

Before Starting the Project Listings for the CoC Priority Listing

The CoC Consolidated Application requires TWO submissions. Both this Project Priority Listing AND the CoC Application MUST be completed and submitted prior to the submission deadline stated in the Unsheltered and Rural Homelessness Special NOFO.

The CoC Priority Listing includes:

- Unsheltered Homelessness Set Aside New Project Listing – lists all new project applications applying for funding through the Unsheltered Homelessness Set Aside that were approved and ranked or rejected by the CoC.
- Rural Set Aside Project Listing – lists all new project applications applying for funding through the Rural Set Aside that were approved and ranked or rejected by the CoC.
- UFA Costs Project Listing – applicable and only visible for Collaborative Applicants that were designated as a Unified Funding Agency (UFA) during the FY 2022 CoC Program Registration process. Only 1 UFA Costs project application is permitted and must be submitted by the Collaborative Applicant. The UFA project must be ranked amongst projects submitted on the Unsheltered Homelessness Set Aside New Project Listing.
- CoC Planning Project Listing – Only 1 CoC planning project is permitted per CoC and must be submitted by the Collaborative Applicant. The CoC Planning project must be ranked amongst projects submitted on the Unsheltered Homelessness Set Aside New Project Listing.
- HUD-2991, Certification of Consistency with the Consolidated Plan – Collaborative Applicants must attach an accurately completed, signed, and dated HUD-2991.

Things to Remember:

- All projects must be approved and ranked or rejected on the Project Listings. This includes funding for CoC Planning and UFA Costs, which must be ranked amongst projects submitted on the Unsheltered Homelessness Set Aside New Project Listing.
- Collaborative Applicants are responsible for ensuring all project applications accurately appear on the Project Listings and there are no project applications missing from one or more Project Listings.
- If a project application(s) is rejected by the CoC, the Collaborative Applicant must notify the project applicant(s) no later than 15 days before the CoC Program Competition application deadline outside of e-snaps and include the reason for rejection.
- For each project application rejected by the CoC the Collaborative Applicant must select the reason for the rejection from the dropdown provided.
- If the Collaborative Applicant needs to amend a project application for any reason after ranking has been completed, the ranking of other projects will not be affected; however, the Collaborative Applicant MUST ensure the amended project is returned to the applicable Project Listing AND re-rank the project application BEFORE submitting the CoC Priority Listing to HUD in e-snaps.

Additional training resources are available online on HUD's website.
https://www.hud.gov/program_offices/comm_planning/coc/competition

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this form, please reference the Unsheltered and Rural Homelessness Special NOFO Competition Priority Listing Detailed Instructions and Unsheltered and Rural Homelessness Special NOFO Competition Priority Listing Navigational Guide on HUD's website.
https://www.hud.gov/program_offices/comm_planning/coc/competition.

Collaborative Applicant Name: Metro Denver Homeless Initiative

Unsheltered Homelessness Set Aside Listing

Instructions:

Prior to starting the Unsheltered Homelessness Set Aside Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

To upload all project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of new projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the Unsheltered Homelessness Set Aside Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make the necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

https://www.hud.gov/program_offices/comm_planning/coc/competition.

Project Name	Date Submitted	Comp Type	Applicant Name	Budget Amount	Grant Term	Rank	PSH/RRH	Expansion
Permanent Support...	2022-09-15 14:56:...	PH	Mission Arvada of...	\$917,453	3 Years	X	PSH	
Special NOFO-Stre...	2022-09-16 18:46:...	SSO	Douglas County Co...	\$2,190,000	3 Years	X		
Tiny Home Village...	2022-10-10 18:54:...	Joint TH & PH-RRH	Adams County	\$2,784,784	3 Years	11		
Supportive Servic...	2022-10-07 01:02:...	SSO	Mission Arvada of...	\$414,183	3 Years	5		
Supportive Servic...	2022-10-10 22:20:...	SSO	The Salvation Arm...	\$1,851,812	3 Years	10		
PSV Street Outreach	2022-10-12 15:43:...	SSO	Colorado Safe Par...	\$856,231	3 Years	8		
Rapid Rehousing f...	2022-10-11 21:26:...	PH	The Salvation Arm...	\$1,524,762	3 Years	9	RRH	
DIFRC Unsheltere d...	2022-10-12 16:37:...	SSO	Denver Indian Fam...	\$371,834	3 Years	7		
CoC Special NOFO ...	2022-10-12 16:34:...	SSO	City of Aurora, C...	\$397,641	3 Years	6		

Metro Area Outrea...	2022-10- 12 20:05:...	PH	Colorado Coalitio...	\$3,818,63 2	3 Years	12	PSH	
Family Tree Marsh...	2022-10- 13 13:53:...	PH	Family Tree, Inc.	\$324,204	3 Years	4	PSH	
CE Unsheltere d NO...	2022-10- 14 14:03:...	SSO	Metro Denver Home...	\$255,072	3 Years	1		
HMIS Unsheltere d ...	2022-10- 14 10:55:...	HMIS	Metro Denver Home...	\$342,642	3 Years	3		

Rural Set Aside Listing

Instructions:

Prior to starting the Rural Set Aside Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

To upload all project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of new projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the Rural Set Aside Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make the necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

https://www.hud.gov/program_offices/comm_planning/coc/competition.

