

## Sources of Match/Leverage Detail

### Instructions:

Match and Leverage are two distinct categories of funds from other sources that will be used in conjunction with this project, if awarded. Match (cash or in-kind) must be used for eligible program costs only and must be equal to or greater than 25% of the total grant request for all eligible costs under the CoC Program interim rule with the exception of leasing costs. Leverage funds can be used for any program related costs and there is no minimum requirement. Please review 24 CFR Part 578, the FY 2015 CoC Program NOFA for more detailed information concerning Match and Leverage.

Will this commitment be used towards Match or Leverage? Select Match or Leverage to categorize each commitment being entered.

Type of Commitment: Select Cash (\$) or In-kind (non-cash) to denote the type of contribution that describes this match or leveraging commitment.

Type of source: Select Private or Government to denote the source of the contribution. The Neighborhood Stabilization Program (NSP) and HUD-VASH (VA Supportive Housing program) funds may be considered Government sources. Project applicants are encouraged to include funds from these sources, whenever possible.

Name the Source of the Commitment: Be as specific as possible (e.g. HHS PATH Grant, Community Service Block Grant, Hilton Foundation Grant to End Chronic Homelessness) and include the office or grant program as applicable. Enter the name of the entity providing the contribution. It is important to provide as much detail as possible so that the local HUD office can quickly identify and approve of the commitment source.

Date of written commitment: Enter the date of the written contribution.

Value of written commitment: Enter the total dollar value of the contribution

The values entered on each detailed Match/Leverage screen will populate the Screen "71. Summary Budget." The Cash, In-Kind, and Total Match will also automatically populate the Summary budget where the 25% match minimum will be calculated and applied.

Additional Resources can be found at the HUD Resource Exchange:  
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>

- 1. Will this commitment be used towards Match or Leverage?** Leverage
- 2. Type of Commitment:** Cash
- 3. Type of Source:** Government
- 4. Name the Source of the Commitment:** Riverside County Community Recidivism Reduction  
**(Be as specific as possible and include the office or grant program as applicable)**
- 5. Date of Written Commitment:** 07/01/2015
- 6. Value of Written Commitment:** \$30,000

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1. Will this commitment be used towards Match or Leverage? Leverage
2. Type of Commitment: Cash
3. Type of Source: Government
4. Name the Source of the Commitment: Riverside County Public Safety Realignment  
(Be as specific as possible and include the office or grant program as applicable) Emergency and Transitional Housing
5. Date of Written Commitment: 07/01/2015
6. Value of Written Commitment: \$93,000

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Value of written commitment: Enter the total dollar value of the contribution

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- 1. Will this commitment be used towards Match or Leverage?** Leverage
- 2. Type of Commitment:** In-Kind
- 3. Type of Source:** Private
- 4. Name the Source of the Commitment:** The Grove Community Church Counseling  
**(Be as specific as possible and include the office or grant program as applicable)**
- 5. Date of Written Commitment:** 09/09/2015
- 6. Value of Written Commitment:** \$47,250

## Sources of Match/Leverage Detail

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Date of written commitment: Enter the date of the written contribution.

Value of written commitment: Enter the total dollar value of the contribution

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1. Will this commitment be used towards Match or Leverage? Leverage
2. Type of Commitment: In-Kind
3. Type of Source: Private
4. Name the Source of the Commitment: (Be as specific as possible and include the office or grant program as applicable) E.T. O'Farrell Copywrite, Landlord Negotiation, and Lease Review Retired Real Estate Atty
5. Date of Written Commitment: 09/11/2015
6. Value of Written Commitment: \$204,444

## Sources of Match/Leverage Detail

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Type of Commitment: Select Cash (\$) or In-kind (non-cash) to denote the type of contribution that describes this match or leveraging commitment.

Type of source: Select Private or Government to denote the source of the contribution. The Neighborhood Stabilization Program (NSP) and HUD-VASH (VA Supportive Housing program) funds may be considered Government sources. Project applicants are encouraged to include funds from these sources, whenever possible.

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Date of written commitment: Enter the date of the written contribution.

Value of written commitment: Enter the total dollar value of the contribution

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1. Will this commitment be used towards Match or Leverage? Leverage
2. Type of Commitment: In-Kind
3. Type of Source: Government
4. Name the Source of the Commitment: Riverside County Workforce Development Board  
(Be as specific as possible and include the office or grant program as applicable) Employment Services
5. Date of Written Commitment: 10/13/2015
6. Value of Written Commitment: \$175,000

## Sources of Match/Leverage Detail

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Date of written commitment: Enter the date of the written contribution.

Value of written commitment: Enter the total dollar value of the contribution

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1. Will this commitment be used towards Match or Leverage? Leverage
2. Type of Commitment: In-Kind
3. Type of Source: Private
4. Name the Source of the Commitment: (Be as specific as possible and include the office or grant program as applicable) OctoClean Franchising Systems Inc Training and Development
5. Date of Written Commitment: 10/05/2015
6. Value of Written Commitment: \$150,000

## Sources of Match/Leverage Detail

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1. Will this commitment be used towards Match or Leverage? Leverage
2. Type of Commitment: In-Kind
3. Type of Source: Private
4. Name the Source of the Commitment: Health to Hope Clinics Healthcare Services  
(Be as specific as possible and include the office or grant program as applicable)
5. Date of Written Commitment: 10/12/2015
6. Value of Written Commitment: \$100,000

## Sources of Match/Leverage Detail

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1. Will this commitment be used towards Match or Leverage? Leverage
2. Type of Commitment: In-Kind
3. Type of Source: Government
4. Name the Source of the Commitment: Riverside University Health System-Behavioral Heath  
(Be as specific as possible and include the office or grant program as applicable)
5. Date of Written Commitment: 10/16/2015
6. Value of Written Commitment: \$610,000



## 7I. Summary Budget

**Instructions:**

The system populates a summary budget based on the information entered into each preceding budget form. Review the data and return to the previous forms to correct any inaccurate information. All fields are read only with exception to field "8. Admin (Up to 10%)."

**Admin (Up to 10%):** Enter the amount of requested administration funds. The request should match the amount identified on the CoC's HUD-approved FY 2015 GIW. HUD will not fund greater than 10% of the request listed in the field "Sub-Total Eligible Costs Request." If an amount above 10% is entered, the system will report an error and prevent application submission when the screen is saved.

**Total Assistance plus Admin Requested:** This field is automatically populated based on the amount of funds requested on the various budgets completed by the project applicant and Admin costs requested. This is this is the total amount of funding the project applicant will request in the FY 2015 CoC Program Competition.

**Cash Match:** This field is automatically populated. If it needs to be changed, return to Screen "7H. Sources of Match/Leverage" to make changes to this field.

**In-Kind Match:** This field is automatically populated. If it needs to be changed, return to Screen "7H. Sources of Match/Leverage" to make changes to this field.

**Total Match:** This field will automatically calculate the total combined value of the Cash and In-Kind Match. The total match must equal 25% of the request listed in the field "Total Eligible Costs Request" minus the amount requested for Leased Units and Leased Structures. There is no upper limit for Match. If an ineligible amount is entered, the system will report an error and prevent application submission. To correct an inadequate level of match, return to Screen "7H. Sources of Match/Leverage" to make changes.

Cash and In-Kind Match entered into the budget must qualify as eligible program expenses under the CoC program regulations. Compliance with eligibility requirements will be verified at grant agreement.

The Total Budget automatically calculates when you click the "Save" button.

Additional Resources can be found at the HUD Resource Exchange:  
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**The following information summarizes the funding request for the total term of the project. However, the appropriate amount of cash and in-kind match and administrative costs must be entered in the available fields below.**

Eligible Costs	Total Assistance Requested for 1 year Grant Term (Applicant)
1a. Leased Units	\$0
1b. Leased Structures	\$0
2. Rental Assistance	\$918,048
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<b>3. Supportive Services</b>	\$278,710
<b>4. Operating</b>	\$0
<b>5. HMIS</b>	\$0
<b>6. Sub-total Costs Requested</b>	\$1,196,758
<b>7. Admin (Up to 10%)</b>	\$81,932
<b>8. Total Assistance plus Admin Requested</b>	\$1,278,690
<b>9. Cash Match</b>	\$354,000
<b>10. In-Kind Match</b>	\$0
<b>11. Total Match</b>	\$354,000
<b>12. Total Budget</b>	\$1,632,690

## 8A. Attachment(s)

### Instructions:

**Subrecipient Nonprofit Documentation:** Documentation of the subrecipient's nonprofit status must be uploaded, if the applicant and project subrecipient are different entities, and the subrecipient is a nonprofit organization.

**Other Attachment(s):** Attach any additional information supporting the project funding request. Use a zip file to attach multiple documents.

If indicated on Screens 3A and/or 3B, the following additional attachment screens may be visible that should be used instead of Screen 8A. Attachments:

**CoC Rejection Letter:** Projects that are applying for CoC funds and that have been rejected for the competition by their CoC (Solo Projects) must submit documentation from the CoC verifying and explaining why the project has been rejected.

**Certification of Consistency with Consolidated Plan:** Each applicant that is not a State or unit of local government is required to have a certification by the jurisdiction in which the proposed project will be located confirming that the applicant's application for funding is consistent with the jurisdiction's HUD-approved consolidated plan. The certification must be made in accordance with the provisions of the consolidated plan regulations at 24 CFR part 91, subpart F. For projects that selected "No CoC" on Screen 3A, a form HUD-2991 must be obtained and signed by the certifying official for the applicable jurisdiction, indicating that the proposed project will be consistent with the Consolidated Plan. If the Solo Applicant is a State or unit of local government, the jurisdiction must certify that it is following its HUD-approved Consolidated Plan.

Additional Resources can be found at the HUD Resource Exchange:  
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Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No	POLM non-profit l...	10/07/2015
2) Other Attachment	No	50070 HUD Drug Fr...	10/12/2015
3) Other Attachment	No	POL PSH Match/Lev...	11/02/2015

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## **Attachment Details**

**Document Description:** POLM non-profit letter

## **Attachment Details**

**Document Description:** 50070 HUD Drug Free Workplace

## **Attachment Details**

**Document Description:** POL PSH Match/Leverage Documents

## 8B. Certification

### **A. For all projects:**

#### **Fair Housing and Equal Opportunity**

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

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

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

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

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

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

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

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

If persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance.

It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

**Additional for Rental Assistance Projects:**

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

**B. For non-Rental Assistance Projects Only.  
20-Year Operation Rule.**

For applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 20 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

**1-Year Operation Rule.**

For applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provided.

**C. Explanation.**

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.

**Name of Authorized Certifying Official** Susan von Zabern  
**Date:** 11/10/2015  
**Title:** Director  
**Applicant Organization:** County of Riverside

**PHA Number (For PHA Applicants Only):**

**I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).**

X
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## 9B Submission Summary

Page	Last Updated
<b>1A. Application Type</b>	09/29/2015
<b>1B. Legal Applicant</b>	No Input Required
<b>1C. Application Details</b>	No Input Required
<b>1D. Congressional District(s)</b>	10/07/2015
<b>1E. Compliance</b>	09/29/2015
<b>1F. Declaration</b>	09/29/2015
<b>2A. Subrecipients</b>	10/18/2015
<b>2B. Recipient Performance</b>	10/19/2015
<b>3A. Project Detail</b>	11/03/2015
<b>3B. Description</b>	11/10/2015
<b>4A. Services</b>	10/09/2015
<b>4B. Housing Type</b>	11/10/2015
<b>5A. Households</b>	10/07/2015
<b>5B. Subpopulations</b>	No Input Required
<b>5C. Outreach</b>	10/13/2015
<b>6A. Standard</b>	10/27/2015
<b>6B. Additional Performance Measures</b>	No Input Required
<b>7A. Funding Request</b>	11/06/2015
<b>7D. Rental Assistance</b>	11/10/2015
<b>7E. Supp. Srvcs. Budget</b>	11/10/2015
<b>7H. Match/Leverage</b>	10/27/2015
<b>7I. Summary Budget</b>	No Input Required
<b>8A. Attachment(s)</b>	11/02/2015
<b>8B. Certification</b>	11/10/2015



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

DEPARTMENT OF THE TREASURY

Date: SEP 25 1998

Employer Identification Number:  
33-0724945

DLN:  
17053240030008

Contact Person:  
D. A. DOWNING  
Contact Telephone Number:  
(513) 241-5199

Accounting Period Ending:  
December 31

Form 990 Required:  
No

Addendum Applies:  
No

Path of Life Ministries  
3340 Durahart St  
Riverside, CA 92507  
c/o Eduardo G Sanchez  
500 Citadel Ste. 200  
Los Angeles, CA 90040

Dear Applicant:

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

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

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

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more you pay to each of your employees during a calendar year. This does not apply, however, if you make or have made a timely election under section 3121(w) of the Code to be exempt from such tax. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

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

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(1) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or

Letter 947 (DO/CG)

PATH OF LIFE MINISTRIES

she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(1) organization.

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

Contribution deductions are allowable to donors only to the extent that their contributions are gifts, with no consideration received. Ticket purchases and similar payments in conjunction with fundraising events may not necessarily qualify as deductible contributions, depending on the circumstances. See Revenue Ruling 67-246, published in Cumulative Bulletin 1967-2, on page 104, which sets forth guidelines regarding the deductibility, as charitable contributions, of payments made by taxpayers for admission to or other participation in fundraising activities for charity.

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

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

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

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

PATH OF LIFE MINISTRIES

lated trade or business as defined in section 513 of the Code.

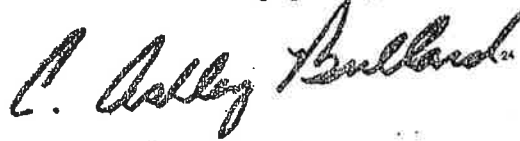
You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal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

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

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

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

Sincerely yours,

A handwritten signature in cursive script that reads "C. Colley Bullard".

District Director

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Path of Life Ministries

Program/Activity Receiving Federal Grant Funding

Permanent Supportive Housing - HUD Continuum of Care

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

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

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

Scattered Sites in Riverside County

Check here  if there are workplaces on file that are not identified on the attached sheets.

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

Name of Authorized Official Damien O'Farrell	Title CEO
Signature X <i>D O Farrell</i>	Date October 12, 2015

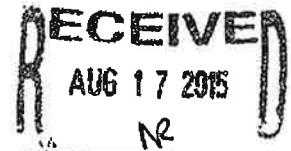
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**Path of Life Ministries**  
**Permanent Supportive Housing**  
**MATCH Documents**

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**CITY OF PERRIS**  
Housing Authority



136 NORTH D STREET  
PERRIS, CALIFORNIA 92570  
TEL: (951) 943-6003

August 10, 2015

Path of Life Ministries  
Ms. Janice Rooths  
6216 Brockton Ave. #211  
Riverside, CA 92506

**Subject: NOTICE TO PROCEED CDBG FY 2015-2016 Homeless Outreach Program -  
(Acct #: 152-5000-156-7731)**

Dear Ms. Rooths:

On July 27, 2015 the City of Perris executed the Subrecipient Agreement between the City of Perris and Path of Life Ministries, for the "Homeless Outreach Program". This program was approved by Council on April 28, 2015 as part of the 2015-2016 Annual Action Plan for the Community Development Block Grant Program (CDBG). I have enclosed an original Subrecipient Agreement for your files. The amount of the approved budget is \$36,000.

Please reference the above project number for all reimbursement requests related to this project. Any reimbursement requests shall contain adequate documentation including a cover letter, summary sheet of expenditures, and checks issued to payees.

In accordance with the Subrecipient Agreement, your agency will be required to submit a quarterly reports with progress of grant funded program activities along with performance and beneficiary data.

If you require any additional information, please do not hesitate to contact me at (951) 943-5003 ext 254.

Sincerely,

Sara Cortés de Pavón  
Grants Manager

Enclosure(s): CDBG Sub-Recipient Agreement

July 7, 2015

Damien O'Farrell  
Chief Operating Officer  
Path of Life Ministries  
P.O. Box 1445  
Riverside, CA 92502

**LIVE UNITED**



United Way  
of the Inland Valleys  
www.uwiv.org

**Subject: 2015-2016 Extended Funding Agreement**

Dear Damien,

We are pleased to inform you of the total amount your agency will receive per program for 2015-2016 Extended Funding:

**Path of Life Ministries  
(Community Shelter) - (\$14,000.00)**

Funding recommendations were made by the Community Impact Committee and approved by the Board of Directors. (The total distribution does not include campaign designations made directly to your agency).

