

Before Starting the Project Listings for the CoC Priority Listing

The FY 2019 CoC Consolidated Application requires TWO submissions. Both this Project Priority Listing AND the CoC Application MUST be submitted prior to the CoC Program Competition deadline as required by the FY 2019 CoC Program Competition NOFA.

The FY 2019 CoC Priority Listing includes the following:

- Reallocation forms – must be completed if the CoC is reallocating eligible renewal projects to create new projects as described in the FY 2019 CoC Program Competition NOFA.
- New Project Listing – lists all new project applications created through reallocation, the CoC Bonus, and DV Bonus that have been approved and ranked or rejected by the CoC.
- Renewal Project Listing – lists all eligible renewal project applications that have been 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 2019 CoC Program Registration process. Only 1 UFA Costs project application is permitted and can only be submitted by the Collaborative Applicant.
- CoC Planning Project Listing – Only 1 CoC planning project is permitted per CoC and can only be submitted by the Collaborative Applicant.
- YHDP Project Listing – lists the eligible YHDP renewal project for the CoC that must be approved and ranked or rejected by the CoC.
- 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 new, renewal, and YHDP projects must be approved and ranked or rejected on the Project Listings.
- Collaborative Applicants are responsible for ensuring all project applications are accurately appearing 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 the CoC Training page of the HUD Exchange at: <https://www.hudexchange.info/resource/2916/project-priority-listing-coc-consolidated-application/>

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this form, please reference the FY 2019 CoC Priority Listing Detailed Instructions and FY 2019 CoC Priority Listing Navigational Guide on the HUD Exchange at <https://www.hudexchange.info/programs/e-snaps/>.

Submit technical question to the HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/program-support/my-question/>.

Collaborative Applicant Name: Texas Homeless Network

2. Reallocation

Instructions:

For guidance on completing this form, please reference the FY 2019 CoC Priority Listing Detailed Instructions and FY 2019 CoC Priority Listing Navigational Guide on the HUD Exchange at <https://www.hudexchange.info/programs/e-snaps/>.

Submit technical question to the HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/program-support/my-question/>.

2-1. Is the CoC reallocating funds from one or more eligible renewal grant(s) that will expire in calendar year 2020 into one or more new projects? Yes

3. Reallocation - Grant(s) Eliminated

CoCs that are reallocating eligible renewal project funds to create a new project application – as detailed in the FY 2019 CoC Program Competition NOFA – may do so by eliminating one or more expiring eligible renewal projects. CoCs that are eliminating eligible renewal projects entirely must identify those projects on this form.

Amount Available for New Project: (Sum of All Eliminated Projects)				
\$549,522				
Eliminated Project Name	Grant Number Eliminated	Component Type	Annual Renewal Amount	Type of Reallocation
City of Beaumont	TX0219L6E071811	PH-PSH	\$154,808	Regular
City of Longview ...	TX0157L6T071811	PH-PSH	\$394,714	Regular

3. Reallocation - Grant(s) Eliminated Details

Instructions:

For guidance on completing this form, please reference the FY 2019 CoC Priority Listing Detailed Instructions and FY 2019 CoC Priority Listing Navigational Guide on the HUD Exchange at <https://www.hudexchange.info/programs/e-snaps/>.

Submit technical question to the HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/program-support/my-question/>.

*** 3-1. Complete each of the fields below for each eligible renewal grant that is being eliminated during the FY 2019 reallocation process. Collaborative Applicants should refer to the final HUD-approved FY 2019 Grant Inventory Worksheet to ensure all information entered on this form is accurate.**

Eliminated Project Name: City of Beaumont

Grant Number of Eliminated Project: TX0219L6E071811

Eliminated Project Component Type: PH-PSH

Eliminated Project Annual Renewal Amount: \$154,808

3-2. Describe how the CoC determined that this project should be eliminated and include the date the project applicant was notified. (limit 750 characters)

The Texas Balance of State Continuum of Care makes all reallocation decisions using a Reallocation Policy and Procedure. These decisions are based on historical performance data, the applicant's ability to appropriately spend down all the funds awarded, and the applicant's ability to effectively administer the awarded funds. The City of Beaumont was notified in writing on June 27, 2019 that TX0219L6E071811 would be fully reallocated during the FY2019 CoC Program Competition.

This applicant has historically struggled to meet the TX BoS CoC's performance expectations. This applicant was subject to the mandatory reallocation consideration based on the project's ranking in the 2018 TX BoS CoC Local Application Process

3. Reallocation - Grant(s) Eliminated Details

Instructions:

For guidance on completing this form, please reference the FY 2019 CoC Priority Listing

Project Priority List FY2019	Page 5	09/28/2019
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Detailed Instructions and FY 2019 CoC Priority Listing Navigational Guide on the HUD Exchange at <https://www.hudexchange.info/programs/e-snaps/>.
Submit technical question to the HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/program-support/my-question/>.

*** 3-1. Complete each of the fields below for each eligible renewal grant that is being eliminated during the FY 2019 reallocation process. Collaborative Applicants should refer to the final HUD-approved FY 2019 Grant Inventory Worksheet to ensure all information entered on this form is accurate.**

Eliminated Project Name: City of Longview CoC 2018 Renewal

Grant Number of Eliminated Project: TX0157L6T071811

Eliminated Project Component Type: PH-PSH

Eliminated Project Annual Renewal Amount: \$394,714

3-2. Describe how the CoC determined that this project should be eliminated and include the date the project applicant was notified. (limit 750 characters)

This project applicant submitted an incomplete local competition application on 8/23/2019 resulting in several non-curable deficiencies. A threshold review was completed and the applicant notified on 8/27/2019 that the application contained non-curable deficiencies and would be rejected and would not move forward in the local competition process. The applicant submitted a grievance to the TX BoS CoC Board of Directors on 8/28/2019. The board heard that grievance on 8/28/2019 and returned a written response rejecting the grievance and requested remedy on 8/29/2019.