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

Continuum of Care (CoC) Planning Project Listing

Instructions:

Prior to starting the CoC Planning Project Listing, review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide available on HUD's website.

To upload the CoC planning project application submitted to this Project Listing, click the "Update List" button. This process may take a few minutes while the project is located in the e-snaps system. You may update each of the Project Listings simultaneously. To review the CoC Planning Project Listing, click on the magnifying glass next to view the project details. To view the actual project application, click on the orange folder. If you identify errors in the project application, you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

Only one CoC planning project application can be submitted and only by the Collaborative Applicant designated by the CoC which must match the Collaborative Applicant information on the CoC Applicant Profile.

https://www.hud.gov/program_offices/comm_planning/coc/competition.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Accepted?	Rank
CoC Planning Unsh...	2022-10-14 10:25:...	3 Years	Metro Denver Home...	\$391,392	Yes	2

Funding Summary

Instructions

This page provides the total budget summaries for each of the project listings after the you approved, ranked; or rejected project applications. You must review this page to ensure the totals for each of the categories is accurate. The "Total CoC Request" indicates the total funding request amount your CoC's Collaborative Applicant will submit to HUD for funding consideration. As stated previously, only 1 UFA Cost project application (for UFA designated Collaborative Applicants only) and only 1 CoC Planning project application can be submitted and only the Collaborative Applicant designated by the CoC is eligible to request these funds..

Title	Total Amount
Unsheltered Homelessness Set Aside	\$12,941,797
Unsheltered Homelessness Set Aside - Rejected Amount	\$3,107,453
Rural Set Aside	
Rural Set Aside - Rejected Amount	
CoC Planning Amount	\$391,392
Total CoC Request Unsheltered Homelessness Set Aside	\$13,333,189
Total CoC Request Rural Set Aside	
TOTAL CoC REQUEST	\$13,333,189

Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan (HUD-2991)	Yes	Certification of ...	10/17/2022
FY 2022 Rank Tool (optional)	No	FY 2022 Rank Too...	10/17/2022
Other	No		
Priority Listing	No	Priority Listing	10/17/2022

Attachment Details

Document Description: Certification of Consistency with the Consolidated Plan (HUD-2991)

Attachment Details

Document Description: FY 2022 Rank Tool (optional)

Attachment Details

Document Description:

Attachment Details

Document Description: Priority Listing

Submission Summary

WARNING: The FY2022 Special NOFO Consolidated Application requires 2 submissions. Both this Project Priority Listing AND the CoC Consolidated Application MUST be submitted.

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Page	Last Updated
Before Starting	No Input Required
1A. Identification	08/24/2022
2A. Unsheltered Homelessness Set Aside New Project Listing	10/17/2022
2B. Rural Set Aside Project Listing	No Input Required
2D. CoC Planning Project Listing	10/17/2022
Funding Summary	No Input Required
Attachments	10/17/2022
Submission Summary	No Input Required

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
with the Consolidated Plan
for the Continuum of Care
Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: Metro Denver Homeless Initiative CoC

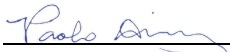
Project Name: See attached project listing

Location of the Project: See attached project listing

Name of
Certifying Jurisdiction: Adams County Government

Certifying Official
of the Jurisdiction Name: Paolo Diaz

Title: CSWB Manager

Signature: 

Date: October 5, 2022

Public reporting burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, completing the form, attaching a list of projects if submitting one form per jurisdiction, obtaining local jurisdiction's signature, and uploading to the electronic e-snaps CoC Consolidated Application. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

Privacy Act Statement. This form does not collect SSN information. The Department of Housing and Urban Development (HUD) is authorized to collect all the information required by this form under 24 CFR part 91, 24 CFR Part 578, and is authorized by the McKinney-Vento Act, as amended by S. 896 The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 (42 U.S.C. 11371 et seq.). HUD considers the completion of this form, including the local jurisdiction(s) authorizing official's signature, as confirmation the project application(s) proposed activities submitted to HUD in the CoC Program Competition are consistent with the jurisdiction's Consolidated Plan and, if the project applicant is a state or unit of local government, that the jurisdiction is following its Consolidated Plan per the requirement of 24 CFR part 91. Failure to either submit one form per project or one form with a listing of project information for each field (i.e., name of applicant, name of project, location of project) will result in a technical deficiency notification that must be corrected within the number of days designated by HUD, and further failure to provide missing or incomplete information will result in project application removal from the review process and rejection in the competitive process.

Instructions for completing the HUD-2991, Certification of Consistency with the Consolidated Plan

The following information must be completed by the Continuum of Care's designated Collaborative Applicant. If the CoC has multiple projects, it may complete a single HUD-2991 for the jurisdiction provided the Collaborative Applicant includes a list of all projects with applicant names, project names, and locations that will be submitted to HUD with the form when forwarding to the jurisdiction for signature. If there are multiple jurisdictions located within a CoC's geographic area, it must obtain a signed HUD-2991 for each jurisdiction where projects are located.

Completed by the CoC's Collaborative Applicant:

Applicant Name. Enter the name of the project applicant's organization.

Project Name. Enter the name of the project application that will be submitted to HUD in the Continuum of Care Program Competition.