Equal payments of the Extended Funding amounts will be mailed monthly, beginning in July 2015. Subsequent payments will be released after the Extended Funding Agreements have been signed and returned to United Way of the Inland Valleys.

Enclosed are two signed copies of the Strategic Funding Agreement by the UWIV Board Chair and President & CEO. Additionally, we have provided helpful reviewer comments regarding your submitted application. Please review carefully the provisions of the agreement, including the timeline for submitting reports and consequences for non-compliance.

**Please have your Executive Director and Board Chair sign both copies of the agreement and return ONE signed copy to United Way of the Inland Valleys ("UWIV").**

**United Way of the Inland Valleys must receive the signed agreement before August 1<sup>st</sup>  
in order for the August and subsequent allocation checks to be released.**

Below are the reviewer comments regarding your Extended Funding Application:

- The reviewer appreciates the great work that is being done in the community through this program.

We look forward to partnering with you to improve the quality of life in Western Riverside County.

Sincerely,

A handwritten signature in cursive script that reads "Gail Ousley".

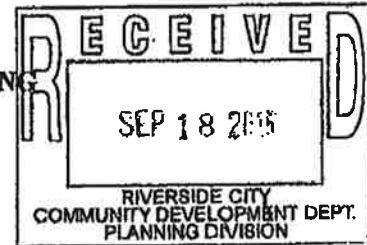
Gail Ousley  
Vice President, Development & Community Impact

Home Office: 6215 River Crest Dr., Suite B • Riverside, CA 92507 • Tel 951.697.4700 • Fax 951.656.8210  
Southwest Office: 25109 Jefferson Ave., Suite 225-A • Murrieta, CA 92562 • Tel 951.233.4315

[www.uwiv.org](http://www.uwiv.org)

**RAPID RE-HOUSING AND SUPPORTIVE HOUSING  
PROGRAMS AGREEMENT**

**PATH OF LIFE MINISTRIES**



THIS RAPID RE-HOUSING AND SUPPORTIVE HOUSING PROGRAMS AGREEMENT is made and entered into this \_\_\_\_\_ day of \_\_\_\_\_, 2015 ("Effective Date"), by and between the HOUSING AUTHORITY OF THE CITY OF RIVERSIDE, a public entity, corporate and politic, hereinafter referred to as "Authority", and the PATH OF LIFE MINISTRIES, a California non-profit corporation, hereinafter referred to as "PLM".

**RECITALS**

A. WHEREAS, Path of Life Ministries is implementing a Housing First Model through the support of its HUD Rapid Re-Housing and Supportive Housing Programs ("Programs"); and

B. WHEREAS, City desires to have PLM perform the services required to implement the Programs as set forth in specific detail on the attached Exhibit "A" entitled "Scope of Services".

NOW, THEREFORE, the parties hereto agree as follows:

1. **Scope of Services.** The Authority will contract with PLM to implement the Programs as set forth in the Scope of Services, attached hereto as Exhibit "A" and incorporated herein by this reference.

2. **Notices.** Any notices required to be given, hereunder shall be in writing and shall be personally served or given by mail. Any notice given by mail shall be deemed given when deposited in the United States Mail, certified and postage prepaid, addressed to the party to be served as follows:

To Authority  
Housing Authority of the  
City of Riverside  
Community & Economic  
Development Department  
Attn: Michelle Davis  
3900 Main Street, 3<sup>rd</sup> Floor  
Riverside, CA 92522

To PLM  
Path of Life Ministries  
Attn: Janice Rooths  
P.O. Box 1445  
Riverside, CA 92502

3. **Worker's Compensation.** By executing this Agreement, PLM certifies that PLM is aware of and will comply with Section 3700 of the Labor Code of the State of California



requiring every employer to be insured against liability for workers' compensation, or to undertake self-insurance before commencing any of the work. PLM shall carry the insurance or provide for self-insurance required by California law to protect PLM from claims under the Workers' Compensation Act. Prior to Authority's execution of this Agreement, PLM shall file with Authority either (1) a certificate of insurance showing that such insurance is in effect, or that PLM is self-insured for such coverage, or (2) a certified statement that PLM has no employees, and acknowledging that if PLM does employ any person, the necessary certificate of insurance will immediately be filed with Authority. Any certificate filed with Authority shall provide that Authority will be given ten (10) days prior written notice before modification or cancellation thereof.

4. **Insurance.** Prior to Authority's execution of this Agreement, PLM shall obtain, and shall thereafter maintain during the term of this Agreement, commercial general liability insurance as required to insure PLM against damages for personal injury, including accidental death, as well as from claims for property damage which may arise from or which may concern operations by PLM, or by anyone directly or indirectly employed by, connected with, or acting for or on behalf of PLM.

All liability insurance shall be issued by insurance companies authorized to transact liability insurance business in the State of California, with a policy holder's rating of A or higher, and a Financial Class of VII or larger.

PLM's commercial general liability policy shall cover both bodily injury (including death) and property damage (including but not limited to premises-operations liability, products-completed operations liability, independent contractors liability, personal injury liability, and contractual liability), in an amount not less than \$1,000,000 per-occurrence limit/\$2,000,000 aggregate.

This minimum amount of coverage shall not constitute any limitation or cap on PLM's indemnification obligations stated in this section.

Prior to Authority's execution of this Agreement, insurance policies or original certificates and additional insured endorsements evidencing the coverage required by this Agreement, for commercial general liability, shall be filed with Authority and shall include Authority and the City of Riverside, its officers and employees as additional insureds. Said policies shall be in the usual form of commercial general liability insurance, but shall include the following provisions:

"Solely with respect to work done by and on behalf of the named insured for the Housing Authority of the City of Riverside and the City of Riverside, it is agreed that the Housing Authority and City and its officers and employees are added as additional insureds under this policy."

The policy shall not be cancelled unless thirty (30) days' prior written notification of intended cancellation has been given to Authority by certified or registered mail.

The Authority and City, its agents and employees make no representation that the limits of the insurance specified to be carried by PLM pursuant to this Agreement are adequate to protect PLM. If PLM believes that any required insurance coverage is inadequate, PLM will obtain such additional insurance coverage as PLM deems adequate, as PLM's sole expense.

The insurance requirements stated in this section may be satisfied by PLM by providing proof of self-insurance acceptable to the Authority.

5. **PLM Indemnification.** PLM agrees to indemnify, defend and hold harmless the Authority and the City, and their authorized agents, officers, and employees against any and all claims or actions arising from PLM's willful misconduct, negligent acts or omissions connected with the performance of work under this Agreement by PLM and for any costs or expenses incurred by PLM or Authority on account of any claim therefore.

6. **Authority Indemnification.** The Authority and City agrees to indemnify, defend and hold harmless PLM and their authorized agents, officers, and employees against any and all claims arising from the Authority's/City's willful misconduct, negligent acts or omissions connected with the performance of work under this Agreement by City/Authority and for any costs or expenses incurred by PLM on account of any claim therefore.

7. **Documentation.** PLM agrees to provide Authority with all the documentation required upon Authority's request. Authority agrees to provide PLM with all documentation required to fulfill their obligations under this agreement.

8. **Accounting Records.** PLM shall maintain complete and accurate records with respect to costs incurred under this Agreement. All such records shall be clearly identifiable. Consultant shall allow a representative of Authority during normal business hours to examine, audit, and make transcripts or copies of such records and any other documents created pursuant to this Agreement. PLM shall allow inspection of all work, data, documents, proceedings, and activities related to the Agreement for a period of three (3) years from the date of final payment under this Agreement.

9. **Term.** All terms and conditions in this Agreement shall commence on July 1, 2015, and shall terminate when all Programs funds have been expended, or no later than June 30, 2016.

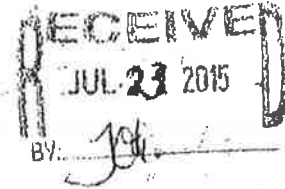
10. **Termination.** In the event PLM fails to provide services as set forth in this Agreement and its attached documents, the Authority may, upon thirty (30) days written notice to PLM, terminate this Agreement.

11. **Compensation.** The Authority agrees to compensate PLM for the activities identified in the Operations Budget, attached here to as Exhibit "B", in an amount not exceed the amount of One Hundred Ten Thousand Dollars (\$110,000). Said payment shall be made in accordance with the City of Riverside's usual accounting procedures upon receipt and approval of an itemized invoice setting forth the services performed. The invoices shall be delivered to the Authority at the address set forth in Section 2.

# San Manuel Band of Mission Indians

July 9, 2015

Mr. Damien O'Farrell  
CEO  
Path of Life Ministries  
6216 Brockton Ave. Ste. 211  
Riverside, CA 92506



Re: Charitable Donation

Dear Mr. O'Farrell,

On behalf of San Manuel Band of Mission Indians ("Tribe"), we want to thank you and your organization for the programs and services you provide to our community.

We are pleased to inform you that a donation in the amount of \$85,000.00 has been approved to support your efforts. By accepting this charitable donation ("Grant") from the Tribe, Path of Life Ministries ("Grantee") agrees to abide by the following terms and conditions:

## I. GRANTEE'S STATUS

The Grantee warrants and represents that it is a public school, Tribal or other government entity, or tax-exempt organization under Section 501(c) (3) of the Internal Revenue Code of 1986, as amended (the "Code"), and is not a private foundation as defined in Section 509(a) of the Code. The Grantee has provided the Tribe with a copy of IRS determination letter(s) evidencing its status as an eligible recipient and warrants and represents that such determination letter(s) are currently in full force and effect. Regardless of the Grantee's current tax status, the Grantee will notify the Tribe immediately of any actual or proposed change in tax status.

## II. PURPOSE AND AMOUNT OF GRANT

The Tribe's donation is made only for the specific charitable purposes requested by you in your proposal to us and as described in this letter. The Grant may not be used for any other purpose without prior written approval from the Tribe.

Full payment of the \$85,000.00 is enclosed for the following purpose(s):

1. Eighty-Five Thousand Dollars (\$85,000.00) to support the Employment Pipeline for the Homeless Program with the cost of program coordinators, employment specialist/navigator, licensed counselor for social work, marriage and family therapist and employment assessment tools.

During the Execution Period (as defined below), the Grantee will accomplish the following:

1. Expand employment pipeline for homeless program:
  - a. Hire one full time program coordinator with a primary concentration on the employment pipeline;



RECEIVED  
JUN 19 2015  
BY:       

June 16, 2015

Damien O'Farrell, Chief Executive Officer  
Path of Life Ministries, Inc.  
P.O. Box 1445  
Riverside, CA 92502

Grant # 2015-13

Dear Mr. O'Farrell,

I am pleased to inform you that on June 1, 2015, Riverside Community Health Foundation's Board of Directors approved an outpatient grant in the amount of \$100,000 to provide funding for Path of Life Ministries' provision of mobile behavioral health care to individuals, families, and children throughout POLM homeless shelters and housing programs. It is our understanding the funds will be used for residents from the following Riverside zip codes: 92501 – 92509, 92518, 92521, 92522, and 91752.

In order for the grant award check to be released, the following documents must be completed, signed, and returned to our office by mail immediately:

- *Revised Program Budget*
- *Grant Contract* (two original documents)

**Revised Program Budget**

Because the \$100,000 awarded is less than your requested amount, we ask that you submit a revised budget. Please refer to the enclosed *Revised Program Budget*; the electronic version of this form will be emailed to you. In the "Total Awarded by RCHF" column of this form, enter the adjusted line item amounts such that the Grand Total of this column equals \$100,000. Please note the following: (1) Total Indirect Costs cannot exceed 15% of the combined total of Personnel and Operating Expenses; and (2) Cells in the "Total Projected Budget" and "Total Requested from RCHF" columns are locked.

If you have any questions about the Revised Program Budget, please contact Desirée Santos-Kho at [desiree@rchf.org](mailto:desiree@rchf.org).

4445-A Magnolia Avenue  
Riverside, CA 92501  
T 951.788.3471  
F 951.788.3589  
[www.rchf.org](http://www.rchf.org)

**Grant Contract**

Enclosed you will find two (2) sets of the grant contract. Please sign both sets in blue ink and return them to our office. We will return a signed copy to you for your records.

**Award Check**

Following our receipt of the signed contract, you will receive a grant award check in the amount of \$100,000, accompanied by a form titled the *Recipient's Acknowledgement of Receipt of Grant*. Please sign the form and return it to our office within 30 days of receiving the check.

**Report (s)**

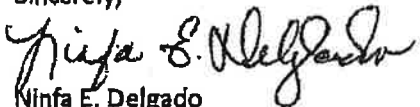
In order to learn about your program's accomplishments, changes, and challenges, Riverside Community Health Foundation will be requesting a Progress Report on January 29, 2016 (report period of July 1, 2015 – December 31, 2015) and a Final Report on July 29, 2016 (report period of January 1, 2016 – June 30, 2016).

Copies of these report forms have been provided for your convenience; electronic versions of the forms are available on our website at [www.rchf.org](http://www.rchf.org). Please submit all reports by mail to:

Ninfa Delgado, Vice President/COO  
Riverside Community Health Foundation  
4445-A Magnolia Ave.  
Riverside, CA 92501

Riverside Community Health Foundation wishes you continued success in providing this valuable service to our community. If you have any questions, please feel free to call Desirée Santos-Kho at (951) 788-3471.

Sincerely,



Ninfa E. Delgado  
Vice President/COO

Enclosures

Cc: Janice Rooths, VP Finance and Administration

**Statement of Support and Intent  
for Partnership and service with  
Path of Life Ministries**

This statement of support and intent shall stand as evidence that The Grove Community Church (The Grove) agrees to work with the Path of Life Ministries (POLM) for the collaborative mission of providing support and supportive services to individuals and families exiting homelessness into permanent housing options.

The Grove has worked with POLM for 10 years, as POLM has provided Emergency Shelter, Transitional Housing, Permanent Housing, and Supportive Services for families with children and individuals who find themselves in a homeless crisis or stuck in the cycle of homelessness and poverty. Throughout the period of time that we have collaborated with POLM, we have known them to serve as an excellent service provider for those they serve.

The Grove has historically collaborated with POLM in providing financial support to POLM for the services they provide.

The Grove's amount of support has totaled \$3,600 per month in past years end with total \$4,800 per month this coming year.

In addition to this financial support, The Grove has provided the following services and support to those who POLM staff connect us with.

- Counseling through our On Site Counseling Center
- Meals four times each month (increasing to 6 times each month in 2015)

These services are provided at no cost to POLM, but hold an approximate total fair market value of \$247,250.00 in addition to the financial support we provide assuming that they are provided in connection with the 75 permanent supportive housing clients POLM will be serving this year.

The Grove has been pleased to collaborate with POLM in the past and we are pleased to continue in this collaboration for the coming year.

Please contact Pastor Aaron Foor with any questions at (951) 571-9090, ext. 2129.



September 9, 2015

Aaron Foor, Local Outreach Coordinator

The Grove Community Church

**Statement of Support and Intent  
for partnership and service with  
Path of Life Ministries**

This statement of support and intent shall stand as evidence that **GAR Laboratories, Inc.** agrees to work with the **Path of Life Ministries (POLM)** for the collaborative mission of providing support and supportive services to individuals and families exiting homelessness into permanent housing options.

**GAR Laboratories, Inc.** has worked with **POLM** for 2 years, as **POLM** has provided Emergency Shelter, Transitional Housing, Permanent Housing, and Supportive Services for families with children and individuals who find themselves in a homeless crisis or stuck in the cycles of homelessness and poverty. Throughout the period of time that we have collaborated with **POLM**, we have known them to serve as an excellent service provider for those they serve.

**GAR Laboratories, Inc.** has collaborated with **POLM** in providing financial support to **POLM** for the services they provide.

**GAR Laboratories, Inc.** the annual amount of support this year will total at least \$ 25,000.00

In addition to this financial support **GAR Laboratories, Inc.** has provided the following supplies to those who **POLM** serves.

- Specially packaged Shampoo and Conditioner.

These services are provided at no cost to **POLM**, but hold an approximate total fair market value of \$5,343.85 each year.

**GAR Laboratories, Inc.** has been pleased to collaborate with **POLM** in the past and we are pleased to continue in this collaboration for the coming year.

Please contact Tom Raffy with any questions at 951-788-0700.



Signature

Tom Raffy

**GAR Laboratories, Inc.**

President

9/15/15

Name

Agency

Position

Date

**Statement of Support and Intent  
for partnership and service with  
Path of Life Ministries**

This statement of support and intent shall stand as evidence that Mike and Linda Van Daele Family Foundation agrees to work with the Path of Life Ministries (POLM) for the collaborative mission of providing support and supportive services to individuals and families exiting homelessness into permanent housing options.