4. Reallocation - Grant(s) Reduced

CoCs that are reallocating eligible renewal project funds to create a new project application – as detailed in the FY 2019 CoC Program Competition NOFA – may do so by reducing one or more expiring eligible renewal projects. CoCs that are reducing eligible renewal projects entirely must identify those projects on this form.

Amount Available for New Project (Sum of All Reduced Projects)					
\$135,482					
Reduced Project Name	Reduced Grant Number	Annual Renewal Amount	Amount Retained	Amount available for new project	Reallocation Type
Texarkana Homeles...	TX0387L6T071804	\$338,705	\$203,223	\$135,482	Regular

4. Reallocation - Grant(s) Reduced Details

Instructions:

For guidance on completing this form, please reference the FY 2019 CoC Priority Listing Detailed Instructions and FY 2019 CoC Priority Listing Navigational Guide on the HUD Exchange at <https://www.hudexchange.info/programs/e-snaps/>.

Submit technical question to the HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/program-support/my-question/>.

4-1. Complete the fields below for each eligible renewal grant that is being reduced during the FY 2019 reallocation process. Collaborative Applicants should refer to the FY 2019 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Texarkana Homeless Coalition: Doorways Home

Grant Number of Reduced Project: TX0387L6T071804

Reduced Project Current Annual Renewal Amount: \$338,705

Amount Retained for Project: \$203,223

Amount available for New Project(s): \$135,482
(This amount will auto-calculate by selecting "Save" button)

4-2. Describe how the CoC determined that this project should be reduced and include the date the project applicant was notified of the reduction. (limit 750 characters)

The Texas Balance of State Continuum of Care (TX BoS CoC) makes all reallocation decisions using a Reallocation Policy and Procedure. These decisions are based on historical performance data, the applicant's ability to appropriately spend down all the funds awarded, and the applicant's ability to effectively administer the awarded funds. The City of Texarkana was notified in writing on June 27, 2019 that TX0387L6T071804 would be partially reallocated during the FY2019 CoC Program Competition.

This applicant has historically struggled to house the contracted number of participants. In the last two contract years this applicant has returned more than 20% of awarded funds to the US Treasury. Per the TX BoS CoC Reallocation Policy this applicant met the threshold for reallocation consideration by the TX BoS CoC Board of Directors.

Continuum of Care (CoC) New Project Listing

Instructions:

Prior to starting the New Project Listing, Collaborative Applicants should carefully review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide, both of which are available at: <https://www.hudexchange.info/resource/2916/project-priority-listing-coc-consolidated-application/>

To upload all new project applications that have been submitted to this CoC Project Listing, click on 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. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). To review a project on the New 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 there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon. The Collaborative Applicant has the 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.

Project Name	Date Submitted	Comp Type	Applicant Name	Budget Amount	Grant Term	Rank	PH/Realloc	PSH/RRH	Expansion
TCCI Pelican Isla...	2019-08-23 11:35:...	Joint TH & PH-RRH	The Children's Ce...	\$278,050	1 Year	26	PH Bonus		
FIC_RRH_KILLEEN_F...	2019-08-28 12:41:...	PH	Families In Crisi...	\$232,870	1 Year	D27	DV Bonus	RRH	Yes
Lubbock Open Door...	2019-09-01 16:15:...	PH	Lubbock Open Door	\$761,915	1 Year	25	PH Bonus	PSH	Yes
COSA Rapid Rehousing	2019-08-29 15:34:...	PH	City of San Angelo	\$175,230	1 Year	29	PH Bonus	RRH	
Fredonia Homeless...	2019-09-03 11:34:...	PH	Sabine Valley Center	\$110,376	1 Year	31	PH Bonus	RRH	Yes
Rapid Rehousing a...	2019-08-29 11:04:...	PH	Christian Communi...	\$351,340	1 Year	32	PH Bonus	RRH	
Turning Point-Exp...	2019-09-03 14:30:...	PH	Giving HOPE, Inc.	\$190,401	1 Year	24	PH Bonus	PSH	Yes
First Step	2019-09-03 15:22:...	PH	Giving HOPE, Inc.	\$342,650	1 Year	33	PH Bonus	RRH	

Connections PSH F...	2019-09-03 15:10:...	PH	Denton County Men...	\$372,375	1 Year	28	PH Bonus	PSH	Yes
Laredo Housing Au...	2019-09-04 18:50:...	PH	Laredo Housing Au...	\$221,176	1 Year	30	PH Bonus	RRH	
Virtual CES FY19	2019-09-25 13:43:...	SSO	Homeless Network ...	\$2,491,065	3 Years	34	PH Bonus		
TX BoS CoC HMIS P...	2019-09-25 15:47:...	HMIS	Homeless Network ...	\$64,400	1 Year	2	Reallocation		Yes
Next Step Expansion	2019-09-26 17:16:...	PH	Mid-Coast Family ...	\$230,410	1 Year	22	Reallocation	PSH	Yes
Pathways	2019-09-26 17:11:...	Joint TH & PH-RRH	Mid-Coast Family ...	\$273,558	1 Year	23	Both		

Continuum of Care (CoC) Renewal Project Listing

Instructions:

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

To upload all renewal project applications that have been submitted to this Renewal Project Listing, click on the "Update List" button. This process may take a few minutes based upon the number of renewal projects that need to be located in the e-snaps system. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). To review a project on the Renewal 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 there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon. The Collaborative Applicant has the sole responsibility for ensuring all amended projects are resubmitted and appear on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