Location of the Project. Enter the physical address of the project; however, if the project is designated as a domestic violence project, enter a P.O. Box or address of the main administrative office provided it is not the same address as the project.

Name of Certifying Jurisdiction. Enter the name of jurisdiction that will review the project information and certify consistency with the Consolidated Plan (e.g., City of..., County, State).

Must be completed by the certifying jurisdiction.

Certifying Official of the Jurisdiction. Enter the name of the official who will sign the form.

Title. Enter the official title of the certifying official (e.g., mayor, county judge, state official).

Signature. The certifying official is to sign the form.

Date. Enter the date the certifying official signs the form.

Certification of Consistency with the Consolidated Plan**Project Listing for the Certifying Jurisdiction**

Applicant Name	Project Name	Location of Project
Adams County	Tiny Home Village	Multiple, including Adams County
Colorado Coalition of the Homeless	Metro Denver Outreach to Home Collaborative	Multiple, including Adams County
Colorado Safe Parking Initiative	PSV Street Outreach	Multiple, including Adams County
Salvation Army	Supportive Services for Unsheltered Households	Multiple, including Adams County
Metro Denver Homeless Initiative	MDHI HMIS Metro Denver	Multiple, including Adams County
Metro Denver Homeless Initiative	MDHI Planning Grant	Multiple, including Adams County
Metro Denver Homeless Initiative	MDHI OneHome CE	Multiple, including Adams County

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
with the Consolidated Plan
for the Continuum of Care
Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: Metro Denver Homeless Initiative CoC

Project Name: See attached project listing

Location of the Project: see attached project listing

Name of
Certifying Jurisdiction: Arapahoe County

Certifying Official
of the Jurisdiction Name: Jeremy Fink

Title: Community Development Administrator

Signature: *Jeremy Fink*

Date: 10/13/2022

Public reporting burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, completing the form, attaching a list of projects if submitting one form per jurisdiction, obtaining local jurisdiction's signature, and uploading to the electronic e-snaps CoC Consolidated Application. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

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Instructions for completing the HUD-2991, Certification of Consistency with the Consolidated Plan

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Completed by the CoC's Collaborative Applicant:

Applicant Name. Enter the name of the project applicant's organization.

Project Name. Enter the name of the project application that will be submitted to HUD in the Continuum of Care Program Competition.

Location of the Project. Enter the physical address of the project; however, if the project is designated as a domestic violence project, enter a P.O. Box or address of the main administrative office provided it is not the same address as the project.

Name of Certifying Jurisdiction. Enter the name of jurisdiction that will review the project information and certify consistency with the Consolidated Plan (e.g., City of..., County, State).

Must be completed by the certifying jurisdiction.

Certifying Official of the Jurisdiction. Enter the name of the official who will sign the form.

Title. Enter the official title of the certifying official (e.g., mayor, county judge, state official).

Signature. The certifying official is to sign the form.

Date. Enter the date the certifying official signs the form.

Certification of Consistency with the Consolidated Plan

Project Listing for the Certifying Jurisdiction

Applicant Name	Project Name	Location of Project
Colorado Coalition of the Homeless	Metro Denver Outreach to Home Collaborative	Multiple, including Arapahoe County
Colorado Safe Parking Initiative	PSV Street Outreach	Multiple, including Arapahoe County
Salvation Army	Supportive Services for Unsheltered Households	Multiple, including Arapahoe County
Metro Denver Homeless Initiative	MDHI HMIS Metro Denver	Multiple, including Arapahoe County
Metro Denver Homeless Initiative	MDHI OneHome CE	Multiple, including Arapahoe County
Metro Denver Homeless Initiative	MDHI Planning Grant	Multiple, including Arapahoe County

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
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Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: Metro Denver Homeless Initiative CoC

Project Name: See attached project listing

Location of the Project: see attached project listing

Name of
Certifying Jurisdiction: City of Arvada

Certifying Official
of the Jurisdiction Name: Carrie Espinosa

Title: Manager, Housing Preservation and Resources

Signature: *Carrie Espinosa*

Date: October 11, 2022

Public reporting burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, completing the form, attaching a list of projects if submitting one form per jurisdiction, obtaining local jurisdiction's signature, and uploading to the electronic e-snaps CoC Consolidated Application. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

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Instructions for completing the HUD-2991, Certification of Consistency with the Consolidated Plan

The following information must be completed by the Continuum of Care's designated Collaborative Applicant. If the CoC has multiple projects, it may complete a single HUD-2991 for the jurisdiction provided the Collaborative Applicant includes a list of all projects with applicant names, project names, and locations that will be submitted to HUD with the form when forwarding to the jurisdiction for signature. If there are multiple jurisdictions located within a CoC's geographic area, it must obtain a signed HUD-2991 for each jurisdiction where projects are located.

Completed by the CoC's Collaborative Applicant:

Applicant Name. Enter the name of the project applicant's organization.

Project Name. Enter the name of the project application that will be submitted to HUD in the Continuum of Care Program Competition.

Location of the Project. Enter the physical address of the project; however, if the project is designated as a domestic violence project, enter a P.O. Box or address of the main administrative office provided it is not the same address as the project.

Name of Certifying Jurisdiction. Enter the name of jurisdiction that will review the project information and certify consistency with the Consolidated Plan (e.g., City of..., County, State).