Mike and Linda Van Daele Family Foundation has worked with POLM for 6 years, as POLM has provided Emergency Shelter, Transitional Housing, Permanent Housing, and Supportive Services for families with children and individuals who find themselves in a homeless crisis or stuck in the cycles of homelessness and poverty. Throughout the period of time that we have collaborated with POLM, we have known them to serve as an excellent service provider for those they serve.

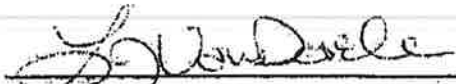
Mike and Linda Van Daele Family Foundation has historically collaborated with POLM in providing financial support to POLM for the services they provide.

The annual amount of support has totaled approximately \$100,000.

Mike and Linda Van Daele Family Foundation has been pleased to collaborate with POLM in the past and we are pleased to continue in this collaboration for the coming year.

Please contact Linda Van Daele with any questions at 951-354-2121.

Date: September 10, 2015



Linda J. Van Daele, Chief Financial Officer  
Mike and Linda Van Daele Family Foundation



**Path of Life Ministries**  
**Permanent Supportive Housing**  
**LEVERAGE Documents**

Path-Leverage

**AGREEMENT FOR THE USE OF 2015-2016  
EMERGENCY SOLUTIONS GRANT FUNDS  
PATH OF LIFE MINISTRIES  
Riverside Emergency Shelter Program  
2840 Hulen Place**

THIS AGREEMENT is entered into this \_\_\_\_\_ day of \_\_\_\_\_, 2015, by and between the CITY OF RIVERSIDE, a California charter city and municipal corporation, hereinafter referred to as "CITY", and PATH OF LIFE MINISTRIES, hereinafter referred to as "RECIPIENT", a 501(c) (3) non-profit corporation; DUNS # 00-336-4176.

**RECITALS**

WHEREAS, pursuant to Subtitle B of Title IV of the McKinney-Vento Homeless Assistance Act of 1987 (Public Law 100-77, hereinafter referred to as the "Act"), CITY has been awarded ~~Emergency Solutions Grant Funds ("ESG Funds") from the United States Department of Housing and Urban Development~~ which can be used for the operation and maintenance of emergency shelter facilities together with the provision of certain essential services for homeless individuals; and

WHEREAS, CITY is authorized to distribute ESG Funds to the RECIPIENT, a 501(c) (3) non-profit corporation eligible for ESG Funds to provide services for homeless individuals and families; and

WHEREAS, RECIPIENT is eligible under the Act to receive ESG Funds to provide the services as described herein pursuant to federal regulations; and

WHEREAS, CITY has been awarded funds from the United States Department of Housing and Urban Development ("HUD") for the 2015-2016 Emergency Solutions Grant year; and

WHEREAS, CITY agrees to provide HUD funding to the RECIPIENT in the amount of **Ninety Five Thousand Three Hundred Twenty Three Dollars (\$95,323)** for costs associated with the operation of an emergency shelter ("Grant Funds").

**1. SCOPES OF SERVICES, BUDGET, AND AMOUNT OF ESG FUNDS.**

A. RECIPIENT promises and agrees as a California nonprofit corporation, to provide, operate, and maintain an emergency shelter year-round for homeless men, women, and families with children, located at 2840 Hulen Place, Riverside, California 92507, on a continuous year-round basis, as more specifically set forth and in the manner provided in the Scope of Services, attached hereto as Exhibit "A" and incorporated herein by this reference. CITY shall pay RECIPIENT the sum of **Ninety Five Thousand Three Hundred Twenty Three Dollars (\$95,323)** of 2015-2016 ESG Funds for the operation of an emergency shelter. Said Grant Funds shall be used for staff costs, building maintenance, utilities, and operation costs, and to provide

**AGREEMENT FOR THE USE OF 2015-2016  
EMERGENCY SOLUTIONS GRANT FUNDS**

**PATH OF LIFE MINISTRIES  
Riverside Cold Weather Shelter Program  
2840 Hulen Place**

THIS AGREEMENT is entered into this \_\_\_\_\_ day of \_\_\_\_\_, 2015, by and between the CITY OF RIVERSIDE, a California charter city and municipal corporation, hereinafter referred to as "CITY", and PATH OF LIFE MINISTRIES, hereinafter referred to as "RECIPIENT", a 501(c) (3) non-profit corporation, DUNS # 00-336-4176.

**RECITALS**

WHEREAS, pursuant to Subtitle B of Title IV of the McKinney-Vento Homeless Assistance Act of 1987 (Public Law 100-77, hereinafter referred to as the "Act"), CITY has been awarded Emergency Solutions Grant Funds ("ESG Funds") from the United States Department of Housing and Urban Development which can be used for the operation and maintenance of emergency shelter facilities together with the provision of certain essential services for homeless individuals; and

WHEREAS, CITY is authorized to distribute ESG Funds to the RECIPIENT, a 501(c) (3) non-profit corporation eligible for ESG Funds to provide services for homeless individuals and families; and

WHEREAS, RECIPIENT is eligible under the Act to receive ESG Funds to provide the services as described herein pursuant to federal regulations; and

WHEREAS, CITY has been awarded funds from the United States Department of Housing and Urban Development ("HUD") for the 2015-2016 Emergency Solutions Grant year; and

WHEREAS, CITY agrees to provide HUD funding to the RECIPIENT in the amount of **Sixty Seven Thousand Six Hundred Thirty Five Dollars (\$67,635)** for costs associated with the operation of a cold weather shelter ("Grant Funds").

**1. SCOPES OF SERVICES, BUDGET, AND AMOUNT OF ESG FUNDS.**

A. RECIPIENT promises and agrees as a California nonprofit corporation, to provide, operate, and maintain a 65-bed emergency cold weather shelter for homeless men, women, and families with children, located at 2840 Hulen Place, Riverside, California 92507, during the cold weather period of December through April ("Cold Weather Shelter"), as more specifically set forth and in the manner provided in the Scope of Services, attached hereto as Exhibit "A" and incorporated herein by this reference. CITY shall pay RECIPIENT the sum of **Sixty Seven Thousand Six Hundred Thirty Five Dollars (\$67,635)** of 2015-2016 ESG Funds for the



Community Development  
Department

*City of Arts & Innovation*

October 09, 2015

Path of Life Ministries  
Attn: Damien O'Farrell  
P.O. Box 1445  
Riverside, CA 92502

**RE: City of Riverside 2015-2016 CDBG Sub-Recipient Agreement**

Dear Mr. O'Farrell:

Enclosed please find two original documents of the 2015-2016 CDBG Sub-Recipient Agreement for execution by your organization. Please have both Agreements signed by the authorized representatives of your organization that you identified in the Corporate Signature Certification submitted with your contract documents. A copy is enclosed for your reference (Exhibit E).

Please return both originals of the Agreement to my attention for final execution. Once fully executed, an original agreement will be returned to your Agency. City staff will then prepare a Purchase Order for your account and you can begin drawing down funds from your CDBG grant. You may begin requesting reimbursement of expenses incurred since July 1, 2015 on your CDBG funded project by submitting the CDBG Request for Payment Forms A and B (enclosed) with the required back-up documentation.

Thank you for your patience and cooperation as we finalize the agreement process. Should you have any questions or concerns, please feel free to contact Raul Gonzalez at (951) 826-5469 or Michelle Guzman at (951) 826-5302.

Sincerely,

*Rosemarie Gonzalez*  
Rosemarie Gonzales  
Project Manager

Enclosures

**COMMUNITY DEVELOPMENT BLOCK GRANT  
SUBRECIPIENT AGREEMENT  
PATH OF LIFE MINISTRIES**

(Emergency Shelter – 2840 Hulen Place)

THIS AGREEMENT is made and entered into this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by and between the CITY OF RIVERSIDE, a California charter city and municipal corporation (“City”) and PATH OF LIFE MINISTRIES, a California corporation (“Subrecipient”).

RECITALS

WHEREAS, the Community Development Department, Development Division has applied and been awarded grant funds from the United States Department of Housing and Urban Development (“HUD”) for the City of Riverside’s (“City”) fiscal year 2015-2016 Community Development Block Grant (“CDBG”), Catalog of Federal Domestic Assistance (“CFDA”) No. 14.218, Program and will administer/monitor the distribution of said funds; and

WHEREAS, the Subrecipient has submitted its proposal to the Community Development Department, Development Division to receive funding from the City’s fiscal year 2015-2016 Community Development Block Grant (“CDBG”) Program, pursuant to the Housing and Community Development Act of 1974, as amended; and

WHEREAS, the Federal Accounting and Transparency Act of 2006 (“the Act”) became effective on October 1, 2010 and requires all CDBG grant recipients to include specific provision in their grant agreements that are identified in paragraph 10.8 below; and

WHEREAS, Subrecipient agrees and understands that the Act requires additional reporting requirements, which includes providing information regarding the total compensation and names for the top five highest paid executives of its agency. Further, Subrecipient is referred to as the “Subcontractor” in Section 10.8 below; and

WHEREAS, following a public hearing, the City Council of the City has approved the allocation of One Hundred Twenty Five Thousand Five Hundred Dollars (\$125,500) from its 2015-2016 Community Development Block Grant to fund the proposal for providing low barrier entry into safe emergency housing which was submitted by Subrecipient (“Grant funds”).

NOW THEREFORE, in consideration of the mutual covenants set forth herein, and the mutual benefits to be derived there from, the City and Subrecipient agree as follows:

1. **SCOPE OF SERVICES.** Subrecipient shall provide services under the Emergency Shelter Program – 2840 Hulen Place, as more particularly described in **Exhibit “A”**, entitled Scope of Services (“Services”), and **Exhibit “B”** entitled Budget (“Budget”) attached and incorporated by reference, in accordance with this Agreement.



*Dec*  
*6-1-15*

File No.: 6.145-15

May 21, 2015

Raul Diaz, Executive Director  
Path of Life Ministries  
P.O. Box 1445  
Riverside, CA. 92502

**SUBJECT: 2015 - 2016 Emergency Solutions Grant (ESG) Application Approved**

Project: **Path of Life Ministries Community Shelter**  
File No.: **6.145-15**  
**\$55,000 Total Funding**

Dear Sponsor:

We are pleased to notify you that the Riverside County Board of Supervisors has approved a request for ESG funding for the activity listed below:

**\$55,000 for Emergency Shelter**  
**\$55,000 Total Funding**

This project has been included in the County's 2015 - 2016 One Year Action Plan (OYAP). The OYAP has been submitted to the U.S. Department of Housing and Urban Development (HUD) for review. The anticipated effective date of HUD's approval of our 2015 - 2016 OYAP is July 1, 2015.

We are in the process of preparing your Sponsor's Agreement for the use of the ESG funds. Once you receive your Sponsor's Agreement, you will have forty-five (45) days to have it properly executed and returned to EDA.

**Please note:** the County will not approve your Sponsor's Agreement until an authorized representative of your organization has successfully completed the online ESG Subrecipient Training.

At this time, we are undertaking the required environmental review and administrative actions pertaining to your activity. Our staff may be contacting you to discuss approved project budgets, project schedule, performance and outcome measures, national objective reporting, and other necessary items.

P.O. Box 1180 • Riverside, California • 92502 • T: 951.955.8916 • F: 951.955.4488

[www.rivcoeda.org](http://www.rivcoeda.org)

Administration  
Aviation  
Business Intelligence  
Cultural Services  
Community Services  
Custodial

Housing  
Housing Authority  
Information Technology  
Maintenance  
Marketing

Economic Development  
Edward-Dean Museum  
Environmental Planning  
Fair & National Date Festival  
Foreign Trade  
Graffiti Abatement

Parking  
Project Management  
Purchasing Group  
Real Property  
Redevelopment Agency  
Workforce Development

2015 - 2016 Emergency Solutions Grant (ESG) Approval

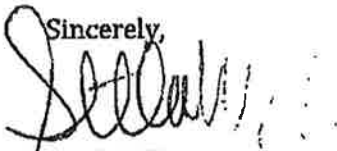
May 21, 2015

Page 2

To expedite all future correspondence and inquiries, please refer to the ESG File number located in the upper right corner of this letter.

If you have any questions regarding the program process or need additional information, please feel free to contact me at (951) 955-3141.

Sincerely,



Sterlon Sims  
Program Manager

SH:JT:SS:ew

AGREEMENT  
BETWEEN  
PATH OF LIFE MINISTRIES  
AND  
THE ILLUMINATION FOUNDATION

This Agreement (the "Agreement") is made and entered into as of the later of July 15, 2015 or execution of the Agreement by both parties (the "Effective Date"), by and between Path of Life Ministries (POLM) and The Illumination Foundation (IF).

RECITALS

1. POLM and IF desire to collaborate in providing a safe place for homeless patients to recuperate upon being discharged from hospitals in Counties of Riverside and San Bernardino and receive continued recovery care coordination and facilitation during the recuperation period.
2. POLM and IF desire to enter into an Agreement governing the terms and conditions of IF operating its Inland Empire Recuperative and Recovery Program (the "Program") at Path of Life Community Shelter (the "Shelter") located at 2840 Hulen Place, Riverside, CA 92507.

NOW, THEREFORE, in consideration of the mutual terms and conditions contained herein, IF and POLM hereby agree as follows:

AGREEMENT

1. Responsibilities/Scope of Services
  - A. POLM's responsibilities under this Agreement will be to make available or provide items listed in Exhibit A - "Site/Program Requirements", marked by an "X" in the column "POLM to Provide".
  - B. IF will be operating the Program as described in Exhibit B - "Program Specifics".
  - C. POLM and IF recognizes the uniqueness of the "Program within the Shelter" model and will work jointly on Policies and procedures to facilitate mutually beneficial collaborative partnership.
2. Assignment
  - IF may not assign or transfer this Agreement, any interest therein or claim there under, without the prior written approval of POLM, which shall not be unreasonably withheld, and POLM may not assign or transfer this agreement, any



Interest therein or claim there under, without prior written approval of IF, which shall not be unreasonably withheld.

3. Independent Contractors

The parties are and shall be independent contractors to one another, and nothing herein shall be deemed to cause this Agreement to create an agency, partnership, or joint venture between the parties. Nothing in the Agreement shall be interpreted or construed as creating or establishing the relationship of employer and employee between POLM and IF or any employee or agent of either party. Neither shall act as an agent for the other and neither shall enter into any agreement or incur obligation/commitment on behalf of the other.

4. Conflict of Interest.

IF assures that to the best of IF's knowledge there exists no conflict of interest and every effort will be made to avoid the appearance of conflict of interest between IF, IF's business or financial interest and the services provided under this Agreement, and POLM assures that to the best of POLM's knowledge there exists no conflict of interest and every effort will be made to avoid the appearance of conflict of interest between POLM, POLM's business or financial interest and the services provided under this Agreement. Should this situation change during the time of this Agreement, IF and POLM will advise each other of such change.

5. Entire Agreement.

This Agreement constitutes the entire agreement of the parties hereto and supersedes all prior representations, proposals, discussions and communications, whether oral or in writing. This Agreement may be modified only in writing and shall be enforceable in accordance with its terms when signed.

6. Term.

The term of this Agreement shall commence on the Effective Date for a period of thirty-six (36) months unless terminated earlier as herein provided. If the parties continue to abide by the terms and conditions of this Agreement without having executed a renewal or extension of this Agreement or advised the other party of such party's intent not to renew or extend this Agreement, then this Agreement shall automatically be extended on a month-to-month basis for up to six (6) months.

7. Cancellation.

A. POLM may, at any time, terminate the Agreement upon sixty (60) days prior written notice. Within thirty (30) days of termination of this agreement for any reason, POLM shall submit to IF an itemized invoice for any fees or expenses thereto accrued under this Agreement.

B. IF may, at any time, terminate the Agreement upon sixty (60) days prior written notice. Within thirty (30) days of receipt of an itemized invoice from POLM subsequent to termination of this agreement for any reason, IF will pay any remaining fees or expenses accrued under this Agreement.

8. Copyright and Public Communication

IF shall retain title and have the right to copyright, publish, disclose, disseminate and use, in whole and in part, any data, information or material developed by IF for the Program. POLM may reproduce, publish or otherwise use any material delivered under this agreement. With respect to those materials delivered which may be copyrighted, IF agrees to and does hereby grant to POLM a royalty-free, nonexclusive and irrevocable license throughout the world to reproduce, publish or otherwise use such deliverables for POLM purposes, and to authorize others to do so.

POLM and IF agree that it is in their mutual interests to inform each other of media inquiries, responses to media inquiries, and other forms of public communications about the Program within the Shelter including news releases and newsletters. POLM and IF will provide same-day notice to each other of media inquiries that are particular to the parties of this agreement, and within 48 hours of release will provide electronic copies to each other of written public communications pertaining to the Program within the Shelter.