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

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

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Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Rank	PSH/RRH	Comp Type	Consolidation Type	Expansion Type
Fredonia Homeless...	2019-08-22 15:47:...	1 Year	Sabine Valley Center	\$135,790	E6	RRH	PH		Stand-Alone Renewal Expa...
Homeless to Homes...	2019-08-21 11:10:...	1 Year	Neighborhood Deve...	\$183,013	12	PSH	PH		
Texarkana Homeless ...	2019-08-22 21:48:...	1 Year	City of Texarkana	\$203,223	13	RRH	PH		

Lubbock Open Door...	2019-08-22 19:53:...	1 Year	Lubbock Open Door	\$567,365	E9	PSH	PH		Stand-Alone Renewal Expa...
Lubbock Open Door...	2019-08-22 19:54:...	1 Year	Lubbock Open Door	\$1,329,280	NA	PSH	PH		Combined Renewal Expansion
The Salvation Arm...	2019-08-23 14:45:...	1 Year	The Salvation Arm...	\$160,550	18	RRH	PH		
The Salvation Arm...	2019-08-23 15:42:...	1 Year	The Salvation Arm...	\$142,541	20	PSH	PH		
FY19 GCC Permanen...	2019-08-28 10:01:...	1 Year	The Gulf Coast Ce...	\$586,191	17	PSH	PH		
WOMAN, Inc. Rapid...	2019-08-30 11:23:...	1 Year	Women Opting for ...	\$116,712	5	RRH	PH		
Hope Housing Serv...	2019-08-30 13:43:...	1 Year	Abilene Hope Have...	\$212,905	19	PSH	PH		
Denton County Coo...	2019-08-29 17:49:...	1 Year	United Way of Den...	\$123,926	21		SSO		
FIC_RR_H_KILLE EN_F...	2019-08-28 12:50:...	1 Year	Families In Crisi...	\$662,522	NA	RRH	PH		Combined Renewal Expansion
FIC_RR_H_KILLE EN_FY19	2019-08-28 12:26:...	1 Year	Families In Crisi...	\$429,652	E4	RRH	PH		Stand-Alone Renewal Expa...
Transforming Lives	2019-09-01 19:32:...	1 Year	The Salvation Arm...	\$153,944	10	PSH	PH		
Next Step Combined	2019-09-01 13:49:...	1 Year	Mid-Coast Family ...	\$757,092	NA	PSH	PH		Combined Renewal Expansion
Hope Housing Serv...	2019-09-03 09:54:...	1 Year	Abilene Hope Have...	\$243,599	14	RRH	PH		
Project Bridge Ra...	2019-09-01 18:44:...	1 Year	The Salvation Arm...	\$299,962	11	RRH	PH		
Next Step	2019-09-01 13:12:...	1 Year	Mid-Coast Family ...	\$509,549	E7	PSH	PH		Stand-Alone Renewal Expa...
Project HOPE FY 2019	2019-09-03 13:36:...	1 Year	Odessa Links	\$304,944	15	RRH	PH		
Fredonia Homeles s...	2019-09-03 11:33:...	1 Year	Sabine Valley Center	\$246,166	NA	RRH	PH		Combined Renewal Expansion

HUD RAPID REHOU SI...	2019-09-03 14:20:...	1 Year	Shelter Agencies ...	\$172,601	16	RRH	PH		
Connecti ons PSH F...	2019-09-03 15:13:...	1 Year	Denton County Men...	\$304,045	E3	PSH	PH		Stand-Alone Renewal Expa...
Connecti ons PSH F...	2019-09-03 15:11:...	1 Year	Denton County Men...	\$676,432	NA	PSH	PH		Combined Renewal Expansion
Turning Point- Com...	2019-09-12 12:14:...	1 Year	Giving HOPE, Inc.	\$422,418	NA	PSH	PH		Combined Renewal Expansion
Turning Point	2019-09-12 12:00:...	1 Year	Giving HOPE, Inc.	\$232,017	E8	PSH	PH		Stand-Alone Renewal Expa...
TX BoS CoC HMIS P...	2019-09-25 15:48:...	1 Year	Homeles s Network ...	\$433,018	E1		HMIS		Stand-Alone Renewal Expa...
TX BoS CoC HMIS P...	2019-09-25 17:29:...	1 Year	Homeles s Network ...	\$497,418	NA		HMIS		Combined Renewal Expansion

Continuum of Care (CoC) Planning Project Listing

Instructions:

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

To upload the CoC planning project application that has been submitted to this CoC Planning Project Listing, click on the "Update List" button. This process may take a few minutes as the project will need to be located in the e-snaps system. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). 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 there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon.

Only one CoC Planning project application can be submitted by a Collaborative Applicant and must match the Collaborative Applicant information on the CoC Applicant Profile. Any additional CoC Planning project applications must be rejected.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Comp Type
TX-607 CoC Planni...	2019-09-27 11:43:...	1 Year	Homeless Network ...	\$1,130,489	CoC Planning Proj...

Continuum of Care (CoC) YHDP Renewal Project Listing

Instructions:

Prior to starting the New Project Listing, Collaborative Applicants should carefully review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide, both of which are available at: <https://www.hudexchange.info/resource/2916/project-priority-listing-coc-consolidated-application/>

To upload all new project applications that have been submitted to this CoC Project Listing, click on 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. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). To review a project on the New 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 there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon. The Collaborative Applicant has the 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.

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

Funding Summary

Instructions

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

This page contains the total budget summaries for each of the project listings for which the Collaborative Applicant approved and ranked or rejected project applications. The Collaborative Applicant must review this page to ensure the totals for each of the categories is accurate. The "Total CoC Request" indicates the total funding request amount the Collaborative Applicant will submit to HUD for funding consideration. As stated previously, 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
Renewal Amount	\$5,515,547
Consolidated Amount	\$0
New Amount	\$6,095,816
CoC Planning Amount	\$1,130,489
YHDP Renewal Amount	\$0
Rejected Amount	\$0
TOTAL CoC REQUEST	\$12,741,852

Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan	Yes	Certification of ...	09/28/2019
FY 2017 Rank (from Project Listing)	No		
Other	No		
Other	No		

Attachment Details

Document Description: Certification of Consistency

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

WARNING: The FY2017 CoC Consolidated Application requires 2 submissions. Both this Project Priority Listing AND the CoC Consolidated Application MUST be submitted.