Must be completed by the certifying jurisdiction.

Certifying Official of the Jurisdiction. Enter the name of the official who will sign the form.

Title. Enter the official title of the certifying official (e.g., mayor, county judge, state official).

Signature. The certifying official is to sign the form.

Date. Enter the date the certifying official signs the form.

Project Listing for the Certifying Jurisdiction		
Applicant Name	Project Name	Location of Project
Family Tree, Inc.	Marshall Homes	Multiple, including Arvada
Arvada Central Baptist Church dba The Rising	Mission Arvada Serivces Only	Multiple, including Arvada
Colorado Safe Parking Initiative	PSV Street Outreach	Multiple, including Arvada
Salvation Army	Supportive Services for Unsheltered Households	Multiple, including Arvada
Metro Denver Homeless Initiative	MDHI HMIS Metro Denver	Multiple, including Arvada
Metro Denver Homeless Initiative	MDHI OneHome CE	Multiple, including Arvada
Metro Denver Homeless Initiative	MDHI Planning Grant	Multiple, including Arvada

**U.S. Department of Housing
and Urban Development**

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Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: Metro Denver Homeless Initiative CoC

Project Name: See attached project listing

Location of the Project: see attached project listing

Name of
Certifying Jurisdiction: City of Aurora

Certifying Official
of the Jurisdiction Name: Jessica Prosser

Title: Director of Housing and Community Services

Signature: 

Date: Oct 7, 2022

Public reporting burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, completing the form, attaching a list of projects if submitting one form per jurisdiction, obtaining local jurisdiction's signature, and uploading to the electronic e-snaps CoC Consolidated Application. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

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Completed by the CoC's Collaborative Applicant:

Applicant Name. Enter the name of the project applicant's organization.

Project Name. Enter the name of the project application that will be submitted to HUD in the Continuum of Care Program Competition.

Location of the Project. Enter the physical address of the project; however, if the project is designated as a domestic violence project, enter a P.O. Box or address of the main administrative office provided it is not the same address as the project.

Name of Certifying Jurisdiction. Enter the name of jurisdiction that will review the project information and certify consistency with the Consolidated Plan (e.g., City of..., County, State).

Must be completed by the certifying jurisdiction.

Certifying Official of the Jurisdiction. Enter the name of the official who will sign the form.

Title. Enter the official title of the certifying official (e.g., mayor, county judge, state official).

Signature. The certifying official is to sign the form.

Date. Enter the date the certifying official signs the form.

Certification of Consistency with the Consolidated Plan

Project Listing for the Certifying Jurisdiction

Applicant Name	Project Name	Location of Project
Colorado Coalition of the Homeless	Metro Denver Outreach to Home Collaborative	Multiple, including Aurora
City of Aurora	Street Outreach	Multiple, including Aurora
Colorado Safe Parking Initiative	PSV Street Outreach	Multiple, including Aurora
Salvation Army	Supportive Services for Unsheltered Households	Multiple, including Aurora
Metro Denver Homeless Initiative	MDHI HMIS Metro Denver	Multiple, including Aurora
Metro Denver Homeless Initiative	MDHI OneHome CE	Multiple, including Aurora
Metro Denver Homeless Initiative	MDHI Planning Grant	Multiple, including Aurora

**U.S. Department of Housing
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**Certification of Consistency Plan
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Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: Metro Denver Homeless Initiative CoC

Project Name: See attached project listing

Location of the Project: see attached project listing

Name of

Certifying Jurisdiction: City of Boulder as lead agency for the Boulder Broomfield Regional HOME Consotrium

Certifying Official

of the Jurisdiction Name: Eli Urken

Title: Housing Investment Manager

Signature: 

Date: 10/5/2022

Public reporting burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, completing the form, attaching a list of projects if submitting one form per jurisdiction, obtaining local jurisdiction's signature, and uploading to the electronic e-snaps CoC Consolidated Application. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

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Completed by the CoC's Collaborative Applicant:

Applicant Name. Enter the name of the project applicant's organization.

Project Name. Enter the name of the project application that will be submitted to HUD in the Continuum of Care Program Competition.

Location of the Project. Enter the physical address of the project; however, if the project is designated as a domestic violence project, enter a P.O. Box or address of the main administrative office provided it is not the same address as the project.

Name of Certifying Jurisdiction. Enter the name of jurisdiction that will review the project information and certify consistency with the Consolidated Plan (e.g., City of..., County, State).

Must be completed by the certifying jurisdiction.

Certifying Official of the Jurisdiction. Enter the name of the official who will sign the form.

Title. Enter the official title of the certifying official (e.g., mayor, county judge, state official).

Signature. The certifying official is to sign the form.

Date. Enter the date the certifying official signs the form.