9. Confidentiality

POLM and IF and their board members, employees, authorized agents, consultants, subcontractors, volunteers, and interns shall maintain HIPAA-compliant communications and otherwise comply with applicable federal, state, and county codes and regulations relating to the protection and confidentiality of personal health information.

10. Arbitration

In the event a dispute shall arise between the parties to this contract, it is hereby agreed that the dispute shall be referred to arbitration. POLM and IF agree to select an arbitrator and site for arbitration in Riverside County or Orange County, California in accordance with the applicable United States Arbitration and Mediation Rules of Arbitration. The arbitrator's decision shall be final and legally binding and judgment may be entered thereon.

Each party shall be responsible for its share of the arbitration fees in accordance with the applicable Rules of Arbitration. In the event a party fails to proceed with arbitration, unsuccessfully challenges the arbitrator's award, or fails to comply with the arbitrator's award, the other party is entitled to costs of suit, including a reasonable attorney's fee for having to compel arbitration or defend or enforce the award.

11. Payment.

- A. IF will provide POLM compensation on this agreement on a monthly basis as follows:
  - a. \$40 for each bednight up to a monthly maximum of 15 times the number of days in the month (for example, during a month with 30 days, the payment would be \$40/bednight for up to 450 bednights.

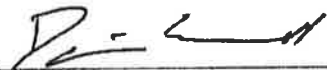
- b. \$35 for each bednight above the monthly maximum of 15 times the number of days in the month.
- c. IF will pay a minimum guaranteed payment according to the table below:

Period Covered	Payment Due Date	Days in Period	Minimum Bednights	Minimum Payment
Advance Payment	7/30/2015			\$18,325
8/15/15 – 8/31/15	Within 30 days of receiving an invoice from POLM	17	255	\$10,200
9/1/15 – 9/30/15		30	450	\$18,000
10/1/15 – 10/31/15		31	465	\$18,600
11/1/15 – 11/30/15		30	405	\$16,200
12/1/15 – 12/31/15		31	341	\$13,640
1/1/16 – 1/31/16		31	279	\$11,160
Monthly, thereafter		Monthly	8 times days in month	\$40 times Minimum Bednights

- B. IF will provide POLM with one month's compensation in advance, as specified in table above, which will be returned to IF upon receipt of the payment for the final invoice of this agreement.
- C. POLM will invoice IF for payment as follows:
  1. POLM will Invoice IF within 10 business days of the last day of the monthly period.
  2. IF will process payment within 30 days of receiving the invoice from POLM.
  3. All checks will be made payable to Path of Life Ministries.

Path of Life Ministries (POLM)

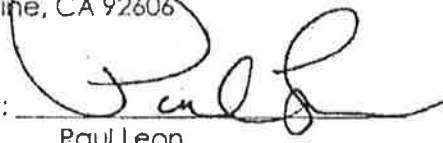
23701 Meyer Dr.  
Riverside, CA 92518

By:   
Damien O'Farrell  
CEO

On: 7/15/15

The Illumination Foundation (IF)

2691 Richter Ave., Ste 107  
Irvine, CA 92606

By:   
Paul Leon  
CEO

On: 7/14/2015

**PROFESSIONAL SERVICE AGREEMENT**

for

**Community Recidivism Reduction Grant Program**

between

**COUNTY OF RIVERSIDE**

and

**Path of Life Ministries**



This Agreement, made and entered into this \_\_\_\_ day of \_\_\_\_\_, 2015, by and between Path of Life Ministries, (herein referred to as "CONTRACTOR"), and the COUNTY OF RIVERSIDE, a political subdivision of the State of California, (herein referred to as "COUNTY"). The parties agree as follows:

**1. Description of Services**

1.1 CONTRACTOR shall provide all services as outlined and specified in Exhibit A, Scope of Services, consisting of two pages at the prices stated in Exhibit B, Budget, consisting of three pages, to the Agreement.

1.2 CONTRACTOR represents that it has the skills, experience, and knowledge necessary to perform under this Agreement and the COUNTY relies upon this representation. CONTRACTOR shall perform to the satisfaction of the COUNTY and in conformance to and consistent with the highest standards of firms/professionals in the same discipline in the State of California.

1.3 CONTRACTOR affirms this it is fully apprised of all of the work to be performed under this Agreement; and the CONTRACTOR agrees it can properly perform this work at the prices stated in Exhibit B. CONTRACTOR is not to perform services or provide products outside of the Agreement.

1.4 Acceptance by the COUNTY of the CONTRACTOR's performance under this Agreement does not operate as a release of CONTRACTOR's responsibility for full compliance with the terms of this Agreement.

**2. Period of Performance**

2.1 This Agreement shall be effective upon signature of this Agreement by both parties and continues in effect through 06/30/2018, unless terminated earlier. CONTRACTOR shall commence performance upon signature of this Agreement by both parties and shall diligently and continuously perform thereafter. The Riverside County Board of Supervisors is the only authority that may obligate the County for a non-cancelable multi-year agreement.

**3. Compensation**

3.1 The COUNTY shall pay the CONTRACTOR for services performed, products provided and expenses incurred in accordance with the terms of Exhibit B, Payment Provisions. Maximum payments by COUNTY to CONTRACTOR shall not exceed fifty thousand dollars (\$50,000) including all expenses. The COUNTY is not responsible for any fees or costs incurred above or beyond the contracted amount and shall have no obligation to purchase any specified amount of services or products. Unless otherwise specifically stated in Exhibit B, COUNTY shall not be responsible for payment of any of CONTRACTOR's expenses related to this Agreement.

**EXHIBIT B  
BUDGET**

1. Path of Life Ministries (POLM) has 10-years of housing and supportive services to the many sub-populations of homelessness. Probation and Parolee clients are part of the sub-population mix of those service shelters in Riverside. The POLM has been a 501c3 nonprofit since 1998 and provides shelter housing for 1,400 a year. Two shelters offer 179-beds for families, single adults and couples without children. The shelter locations are:

Community Shelter  
2840 Hulen Place  
Riverside, CA 92507

Family Shelter  
2830 Third Street  
Riverside, CA 92507

2. Path of Life Ministries provides the following support and referral services through their housing and supportive services program.
  - a) Self-help groups such as behavioral health are offered at the shelters by Licensed Clinical Social Worker, Marriage and Family Therapist Intern. Plus referrals are made to community partners through case management and case plan activities such as alcohol and substance abuse, behavioral needs, etc.
  - b) Life skills classes are available weekly for all shelter clients lead by staff such as employment Specialist, Marriage and Family Therapist Intern and community partners like Springboard and BBV Compass. Some of the classes are: anger management, financial management, job readiness, housing rights, and more.
  - c) The POLM employment pipeline is expanding its mentoring and adding life coaching for all clients who desire to take advantage of this opportunity. The client's case manager does some of the mentoring weekly at case conferences and when possible connects a client to a volunteer for mentoring (all volunteers have background checks complied with Allied Information Resources). The Employment Pipeline is coordinated by program coordinator who runs a 4-week / 60-hour training program, connects with business partners in the community and pairs clients with mentors and life coaches.
  - d) Educational services are not directly provided at the POLM Shelters, but case managers make referrals for those seeking education of some type – GED, high school diploma, trade school, Department of Rehabilitation, etc. A METRO grant partnership with the Path of Life Church does provide some educational services too.
  - e) Job training is available through job readiness workshops and the expanding Employment Pipeline 4-week / 60-hour employment classes that will lead to employment placement with

community partners such as Octoclean and KN Filters. Some clients have the ability to enroll, upon eligibility, into the Angel Wings Bakery training program (a nonprofit incubate at POLM). Other clients have access to trade programs with assistance from their case managers. Clients are also encouraged to work with the Workforce Investment Office for employment readiness activities and placement into the workforce.

- f) POLM does not have truancy prevention programs, but has the ability to make referrals to such community programs like school districts through the client's case manager. In addition POLM has a METRO grant partnership with Path of Life Church which does provide some educational services.
- g) POLM does not have literacy programs, but has the ability to make referrals to such community programs like the library system through the client's case manager.
- h) POLM has a partnership with Path of Life Church for their Neighborhood College Program that provides educational support, employment placement, case management and other wrap around services for youth. This program is under a grant with METRO of San Diego and the U.S. Dept. of Labor.
- i) POLM has a small fleet of vehicles that can take clients to employment interviews, work, and other supportive services as necessary. The shelters are located near Riverside bus lines.
- j) POLM cannot have sexual offenders at the shelters because there are children at the family shelter and teens who volunteer at the community shelter for single adults and couples without children. In addition our Conditional Use Permits with the County and City of Riverside state we cannot have sexual offenders at the shelters.
- k) POLM has no programs for the mentally ill offenders. POLM does have a Licensed Clinical Social Worker and Marriage Family Therapist Intern that can do assessments and make the proper referrals and connections for those diagnosed as mentally ill.
- l) POLM is not a day reporting center and the nearest center is in San Bernardino. POLM does provide showers, meals, mail address, bed nights, life skill sessions and case management at all our shelters during shelter hours for clients once an intake is completed by staff using the County of Riverside Continuum of Care Coordinated Assessment.
- m) The only "kinda" day center at this time in the City of Riverside is the City of Riverside Homeless Access Center next to the POLM Community Shelter. The City of Riverside has explored the possibility of a day center and if they come up with funding POLM has considered applying to operate the day center.
- n) POLM is the largest provider of shelter beds and supportive services in Riverside. Every shelter guest receives case management and supportive services at the shelter for up to 90-days. In addition showers, hot meals, and a mail address is provided each guest at enrollment into the shelter. Some of the shelter guest will qualify for permanent supportive housing or rapid rehousing and will move from the shelter to obtain housing. When housing is obtained POLM continues to support those housed with supportive services such as mental health care and employment with the goal of the person being able to maintain housing.
- o) None

p) Offered at the POLM shelters: some mental health / behavioral counseling and groups' sessions with a Licensed Clinical Social Worker and a Marriage and Family Therapist Intern. There are educational referrals made for educational support, alcohol and drug treatment programs and other services. The POLM Employment Pipeline has a Program Coordinator as stated in sections "e & d". An employment pipeline that is expanding as part of holistic system of care.

<u>Description</u>	<u>Amount</u>	<u>% of Grand Total</u>
Salaries Subtotal	\$39,130.00	78.3%
Benefits Subtotal	\$7,165.00	14.3%
Program / Operational Total	\$3,705.00	7.4%
Administrative / Overhead Cost	\$0.00	0%
<b>Grand Total</b>	<b>\$50,000.00</b>	<b>100%</b>



Contract ID #

**PROFESSIONAL SERVICE AGREEMENT**

for

**PUBLIC SAFETY REALIGNMENT EMERGENCY AND TRANSITIONAL  
HOUSING PROGRAMS**

between

**COUNTY OF RIVERSIDE**

and

**PATH OF LIFE MINISTRIES**



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This Agreement, made and entered into this 1st day of July, 2015, by and between **PATH OF LIFE MINISTRIES** (herein referred to as "CONTRACTOR"), and the COUNTY OF RIVERSIDE, a political subdivision of the State of California, (herein referred to as "COUNTY"). The parties agree as follows:

**1. Description of Services**

1.1 CONTRACTOR shall provide all services as outlined and specified in Exhibit A, Scope of Services, consisting of five (5) pages at the prices stated in Exhibit B, Payment Provisions, consisting of one (1) pages, and Attachment I, HIPAA Business Associate Attachment to the Agreement, consisting of twelve (12) pages.

1.2 CONTRACTOR represents that it has the skills, experience, and knowledge necessary to perform under this Agreement and the COUNTY relies upon this representation. CONTRACTOR shall perform to the satisfaction of the COUNTY and in conformance to and consistent with the highest standards of firms/professionals in the same discipline in the State of California.

1.3 CONTRACTOR affirms this it is fully apprised of all of the work to be performed under this Agreement; and the CONTRACTOR agrees it can properly perform this work at the prices stated in Exhibit B. CONTRACTOR is not to perform services or provide products outside of the Agreement.

1.4 Acceptance by the COUNTY of the CONTRACTOR's performance under this Agreement does not operate as a release of CONTRACTOR's responsibility for full compliance with the terms of this Agreement.

**2. Period of Performance**

2.1 This Agreement shall be effective upon signature of this Agreement by both parties and continue in effect through (June 30, 2016), with the option to renew for one (1) year, each year shall be renewable in one year increments by written amendment, unless terminated earlier. CONTRACTOR shall commence performance upon signature of this Agreement by both parties and shall diligently and continuously perform thereafter. The Riverside County Board of Supervisors is the only authority that may obligate the County for a non-cancelable multi-year agreement.

**3. Compensation**

3.1 The COUNTY shall pay the CONTRACTOR for services performed, products provided and expenses incurred in accordance with the terms of Exhibit B, Payment Provisions. Maximum payments by COUNTY to CONTRACTOR shall not exceed **\$136,875** annually including all expenses. The COUNTY is not responsible for any fees or costs incurred above or beyond the contracted amount and shall have no obligation to purchase any specified amount of services or products. Unless otherwise

Statement of Support and Intent  
for Partnership and service with  
Path of Life Ministries

This statement of support and intent shall stand as evidence that The Grove Community Church (The Grove) agrees to work with the Path of Life Ministries (POLM) for the collaborative mission of providing support and supportive services to individuals and families exiting homelessness into permanent housing options.

The Grove has worked with POLM for 10 years, as POLM has provided Emergency Shelter, Transitional Housing, Permanent Housing, and Supportive Services for families with children and individuals who find themselves in a homeless crisis or stuck in the cycle of homelessness and poverty. Throughout the period of time that we have collaborated with POLM, we have known them to serve as an excellent service provider for those they serve.

The Grove has historically collaborated with POLM in providing financial support to POLM for the services they provide.

The Grove's amount of support has totaled \$3,600 per month in past years end with total \$4,800 per month this coming year.

In addition to this financial support, The Grove has provided the following services and support to those who POLM staff connect us with.

- Counseling through our On Site Counseling Center
- Meals four times each month (Increasing to 6 times each month in 2015)

These services are provided at no cost to POLM, but hold an approximate total fair market value of \$247,250.00 in addition to the financial support we provide assuming that they are provided in connection with the 75 permanent supportive housing clients POLM will be serving this year.

The Grove has been pleased to collaborate with POLM in the past and we are pleased to continue in this collaboration for the coming year.

Please contact Pastor Aaron Foor with any questions at (951) 571-9090, ext. 2129.



Aaron Foor, Local Outreach Coordinator  
The Grove Community Church

September 9, 2015

**Statement of Support and Intent  
for partnership and service with  
Path of Life Ministries**

This statement of support and intent shall stand as evidence that E.T. O'Farrell, Freelance Copywriter and Ret. Real Estate Attorney, agrees to work with the Path of Life Ministries (POLM) for the collaborative mission of providing support and supportive services to individuals and families exiting homelessness into permanent housing options.

E.T. O'Farrell, Freelance Copywriter and Ret. Real Estate Attorney, has worked with POLM for 1 year, as POLM has provided Emergency Shelter, Transitional Housing, Permanent Housing, and Supportive Services for families with children and individuals who find themselves in a homeless crisis or stuck in the cycles of homelessness and poverty. Throughout the period of time that I have collaborated with POLM, I have known them to serve as an excellent service provider for those they serve.

---

I will be collaborating with POLM in providing the following services to POLM clients referred or directly connected to me by POLM staff:

---

- Copywrite, Landlord Negotiation, and Lease Review (Consulting)

These services are provided at no cost to POLM, but hold a fair market value of approximately \$3,000.00 for each person for whom I provide them. I have committed to POLM to help them with all 93 of their Permanent Supportive Housing and Rapid Rehousing households, bringing the total fair market value to \$279,000.00

Please contact me with any questions at 951-684-6609.

E.T. O'Farrell  
Signature

Earl Thomas O'Farrell      ET. O'Farrell  
Name                                      Agency

Copy Writer/Attorney Ret.      9/11/15  
Position                                      Date



**Morris Myers**  
**Chair**

Members

Layne Arthur

Michael Burke

Jamil Deda

Juan De Lara

Sharon Duffy

Angelov Farooq

Mirna Flores

Duane Friel

Rick Glasmann

Cheri Greenlee

Francisca Hernandez

Barbara Howison

Peter Hubbard

Joyce Johnson

Deanna Margarita

Charles Martin

Debra Martin

Chuck McDaniel

Sonia Nunez

Ken Orr

Lea Petersen

Mary Jo Ramirez

Susan Senior

Tina Sewell

Laurie Stalmaker

Diane Strand

Jeffery Van Wagenen

Ron Vito

October 13, 2015

Damien O'Farrell, Chief Operations Officer  
Path of Life Ministries  
6216 Brockton Avenue  
Riverside, CA 92506

Dear Mr. O'Farrell,

The Riverside County Workforce Development Board (WDB) is pleased to support the Path of Life Ministries' submission to the Riverside County Continuum of Care 2015 Housing for Urban Development (HUD) Permanent Supportive Housing Program. It is imperative that there are a myriad of resources available to address critical issues, such as mental illness and unemployment, all which impact homeless families.