WARNING: The FY2017 CoC Consolidated Application requires 2 submissions. Both this Project Priority Listing AND the CoC Consolidated Application MUST be submitted.

Page	Last Updated
Before Starting	No Input Required
1A. Identification	09/25/2019
2. Reallocation	09/25/2019
3. Grant(s) Eliminated	09/25/2019
4. Grant(s) Reduced	09/25/2019
5A. CoC New Project Listing	09/26/2019
5B. CoC Renewal Project Listing	09/25/2019
5D. CoC Planning Project Listing	09/27/2019
5E. YHDP Renewal Project Listing	No Input Required
Funding Summary	No Input Required

Applicant: Texas Balance of State Continuum of Care

TX-607

Project: TX-607 CoC Registration FY2019.

COC_REG_2019_170625

Attachments

09/28/2019

Submission Summary

No Input Required

Exhibit 5B:

Certification of Consistency with Consolidated Plan

Applicants are required to submit the certification below from the official responsible for submitting the Consolidated Plan on behalf of the State or local government. Applicants may use this form or may reproduce the exact contents. HUD recommends completing the form itself and submitting it as the certification, rather than retyping it.

I certify that, based on the information provided, the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.

(Type or clearly print the following information)

Applicant Name: **Homeless Network of Texas (dba Texas Homeless Network) (THN)**

Contact Name: **Eric Samuels, President/CEO**

Contact Phone Number: **512-687-5101**

Name of the Federal Program to which the Applicant is Applying: **HUD Continuum of Care (CoC) Program**

Project Name: **Texas Balance of State CoC HMIS Project FY 2019**

Location of the Project: **THN, 1713 Fortview Road, Austin, TX 78704**

Brief Description of the Project: **The Homeless Management Information System (HMIS) is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless persons. THN is the HMIS Lead for the TX BoS CoC, and the HMIS software is ClientTrack. The Renewal project will continue to provide HMIS system administration and operations activities.**

Needs the Project Will Address: **All recipients of HUD Continuum of Care (CoC) Program funding and Emergency Solutions Grant (ESG) funding are required to use the CoC's HMIS. The HMIS project allows THN, as the HMIS Lead Agency for the CoC, and the TX BoS CoC to fulfill its requirement to establish and operate an HMIS, as described in 24 CFR Part 578.**

Strategic Plan and/or Consolidated Plan Goals

Addressed (TDHCA use only):

Note: After reviewing the information, the state has not found anything inconsistent with the Consolidated Plan.

Certifying Official of the Jurisdiction

Name: **Elizabeth Yevich**

Title: **Director, Housing Resource Center**

Signature & Date:

Elizabeth Yevich August 20, 2019

Certification Directions:

Save this form to your computer. Open the form using Microsoft Word and fill out form fields. Save the file. Use your email program to email the completed form as an attachment to elizabeth.yevich@tdhca.state.tx.us.

When received, TDHCA will compare this project to TDHCA goals and determine consistency. When approved, the form will be signed and a copy will be faxed and mailed to the person designated at right.

If you have any questions, please contact Elizabeth Yevich at (512) 463-7961

Exhibit 5B:
Certification of Consistency with Consolidated Plan

Applicants are required to submit the certification below from the official responsible for submitting the Consolidated Plan on behalf of the State or local government. Applicants may use this form or may reproduce the exact contents. HUD recommends completing the form itself and submitting it as the certification, rather than retyping it.

I certify that, based on the information provided, the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.

(Type or clearly print the following information)

Applicant Name: **Homeless Network of Texas (dba Texas Homeless Network) (THN)**

Contact Name: **Eric Samuels, President/CEO**

Contact Phone Number: **512-687-5101**

Name of the Federal Program to
which the Applicant is Applying: **HUD Continuum of Care (CoC) Program**

Project Name: **Texas Balance of State CoC HMIS Project FY 2019 Expansion**

Location of the Project: **THN, 1713 Fortview Road, Austin, TX 78704**

Brief Description of the Project: **The Homeless Management Information System (HMIS) is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless persons. THN is the HMIS Lead for the TX BoS CoC, and the HMIS software is ClientTrack. The HMIS Project expansion would allow THN to provide enhanced technical assistance and custom reporting for projects and communities in the CoC.**

Needs the Project Will Address: **All recipients of HUD CoC Program funding and Emergency Solutions Grant (ESG) funding are required to use the CoC's HMIS. The HMIS project allows THN, as the HMIS Lead Agency for the CoC, and the TX BoS CoC to fulfill its requirement to establish and operate an HMIS. The expansion will increase THN's capacity to support HMIS users with enhanced data quality, custom reports, and data analysis.**

Strategic Plan and/or
Consolidated Plan Goals

Addressed (TDHCA use only):

Certifying Official of the Jurisdiction

Name: **Elizabeth Yevich**

Title: **Director, Housing Resource Center**

Signature & Date:

*NOTE: After reviewing the information,
the State has not found
anything inconsistent with the
Consolidated Plan.*

Elizabeth Yevich August 20, 2019

Certification Directions:

Save this form to your computer. Open the form using Microsoft Word and fill out form fields. Save the file. Use your email program to email the completed form as an attachment to elizabeth.yevich@tdhca.state.tx.us.

When received, TDHCA will compare this project to TDHCA goals and determine consistency. When approved, the form will be signed and a copy will be faxed and mailed to the person designated at right.