Certification of Consistency with the Consolidated Plan

Project Listing for the Certifying Jurisdiction

Applicant Name	Project Name	Location of Project
Colorado Safe Parking Initiative	PSV Street Outreach	Multiple, including Boulder
Salvation Army	Supportive Services for Unsheltered Households	Multiple, including Boulder
Metro Denver Homeless Initiative	MDHI HMIS Metro Denver	Multiple, including Boulder
Metro Denver Homeless Initiative	MDHI OneHome CE	Multiple, including Boulder
Metro Denver Homeless Initiative	MDHI Planning Grant	Multiple, including Boulder

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
with the Consolidated Plan
for the Continuum of Care
Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: Metro Denver Homeless Initiative CoC

Project Name: See attached project listing

Location of the Project: see attached project listing

Name of
Certifying Jurisdiction: City and County of Broomfield

Certifying Official
of the Jurisdiction Name: Rachel King

Title: Deputy Director, Economic Vitality & Department

Signature: *Rachel King*

Date: 10/7/2022

Public reporting burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, completing the form, attaching a list of projects if submitting one form per jurisdiction, obtaining local jurisdiction's signature, and uploading to the electronic e-snaps CoC Consolidated Application. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

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Instructions for completing the HUD-2991, Certification of Consistency with the Consolidated Plan

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Completed by the CoC's Collaborative Applicant:

Applicant Name. Enter the name of the project applicant's organization.

Project Name. Enter the name of the project application that will be submitted to HUD in the Continuum of Care Program Competition.

Location of the Project. Enter the physical address of the project; however, if the project is designated as a domestic violence project, enter a P.O. Box or address of the main administrative office provided it is not the same address as the project.

Name of Certifying Jurisdiction. Enter the name of jurisdiction that will review the project information and certify consistency with the Consolidated Plan (e.g., City of..., County, State).

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Certifying Official of the Jurisdiction. Enter the name of the official who will sign the form.

Title. Enter the official title of the certifying official (e.g., mayor, county judge, state official).

Signature. The certifying official is to sign the form.

Date. Enter the date the certifying official signs the form.

Certification of Consistency with the Consolidated Plan

Project Listing for the Certifying Jurisdiction

Applicant Name	Project Name	Location of Project
Colorado Safe Parking Initiative	PSV Street Outreach	Multiple, including Broomfield
Salvation Army	Supportive Services for Unsheltered Households	Multiple, including Broomfield
Metro Denver Homeless Initiative	MDHI HMIS Metro Denver	Multiple, including Broomfield
Metro Denver Homeless Initiative	MDHI OneHome CE	Multiple, including Broomfield
Metro Denver Homeless Initiative	MDHI Planning Grant	Multiple, including Broomfield

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
with the Consolidated Plan
for the Continuum of Care
Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: Metro Denver Homeless Initiative CoC

Project Name: See attached project listing

Location of the Project: see attached project listing

Name of
Certifying Jurisdiction: Arapahoe County on behalf of City of Centennial

Certifying Official
of the Jurisdiction Name: Jeremy Fink

Title: Community Development Administrator

Signature: *Jeremy Fink*

Date: 10/13/2022

Public reporting burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, completing the form, attaching a list of projects if submitting one form per jurisdiction, obtaining local jurisdiction's signature, and uploading to the electronic e-snaps CoC Consolidated Application. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

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Completed by the CoC's Collaborative Applicant:

Applicant Name. Enter the name of the project applicant's organization.

Project Name. Enter the name of the project application that will be submitted to HUD in the Continuum of Care Program Competition.

Location of the Project. Enter the physical address of the project; however, if the project is designated as a domestic violence project, enter a P.O. Box or address of the main administrative office provided it is not the same address as the project.

Name of Certifying Jurisdiction. Enter the name of jurisdiction that will review the project information and certify consistency with the Consolidated Plan (e.g., City of..., County, State).

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Certifying Official of the Jurisdiction. Enter the name of the official who will sign the form.

Title. Enter the official title of the certifying official (e.g., mayor, county judge, state official).

Signature. The certifying official is to sign the form.

Date. Enter the date the certifying official signs the form.

Certification of Consistency with the Consolidated Plan

Project Listing for the Certifying Jurisdiction

Applicant Name	Project Name	Location of Project
Colorado Safe Parking Initiative	PSV Street Outreach	Multiple, including Centennial
Salvation Army	Supportive Services for Unsheltered Households	Multiple, including Centennial
Metro Denver Homeless Initiative	MDHI HMIS Metro Denver	Multiple, including Centennial
Metro Denver Homeless Initiative	MDHI OneHome CE	Multiple, including Centennial
Metro Denver Homeless Initiative	MDHI Planning Grant	Multiple, including Centennial

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
with the Consolidated Plan
for the Continuum of Care
Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: Metro Denver Homeless Initiative CoC

Project Name: See attached project listing

Location of the Project: see attached project listing

Name of
Certifying Jurisdiction: City & County of Denver

Certifying Official
of the Jurisdiction Name: Midori Higa

Title: Director of Homelessness Resolution Programs

Signature: Higa, Midori - HOST Director of Homelessness Resolution Progra
Digitally signed by Higa, Midori - HOST Director of Homelessness Resolution Progra
Date: 2022.10.13 09:35:13 -06'00'

Date: 10/13/2022

Public reporting burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, completing the form, attaching a list of projects if submitting one form per jurisdiction, obtaining local jurisdiction's signature, and uploading to the electronic e-snaps CoC Consolidated Application. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

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Completed by the CoC's Collaborative Applicant:

Applicant Name. Enter the name of the project applicant's organization.

Project Name. Enter the name of the project application that will be submitted to HUD in the Continuum of Care Program Competition.