The Riverside County WDB is one of approximately 600 private-sector led WDBs in the Country. WDBs are transforming the nation's workforce system to be responsive to the demand of a global economy. Through strong strategic partnerships with private-sector businesses, local government, community based organizations, institutions of higher education and K-12 education; WDBs remain in a prime position to serve as the pipeline for a skilled-labor workforce necessary for economic recovery and long-term growth.

The Riverside County WDB and the Path of Life Ministries will continue to collaborate to offer employment and housing services to support homeless families. In support of this project, the Riverside County WDB commits to the following:

- Determine Workforce Innovation and Opportunity Act (WIOA) eligibility and program enrollment\*
- Offer comprehensive workforce preparation opportunities and career development to participants for enrolled customers\*
- Provide individual Career Coaches to each enrolled homeless adult family member\*
- Promote programs at recruitment or outreach events\*
- Provide supportive services for homeless family members attending training\*
- Referral to stabilization and community resources\*

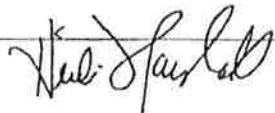
\*as appropriate and as funds are available

Damien O'Farrell, Chief Operations Officer  
Path of Life Ministries  
October 13, 2015  
Page 2

We estimate a total of \$254,813 In-kind services (depending upon availability of funds) will be provided over a 12-month grant period for 75 homeless families. The Workforce Development Center programs will serve individuals 18 and older and the Youth Opportunity Centers of Riverside County will serve youth 16 to 21 years old.

The Riverside County WDB looks forward to bringing additional opportunities to homeless families that lead to self-sufficiency. Should you have any questions, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read "Heidi Marshall", is written over a horizontal line.

Heidi Marshall  
Executive Director

**Statement of Support and Intent  
for partnership and service with  
Path of Life Ministries**

This statement of support and intent shall stand as evidence that OctoClean Franchising Systems Inc. (OFS) agrees to work with the Path of Life Ministries (POLM) for the collaborative mission of providing support and supportive services to individuals and families exiting homelessness into permanent housing options.

OFS has worked with POLM for 2 years, as POLM has provided Emergency Shelter, Transitional Housing, Permanent Housing, and Supportive Services for families with children and individuals who find themselves in a homeless crisis or stuck in the cycles of homelessness and poverty. Throughout the period of time that we have collaborated with POLM, we have known them to serve as an excellent service provider for those they serve.

OFS has historically collaborated with POLM in providing the following services to POLM clients referred or directly connected to us by POLM staff:

Training and Development of guests to include:

- Janitorial Services Training
- Floor Care Specialist
- Business Development

These services are provided at no cost to POLM, but hold a fair market value of approximately \$2500.00 for each person for whom we provide them for a total of \$232,500.00 in total possible value for 93 households.

Signature



Name

Matthew Stowe

Agency

Octoclean

Position

COO

Date

10-5-15





HEALTH to  
**H+PE**  
CLINICS

October 12, 2015

Damlen O'Farrell  
Path of Life Ministries  
6216 Brockton Ave.  
Riverside, CA 92506

Dear Damlen:

Please use this letter to document our support and collaboration of Path of Life Ministries in its effort to provide Permanent Supportive Housing to the homeless population of Riverside County. In our mutual efforts to deliver services, Health to Hope Clinics (Urban Community Action Projects dba) has had the pleasure of a positive relationship.

Health to Hope Clinics is a Federally Qualified Health Center (FQHC) that been in operation providing health care to the homeless population since 2009 with a permanent clinic located next door to the Riverside Community Shelter operated by Path of Life Ministries and a mobile clinic van that provides care to the homeless in and around the City of Riverside in parks and locations where the homeless congregate. Health to Hope Clinics receives federal funding through the Health Resources Services Administration (HRSA) 330 HCH Community Health Center program focused on Health Care for the Homeless.

We are aware that Path of Life Ministries is applying for funding to operate a Permanent Supportive Housing in Riverside and we support this project completely. If funded, we will sign a memorandum of understanding that describes our collaboration with Path of Life Ministries to provide transportation to and from their PSH housing sites each day for residents to access healthcare services at our clinics. This transportation service will be rolled into our current bus route that operates Monday through Friday and picks up any homeless persons in need of medical services at various bus stops and delivers them back after the clinic visit.

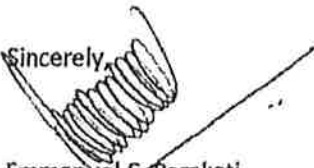
Health To Hope Clinics - a community project of Urban Community Action Projects  
Tel: 951.599.4444 • Fax: 951.715-3449 • [www.healthtohope.com](http://www.healthtohope.com)  
2880 Helen Place • Riverside, CA 92507-2606

---

While at our clinic, residents will receive primary healthcare services along with access to mental health, substance abuse and referral to specialty care if needed. Additionally, they will receive comprehensive case management services to include: health insurance enrollment, job placement, access to feeding programs and other social services programs that may be available to them. Our connection to healthcare and support services is estimated to be approximately \$136,500 annually based on the primary care needs of people transitioning from homelessness to housed.

We are very pleased that Path of Life Ministries is expanding its efforts to provide much needed shelter and housing for the homeless of Riverside County and look forward to additional opportunities to collaborate in the future.

Sincerely,

A handwritten signature in black ink, appearing to read "Emmanuel S. Parakati", written over a diagonal line.

---

Emmanuel S. Parakati  
Chief Executive Officer



---

JERRY A. WENGERD, DIRECTOR

Reply to: HHOPE Program  
RUHS – Behavioral Health  
1405 Spruce St. Suite A Riverside, CA 92507  
PH. (951) 715-5050 Fax (951) 784-4986

October 16, 2015

Damien O'Farrell  
Path of Life Ministries  
Riverside, California

Dear Damien,

This letter of support and intent shall stand as evidence that the **Riverside University Health System – Behavioral Health (RUHS-BH – formerly known as Riverside County Mental Health)** works on a regular basis with the **Path of Life Ministries (POLM)**, for the collaborative mission of providing support and supportive services to individuals and families who are moving from a housing crisis situation into permanent housing options.

**RUHS-BH** has worked closely with **POLM**. As **POLM** has provided Emergency Shelter, Transitional Housing, Permanent Housing, and Supportive services for individuals and families with children, who find themselves in a housing crisis situation or stuck in the cycles of poverty. For 16 years throughout our collaboration, we have known them to function as an excellent service provider for those individuals in their programs.

**RUHS-BH** has historically collaborated with **POLM** in providing services to **POLM** clients. The clients referred or directly connected to us by **POLM** staff, are currently in a housing crisis situation and suffer from a serious and disabling mental health condition. The services are provided at no cost to **POLM**. The services we expended this year were \$825,000.00, exclusive of additional temporary or permanent rental subsidies they may receive.

**RUHS-BH** has been pleased to collaborate with **POLM** in the past and we are pleased to continue in the collaboration for the coming year.

Please feel free to contact me with any questions at 951.715.5050 or [lmbrockmeyer@rcmhd.org](mailto:lmbrockmeyer@rcmhd.org).

Sincerely,



Lynne Brockmeyer  
Administrative Services Manager  
HHOPE Program

*"Wellness Begins with a Home"*



Submitted/Updated by: _____	Date: _____
Approved by: _____	Date: _____
Entered by: _____	Date: _____
Reviewed by: _____	Date: _____

**Riverside County Community Services Directory  
AGENCY INFORMATION FORM**

Information on this form should pertain to the agency only.  
Please use the Program Information form to add or change program details.

Agency Name: \_\_\_\_\_

List Aliases/ known abbreviations/ other names: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Confidential location:  Yes  No

Handicap accessible?  Yes  No

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Main Phone: \_\_\_\_\_ Alternative Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ TDD/TYY: \_\_\_\_\_

Hotline: \_\_\_\_\_ Other: \_\_\_\_\_

Website: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Legal Status**

- Private, non-profit    
  Public-County    
  Public-State    
  Public-Federal  
 Faith Based    
  For Profit    
  Other \_\_\_\_\_

Tax Classification: \_\_\_\_\_

Year of Incorporation: \_\_\_\_\_

Office Days and Hours: \_\_\_\_\_

Eligibility/ Target Population: \_\_\_\_\_

Agency Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Languages spoken other than English: \_\_\_\_\_

Fees

- No Cost
- Vary
- Low Cost
- Other \_\_\_\_\_
- Sliding Fee
- Donation

Method of Payment

- Medi-Cal
- Cash
- Credit Cards
- Personal Check

Personnel

Agency Director: \_\_\_\_\_ Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Any additional information you would like us to be aware of?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Submitted by: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Date : \_\_\_\_\_



Volunteer Center of Riverside

Please enclose your brochure and return to  
 2-1-1 Riverside County  
 P.O Box 5376  
 Riverside, CA 92517-5376  
 Phone: (800) 464-1123  
 or (951) 686-4402 Ext. 751  
 Fax: (951) 686-7417

Submitted/Updated by: _____	Date: _____
Approved by: _____	Date: _____
Entered by: _____	Date: _____
Reviewed by: _____	Date: _____



**Riverside County Community Services Directory  
PROGRAM INFORMATION FORM**

This form is to submit the program's details, additions or changes.  
Please submit a separate form for each program.  
Additional copies can be made of this form as needed.

Agency Name: \_\_\_\_\_

Program Name: \_\_\_\_\_

List Aliases/ known abbreviations/ other names: \_\_\_\_\_

Program Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Confidential location:  Yes  No

Handicap accessible?  Yes  No

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Program Phone: \_\_\_\_\_ Alternative Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ TDD/TYY: \_\_\_\_\_

Hotline: \_\_\_\_\_ Other: \_\_\_\_\_

Website: \_\_\_\_\_

E-mail: \_\_\_\_\_

Program Days and Hours: \_\_\_\_\_

Program Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Eligibility/Target Population: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Intake/Application Procedure:

- Phone       Appointment required       Walk-in       Referral needed
- Mail       Other \_\_\_\_\_

Documents Required: \_\_\_\_\_

Areas Served: (Please indicate specific areas program services)

Regions

- All Riverside County     West County       Central County     Southwest County
- East County       Coachella Valley     Other

Cities: \_\_\_\_\_

Zip Codes: \_\_\_\_\_

Fees:

- No Cost       Low Cost       Sliding Fee       Donation
- Vary       Other \_\_\_\_\_

Method of Payment

- Medi-Cal     Cash       Credit Cards     Personal Check

Languages spoken other than English: \_\_\_\_\_

Personnel

Program Director: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Any additional Information you would like us to be aware of?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Submitted by: \_\_\_\_\_

Phone: \_\_\_\_\_

Date: \_\_\_\_\_



Please enclose your brochure and return to  
 2-1-1 Riverside County  
 P.O Box 5376  
 Riverside, CA 92517-5376  
 Phone: (800) 464-1123  
 or (951) 686-4402 Ext. 160  
 Fax: (951) 686-7417

# DEPARTMENT OF PUBLIC SOCIAL SERVICES

## ADMINISTRATIVE HANDBOOK FOR HUD FUNDED CONTINUUM OF CARE PROGRAM





**ADMINISTRATIVE HANDBOOK  
FOR HUD FUNDED  
CONTINUUM OF CARE PROGRAM  
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**ATTACHMENTS**

DPSS 3106 (HUD Programs Claim Form)
HUD Continuum of Care Time/Activity Report

## INTRODUCTION

This handbook provides project administration guidelines and financial reporting requirements for Subrecipients under contract with Riverside County Department of Public Social Services to operate the Housing and Urban Development grant-funded Continuum of Care (CoC) Program. This program consolidates the Supportive Housing Program, Shelter Plus Care, and Section 8 Moderate Rehab. This handbook does not supersede any law, regulation, or policy issued by the U.S. Government or the Department of Housing and Urban Development with regard to this program.

Assistance to homeless individuals was authorized by the McKinney-Vento Homeless Assistance Act of 1987 as amended by the Housing and Community Development Act of 1992, approved October 28, 1992. The Act established numerous programs to promote the development of housing and supportive services to assist homeless persons in the transition from streets and shelters to permanent housing and to achieve maximum self-sufficiency. The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act), enacted into law on May 20, 2009, consolidates three of the separate homeless assistance programs administered by HUD under the McKinney-Vento Homeless Assistance Act into a single grant program known as the Continuum of Care Program (CoC). The HEARTH Act also codifies in law the Continuum of Care planning process, a longstanding part of HUD's application process to assist homeless persons by providing greater coordination in responding to their needs.

DPSS, a HUD Grantee, has partnered with your organization through a contract to bring homeless housing and services to help alleviate all homeless sub-populations within Riverside County.

This handbook is intended to outline the DPSS procedures and also contains direction on where to find the federal codes and regulations for the HUD Continuum of Care Program.

## DPSS CONTACTS

<b>HOMELESS PROGRAM UNIT</b>	
Program Specialist II (All grants)	951-358-5694
<b>CONTRACT ADMINISTRATION UNIT</b>	
Contract Analyst	951-358-3081
<b>FISCAL</b>	
Administrative Services Analyst II (all grants)	951-358-6548 or 951-358-7758

## A. ACCOUNTING PROCEDURES

The Subrecipient's financial system must comply with:

- 24 CFR 84.21 if you are an institution of higher education, hospital, or other nonprofit organization
- 24 CFR 85.20 if you are a state, local government, or federally recognized Indian tribe
- 2 CFR Part 200

### 1. CLAIMS

Although federal regulations affecting claiming may change during the course of your grant, the regulations that were in effect at the time your grant was approved will usually apply until your grant expires or is renewed.

### 2. CLAIM FORMS

Claims should be received by DPSS no later than 30 days after the end of the month in which services were provided using the DPSS 3106 HUD Programs Claim Form (see attached) with the required supporting documentation (see Section 5 *Supporting Documentation*).

Time/Activity reports (see attached) are required for all staff (see Section 5 *Supporting Documentation*).

### 3. REIMBURSEMENTS

Generally, reimbursement payments are sent to you within thirty (30) days after receipt of your claim.

The most common cause for a delay in reimbursement is lack of clarity in the documentation submitted with the Claim Form. If we need to contact you because your claim is not clear, there will be a delay in your reimbursement. Please contact a fiscal staff member if you have any questions about how to assure clarity in your completion of the Claim Form and supporting documentation.

Once your claim has been reviewed, we will send you back a letter indicating any differences. If you disagree with any disallowance, please request any correction within 30 days from the date of the letter.

### 4. MATCH

All eligible funding costs, except leasing, must be matched with no less than a **25 percent cash or in-kind contribution**. No match is required for leasing. The match requirements apply to project administration funds, along with the traditional expenses—operations, rental assistance, supportive services, and HMIS. Match must be met for each operating year. Match must be submitted with each monthly claim.

For an in-kind match, the subrecipient may use the value of property, equipment, goods, or services contributed to the project, provided that, if the subrecipient had to pay for such items with grant funds, the costs would have been eligible. If third-party services are to be used as a match, the subrecipient

and the third-party service provider that will deliver the services must enter into a memorandum of understanding (MOU)—**before the grant is executed**—documenting that the third party will provide such services and value towards the project.

All match must be for eligible activities.

**5. SUPPORTING DOCUMENTATION**

The general rule for supporting documentation is that for any program cost that is to be reimbursed (or used as match), provide the invoice which documents that a cost was incurred, and a receipt, or a copy of a check, or a check stub to substantiate the amount paid. Supporting documentation must be **legible, clear, and organized**. DPSS must be able to tie your request to the amounts claimed after each line item on the Claim Form. Costs can only be reimbursed if they have been included in the original Technical Submission.

Documentation for like line items should be clipped together and identified with a summary sheet or label identifying the Line Item Number or the Activity as listed on the Claim Form. A spreadsheet itemizing the expenses, or at a minimum, an adding machine tape showing the expenses with a matching amount on the claim form is helpful. The clearer the information is that you provide, the quicker we will be able to process the claim.

