation: County of Lake

Telephone Number: (707) 274-9101

Extension:

Fax Number: (707) 730-8191

Email: melissa.kopf@lakecountycalifornia.gov

1C. SF-424 Application Details

9. Type of Applicant: B. County Government

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: CPD-2600-DC-0025

Title: Continuum of Care Homeless Assistance
Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): California
(for multiple selections hold CTRL+Key)

15. Descriptive Title of Applicant's Project: CA-529 Planning Project

16. Congressional District(s):

a. Applicant: CA-004

b. Project: CA-003, CA-005
(for multiple selections hold CTRL+Key)

17. Proposed Project

a. Start Date: 07/01/2027

b. End Date: 06/30/2028

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? a. Yes

If "YES", enter the date this application was made available to the State for review: 09/23/2026

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

I AGREE: ☒

21. Authorized Representative

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

Telephone Number: (707) 274-9101
(Format: 123-456-7890)

Fax Number: (707) 274-9192
(Format: 123-456-7890)

Email: elise.jones@lakecountycalifornia.gov

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

Date Signed: 09/24/2026

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Number: 2501-0017 Expiration Date: 01/31/2026

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: County of Lake

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

Organizational Affiliation: County of Lake

Telephone Number: (707) 274-9101

Extension:

Email: elise.jones@lakecountycal.gov

City: Lakeport

County: Lake

State: California

Country: United States

Zip/Postal Code: 95453

2. Employer ID Number (EIN): 94-6000825

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received: \$50,000.00

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, City and State) of the project or activity.

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
(For further information, see 24 CFR Sec. 4.3).

2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
Lake County Behavioral Health Services	SSO-CE	\$386,824.00	Continue the Coordinated Entry System.
Lake County Behavioral Health Services	SSO-CE	\$50,000.00	Coordinate Domestic Violence victims through Coordinated Entry.

Note: If additional sources of Government Assistance, please use the "Other Attachments" screen of the project applicant profile.

Part III Interested Parties

Do you need to disclose interested parties for this grant according to the criteria below? No

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional non-disclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I/We, the undersigned, certify under penalty of perjury that the information provided above is true, correct, and accurate. Warning: If you knowingly make a false statement on this form, you may be subject to criminal and/or civil penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

X

Name / Title of Authorized Official: Elise Jones, Director

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

Date Signed: 09/24/2026

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: County of Lake

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

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

Sites for Work Performance.

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

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

☒

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

Authorized Representative

Prefix: Miss

First Name: Elise

Middle Name

Last Name: Jones

Suffix:

Title: Director

Telephone Number: (707) 274-9101
(Format: 123-456-7890)

Fax Number: (707) 274-9192
(Format: 123-456-7890)

Email: elise.jones@lakecountycal.gov

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

Date Signed: 09/24/2026

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

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

Applicant's Organization: County of Lake

Name / Title of Authorized Official: Elise Jones, Director

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

Date Signed: 09/24/2026

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES

**Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.
Approved by OMB: 4040-0013 (exp. 02/28/2026)**

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. The requirement related to lobbying as explained in the SF-LLL instructions states: "The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action."

Answer "No" if your organization is NOT engaged in lobbying.

Does the recipient or subrecipient of this CoC grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program? No

Legal Name: County of Lake

Street 1: 225 North Forbes St

Street 2:

City: Lakepoert

County: Lake

State: California

Country: United States

Zip / Postal Code: 95453

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete. ☒

Authorized Representative

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

Telephone Number: (707) 274-9101
(Format: 123-456-7890)

Fax Number: (707) 274-9192
(Format: 123-456-7890)

Email: elise.jones@lakecountycalifornia.gov

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

Date Signed: 09/24/2026

IK. SF-424B

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

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

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

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

- | | |
|----|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |

9.	Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
10.	Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11.	Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12.	Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13.	Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14.	Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15.	Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16.	Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17.	Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18.	Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
19.	Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

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

Authorized Representative for: County of Lake

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

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

Date Signed: 09/24/2026

1M. Project Eligibility Certification

1. The project applicant will not engage in racial preferences or other forms of illegal discrimination

X

2. The project applicant will not operate drug injection sites or “safe consumption sites,” knowingly distribute drug paraphernalia on or off of property under their control, permit the use or distribution of illicit drugs on property under their control, or conduct any of these activities under the pretext of “harm reduction.”