Location of the Project. Enter the physical address of the project; however, if the project is designated as a domestic violence project, enter a P.O. Box or address of the main administrative office provided it is not the same address as the project.

Name of Certifying Jurisdiction. Enter the name of jurisdiction that will review the project information and certify consistency with the Consolidated Plan (e.g., City of..., County, State).

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Date. Enter the date the certifying official signs the form.

Certification of Consistency with the Consolidated Plan**Project Listing for the Certifying Jurisdiction**

Applicant Name	Project Name	Location of Project
Colorado Coalition of the Homeless	Metro Denver Outreach to Home Collaborative	Multiple, including the City and County of Denver
Denver Indian Family Resource Center	DIFRC Unsheltered Homelessness	Multiple, including the City and County of Denver
Family Tree, Inc.	Marshall Homes	Multiple, including the City and County of Denver
Colorado Safe Parking Initiative	PSV Street Outreach	Multiple, including the City and County of Denver
Salvation Army	Supportive Services for Unsheltered Households	Multiple, including the City and County of Denver
Salvation Army	Rapid Rehousing for Special Needs Households	Multiple, including the City and County of Denver
Metro Denver Homeless Initiative	MDHI HMIS Metro Denver	Multiple, including the City and County of Denver
Metro Denver Homeless Initiative	MDHI OneHome CE	Multiple, including the City and County of Denver
Metro Denver Homeless Initiative	MDHI Planning Grant	Multiple, including the City and County of Denver

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
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Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: Metro Denver Homeless Initiative CoC

Project Name: See attached project listing

Location of the Project: see attached project listing

Name of
Certifying Jurisdiction: Jefferson Count

Certifying Official
of the Jurisdiction Name: Kat Douglas

Title: Division Director

Signature: *Kat Douglas*

Date: 10/5/22

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Completed by the CoC's Collaborative Applicant:

Applicant Name. Enter the name of the project applicant's organization.

Project Name. Enter the name of the project application that will be submitted to HUD in the Continuum of Care Program Competition.

Location of the Project. Enter the physical address of the project; however, if the project is designated as a domestic violence project, enter a P.O. Box or address of the main administrative office provided it is not the same address as the project.

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Certification of Consistency with the Consolidated Plan**Project Listing for the Certifying Jurisdiction**

Applicant Name	Project Name	Location of Project
Colorado Coalition of the Homeless	Metro Denver Outreach to Home Collaborative	Multiple, including Jefferson County
Family Tree, Inc.	Marshall Homes	Multiple, including Jefferson County
Arvada Central Baptist Church dba The Rising	Mission Arvada Serivces Only	Multiple, including Jefferson County
Colorado Safe Parking Initiative	PSV Street Outreach	Multiple, including Jefferson County
Salvation Army	Supportive Services for Unsheltered Households	Multiple, including Jefferson County
Metro Denver Homeless Initiative	MDHI HMIS Metro Denver	Multiple, including Jefferson County
Metro Denver Homeless Initiative	MDHI OneHome CE	Multiple, including Jefferson County
Metro Denver Homeless Initiative	MDHI Planning Grant	Multiple, including Jefferson County

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
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Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: Metro Denver Homeless Initiative CoC

Project Name: See attached project listing

Location of the Project: see attached project listing

Name of
Certifying Jurisdiction: City of Lakewood, Colorado

Certifying Official
of the Jurisdiction Name: Amy DeKnikker

Title: Principal Planner & CDBG Program Manager

Signature: 

Date: 10/5/22

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Completed by the CoC's Collaborative Applicant:

Applicant Name. Enter the name of the project applicant's organization.

Project Name. Enter the name of the project application that will be submitted to HUD in the Continuum of Care Program Competition.

Location of the Project. Enter the physical address of the project; however, if the project is designated as a domestic violence project, enter a P.O. Box or address of the main administrative office provided it is not the same address as the project.

Name of Certifying Jurisdiction. Enter the name of jurisdiction that will review the project information and certify consistency with the Consolidated Plan (e.g., City of..., County, State).

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Certifying Official of the Jurisdiction. Enter the name of the official who will sign the form.

Title. Enter the official title of the certifying official (e.g., mayor, county judge, state official).

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Date. Enter the date the certifying official signs the form.

Certification of Consistency with the Consolidated Plan**Project Listing for the Certifying Jurisdiction**

Applicant Name	Project Name	Location of Project
Family Tree, Inc.	Marshall Homes	Multiple, including Lakewood
Colorado Safe Parking Initiative	PSV Street Outreach	Multiple, including Lakewood
Salvation Army	Supportive Services for Unsheltered Households	Multiple, including Lakewood
Metro Denver Homeless Initiative	MDHI HMIS Metro Denver	Multiple, including Lakewood
Metro Denver Homeless Initiative	MDHI OneHome CE	Multiple, including Lakewood
Metro Denver Homeless Initiative	MDHI Planning Grant	Multiple, including Lakewood

**U.S. Department of Housing
and Urban Development**

**Certification of Consistency Plan
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Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: Metro Denver Homeless Initiative CoC

Project Name: See attached project listing

Location of the Project: see attached project listing

Name of
Certifying Jurisdiction: City of Westminster

Certifying Official
of the Jurisdiction Name: Molly Tayer

Title: Housing Coordinator

Signature: *Molly Tayer*

Date: October 6, 2022

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Certification of Consistency with the Consolidated Plan