The Management Reporting Unit reviews each claim for expenses that are:

- Allowable
- Allocable
- Reasonable

**CLAIM DOCUMENTATION REQUIRED BY DPSS**

<b>LEASING / RENTAL ASSISTANCE</b>
● Lease agreement (does not need to be submitted with each claim. Must be submitted each time a lease expires or changes.)
● Invoice or documentation of rent amount and due date
● Proof of payment (cancelled check or check stub)
<b>STAFF (Operations, Supportive Services, HMIS and Admin)</b>
● Time Sheet
● Time and Activity Report
● Pay Stub or Payroll Report
<b>EXPENSES (Operations, Supportive Services, HMIS and Admin)</b>
● Invoice or receipt that is dated and has a detailed explanation of charges.
● Proof of payment (cancelled check or check stub)

## 6. INDIRECT COSTS

DPSS, with HUD's approval, has elected to allow Direct Costs only

## 7. IDENTIFYING LINE ITEMS

- Acquisition (24 CFR Part 578.43)
- Rehabilitation (24 CFR Part 578.45)
- New Construction (24 CFR Part 578.47)
- Leasing (24 CFR Part 578.49)
- Rental Assistance (24 CFR Part 578.51)
- Supportive Services (24 CFR Part 578.53)
  - Assessment of Service Needs
  - Assistance with moving costs
  - Case management
  - Child care
  - Education Services
  - Employment Assistance
  - Food
  - Housing/Counseling Services
  - Legal Services
  - Life Skills
  - Mental Health Services
  - Outpatient Health Services
  - Outreach Services
  - Substance Abuse Treatment Services
  - Transportation
  - Utility Deposits
- Operating Costs (24 CFR Part 578.55)
  - Maintenance/Repair
  - Property Taxes and Insurance
  - Replacement Reserve
  - Building Security
  - Electricity, Gas, and Water
  - Furniture
  - Equipment (lease, buy)
- HMIS (24 CFR Part 578.57)
  - Equipment
  - Software
  - Services
  - Personnel
  - Space & Operations
- Administration (24 CFR Part 578.59)
  - Administration

## **B. RECORDKEEPING**

See 24 CFR Part 578.103 (available at <http://www.ecfr.gov> )

## **C. REPORTING**

Reporting due dates are determined by a project's operating start date. Each year is funded separately, and funds cannot be automatically rolled over from one year to another. Additionally, funds may only be rolled over within the same multi-year grant contract; funds may not be rolled over from one contract to another. Subrecipients must contact the DPSS Homeless Programs Unit if rollover from one year to another in multiple year grants is required. Please note that different programs have different operating start dates.

## **D. ASSESSMENT AND MONITORING**

Riverside County is on record as the applicant and grantee for the HUD grant funds you receive. As such, the Riverside County DPSS is responsible for ensuring that the funds received by Subrecipients are utilized according to federal law and policy, and that goals established in the Project Application, Technical Submission, and Contract are being met. To ensure that the County and Subrecipients comply with HUD and all applicable policies, DPSS will conduct on-site program, financial, and contract compliance monitoring visits at least annually.

Reviews will be conducted, at least annually, by representatives from the Homeless Programs Unit (lead), the Subrecipient's liaison from the Fiscal Unit, and the Contracts Administration Unit. The purpose of the monitoring visit is to assess how well the Subrecipient is implementing its grant and/or to offer technical assistance.

In preparation for the on-site monitoring visit, the monitoring team will contact the Subrecipient to arrange a mutually convenient date for the visit, explain the purpose of the monitoring visit, and provide an advance copy of the monitoring tool.

The County will follow a monitoring plan and conduct a Monitoring Visit Entrance Meeting and Exit Meeting. During the Entrance meeting, the monitoring team will meet Subrecipient key personnel and provide an overview of the review process. At the Exit meeting, the County will review and comment on areas which might be a finding or a concern during the visit.

DPSS will prepare Monitoring Report for the review not later than thirty (30) days after the visit. The Subrecipient will be given, if appropriate, thirty (30) days to respond to the report, including a corrective action plan for review and approval by DPSS.

## **E. FUTURE APPLICATIONS AND PROJECT RENEWALS**

If your organization wishes to renew its contract with Riverside County DPSS, you will need to apply through the HUD NOFA (Notice of Funding Availability) process during the final year of your active grant.

Your renewal application will be submitted as part of the County's Consolidated Application (unless there have been significant problems with your project). Problems that could prevent a program from being submitted for renewal, or receiving a low ranking score include, but are not limited to, failure to

meet program goals, mismanagement of funds, or failure to serve the population targeted in the Technical Submission.

During the application process, all applications are evaluated and ranked by an established committee. The criteria for ranking projects is established annually based upon needs caused by gaps in the Continuum of Care. Renewal applications are generally ranked high in the evaluation process because failure to renew them would re-create gaps in service that the projects are intended to fill. However, if projects are not performing according to the commitments made in the Technical Submission or the contract with the County of Riverside, there may be justification on the part of the committee to lower the ranking.

## CoC PROGRAM REFERENCE GUIDE

1. 24 CFR Part 578  
[https://www.onecpd.info/resources/documents/CoCProgramInterimRule\\_FormattedVersion.pdf](https://www.onecpd.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf)
2. OMB Circular 2 CFR Part 200 (OFFICE OF MANAGEMENT AND BUDGET GUIDANCE FOR GRANTS AND AGREEMENTS)  
<http://www.gpo.gov/fdsys/pkg/FR-2013-12-26/pdf/2013-30465.pdf>
3. Homelessness Resource Exchange – CoC Program  
<http://www.hudhre.info/coc/index.cfm>
4. HUD Exchange  
<https://www.hudexchange.info/homelessness-assistance/>
5. Department of Public Social Services – Homeless Program  
<http://dpss.co.riverside.ca.us/homeless-programs>



## Certification of Tenant Roll

Month of:	Project Name:	Grant #	Tenant Name (last, first)	Address	Unit #	Tenant Move in date	Tenant Move out Date
1							
2							
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**Certification: I certify this is true and correct (signature and date)**

\*The Certification of Tenant Roll is due, by fax or email on or before the 10th business day following the reporting month.

**ASSURANCE OF COMPLIANCE WITH  
THE RIVERSIDE COUNTY DEPARTMENT OF PUBLIC SOCIAL SERVICES  
NONDISCRIMINATION IN STATE AND FEDERALLY ASSISTED PROGRAMS**

\_\_\_\_\_  
NAME OF ORGANIZATION

HEREBY AGREES THAT it will comply with Title VI and VII of the Civil Rights Act of 1964 as amended; Section 504 of the Rehabilitation Act of 1973 as amended; the Age Discrimination Act of 1975 as amended; the Food Stamp Act of 1977, as amended and in particular section 272.6; Title II of the Americans with Disabilities Act of 1990; California Civil Code Section 51 et seq., as amended; California Government Code section 11135-11139.5, as amended; California Government Code section 12940 (c), (h) (1), (i), and (j); California Government Code section 4450; Title 22, California Code of Regulations section 98000 – 98413; Title 24 of the California Code of Regulations, Section 3105A(e); the Dymally-Alatorre Bilingual Services Act (California Government Code Section 7290-7299.8); Section 1808 of the Removal of Barriers to Interethnic Adoption Act of 1996; and other applicable federal and state laws, as well as their implementing regulations [including 45 Code of Federal Regulations (CFR) Parts 80, 84, and 91, 7 CFR Part 15, and 28 CFR Part 42], by ensuring that employment practices and the administration of public assistance and social services programs are nondiscriminatory, to the effect that no person shall because of ethnic group identification, age, sex, color, disability, medical condition, national origin, race, ancestry, marital status, religion, religious creed or political belief be excluded from participation in or be denied the benefits of, or be otherwise subject to discrimination under any program or activity receiving federal or state financial assistance; and HEREBY GIVE ASSURANCE THAT it will immediately take any measures necessary to effectuate this agreement.

THIS ASSURANCE is given in consideration of and for the purpose of obtaining any and all federal and state assistance; and THE VENDOR/RECIPIENT HEREBY GIVES ASSURANCE THAT administrative methods/procedures which have the effect of subjecting individuals to discrimination or defeating the objectives of the California Department of Social Services (CDSS) Manual of Policies and Procedures (MPP) Chapter 21, will be prohibited.

BY ACCEPTING THIS ASSURANCE, the vendor/recipient agrees to compile data, maintain records and submit reports as required, to permit effective enforcement of the aforementioned laws, rules and regulations and permit authorized CDSS and/or federal government personnel, during normal working hours, to review such records, books and accounts as needed to ascertain compliance. If there are any violations of this assurance, CDSS shall have the right to invoke fiscal sanctions or other legal remedies in accordance with Welfare and Institutions Code section 10605, or Government Code section 11135-11139.5, or any other laws, or the issue may be referred to the appropriate federal agency for further compliance action and enforcement of this assurance.

THIS ASSURANCE is binding on the vendor/recipient directly or through contract, license, or other provider services, as long as it receives federal or state assistance.

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Director's Signature

\_\_\_\_\_  
Address of Vendor/Recipient

(08/13/01)

CR50-Vendor Assurance of Compliance

**Riverside County Department of Public Social Services  
Contracts Administration Unit  
10281 Kidd Street  
Riverside, CA 92503**

**AGREEMENT:** HQ-03303

**CONTRACTOR:** LightHouse Social Service Centers

**ACTIVITIES:** Rapid Rehousing

**TERM:** July 1, 2016 - June 30, 2017

**MAXIMUM REIMBURSABLE AMOUNT:** \$263,274.00

**HUD PROJECT NUMBER:** CA1367L9D081501

**RECITALS**

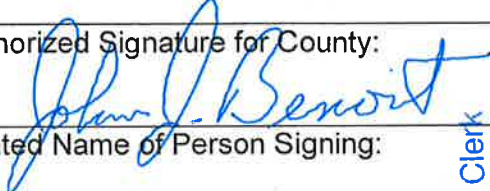
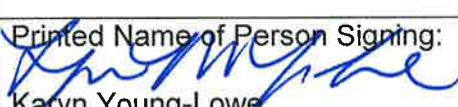
This Agreement is made and entered into by and between the County of Riverside, hereinafter referred to as "County," and the LightHouse Social Service Centers, hereinafter referred to as the "Subrecipient."


**WITNESSETH**

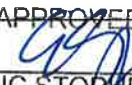

**WHEREAS**, the County has entered into a grant agreement with the United States Department of Housing and Urban Development (HUD), hereinafter referred to as the "Grantor," pursuant to the Continuum of Care Program Rule (CFDA 14.267), codified as 24 CFR 578 and Subtitle C of Title IV of the Stewart B. McKinney-Vento Homeless Assistance Act as amended by S. 896 the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009, 42 U.S.C. 11381 et seq.; and

**WHEREAS**, the Department of Public Social Services, hereinafter referred to as "DPSS," has been designated by the County to provide coordination and administration of the County's Continuum of Care Program, as described in the County's grant agreement with the Grantor.

**NOW THEREFORE**, DPSS and the Subrecipient do hereby covenant and agree that the Subrecipient will provide said services in return for monetary compensation, all in accordance with the terms and conditions contained herein this Agreement.

Authorized Signature for County: 	Authorized Signature for LightHouse Social Service Centers 
Printed Name of Person Signing: John Benoit	Printed Name of Person Signing: Karyn Young-Lowe
Title: Chairman, Board of Supervisors	Title: CEO, President
Address: 4080 Lemon St. Riverside, Ca 92501	Address: 1003 E. Cooley Drive, Ste 101 Colton, CA 92324
Date Signed: JUL 12 2016	Date Signed:

ATTEST:  
 KECIA HARPER-IHEM, Clerk  
 BY  DEPUTY

FORM APPROVED COUNTY COUNSEL  
 BY:  ERIC STOPPER  
 DATE:  DATE

JUL 12 2016 328

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**LIST OF EXHIBITS**

- EXHIBIT A** – Project Application
- EXHIBIT B** – 2-1-1 Riverside County Agency Registration Form
- EXHIBIT C** – 2-1-1 Riverside County Program Registration Form
- EXHIBIT D** – Administrative Handbook for HUD Funded Continuum of Care Programs
- EXHIBIT E** – Certification of Tenant Roll Form
- EXHIBIT F** – Assurance of Compliance

## I. DEFINITIONS

As used in this Agreement, the following terms are defined below unless the context indicates otherwise.

- A. The term “2-1-1” refers to 2-1-1 Riverside County—a designated 3-digit number that allows callers to receive up-to-date information and referrals to health and human service agencies.
- B. The term “Application” refers to the approved application and its submissions prepared by the Subrecipient, which is the basis on which HUD approved the grant.
- C. The term “APR” refers to the Annual Performance Report.
- D. The term “Draw Down” refers to the wire transfer system called Line of Credit Control System - Voice Response System (LOCCS – VRS).
- E. The term “DPSS” refers to the County of Riverside and its Department of Public Social Services, which has administrative responsibility for this Agreement.
- F. The term “HMIS” refers to the Riverside County Homeless Management Information System.
- G. The term “Participants” refers to individuals who utilize Supportive Housing Services, including referral services or individuals who are residents or former residents of the housing project.
- H. The term “Project” refers to housing and/or supportive services for facilitating the movement of homeless individuals through the Continuum of Care into independent permanent housing.
- I. The terms “Subrecipient” or “Contractor” refer to the LightHouse Social Service Centers, the entity under agreement with DPSS to operate the project on a daily basis.
- J. The term “Subcontract” refers to any contract, purchase order, or other purchase agreement, including modifications and change orders to the foregoing, entered into by the Contractor with a subcontractor to furnish supplies, materials, equipment, and services for the performance of any of the terms and conditions contained in this Agreement.
- K. The term “Subcontractor” means any supplier, vendor, or firm, that furnishes supplies, materials, equipment, or services to or for the Contractor or another subcontractor.
- L. The term “Continuum of Care Program (COC Program)” refers to the HUD grant program to promote transitional housing, permanent housing and supportive services to homeless individuals.
- M. The term “Technical Submission” refers to the approved documents prepared by the Subrecipient and submitted to HUD after the HUD grant award.

**II. DPSS RESPONSIBILITIES**

- A. DPSS shall assure that the services provided by the Subrecipient comply with all applicable federal, state, county, and local government laws, rules, regulations, policies and procedures.
- B. DPSS shall assign staff to serve as liaison and program coordinator between DPSS and the Subrecipient. This staff will provide the Subrecipient programmatic consultation and advise the Subrecipient of all-pertinent existing guidelines and regulations. Additionally, the staff will provide or arrange for consultation and technical assistance to the Subrecipient as needed.
- C. DPSS will assign staff to monitor the performance of the Subrecipient in performing the terms, conditions, and specifications of this Agreement. DPSS, at its sole discretion, may monitor the performance of the Subrecipient through any combination of the following methods which may include, but are not limited to: 1) periodic reviews, including on-site visits; (2) evaluations of the quantity or level and quality of services provided by the Subrecipient; (3) annual inspection of all available fiscal statements and other records maintained by the Subrecipient; and (4) annual statements that the Subrecipient is required to complete under this Agreement.

**III. SUBRECIPIENT RESPONSIBILITIES**

- A. The Subrecipient shall be responsible for the overall administration of the Project, including overseeing all subcontractors, client services, and case management, medical care, social services support, and legal support. The Subrecipient will also provide client linkages to other sources of support. The Subrecipient will keep records and reports established to carry out the program in an effective and efficient manner. These records and reports must include racial and ethnic data on participants for program monitoring and evaluation.
- B. The Subrecipient shall provide services as set forth in the Project Application, attached hereto as **Exhibit A**, and incorporated herein by these references.
- C. The Subrecipient shall register its agency and/or program, as funded by DPSS, with 2-1-1 Riverside County, by faxing the 2-1-1 registration forms attached hereto as **Exhibits B and C**, respectively, and incorporated herein by these references, to (951) 686-7417. Registration is to take place at the time of execution of this Agreement, and updated on a quarterly basis, at minimum, if agency and/or program changes occur through the term of this Agreement.

For general inquiries regarding agency and/or program registration, Subrecipients may contact 2-1-1 by one of the following methods:

<b>Telephone</b>	(800) 464-1123 or (951) 686-4402 Monday through Friday - 8:00 am to 5:00 pm
<b>U.S. Postal Service</b>	P.O. 5376, Riverside, CA 92517-5376
<b>E-mail</b>	211Updateinfo@connectRiverside.org

- D. The Subrecipient will be responsible for assuring that persons served under the terms of this Agreement meet the criteria specified in federal law for participants served under the Continuum of Care Program.