If you have any questions, please contact Elizabeth Yevich at (512) 463-7961

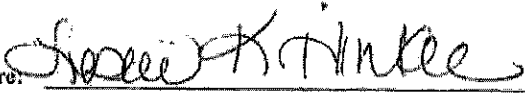
**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: Denton County MHMRProject Name: Denton County MHMR Connections PSHLocation of the Project: 2519 Scripture St.
Denton, TX 76201Name of the Federal
Program to which the
applicant is applying: HUD Continuum of CareName of
Certifying Jurisdiction: City of DentonCertifying Official
of the Jurisdiction
Name: Todd HilmanTitle: City ManagerSignature: Date: 8-8-19

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: Families In Crisis, Inc.Project Name: FIC_RRH_KILLEEN_FY19Location of the Project: Killeen, TexasName of the Federal
Program to which the
applicant is applying: HUD Continuum of Care for Homeless Assistance ProgramName of
Certifying Jurisdiction: City of KilleenCertifying Official
of the Jurisdiction
Name: Leslie HinkleTitle: Director of Community Development, City of KilleenSignature: Date: 8-15-19

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: Women Opting for More Affordable Housing Now, Inc. (WOMAN, Inc.)

Project Name: Woman, Inc. Rapid Re-Housing

Location of the Project: City of Galveston

Name of the Federal
Program to which the
applicant is applying: HUD Continuum of Care for Homeless Assistance Program

Name of
Certifying Jurisdiction: City of Galveston

Certifying Official
of the Jurisdiction
Name: Alice T. Law

Title: Interim Director, Department of Grants and Housing, City of Galveston

Signature: 

Date: August 8, 2019

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: Sabine Valley Regional MHMR Center dba Community Healthcore

Project Name: Fredonia Homeless and Disabled Women and Children Rapid Rehousing
Fredonia Homeless and Disabled Women and Children Rapid Rehousing – Expansion
Fredonia Homeless and Disabled Women and Children Rapid Rehousing - Combined

Location of the Project: Longview, TX

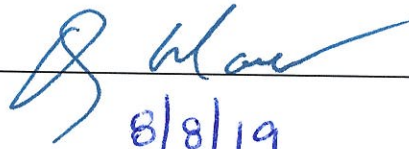
Name of the Federal
Program to which the
applicant is applying: HUD Continuum of Care

Name of
Certifying Jurisdiction: City of Longview

Certifying Official
of the
Jurisdiction

Name: Andy Mack

Title: City Mayor

Signature: 

Date: 8/8/19

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing
and Urban Development

OMB Approval No. 2500-0112 (Exp. 03/2011)

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

Applicant Name: Mid-Coast Family Services

Project Name: Next Step

Location of the Project: 120 S. Main Suite 175


Victoria, TX

Name of the Federal
Program to which the
applicant is applying: 2019 HUD Continuum of Care

Name of
Certifying Jurisdiction: City of Victoria, Texas

Certifying Official
of the Jurisdiction
Name: Julie Fulgham

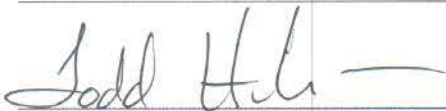
Title: Director of Development Services

Signature: 

Date: 8/28/19

**Certification of Consistency
with the Consolidated Plan**U.S. Department of Housing
and Urban Development

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

Applicant Name: Giving HOPE, Inc.Project Name: Turning PointLocation of the Project: 117 W Sycamore St
Denton, TX 76201Name of the Federal
Program to which the
applicant is applying: HUD Continuum of Care - Permanent Supportive Housing - LeasingName of
Certifying Jurisdiction: City of DentonCertifying Official
of the Jurisdiction
Name: Todd HilemanTitle: City ManagerSignature: Date: 8-9-2019

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: Lubbock Open DoorProject Name: Lubbock Open Door PSHLocation of the Project: 1901-1911 13th St, Lubbock, TX 79401
& scattered-site units throughout Lubbock, TX.Name of the Federal
Program to which the
applicant is applying: HUD Continuum of Care ProgramName of
Certifying Jurisdiction: City of LubbockCertifying Official
of the Jurisdiction
Name: Daniel M. PopeTitle: Mayor, City of LubbockSignature: Date: 5 August 2019

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: The Salvation Army, a Georgia Corporation

Project Name: Transforming Lives

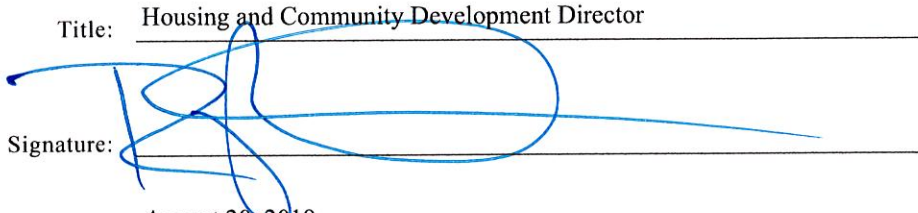
Location of the Project: 521 Josephine, Corpus Christi, TX 78401

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

Name of
Certifying Jurisdiction: City of Corpus Christi

Certifying Official
of the Jurisdiction
Name: Rudy Bentancourt

Title: Housing and Community Development Director

Signature: 

Date: August 20, 2019

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: The Salvation Army, a Georgia Corporation

Project Name: Project Bridge Rapid Rehousing

Location of the Project: 521 Josephine, Corpus Christi, TX 78401

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

Name of
Certifying Jurisdiction: City of Corpus Christi

Certifying Official
of the Jurisdiction
Name: Rudy Bentancourt

Title: Housing and Community Development Director

Signature:  _____

Date: August 20, 2019

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing
and Urban Development

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

Applicant Name: Neighborhood Development Corp.

Project Name: Homeless to Homes Program

Location of the Project: 520 W. Decatur Ave.