Project Listing for the Certifying Jurisdiction

Applicant Name	Project Name	Location of Project
Colorado Safe Parking Initiative	PSV Street Outreach	Multiple, including Westminster
Salvation Army	Supportive Services for Unsheltered Households	Multiple, including Westminster
Metro Denver Homeless Initiative	MDHI HMIS Metro Denver	Multiple, including Westminster
Metro Denver Homeless Initiative	MDHI OneHome CE	Multiple, including Westminster
Metro Denver Homeless Initiative	MDHI Planning Grant	Multiple, including Westminster

**U.S. Department of Housing
and Urban Development**

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Program Competition**

I certify the proposed activities included in the Continuum of Care (CoC) project application(s) is consistent with the jurisdiction's currently approved Consolidated Plan.

Applicant Name: Metro Denver Homeless Initiative CoC

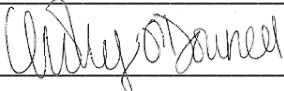
Project Name: See attached project listing

Location of the Project: see attached project listing

Name of
Certifying Jurisdiction: City of Longmont

Certifying Official
of the Jurisdiction Name: Molly O'Donnell

Title: Housing & Community Investment Division Director

Signature: 

Date: 10/14/2022

Public reporting burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, completing the form, attaching a list of projects if submitting one form per jurisdiction, obtaining local jurisdiction's signature, and uploading to the electronic e-snaps CoC Consolidated Application. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

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Instructions for completing the HUD-2991, Certification of Consistency with the Consolidated Plan

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Completed by the CoC's Collaborative Applicant:

Applicant Name. Enter the name of the project applicant's organization.

Project Name. Enter the name of the project application that will be submitted to HUD in the Continuum of Care Program Competition.

Location of the Project. Enter the physical address of the project; however, if the project is designated as a domestic violence project, enter a P.O. Box or address of the main administrative office provided it is not the same address as the project.

Name of Certifying Jurisdiction. Enter the name of jurisdiction that will review the project information and certify consistency with the Consolidated Plan (e.g., City of..., County, State).

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Title. Enter the official title of the certifying official (e.g., mayor, county judge, state official).

Signature. The certifying official is to sign the form.

Date. Enter the date the certifying official signs the form.

Certification of Consistency with the Consolidated Plan

Project Listing for the Certifying Jurisdiction

Applicant Name	Project Name	Location of Project
Colorado Safe Parking Initiative	PSV Street Outreach	Multiple, including Longmont
Salvation Army	Supportive Services for Unsheltered Households	Multiple, including Longmont
Metro Denver Homeless Initiative	MDHI HMIS Metro Denver	Multiple, including Longmont
Metro Denver Homeless Initiative	MDHI OneHome CE	Multiple, including Longmont
Metro Denver Homeless Initiative	MDHI Planning Grant	Multiple, including Longmont

AGENCY NAME
 Project Name
 Project Type
 Reviewers

PSH, RRH, TH/RRH

New Projects Rating Tool

EXPERIENCE		Points Earned	Points Possible
A	Describe the experience of the applicant and sub recipients in working with the proposed population and in providing housing similar to the proposed in the application		10
B	Describe experience with utilizing a Housing First Approach. Include		10
B.1	Eligibility criteria		-
B.2	Process for accepting new clients		-
B.3	Process and criteria for exiting clients		-
B.4	Must demonstrate there are no preconditions to entry ; Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure projection participation is terminated in only the most severe cases		-
C	Describe experience in effectively utilizing federal funds (including HUD grants and other public funding) to operate housing grants		5
Experience Subtotal		0	25

DESIGN OF HOUSING & SUPPORTIVE SERVICES		Points Earned	Points Possible
A	Extent to which the applicant		10
A.1	Demonstrate understanding of the needs fo the clients to be served		-
A.2	Demonstrate type, scale, and location of the housing fit the needs of the clients to be served		-
A.3	Demonstrate type and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served		-
A.4	Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits		-
A.5	Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks		-
B	The proposed project has a strategy for providing supportive services to those with the highest service needs, including those with histories of unsheltered homelessness and those who do not traditionally engage with supportive services.		5
C	Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs		5
D	Describe how clients will be assisted to increase employment and/or income and to maximize their ability to live independently		5
E	The proposed project is consistent with the plan described by the CoC in response to Section VII.B.4 of this NOFO (Unsheltered Plan).		10
Design of Housing and Supportive Services Subtotal		0	35

TIMELINESS		Points Earned	Points Possible
A	Describe plan for rapid implementation of the program documenting how the project will be ready to begin housing the first program participant: Provide a detailed schedule of proposed activities for 60 days, 120, 180 after award		10

FINANCIAL		Points Earned	Points Possible
A	Project is cost effective - comparing projected cost per person served to CoC average witin		5
B	Documented match amount		5
C	Budgeted costs are reasonable, allocable and allowable		20
Financial Subtotal		0	30

OTHER AND LOCAL CRITERIA

TOTAL SCORE		0	100
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AGENCY NAME
 Project Name
 Project Type
 Reviewers