- E. The Subrecipient shall comply with the policies and procedures in the DPSS Administrative Handbook for HUD Funded Programs, attached hereto as **Exhibit D** and incorporated herein by this reference, and all laws applicable to the provision of services under this program. If required, this Agreement will be amended to reflect any additional requirements detailed in the Handbook.
- F. The Subrecipient shall comply with the Educational Assurance requirements as stipulated in the McKinney-Vento Homeless Education Assistance Improvements Act.
- G. The Subrecipient agrees to participate in the Homeless Management Information System (HMIS).
  - 1. Participation is defined by HMIS training attendance, complying with Riverside County HMIS security policies and procedures, and entering required client data on a regular basis.
  - 2. DPSS retains the rights to the HMIS and case management software application used in the operations of this property. DPSS grants the Subrecipient an exclusive perpetual license to use the HMIS software for the term of this Agreement.
  - 3. The Subrecipient shall ensure that employees using HMIS for client intake capture all required data fields, as set forth in the County of Riverside Continuum of Care 's HMIS Policies and Procedures Manual, which is located on the DPSS website: <http://dpss.co.riverside.ca.us/homeless-programs>.
  - 4. The Subrecipient must maintain a valid HMIS End User Agreement on file with DPSS, which is located on the DPSS website: <http://dpss.co.riverside.ca.us/homeless-programs>.

**IV. FISCAL PROVISIONS**

**A. OBLIGATION**

The Subrecipient shall be reimbursed by HUD, utilizing a draw down process, for an amount not to exceed \$252,168.00. The County shall be reimbursed by HUD for an amount not to exceed \$5,886. Said funds shall be spent according to the budget shown below.

BUDGET CATEGORY	Total
RENTAL ASSISTANCE	\$173,856
SUPPORTIVE SERVICES	\$42,773
HMIS -- SOFTWARE	\$30,161
ADMINISTRATIVE COSTS (SUBRECIPIENT)	\$10,598
<b>SUBRECIPIENT TOTAL</b>	<b>\$257,388</b>
ADMINISTRATIVE COSTS (COUNTY)	\$5,886
<b>GRANT TOTAL</b>	<b>\$263,274</b>

The Subrecipient must match all grant funds except for leasing funds with no less than 25% of funds or in kind contributions from other sources. Match must be used for the costs of eligible activities (**Exhibit A**).

**B. METHOD, TIME, AND CONDITION OF PAYMENTS**

1. The Subrecipient shall submit to DPSS a monthly claim in accordance with the Administrative Handbook (**Exhibit D**).
2. The Subrecipient shall ensure that funds provided under this Agreement are not used to pay developer's fees, to establish working capital, or operate deficit funds.

- a. Cash Match Documentation

The Subrecipient shall provide cash match documentation as set forth in this Agreement and the Project Application (**Exhibit A**). Cash match documentation must be submitted with monthly billing claims. DPSS will verify utilization of the cash match through a monthly desk review and on-site monitoring visits. Matching funds provided by the Subrecipient must be money provided to the project by one or more of the following: the Subrecipient, the federal government, state and local governments, and/or private resources. Non-cash resources such as in-kind contributions of goods or services may be used to fulfill matching funds requirements. Matching funds provided by state or local government used in a matching contribution are subject to maintenance of effort requirements.

- b. In the event that the Subrecipient does not meet the requirements in paragraph 2.a. above, DPSS reserves the right to suspend or terminate this Agreement.

### C. BUDGET MODIFICATIONS

Minor changes are departures from the initial application that do not substantially affect the grant. All requests for minor changes must be approved in writing by DPSS prior to implementing the change. No requests will be approved retroactively.

- a. Changes within a Budget Category

Changes can be made to individual line items within a category, if all of the following conditions are met:

- i. The total amount of the Agreement does not change;
- ii. The Subrecipient delivers a written request to DPSS, that adequately documents the need for a change and specifically identifies the items to be reduced/increased;
- iii. The modification cannot remove any line item that was included in the original Application or Technical Submission (if applicable);
- iv. Modification requests (i.e., other than rollovers) must be submitted to DPSS no later than **thirty (30) days** after the end of the grant period.

- b. Changes between Budget Categories (up to 10 percent)

Changes can be made between categories of up to 10 percent over the life of the grant, if all of the following conditions are met:

- i. The total amount of the Agreement does not change;
- ii. The Subrecipient delivers a written request to DPSS, that adequately documents the need for a change and specifically identifies the categories and line items to be reduced/increased;
- iii. The modification cannot remove any line item that was included in the original Application or Technical Submission (if applicable);



- iv. Modification requests (i.e., other than rollovers) must be submitted to DPSS no later than **forty-five (45) days** prior to the end of the grant period.
1. Major changes are departures from the initial application that substantially affect the grant. All requests for major changes must be approved in writing by DPSS prior to implementing the change. No requests will be approved retroactively. The following are examples of significant changes:
    - a change in project site;
    - additions and deletions of eligible activities;
    - a shift of 10 percent or more of funds from one approved activity to another over the life of the grant;
    - a change in the target population; or
    - a change in the number of participants to be served.

- a. Conditions for Approval

Changes may be approved if all of the following conditions are met:

- i. The Subrecipient delivers a written request to DPSS, no later than **ninety (90) days** prior to the end of the grant, and adequately documents the need for change; and
- ii. approval is received by HUD.

- b. Requests for Approval

Request will be forwarded to HUD for their approval and any one of the following will take place:

- i. HUD will approve change as requested;
- ii. HUD will approve change and reduce dollars;
- iii. HUD will deny request.

- c. Budget Rollover of unused funds (multi-year grants only)

The Subrecipient may request that unused funds from a prior operating year be rolled over into the next operating year, if all of the following conditions are met:

- i. The total amount of the Agreement does not change;
- ii. The Subrecipient delivers a written request to DPSS, no later than **forty-five (45) days** prior to the end of the grant period, and adequately documents the need for a change;
- iii. The Subrecipient specifically identifies the categories, line items, and rolls the funds over to the same approved categories and line items for the following operating year;
- iv. The Subrecipient meets the approved match for the unused funds even if the match is different from the approved match from the prior operating year.

## D. DISBURSEMENT OF FUNDS

DPSS shall disburse funds under this Agreement to the Subrecipient as follows:

1. The Subrecipient shall submit claims for reimbursement pursuant to the Budget listed in section IV.A. on a monthly basis.

2. Administrative costs are costs associated with accounting for the use of grant funds, preparing reports for submission to HUD, obtaining program audits, similar costs related to administering the grant after the award, and staff salaries associated with these administrative costs.

#### E. UNEXPENDED FUNDS AND CLOSE-OUTS

1. The Subrecipient shall complete all necessary closeout procedures, including the APR, required by DPSS within a period of not more than **sixty (60) calendar days** from the expiration date of this Agreement. This time period will be referred to as the financial closeout period. After the expiration of the financial closeout period, those funds not paid to the Subrecipient under this Agreement shall be recaptured by HUD. DPSS is not liable for any expenses or costs associated with this Agreement after the expiration of the financial closeout period.
2. The Subrecipient, if required to have an A-133 audit, shall provide a final financial audit for activities performed under this Agreement within thirty (30) days from finalization of audit.

#### F. INSPECTION AND AUDITS

1. The Subrecipient shall maintain auditable books, records, documents, and other evidence pertaining to costs and expenses in this Agreement. The Subrecipient shall maintain these records for seven (7) years after final payment has been made or until all pending DPSS, state, and federal audits, if any, are completed, whichever is later. If a restrictive covenant is in effect, records shall be maintained until the covenant expires.
2. Authorized representatives of DPSS and the federal government shall have access to any books, documents, papers, electronic data, and other records, which these representatives may determine to be pertinent to this Agreement for the purpose of performing an audit, evaluation, inspection, review, assessment, or examination. These representatives are authorized to obtain excerpts, transcripts, and copies, as they deem necessary. Further, these authorized representatives shall have the right, upon request, to inspect or otherwise evaluate the work performed under this Agreement and the premises in which it is being performed.
3. This access to records includes, but is not limited to, service delivery, referrals, and financial and administrative documents for seven (7) years after final payment was made, or until all pending county, state, and federal audits are completed, whichever is later.
4. Should the Subrecipient disagree with any audit conducted by DPSS, the Subrecipient shall have the right to employ a licensed, Certified Public Account (CPA) to prepare and file with DPSS a certified financial and compliance audit (in compliance with generally accepted government auditing standards) of related services provided during the term of this Agreement. The Subrecipient will not be reimbursed by DPSS for such an audit.
5. In the event the Subrecipient does not make available its books and financial records at the location where they are normally maintained, the Subrecipient agrees to pay all necessary and reasonable expenses, including legal fees, incurred by DPSS in conducting any audit.
6. All Agreement deliverables and equipment furnished or utilized in the performance of this Agreement shall be subject to inspection by DPSS at all times during the term of this Agreement. The Subrecipient shall provide adequate cooperation to any employee assigned by DPSS in order to permit their determination of the Sub-recipient's

conformity with specifications and adequacy of performance and services being provided in accordance with this Agreement.

#### G. WITHHELD PAYMENTS

1. Unearned payments under this Agreement may be suspended or terminated if grant funds to DPSS are suspended terminated, or if the Subrecipient refuses to accept additional conditions imposed on it by HUD or DPSS.
2. DPSS has the authority to withhold funds under this Agreement pending a final determination by DPSS of questioned expenditures or indebtedness to DPSS arising from past or present agreements between DPSS and the Subrecipient. Upon final determination by DPSS of disallowed expenditures or indebtedness, DPSS may deduct and retain the amount of the disallowed or indebtedness from the amount of the withheld funds.
3. Payments to the Sub-recipient may be withheld by DPSS if the Subrecipient fails to comply with the provisions of this Agreement.

#### H. FISCAL ACCOUNTABILITY

4. The Sub-recipient agrees to manage funds received through DPSS in accordance with sound accounting policies; incur and claim only eligible costs for reimbursement; and adhere to accounting standards established in OMB Circulars A-110, A-122, and A-133.
5. The Sub-recipient must establish and maintain on a current basis an accrual accounting system in accordance with generally accepted accounting principles and standards. Further, the Sub-recipient must develop an accounting procedure manual. Said manual shall be made available to DPSS upon request or during fiscal monitoring visits.

#### I. AVAILABILITY OF FUNDING

Funding for this Agreement is subject to the continuing availability of funds provided to DPSS during the Agreement period. DPSS will inform the Sub-recipient, immediately upon notice from HUD, of any limitation of the availability of funds. Both parties understand that DPSS makes no commitment to fund this project beyond the term of this Agreement

### V. GENERAL PROVISIONS

#### A. TERM OF AGREEMENT

The Agreement shall be effective from July 1, 2016 - June 30, 2017.

#### B. BACKGROUND CHECKS

Contractors providing services to minors (detailed in **Exhibit A-Project Application**) shall be required to conduct criminal background records checks on all employees, subcontractors, and volunteers providing services under this Agreement. Prior to these individuals providing services to clients, the Contractor shall have received a criminal records clearance from the State of California Department of Justice (DOJ). A signed certification of such clearance shall be retained in each individual's personnel file.

#### C. CONFIDENTIALITY

The Contractor shall maintain the confidentiality of all information and records and comply with all other statutory laws and regulations relating to privacy and confidentiality.

Each party shall ensure that case record information is kept confidential when it identifies an individual by name, address, or other information. Confidential information requires special precautions to protect it from loss, unauthorized use, access, disclosure, modification, and destruction.

The parties to this Agreement shall keep all information that is exchanged between them in the strictest confidence, in accordance with Federal Law. All records and information concerning any and all persons referred to the Contractor shall be considered and kept confidential by the Contractor, its staff, agents, employees and volunteers. The Contractor shall require all of its employees, agents, subcontractors and volunteer staff who may provide services under this Agreement with the Contractor before commencing the provision of any such services, to maintain the confidentiality of any and all materials and information with which they may come into contact, or the identities or any identifying characteristics or information with respect to any and all participants referred to the Contractor by Riverside County.

Contractor shall ensure that no person will publish, disclose, use, permit, or cause to be published, disclosed, or used, any confidential information pertaining to any applicant or recipient of services under this Agreement. The Contractor agrees to inform all persons directly or indirectly involved in administration of services provided under this Agreement of the above provisions and that any person deliberately violating these provisions is guilty of a misdemeanor.

#### D. CONTINUUM OF CARE PROGRAM COMPLIANCE

By executing this Agreement, the Subrecipient hereby certifies that it will adhere to and comply with the following as they may be applicable to a recipient of funds granted pursuant to the Continuum of Care Program, including; HUD Application, Technical Submission; Continuum of Care Program Interim Rule (24 CFR 578); Administrative Requirement for Grants and Cooperative Agreements (24 CFR Part 85); this Agreement, and the applicable Notice of Funding Availability (NOFA).

#### E. CONFLICT OF INTEREST

The Subrecipient covenants that it presently has no interest in, including but not limited to, other projects or independent agreements, and shall not acquire any such interest, direct or indirect, which is, or which the Subrecipient believes to be, incompatible in any manner or degree with the performance of services required to be performed under this Agreement. The Subrecipient further covenants that in the performance of this Agreement no person having any such interest shall be employed or retained by the Subrecipient under this agreement. The Subrecipient agrees to inform DPSS of all of the Subrecipient's interests, if any, which are or which the Subrecipient believes to be incompatible with any interest of DPSS. The County will make final determination of any dispute about conflict(s) of interest.

#### F. DEFAULT

1. A default shall consist of any use of grant funds for a purpose other than as authorized by this Agreement or failure in the Subrecipient's duty to provide the supportive housing for the minimum term in accordance with the requirements of the provisions of the Continuum of Care Program Rule, the Application, the Technical Submission, or this

Agreement. In the event of an occurrence of default, DPSS and HUD may take one or more of the following actions:

- a. Issue a letter of warning advising the Subrecipient of the default that establishes a date by which corrective actions must be completed and puts the Subrecipient on notice that more serious actions will be taken if the default is not corrected or is repeated;
  - b. Direct the Subrecipient to submit progress schedules for completing the approved activities;
  - c. Direct the Subrecipient to establish and maintain a management plan that assigns responsibilities for carrying out remedial actions;
  - d. Direct the Subrecipient to reimburse the program accounts for costs inappropriately charged to the program; and/or
  - e. Make recommendations to HUD to reduce or recapture the grant.
2. No delay or omission by the County in exercising any right or remedy available to it under this Agreement shall impair any such right or remedy or constitute a waiver of acquiescence in any Subrecipient default.

#### G. HOLD HARMLESS/INDEMNIFICATION

Contractor agrees to indemnify and hold harmless County, all Agencies, Districts, Special Districts and Departments of County, their respective directors, officers, Board of Supervisors, elected and appointed officials, employees, agents and representatives from any liability whatsoever, based or asserted upon any services of Contractor, its officers, employees, subcontractors, agents or representatives arising out of or in any way relating to this Agreement, including but not limited to property damage, bodily injury, death, or any other element of any kind or nature whatsoever arising from the performance of Contractor, its officers, agents, employees, subcontractors, agents or representatives from this Agreement. Contractor shall defend, at its sole expense, all costs and fees, including but not limited to attorney fees, cost of investigation, defense and settlements or awards, of County, all Agencies, Districts, Special Districts and Departments of County, their respective directors, officers, Board of Supervisors, elected and appointed officials, employees, agents or representatives in any claim or action based upon such alleged acts or omissions.

With respect to any action or claim subject to indemnification herein by Contractor, Contractor shall, at their sole cost, have the right to use counsel of their choice, subject to the approval of County, which shall not be unreasonably withheld, and shall have the right to adjust, settle, or compromise any such action or claim without the prior consent of County; provided, however, that any such adjustment, settlement or compromise in no manner whatsoever limits or circumscribes Contractor's indemnification to County as set forth herein. Contractor's obligation to defend, indemnify and hold harmless County shall be subject to County having given Contractor written notice within a reasonable period of time of the claim or of the commencement of the related action, as the case may be, and information and reasonable assistance, at Contractor's expense, for the defense or settlement thereof. Contractor's obligation hereunder shall be satisfied when Contractor has provided to County the appropriate form of dismissal relieving County from any liability for the action or claim involved.

The specified insurance limits required in this Agreement shall in no way limit or circumscribe Contractor's obligations to indemnify and hold harmless County herein from third party claims.

In the event there is conflict between this clause and California Civil Code §2782, this clause shall be interpreted to comply with Civil Code §2782. Such interpretation shall not relieve the Contractor from indemnifying County to the fullest extent allowed by law.