X

2A. Project Detail

1. CoC Number and Name: CA-529 - Lake County CoC

2. Collaborative Applicant Name: Lake County

3. Project Name: CA-529 Planning Project

4. Component Type: CoC Planning Project Application

2B. Project Description

1. Provide a description that addresses the entire scope of the proposed project and how the Collaborative Applicant will use grant funds to comply with 24 CFR 578.7:

The Lake County Continuum of Care (LCCoC) Collaborative Applicant will use grant funds to support the planning, coordination, administration, and oversight responsibilities required under 24 CFR 578.7. The project will provide resources necessary to carry out Continuum of Care responsibilities, support compliance with HUD requirements, and administer activities associated with the Continuum's governance, HMIS, and funding responsibilities.

Grant funds will support HMIS reporting consultation services to assist with compliance with HUD HMIS Data Standards, data quality monitoring, development of performance reports, and analysis of system-level data. These services will support monitoring of project performance, measurement of HUD System Performance Measures, preparation of required federal reports, and the use of HMIS data for planning, monitoring, and Continuum-wide decision-making.

Grant funds will also support professional grant writing services for the preparation of local, state, and federal grant applications, including the FY2027 Continuum of Care Program Competition. Responsibilities will include development of application narratives, preparation of required forms and supporting documentation, coordination of application components with project applicants, development of budgets, review of applications for completeness and compliance, and submission of applications by required deadlines.

In addition, grant funds will support specialized technical assistance for the FY2027 Continuum of Care Program Competition. Technical assistance activities will include interpretation of the annual HUD Notice of Funding Opportunity (NOFO), review of applicable federal regulations and guidance, assistance with implementation of HUD requirements, evaluation of local competition policies and procedures for compliance, and recommendations related to application preparation and grant administration.

These activities will support the Collaborative Applicant in carrying out responsibilities under 24 CFR 578.7 by providing administrative, reporting, and technical resources necessary for Continuum operations, compliance with HUD requirements, preparation of funding applications, and ongoing management of Continuum of Care responsibilities.

2. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.

The proposed activities of technical assistance and consulting of HMIS, grant writing and the FY2027 CoC Competition Program NOPFO will be implemented through continuing service contracts during the FY2026/FY2027 grant period. The estimated schedule for completion will align with the annual Continuum of Care planning cycle, federal funding timelines, and ongoing operational needs of the Lake County Continuum of Care (LCCoC).

The Collaborative Applicant will initiate and manage contracted activities at the beginning of the grant period and maintain oversight throughout the full term of the contracts. Work will be completed on an ongoing basis, with activities scheduled according to established priorities, required reporting timelines, federal application deadlines, and operational needs identified by the LCCoC.

The Collaborative Applicant will serve as the project manager and will be responsible for overall coordination, contract oversight, communication with service providers, review of deliverables, and monitoring progress toward identified objectives. The management plan will include clearly defined scopes of work, established expectations and timelines, regular communication with contractors, documentation of completed activities, and review of work products to ensure alignment with grant requirements.

The Collaborative Applicant will use established administrative procedures to ensure effective and timely completion of all work. This will include monitoring contract performance, tracking milestones and deliverables, maintaining records of completed activities, addressing potential delays or barriers, and making adjustments as needed to ensure activities remain on schedule. Regular review of progress will allow the Collaborative Applicant to identify issues early and implement corrective actions when necessary.

The Collaborative Applicant will ensure all contracted activities are completed within the FY2026/FY2027 grant period and in accordance with applicable HUD requirements, grant agreements, and Continuum of Care responsibilities under 24 CFR 578.7. Through ongoing oversight, coordination, and performance monitoring, the LCCoC will maintain accountability for timely completion of project activities and effective use of grant resources.

3. How will the requested funds improve or maintain the CoC's ability to evaluate the outcome of CoC and ESG projects?

The requested funds for technical assistance and consulting for HMIS, grant writing and the FY2027 CoC Program Competition NOFO will improve and maintain the Lake County Continuum of Care's (LCCoC) ability to evaluate the outcomes of CoC and ESG projects by supporting the administrative capacity, technical resources, and data analysis processes necessary for effective performance monitoring. These resources will strengthen the Continuum's ability to collect, review, analyze, and utilize project and system-level information to evaluate progress toward HUD performance objectives.