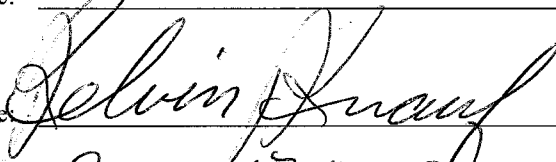
Orange, Orange County TX 77630

Name of the Federal
Program to which the
applicant is applying: 2019 Continuum of Care Program Competition

Name of
Certifying Jurisdiction: City of Orange, Texas

Certifying Official
of the Jurisdiction
Name: Kelvin Knauf

Title: City Manager

Signature: 

Date: August 7, 2019

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: City of Texarkana

Project Name: Texarkana Homeless Coalition: Doorways Home

Location of the Project: Texarkana, Texas

Name of the Federal
Program to which the
applicant is applying: US Department of Housing and Urban Development Continuum of Care

Name of
Certifying Jurisdiction: City of Texarkana, Texas

Certifying Official
of the Jurisdiction
Name: Shirley Jaster

Title: City Manager

Signature: 

Date: 08/09/2019

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: Abilene Hope Haven, Inc.

Project Name: Hope Housing Services

Location of the Project: Abilene Hope Haven, Inc.
801 S Treadaway Blvd.
Abilene, TX 79602

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

Name of
Certifying Jurisdiction: City of Abilene

Certifying Official
of the Jurisdiction
Name: Joana Wuest

Title: Neighborhood Initiatives Manager

Signature: 

Date: 08/16/2019

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing
and Urban Development

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

Applicant Name: Odessa Links

Project Name: Project HOPE FY 2019

Location of the Project: City of Odessa

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

Name of Certifying Jurisdiction: City of Odessa

Certifying Official of the Jurisdiction Name: Merita Sandoval

Title: Director of Community Development

Signature: 

Date: August 15, 2019

Exhibit 5B:**Certification of Consistency with Consolidated Plan**

Applicants are required to submit the certification below from the official responsible for submitting the Consolidated Plan on behalf of the State or local government. Applicants may use this form or may reproduce the exact contents. HUD recommends completing the form itself and submitting it as the certification, rather than retyping it.

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.

(Type or clearly print the following information)

Applicant Name: Shelter Agency for Families in East Texas, Inc.

Contact Name: Ryan Shriver

Contact Phone Number: 903.572.0973

Name of the Federal Program to
which the Applicant is Applying: HUD Continuum of Care (CoC) Program

Project Name: HUD Rapid Rehousing 3

Location of the Project: Titus, Camp, Franklin, Morris, Lamar, Red River, Delta, Hopkins, and Wood

Brief Description of the Project: This project serves our 9 counties in East Texas. We will be applying for RRH funds which will pay for deposits, rent, utilities up to FMR, medical payment and transportation expenses as well as provide case management for all participants. Our focus is homeless victims of domestic violence.

Needs the Project Will Address: This project will provide needed Rapid Rehousing Services for families experiencing domestic violence and individuals in Northeast Texas.

Strategic Plan and/or

Consolidated Plan Goals
Addressed (TDHCA use only):

Name of Certifying Jurisdiction: **State of Texas**

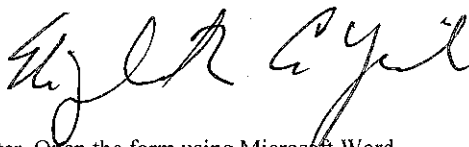
Certifying Official of the Jurisdiction

Name: **Elizabeth Yevich**

Title: **Director, Housing Resource Center**

Note: After reviewing the information, the state has not found anything inconsistent with the Consolidated Plan.

Signature & Date:



22 August, 2019

Certification Directions:

Save this form to your computer. Open the form using Microsoft Word and fill out form fields. Save the file. Use your email program to email the completed form as an attachment to elizabeth.yevich@tdhca.state.tx.us.

When received, TDHCA will compare this project to TDHCA goals and determine consistency. When approved, the form will be signed and a copy will be faxed and mailed to the person designated at right.

Name: Ryan Shriver
Number: 903-572-0973
Mailing Address: PO Box 2337
Mt. Pleasant, TX 75455
Fax: 903-572-0982

If you have any questions, please contact Elizabeth Yevich at (512) 463-7961

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.

(Type or clearly print the following information:)

Applicant Name: Gulf Coast Center

Project Name: FY19 GCC Permanent Housing

Location of the Project: City of Galveston

Name of the Federal
Program to which the
applicant is applying: FY19 Continuum of Care Program Renewal-Permanent Housing

Name of
Certifying Jurisdiction: City of Galveston

Certifying Official
of the Jurisdiction
Name: Alice T. Law

Title: Interim Director, Grants & Housing Department

Signature: 

Date: August 8, 2019

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: The Salvation Army, Temple Corps

Project Name: The Salvation Army - CoC Rapid Rehousing Program

Location of the Project: The Salvation Army

419 West Ave. G

Temple, TX 76504

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

Name of
Certifying Jurisdiction: City of Temple

Certifying Official
of the Jurisdiction
Name: Brynn Myers

Title: City Manager

Signature: 

Date: 8/19/19

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: Abilene Hope Haven, Inc.