Street Outreach

New Projects Rating Tool

EXPERIENCE		Points Earned	Points Possible
A	Describe the experience of the applicant and sub recipients in working with the proposed population		10
B	The extent to which they have a street outreach strategy that regularly engages individuals and families experiencing unsheltered homelessness in the locations where they reside, including a specific strategy for engaging those with the highest vulnerabilities		10
C	Describe experience in effectively utilizing federal funds (including HUD grants and other public funding) to operate housing grants		5
Experience Subtotal		0	25

DESIGN OF HOUSING & SUPPORTIVE SERVICES		Points Earned	Points Possible
A	Extent to which the applicant		10
A.1	Demonstrate understanding of the needs for the clients to be served		-
A.2	Demonstrate type, scale, and location fit the needs of the clients to be served		-
A.3	Demonstrate type and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served		-
A.4	Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits		-
A.5	Establish performance measures that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks		-
B	The proposed project has a strategy for providing supportive services to those with the highest service needs, including those with histories of unsheltered homelessness and those who do not traditionally engage with supportive services.		5
C	Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs		5
D	Describe how clients will be assisted to increase employment and/or income and to maximize their ability to live independently		5
E	The proposed project is consistent with the plan described by the CoC in response to Section VII.B.4 of this NOFO (Unsheltered Plan).		10
Design of Housing and Supportive Services Subtotal		0	35

TIMELINESS		Points Earned	Points Possible
A	Describe plan for rapid implementation of the program documenting how the project will be ready to begin housing the first program participant: Provide a detailed schedule of proposed activities for 60 days, 120, 180 after award		10

FINANCIAL		Points Earned	Points Possible
A	Project is cost effective - comparing projected cost per person served to CoC average within		5
B	Documented match amount		5
C	Budgeted costs are reasonable, allocable and allowable		20
Financial Subtotal		0	30

OTHER AND LOCAL CRITERIA

TOTAL SCORE		0	100
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AGENCY NAME
 Project Name
 Project Type
 Reviewers

Supportive Services

New Projects Rating Tool

EXPERIENCE		Points Earned	Points Possible
A	Describe the experience of the applicant and sub recipients in working with the proposed population		10
B	Describe experience with ensuring people who are unsheltered or have histories of unsheltered homelessness are able to access housing and other resources in the community, including steps to increase access to identification, providing housing navigation services, and providing access to health care and other supportive services.		10
C	Describe experience in effectively utilizing federal funds (including HUD grants and other public funding) to operate housing grants		5
Experience Subtotal		0	25

DESIGN OF HOUSING & SUPPORTIVE SERVICES		Points Earned	Points Possible
A	Extent to which the applicant		10
A.1	Demonstrate understanding of the needs fo the clients to be served		-
A.2	Demonstrate type, scale, and location fit the needs of the clients to be served		-
A.3	Demonstrate type and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served		-
A.4	Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits		-
A.5	Establish performance measures that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks		-
B	The proposed project has a strategy for providing supportive services to those with the highest service needs, including those with histories of unsheltered homelessness and those who do not traditionally engage with supportive services.		5
C	Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs		5
D	Describe how clients will be assisted to increase employment and/or income and to maximize their ability to live indpendently		5
E	The proposed project is consistent with the plan described by the CoC in response to Section VII.B.4 of this NOFO (Unsheltered Plan).		10
Design of Housing and Supportive Services Subtotal		0	35

TIMELINESS		Points Earned	Points Possible
A	Describe plan for rapid implementation of the program documenting how the project will be ready to begin housing the first program participant: Provide a detailed schedule of proposed activities for 60 days, 120, 180 after award		10

FINANCIAL		Points Earned	Points Possible
A	Project is cost effective - comparing projected cost per person served to CoC average witin		5
B	Documented match amount		5
C	Budgeted costs are reasonable, allocable and allowable		20
Financial Subtotal		0	30

OTHER AND LOCAL CRITERIA

TOTAL SCORE		0	100
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MDHI Unsheltered NOFO Ranking Outcomes

All Projects

Rank	Project	Project Type	Budget Amount	
1	MDHI - CE Grant	SSO - CE	\$ 255,124	\$ 255,072
2	MDHI - Planning Grant	N/A	\$ 391,512	\$ 391,392
3	MDHI - HMIS Grant	HMIS	\$ 342,734	\$ 342,642
4	Family Tree - Marshal Homes	PSH	\$ 324,204	\$ 324,204
5	Mission Arvada - SSO	SSO	\$ 414,183	\$ 414,183
6	City of Aurora - Street Outreach	SSO - SO	\$ 397,643	\$ 397,641
7	DIFRC - Street Outreach	SSO - SO	\$ 371,835	\$ 371,834
8	CSPI - PSV Street Outreach	SSO - SO	\$ 856,304	\$ 856,231
9	Salvation Army - Rapid Rehousing	RRH	\$ 1,524,818	\$ 1,524,762
10	Salvation Army - Supportive Services	SSO	\$ 1,852,492	\$ 1,851,812
11	Adams County - Tiny Home Village	TH/RRH	\$ 2,784,784	\$ 2,784,784
12	CCH- Outreach to Home Collaborative	PSH	\$ 3,818,632	\$ 3,818,632
	Total		\$ 13,334,264	\$ 13,333,189