Funding will support activities that enhance the accuracy, consistency, and availability of performance data used to assess CoC and ESG-funded projects. Improved data review and reporting capacity will allow the LCCoC to identify performance trends, monitor project outcomes, evaluate progress toward HUD System Performance Measures, and support informed planning and decision-making.

The funds requested will also support the development and use of standardized reporting processes, performance monitoring tools, and technical expertise necessary to review project-level outcomes. This will assist the LCCoC in evaluating measures such as housing outcomes, project participation, data quality, and overall system effectiveness while ensuring reporting requirements are met.

By maintaining access to administrative and technical resources, the LCCoC will be better positioned to conduct consistent performance reviews, identify areas requiring improvement, provide guidance to funded projects, and use objective data to support funding decisions and system planning. These activities will strengthen accountability for CoC and ESG resources and support continuous improvement of the local homeless response system.

3A. Governance and Operations

1. How often does the CoC conduct meetings of the full CoC membership? Monthly

2. Does the CoC include membership of a homeless or formerly homeless person? Yes

2a. For members who are homeless or formerly homeless, what role do they play in the CoC membership? (Select all that apply)

Participates in CoC meetings:	☒
Votes, including electing Coc Board:	☒
Sits on CoC Board:	☒
None:	☐

3. Does the CoC's governance charter incorporate written policies and procedures for each of the following

3a. Written agendas of CoC meetings? Yes

3b. Coordinated Entry? (Also known as centralized or coordinated assessment) Yes

3c. Process for monitoring outcomes of ESG recipients? Yes

3d. CoC policies and procedures? Yes

3e. Written process for board selection? Yes

3f. Code of Conduct for board members that includes a recusal process? Yes

3g. Written standards for administering assistance? Yes

4. Were there any written complaints received by the CoC in relation to project review, project selection, or other items related to 24 CFR 578.7 or 578.9 within the past 12 months? No

3B. Committees

Provide information for up to five of the most active CoC-wide planning committees, subcommittees and/or workgroups, to address homeless needs in the CoC's geographic area that recommend and set policy priorities for the CoC, including a brief description of the role and the frequency of the meetings. Only include committees, subcommittees and/or workgroups, that are directly involved in CoC-wide planning and not the regular delivery of services.

Name of Committee	Role of the Committee (max 750 characters)	Meeting Frequency	Name of Individuals and/or Organizations Represented
HMIS/CES Committee	Policy planning, monitoring, coordination and planning for HMIS reporting and CE system	Monthly	Adventist Health, Hope Center Transitional Housing, Behavioral Health Services, Redwood Community Services
Performance Review Committee	Performance Evaluations, Ranking and Reviewing	Monthly	Doreen Gilmore, Barbra Christwitz, Clearlake City Council, Woodland Community College, Probation Department, PHA,
Point in Time Committee	Organization of the annual PIT and HIC Count	Monthly	American Red Cross, Kelseyville Methodist Church, Board of Supervisors, Behavioral Health, Mendocino Community Clinic, Adventist Health, Sutter Health, Redwood Community Services, Probation, Office of Ed, North Coast Opportunities,
Interfaith Committee	Outreach to all churches and faith based leaders for outreach supports	Monthly	Adventist Health, Lake County Community Foundation,
Strategic Planning	Governance Charter/Bylaws, policy, Gaps analysis, 2 year plan	Monthly	Office of Ed, Board of Supervisor, Lakeport PD, Probation, Behavioral Health, Clearlake City Council

4A. Sources of Match

The following list summarizes the funds that will be used as Match for the project. To add a Matching source to the list, select the icon. To view or update a Matching source already listed, select the icon.

Summary for Match

Total Amount of Cash Commitments:	\$0
Total Amount of In-Kind Commitments:	\$12,500
Total Amount of All Commitments:	\$12,500

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Type	Source	Contributor	Value of Commitments
In-Kind	Government	Lake County Behav...	\$12,500

Sources of Match Details

1. Type of Match Commitment: In-Kind

2. Source: Government

3. Name of source: Lake County Behavioral Health Services HMIS
(Be as specific as possible and include the office allocated funding for HMIS Administrator
or grant program as applicable)

4. Amount of Written Commitment: \$12,500

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

4B. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 15, 2027? Yes

2. Select a grant term: 1 Year

A description must be entered for Quantity. Any costs without a Quantity description will be removed from the budget.