Project Name: Hope Housing Services- PSH

Location of the Project: Abilene Hope Haven, Inc.
801 S Treadaway Blvd.
Abilene, TX 79602

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

Name of
Certifying Jurisdiction: City of Abilene

Certifying Official
of the Jurisdiction
Name: Joana Wuest

Title: Neighborhood Initiatives Manager

Signature: 

Date: 08/16/2019

**Certification of Consistency
with the Consolidated Plan**U.S. Department of Housing
and Urban Development

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

Applicant Name: The Salvation Army, Temple CorpsProject Name: The Salvation Army - CoC Permanent Supportive Housing ProgramLocation of the Project: The Salvation Army
419 West Ave. G
Temple, TX 76504Name of the Federal
Program to which the
applicant is applying: Continuum of Care (CoC)Name of
Certifying Jurisdiction: City of TempleCertifying Official
of the Jurisdiction
Name: Brynn MyersTitle: City managerSignature: Date: 8/19/19

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: United Way of Denton County

Project Name: Denton County Coordinated Entry

Location of the Project: 1314 Teasley Lane, Denton, Texas 76205

Name of the Federal
Program to which the
applicant is applying: HUD FY 2019 CoC Program Competition

Name of
Certifying Jurisdiction: City of Denton

Certifying Official
of the Jurisdiction
Name: Todd Hileman

Title: City Manager

Signature: 

Date: 8-15-2019

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing
and Urban Development

OMB Approval No. 2500-0112 (Exp. 06/2011)

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

Applicant Name: Mid-Coast Family Services

Project Name: Next Step Expansion

Location of the Project: 120 S. Main Suite 175
Victoria, TX

Name of the Federal
Program to which the
applicant is applying: 2019 HUD Continuum of Care

Name of
Certifying Jurisdiction: City of Victoria, Texas

Certifying Official
of the Jurisdiction
Name: Julie Fulgham

Title: Director of Development Services

Signature: Julie Fulgham

Date: 8/28/19

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing
and Urban Development

OMB Approval No. 2000-0112 (Exp. 06/2011)

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

Applicant Name: Mid-Coast Family Services

Project Name: Pathways

Location of the Project: 120 S. Main Suite 175

Victoria, TX

Name of the Federal
Program to which the
applicant is applying: 2019 HUD Continuum of Care

Name of
Certifying Jurisdiction: City of Victoria, Texas

Certifying Official
of the Jurisdiction
Name: Julie Fulgham

Title: Director of Development Services

Signature: 

Date: 8/28/19

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: Giving Hope, Inc.

Project Name: Turning Point-Expansion

Location of the Project: 117 W Sycamore St
Denton, TX 76201

Name of the Federal
Program to which the
applicant is applying: HUD Continuum of Care-Permanent Supportive Housing-Leasing

Name of
Certifying Jurisdiction: City of Denton

Certifying Official
of the Jurisdiction
Name: Danielle Shaw

Title: Community Development Manager

Signature: 

Date: 9/24/19

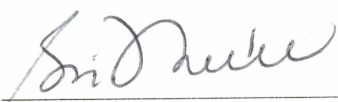
**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: Lubbock Open DoorProject Name: Lubbock Open Door PSH CombinedLocation of the Project: 1901-1911 13th St, Lubbock, TX 79401& scattered-site units throughout Lubbock, TX.Name of the Federal
Program to which the
applicant is applying: HUD Continuum of Care ProgramName of
Certifying Jurisdiction: City of LubbockCertifying Official
of the Jurisdiction
Name: Daniel M. PopeTitle: Mayor, City of LubbockSignature: Date: 5 August 2019

**Certification of Consistency
with the Consolidated Plan**U.S. Department of Housing
and Urban Development

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

Applicant Name: The Children's Center, Inc.Project Name: TCCI Pelican Island COC ProjectLocation of the Project: University Apartments
602 Seawolf Parkway
Pelican Island, Galveston, Texas 77554Name of the Federal
Program to which the
applicant is applying: 2019 Continuum of Care HUD FR-6300-N-25Name of
Certifying Jurisdiction: City of Galveston, Galveston, TexasCertifying Official
of the Jurisdiction
Name: Brian MaxwellTitle: City ManagerSignature: Date: 8/21/19

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: Families In Crisis, Inc.

Project Name: FIC_RRH_KILLEEN_FY19_EXPANSION

Location of the Project: Killeen, Texas

Name of the Federal
Program to which the
applicant is applying: HUD Continuum of Care for Homeless Assistance Program

Name of
Certifying Jurisdiction: City of Killeen

Certifying Official
of the Jurisdiction
Name: Leslie Hinkle

Title: Director of Community Development, City of Killeen

Signature: 

Date: 8-28-19

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: Denton County MHMR

Project Name: Denton County MHMR Connections PSH - Expansion

Location of the Project: 2519 Scripture St.
Denton, TX 76201

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

Name of
Certifying Jurisdiction: City of Denton

Certifying Official
of the Jurisdiction
Name: Todd Hilman

Title: City Manager

Signature: 

Date: 9-3-2019

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

Applicant Name: City of San Angelo

Project Name: COSA Rapid Rehousing

Location of the Project: 52 W. College

San Angelo, TX 76903

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

Name of
Certifying Jurisdiction: City of San Angelo

Certifying Official
of the Jurisdiction
Name: Michael Dane

Title: Assistant City Manager

Signature: 

Date: 8/23/19

**Certification of Consistency
with the Consolidated Plan****U.S. Department of Housing
and Urban Development**

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

ApplicantName: Housing Authority of the City of Laredo, Texas

ProjectName: Laredo Housing Authority Rapid Rehousing Program

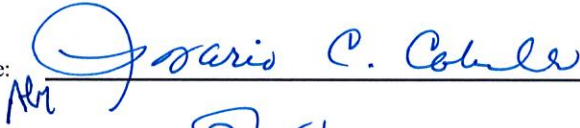
Location of the Project: 2000 San Francisco Avenue, Laredo, Texas 78040
and scattered sites throughout Laredo, Texas

Name of the Federal
Program to which the
applicant is applying: HUD 2019 Continuum of Care (CoC) Program Competition

Name of
Certifying Jurisdiction: City of Laredo Texas

Certifying Official
of the Jurisdiction
Name: Rosario C. Cabello

Title: Interim Co-City Manager

Signature: 

Date: 8/15/19

**Certification of Consistency
with the Consolidated Plan**

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

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

Applicant Name: Christian Community Action

Project Name: ^{and}
Rapid-Rehousing ~~X~~ Rescue Services

Location of the Project: City of Lewisville--Denton County

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

Name of
Certifying Jurisdiction: Lewisville

Certifying Official
of the Jurisdiction
Name: Donna Barron

Title: City Manager

Signature: 

Date: 8-9-19

**Certification of Consistency
with the Consolidated Plan**U.S. Department of Housing
and Urban Development

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

Applicant Name: Giving HOPE, Inc.