Eligible Costs:	Quantity AND Description (max 400 characters)	Annual Assistance Requested (Applicant)
1. Coordination Activities		
2. Project Evaluation		
3. Project Monitoring Activities		
4. Participation in the Consolidated Plan		
5. CoC Application Activities	Contracted grant writing services for local, state, and federal funding opportunities, including preparation of the FY2027 Continuum of Care (CoC) Program Competition Application with Hedstrom Consulting @\$20,000.00. Development and facilitation of quality improvement process for CoC System with Homebase for FY26/27.	\$25,000
6. Determining Geographical Area to Be Served by the CoC		
7. Developing a CoC System		
8. HUD Compliance Activities	Contracted HMIS technical assistance services to support HUD-required reporting, data quality review, system troubleshooting, and the preparation of CoC HMIS-related submissions with Tredwell @ \$25,000.00 for FY26/27	\$25,000
Total Costs Requested		\$50,000
Cash Match		\$0
In-Kind Match		\$12,500
Total Match		\$12,500
Total Budget		\$62,500

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

Indirect Cost Information

Indirect Cost Information Form
OMB Number: 2501-0044
Expiration Date: 2/28/2027

Program/Activity Receiving Federal Grant Funding: CoC Program
Applicant Name: County of Lake

Indirect Cost Rate Information for the Applicant/Recipient:

Please check the box that applies to the Applicant/Recipient and complete the table only as provided by the instructions accompanying this form.

The Applicant/Recipient will not charge indirect costs using an indirect cost rate.	☒
The Applicant/Recipient will calculate and charge indirect costs under the award by applying a de minimis rate as provided by 2 CFR 200.414(f), as may be amended from time to time.	☐
The Applicant/Recipient will calculate and charge indirect costs under the award using the indirect cost rate(s) in the table below, and each rate in this table is included in an indirect cost rate proposal developed in accordance with the applicable appendix to 2 CFR part 200 and, if required, has been approved by the cognizant agency for indirect costs.	☐

Submission Type: Update
Effective Date: 07/27/2026

Certification of Authorized Representative for the Applicant/Recipient:

X

**** Under penalty of perjury, I certify on behalf of the Applicant/Recipient that:**

(1) all information provided on this form is true, complete, and accurate, and

(2) Applicant/Recipient will provide HUD with an update to this form immediately upon learning change in the information provided on this form, and

(3) I am authorized to speak for the Applicant/Recipient regarding all information provided on this

****Warning: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties (18 U.S.C §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. § 3729, 3802; 24 CFR § 28.10(b)(iii)).**

Authorized Representative:

Prefix: Miss

First Name: Elise

Middle Name:

Last Name: Jones

Suffix:

Title: Director

Telephone Number: (707) 274-9101
(Format: 123-456-7890)

Fax Number: (707) 274-9192
(Format: 123-456-7890)

Email: elise.jones@lakecountycalifornia.gov

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

Date Signed: 07/27/2026

5A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1. Other Attachment(s)	No		
2. Other Attachment(s)	No		

Attachment Details

Document Description:

Attachment Details

Document Description:

5A. In-Kind MOU Attachment

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

Attachment Details

Document Description:

5B. Certification

**Applicant and Recipient Assurances and Certifications - form HUD-424B (Title)
U.S. Department of Housing and Urban Development OMB Approval No.
2501-0017
(expires 01/31/2026)**

As part of your application for HUD funding, you, as the official authorized to sign on behalf of your organization or as an individual must provide the following assurances and certifications. The Responsible Civil Rights Official has specified this form for use for purposes of general compliance with 24 CFR §§ 1.5, 3.115, 8.50, and 146.25, as applicable. The Responsible Civil Rights Official may require specific civil rights assurances to be furnished consistent with those authorities and will specify the form on which such assurances must be made. A failure to furnish or comply with the civil rights assurances contained in this form may result in the procedures to effect compliance at 24 CFR §§ 1.8, 3.115, 8.57, or 146.39. By submitting this form, you are stating that to the best of your knowledge and belief, all assertions are true and correct.