Project Name: First Step

Location of the Project: 117 W Sycamore St
Denton, TX 76201Name of the Federal
Program to which the
applicant is applying: HUD Continuum of Care - Rapid RehousingName of
Certifying Jurisdiction: City of DentonCertifying Official
of the Jurisdiction
Name: Todd Hileman

Title: City Manager

Signature:

Date:

U.S. Department of Housing
and Urban Development**Certification of Consistency
with the Consolidated Plan**

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

Applicant Name: Sabine Valley Regional MHMR Center dba Community Healthcore

Project Name: Fredonia Homeless and Disabled Women and Children Rapid Rehousing
Fredonia Homeless and Disabled Women and Children Rapid Rehousing – Expansion
Fredonia Homeless and Disabled Women and Children Rapid Rehousing - Combined

Location of the Project: Longview, TX

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

Name of
Certifying Jurisdiction: City of Longview

Certifying Official
of the
Jurisdiction
Name: Andy Mack

Title: City Mayor

Signature: 

Date: 8/8/19

Exhibit 5B:
Certification of Consistency with Consolidated Plan

Applicants are required to submit the certification below from the official responsible for submitting the Consolidated Plan on behalf of the State or local government. Applicants may use this form or may reproduce the exact contents. HUD recommends completing the form itself and submitting it as the certification, rather than retyping it.

I certify that, based on the information provided, the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.

(Type or clearly print the following information)

Applicant Name: **Homeless Network of Texas (dba Texas Homeless Network) (THN)**
Contact Name: **Eric Samuels, President/CEO**
Contact Phone Number: **512-687-5101**

Name of the Federal Program to which the Applicant is Applying: **HUD Continuum of Care (CoC) Program**

Project Name: **Virtual CES FY19**

Location of the Project: **THN, 1713 Fortview Road, Austin, TX 78704**

Brief Description of the Project: **This project creates access to local Coordinated Entry (CE) processes around the State through the development and maintenance of "virtual entry points."**

Needs the Project Will Address: **By creating virtual entry points into the Coordinated Entry System, any Texan experiencing housing instability or homelessness in the Texas Balance of State Continuum of Care will be quickly linked to housing and services to resolve their crisis.**

NOTE: After reviewing the information, the state has not found anything inconsistent with the Consolidated Plan.

Strategic Plan and/or Consolidated Plan Goals

Addressed (TDHCA use only):

Certifying Official of the Jurisdiction

Name: **Elizabeth Yevich**

Title: **Director, Housing Resource Center**

Signature & Date:

Elizabeth Yevich August 20, 2019

Certification Directions:

Save this form to your computer. Open the form using Microsoft Word and fill out form fields. Save the file. Use your email program to email the completed form as an attachment to elizabeth.yevich@tdhca.state.tx.us.

When received, TDHCA will compare this project to TDHCA goals and determine consistency. When approved, the form will be signed and a copy will be faxed and mailed to the person designated at right.

If you have any questions, please contact Elizabeth Yevich at (512) 463-7961

Exhibit 5B:
Certification of Consistency with Consolidated Plan

Applicants are required to submit the certification below from the official responsible for submitting the Consolidated Plan on behalf of the State or local government. Applicants may use this form or may reproduce the exact contents. HUD recommends completing the form itself and submitting it as the certification, rather than retyping it.

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.

(Type or clearly print the following information)

Applicant Name: **Homeless Network of Texas (dba Texas Homeless Network) (THN)**

Contact Name: **Eric Samuels, President/CEO**

Contact Phone Number: **512-687-5101**

Name of the Federal Program to which the Applicant is Applying: **HUD Continuum of Care (CoC) Program**

Project Name: **TX-607 CoC Planning Project FY2019**

Location of the Project: **THN, 1713 Fortview Road, Austin, TX 78704**

Brief Description of the Project: **The CoC Planning project funds Texas Homeless Network (THN) staff positions to coordinate and facilitate Continuum of Care development for the Texas Balance of State CoC as a whole (215 counties) and for communities within the BoS CoC, working with local homeless coalitions (LHCs). Activities include needs analyses, inventories, counts, training, project development, planning, data analysis, system mapping, implementing Coordinated Entry systems, strategic planning, monitoring, and evaluation.**

Needs the Project Will Address: **The CoC Planning funds increase the capacity of THN, as the Collaborative Applicant for the TX BoS CoC, to assist the CoC to meet all the CoC responsibilities mandated by 24 CFR Part 578, including establishing, planning for, and operating the CoC, as required by HUD. Renewal funding would allow THN to continue those activities for another year.**

Strategic Plan and/or
Consolidated Plan Goals

Addressed (TDHCA use only):

*NOTE: After reviewing the information,
the State has not found anything
inconsistent with the Consolidated
Plan.*

Name of Certifying Jurisdiction: **State of Texas**

Certifying Official of the Jurisdiction

Name: **Elizabeth Yevich**

Title: **Director, Housing Resource Center**

Signature & Date: *Elizabeth Yevich August 20, 2019*

Certification Directions:

Save this form to your computer. Open the form using Microsoft Word and fill out form fields. Save the file. Use your email program to email the completed form as an attachment to elizabeth.yevich@tdhca.state.tx.us.

When received, TDHCA will compare this project to TDHCA goals and determine consistency. When approved, the form will be signed and a copy will be faxed and mailed to the person designated at right.