1. Has the legal authority to apply for Federal assistance, has the institutional, managerial and financial capability (including funds to pay the non-Federal share of program costs) to plan, manage and complete the program as described in the application and the governing body has duly authorized the submission of the application, including these assurances and certifications, and authorized me as the official representative of the application to act in connection with the application and to provide any additional information as may be required.

2. Will administer the grant in compliance with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and implementing regulations (24 CFR part 1), which provide that no person in the United States shall, on the grounds of race, color or national origin, be excluded from participation in, be denied the benefits of, or otherwise be subject to discrimination under any program or activity that receives Federal financial assistance OR if the applicant is a Federally recognized Indian tribe or its tribally designated housing entity, is subject to the Indian Civil Rights Act (25 U.S.C. 1301-1303).

3. Will administer the grant in compliance with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and implementing regulations at 24 CFR part 8, the American Disabilities Act (42 U.S.C. §§ 12101 et seq.), and implementing regulations at 28 CFR part 35 or 36, as applicable, and the Age Discrimination Act of 1975 (42 U.S.C. 6101-07) as amended, and implementing regulations at 24 CFR part 146 which together provide that no person in the United States shall, on the grounds of disability or age, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity that receives Federal financial assistance; except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

4. Will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and the implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion sex (including gender identity and sexual orientation), disability, familial status, or national origin and will affirmatively further fair housing; except an applicant which is an Indian tribe or its instrumentality which is excluded by statute from coverage does not make this certification; and further except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

5. Will comply with all applicable Federal nondiscrimination requirements, including those listed at 24 CFR §§ 5.105(a) and 5.106 as applicable.

6. Will comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (42 U.S.C. 4601) and implementing regulations at 49 CFR part 24 and, as applicable, Section 104(d) of the Housing and Community Development Act of 1974 (42 U.S.C. 5304(d)) and implementing regulations at 24 CFR part 42, subpart A.

7. Will comply with the environmental requirements of the National Environmental Policy Act (42 U.S.C. 4321 et seq.) and related Federal authorities prior to the commitment or expenditure of funds for property.

8. That no Federal appropriated funds have been paid, or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress, in connection with the awarding of this Federal grant or its extension, renewal, amendment or modification. If funds other than Federal appropriated funds have or will be paid for influencing or attempting to influence the persons listed above, I shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying. I certify that I shall require all subawards at all tiers (including sub-grants and contracts) to similarly certify and disclose accordingly. Federally recognized Indian Tribes and tribally designated housing entities (TDHEs) established by Federally-recognized Indian tribes as a result of the exercise of the tribe's sovereign power are excluded from coverage by the Byrd Amendment, but State-recognized Indian tribes and TDHs established under State law are not excluded from the statute's coverage.

Name of Authorized Certifying Official: Elise Jones

Date: 09/24/2026

Title: Director

Applicant Organization: County of Lake

PHA Number (For PHA Applicants Only):

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. **WARNING:** Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§287, 1001, 1010, 1012, 1014; 31 U.S.C. §3729, 3802).

X

6A. Submission Summary

Page		Last Updated	
1A. SF-424 Application Type		No Input Required	
1B. SF-424 Legal Applicant		08/04/2026	
1C. SF-424 Application Details		No Input Required	
1D. SF-424 Congressional District(s)		09/23/2026	
1E. SF-424 Compliance		09/23/2026	
1F. SF-424 Declaration		08/04/2026	
1G. HUD 2880		08/04/2026	
1H. HUD 50070		08/04/2026	
1I. Cert. Lobbying		08/04/2026	
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1J. SF-LLL	08/04/2026
IK. SF-424B	08/04/2026
2A. Project Detail	08/04/2026
2B. Description	09/23/2026
3A. Governance and Operations	09/23/2026
3B. Committees	09/23/2026
4A. Match	08/04/2026
4B. Funding Request	09/23/2026
Indirect Cost Information	08/04/2026
5A. Attachment(s)	No Input Required
5A. In-Kind MOU Attachment	No Input Required
5B. Certification	08/04/2026