## H. INSURANCE

Without limiting or diminishing the CONTRACTOR'S obligation to indemnify or hold the COUNTY harmless, CONTRACTOR shall procure and maintain or cause to be maintained, at its sole cost and expense, the following insurance coverage's during the term of this Agreement. As respects to the insurance section only, the COUNTY herein refers to the County of Riverside, its Agencies, Districts, Special Districts, and Departments, their respective directors, officers, Board of Supervisors, employees, elected or appointed officials, agents or representatives as Additional Insureds.

### Workers' Compensation:

If Contractor has employees as defined by the State of California, the Contractor shall maintain statutory Workers' Compensation Insurance (Coverage A) as prescribed by the laws of the State of California. Policy shall include Employers' Liability (Coverage B) including Occupational Disease with limits not less than \$1,000,000 per person per accident. Policy shall be endorsed to waive subrogation in favor of the County of Riverside; and, if applicable, to provide a Borrowed Servant/Alternate Employer Endorsement.

### Commercial General Liability:

Commercial General Liability insurance coverage, including but not limited to, premises liability, contractual liability, products and completed operations liability, personal and advertising injury, cross liability coverage, covering claims which may arise from or out of Contractor's performance of its obligations hereunder. Policy shall name the COUNTY as additional Insured. Policy's limit of liability shall not be less than \$1,000,000 per occurrence combined single limit. If such insurance contains a general aggregate limit, it shall apply separately to this Agreement or be no less than two (2) times the occurrence limit.

### Professional Liability:

If, at any time during the duration of this Agreement and any renewal or extension thereof, the Contractor, its employees, agents or subcontractors provide professional counseling for issues of medical diagnosis, medical treatment, mental health, dispute resolution or any other services for which it is the usual and customary practice to maintain Professional Liability Insurance, the Contractor shall procure and maintain Professional Liability Insurance (Errors & Omissions), providing coverage for performance of work included within this Agreement, with a limit of liability of not less than \$1,000,000 per occurrence and \$2,000,000 annual aggregate. If Consultant's Professional Liability Insurance is written on a claims made basis rather than an occurrence basis, such insurance shall continue through the term of this Agreement. Upon termination of this Agreement or the expiration or cancellation of the claims made insurance policy Consultant shall purchase at his sole expense either 1) an Extended Reporting Endorsement (also known as Tail Coverage); or 2) Prior Dates Coverage from a new insurer with at retroactive date back to the date of, or prior to, the inception of this Agreement; or, 3) demonstrate through Certificate of Insurance that Consultant has maintained continuous coverage with the same or original insurer. Coverage provided under items: Workers' Compensation, Commercial General Liability or Professional Liability will continue for a period of five (5) years beyond the termination of this Agreement.

### Vehicle Liability:

If Contractor's vehicles or mobile equipment are used in the performance of the obligations under this Agreement, Contractor shall maintain liability insurance for all owned, non-owned

or hired vehicles so used in an amount not less than \$1,000,000 per occurrence combined single limit. If such insurance contains a general aggregate limit, it shall apply separately to this Agreement or be no less than two (2) times the occurrence limit. Policy shall name the COUNTY as additional Insured.

General Insurance Provisions – All lines:

1. Any insurance carrier providing insurance coverage hereunder shall be admitted to the State of California and have an A.M. BEST rating of not less than an A: VIII(A:8) unless such requirements are waived, in writing, by the County Risk Manager. If the County's Risk Manager waives a requirement for a particular insurer such waiver is only valid for that specific insurer and only for one policy term.
2. The Contractor's insurance carrier(s) must declare self-insured retentions. If such self insured retentions exceed \$500,000 per occurrence retentions shall have the prior written consent of the County Risk Manager before the commencement of operations under this Agreement. Upon notification of self insured retention's unacceptable to the County, and at the election of the County's Risk Manager, Contractor's carriers shall either; 1) reduce or eliminate such self-insured retentions as respects this Agreement with the County, or 2) procure a bond which guarantees payment of losses and related investigations, claims administration, defense costs and expenses.
3. The Contractor shall cause insurance carrier(s) to furnish the County of Riverside with either 1) a properly executed original Certificate(s) of Insurance and original copies of Endorsements effecting coverage as required herein; and 2) if requested to do so orally or in writing by the County Risk Manager, provide original Certified copies of policies including all Endorsements and all attachments thereto, showing such insurance is in full force and effect. Further, said Certificate(s) and policies of insurance shall contain the covenant of the insurance carrier(s) that thirty (30) days written notice shall be given to the County of Riverside prior to any material modification, cancellation, expiration or reduction in coverage of such insurance. In the event of a material modification, cancellation, expiration, or reduction in coverage, this Agreement shall terminate forthwith, unless the County of Riverside receives, prior to such effective date, another properly executed original Certificate of Insurance and original copies of endorsements or certified original policies, including all endorsements and attachments thereto evidencing coverages set forth herein and the insurance required herein is in full force and effect. CONTRACTOR shall not commence operations until the COUNTY has been furnished original Certificate (s) of Insurance and certified original copies of endorsements and if requested, certified original policies of insurance including all endorsements and any and all other attachments as required in this Section. An individual authorized by the insurance carrier to do so on its behalf shall sign the original endorsements for each policy and the Certificate of Insurance.
4. It is understood and agreed to by the parties hereto and the CONTRACTOR'S insurance shall be construed as primary insurance, and the County's insurance and/or deductibles and/or self-insured retentions or self-insured programs shall not be construed as contributory.
5. If, during the term of this Agreement or any extension thereof, there is a material change in the scope of services; or, there is a material change in the equipment to be used in the performance of the scope of work which will add additional exposures (such as the use of aircraft, watercraft, cranes, etc.); or, the term of this Agreement, including any extensions thereof, exceeds five (5) years the COUNTY reserves the right to adjust the types of insurance required under this Agreement and the monetary limits of liability for

the insurance coverage's currently required herein, if; in the County Risk Manager's reasonable judgment, the amount or type of insurance carried by the CONTRACTOR has become inadequate.

6. Contractor shall pass down the insurance obligations contained herein to all tiers of subcontractors working under this Agreement.
7. The insurance requirements contained in this Agreement may be met with a program(s) of self-insurance acceptable to the County.
8. Contractor agrees to notify the County of any claim by a third party or any incident or event that may give rise to a claim arising from the performance of this Agreement.

#### I. INDEPENDENT CONTRACTOR

The Subrecipient is, and will at all times be deemed to be, an independent contractor and shall be wholly responsible for the manner in which it performs the services required of it by the terms of this Agreement. Nothing herein contained shall be construed as creating the relationship of employer and employee or principal and agent, between DPSS and the Subrecipient or any of the Sub-recipient's agents, employees, or volunteers. The Subrecipient assumes exclusively the responsibility for the acts of its employees as they relate to the services to be provided during the course and scope of their employment. The Subrecipient, its agents, employees, and volunteers shall not be afforded any of the rights and/or privileges afforded to employees of DPSS or the County of Riverside and shall not be considered in any manner to be employees of the County.

#### J. SUBCONTRACT FOR SERVICES

1. The Contractor shall not enter into any subcontract with any subcontractor who:
  - a. is presently debarred, suspended, proposed for debarment, and declared ineligible or voluntarily excluded from covered transactions by a federal department or agency.
  - b. has within a 3-year period preceding this Agreement been convicted of or had a civil judgment rendered against them for the commission of fraud, or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction; violation of Federal or State anti-trust status or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
  - c. is presently indicated or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in the paragraph above; and
  - d. has within a 3-year period preceding this Agreement had one or more public transactions (Federal, State, or local) terminated for cause or default.
2. The Contractor shall be as fully responsible for the acts or omissions of its subcontractors, and of persons either directly or indirectly employed by them as for the acts or omissions of persons directly employed by the Contractor.
3. The Contractor shall insert appropriate clauses in all subcontracts to bind subcontractors to the terms and conditions of this Agreement insofar as they are applicable to the work of subcontractors.
4. The Contractor shall document, prior to grant execution, all services to be provided by a third party by a memorandum of understanding (MOU) between the recipient or sub-recipient and the third party that will provide the services, as per CFR 578.73, (c)(3).
5. Nothing contained in this Agreement shall create any contractual relationship between any subcontractor and the County of Riverside, its Agencies, Districts, Special Districts



and Departments, their respective directors, officers, Board of Supervisors, elected and appointed officials, employees, agents and representatives.

#### K. REPORTS AND RECORD KEEPING

1. The Subrecipient agrees to complete the Annual Performance Report (APR) in e-snaps and submit to DPSS an electronic copy within sixty (60) days after the end of each operating year. Failure to submit an APR may lead to a delay in receiving future grant funds. Upon review for completeness and accuracy, DPSS will submit the APR to HUD as required.
2. The Subrecipient agrees to submit a Semi-Annual Statistical Report upon a 30-day written notice by DPSS.
3. If funded for Transitional Housing, Permanent Housing, Rapid Re-Housing or Shelter Plus Care, the Subrecipient agrees to provide DPSS with a monthly residential log of participants, attached hereto as **Exhibit E** [Certification of Tenant Roll] and incorporated herein by this reference. The residential log is due, by fax or scanned and sent by e-mail to the DPSS CoC/HUD Program Specialist, on or before the 10<sup>th</sup> (tenth) business day following the reporting month, regardless of the means by which the report is sent to DPSS.
4. The Sponsor agrees to collect and maintain records of participants for required federal, state, and county reports.

#### L. SANCTIONS

Failure by the Subrecipient to comply with any of the provisions, covenants, requirements, or conditions of this Agreement including, but not limited to, reporting and evaluation requirements, shall be a material breach of this Agreement. In such event, DPSS may immediately terminate this Agreement under the provisions in paragraph "K" below, and may take any other remedies available by law, or otherwise specified in this Agreement. DPSS may also:

1. Afford the Subrecipient a time period within which to correct the breach, the period of which shall be established at the sole discretion of DPSS; and/or
2. Withhold funds pending correction of the breach.

#### M. TERMINATION

1. DPSS may immediately suspend or terminate this Agreement for cause upon written notice to the Subrecipient of the action being taken. Cause shall be established if:
  - a. The Subrecipient fails to perform the covenants herein contained at such time and in such manner as provided in this Agreement; or
  - b. There is a conflict with any federal, state or local laws, ordinance, regulation or rule rendering any provision of this Agreement invalid or untenable.
2. DPSS may also terminate or suspend this agreement without cause. DPSS will provide ninety (90) days written notification stating the extent and effective date of termination. The ninety-day period begins when notice is deposited in the U.S. Mail, postage paid.
3. The Subrecipient may terminate this Agreement with cause upon written notice served upon DPSS stating the extent and effective date of termination. Contractor will provide ninety (90) days written notification stating the extent and effective date of termination. The ninety-day period begins when notice is deposited in the U.S. Mail, postage paid.
4. Upon termination of this Agreement, the Subrecipient shall not incur any obligations after any effective date of such termination, unless expressly authorized in writing by DPSS.

5. In the event the funding from HUD is reduced, terminated or otherwise becomes unavailable, DPSS shall provide written notice to the Subrecipient within five (5) working days from the date that HUD reduces, suspends or terminates the grant funding. This Agreement shall be either immediately terminated or amended to reflect said reduction in funds. DPSS shall make payments for all services performed up to the effective date of the termination.

#### N. GOVERNING LAW

This Agreement shall be construed and interpreted according to the laws of the State of California. Any legal action related to the interpretation or performance of this Agreement shall be filed only in the appropriate courts located in the County of Riverside, State of California. Should action be brought to enforce or interpret the provisions of the Agreement, the prevailing party shall be entitled to attorney's fees in addition to whatever other relief are granted.

#### O. NOTICES

All correspondence and notices required or contemplated by this Agreement shall be delivered to the respective parties at the addresses set forth herein. All other correspondence shall be delivered to the addresses shown below and are deemed submitted on the date of deposit in the U. S. Mail, postage prepaid to:

DPSS: (Agreement Issues)	Department of Public Social Services Contracts Administration Unit 10281 Kidd Street Riverside, CA 92503
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DPSS: (Program Issues)	Department of Public Social Services Homeless Program Unit 4060 County Circle Drive Riverside, CA 92503
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DPSS: (Fiscal Issues)	Department of Public Social Services Management Reporting Unit 4060 County Circle Drive Riverside, CA 92503
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SUBRECIPIENT:	LightHouse Social Service Centers 1003 E. Cooley Drive, Ste. 101 Colton, CA 92324
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#### P. ASSIGNMENTS

The Subrecipient cannot assign any interest in this Agreement, and shall not transfer any interest in the same, whether by assignment or novation, without prior written consent of DPSS. Any attempt to assign any interest without DPSS written consent shall be void and of no further force or effect.

## Q. DISPUTES

Except as otherwise provided in this Agreement, any dispute concerning a question of fact arising under this Agreement, which is not disposed of by Agreement, shall be disposed of by DPSS who shall furnish the decision in writing. The decision of DPSS shall be final and conclusive until determined by a court of competent jurisdiction to have been fraudulent or capricious, arbitrary, or so grossly erroneous as necessarily to imply bad faith. The Subrecipient shall proceed diligently with the performance of the Agreement pending DPSS' decision.

## R. CHILD ABUSE REPORTING

The Contractor shall establish a procedure acceptable to DPSS to ensure that all employees, volunteers, consultants, subcontractors or agents performing services under this Agreement report child abuse or neglect to a child protective agency as defined in Penal Code, Section 11166.

## S. ELDER AND DEPENDENT ABUSE REPORTING

The Contractor shall provide documentation of a policy and procedure acceptable to DPSS to ensure that all employees, volunteers, consultants, subcontractors, or agents performing under this Agreement report elder and dependent adult abuse pursuant to Welfare & Institutions Code Sections 15600 et seq. Suspected incidents of abuse should be immediately reported to DPSS, followed by a written report within two (2) working days.

## T. CLIENTS CIVIL RIGHTS COMPLIANCE

### 1. Assurance of Compliance

The Contractor shall complete the Vendor Assurance of Compliance with Riverside County Department of Public Social Services Non-Discrimination in State and Federally Assisted Programs, attached hereto as **Exhibit G** and incorporated herein by this reference. The Contractor will sign and date **Exhibit G** and return it to DPSS along with the executed Agreement. The Contractor shall ensure that the administration of public assistance and social service programs are non-discriminatory. To the effect that no person shall because of ethnic group identification, age, sex, color, disability, medical condition, national origin, race, ancestry, marital status, religion, religious creed or political belief be excluded from participation in or be denied the benefits of, or be otherwise subject to discrimination under any program or activity receiving federal or state financial assistance.

### 2. Client Complaints

The Contractor shall further establish and maintain written referral procedures under which any person, applying for or receiving services hereunder, may seek resolution from Riverside County DPSS Civil Rights Coordinator of a complaint with respect to any alleged discrimination in the provision of services by Contractor's personnel.

### **Civil Rights Complaints should be referred to:**

Civil Rights Coordinator  
Riverside County Department of Public Social Services  
10281 Kidd Street  
Riverside, CA 92503

### 3. Services, Benefits and Facilities

Contractor shall not discriminate in the provision of services, the allocation of benefits, or in the accommodation in facilities on the basis of color, race, religion, national origin, sex, age, sexual preference, physical or mental handicap in accordance with Title VI of the Civil Rights Act of 1964, 42 U.S.C. Section 2000d and all other pertinent rules and regulations promulgated pursuant thereto, and as otherwise provided by State law and regulations, as all may now exist or be hereafter amended or changed.

For the purpose of this Section, discrimination means denying a participant or potential participant any service, benefit, or accommodation that would be provided to another and includes, but is not limited to, the following:

- (a) Denying a participant any service or benefit or availability of a facility.
- (b) Providing any service or benefit to a participant which is different, or is provided in a different manner, or at a different time or place from that provided to other participants on the basis of race, color, creed or national origin.
- (c) Restricting a participant in any way in the enjoyment of any advantage or privilege enjoyed by others receiving any service or benefit. Treating a participant differently from others in satisfying any admission requirement or condition, or eligibility requirement or condition, which individuals must meet in order to be provided any service or benefit.

### 4. Cultural Competency

Contractor shall cause to be available bilingual professional staff or qualified interpreter to ensure adequate communication between clients and staff. Any individual with limited English language capability or other communicative barriers shall have equal access to services.

For the purpose of this Section, a qualified interpreter is defined as someone who is fluent in English and in the necessary second language, can accurately speak, read and readily interpret the necessary second language and/or accurately sign and read sign language. A qualified interpreter must be able to translate in linguistically appropriate terminology necessary to convey information such as symptoms or instructions to the client in both languages.

## U. EMPLOYMENT PRACTICES

1. The Contractor shall not discriminate in its recruiting, hiring, promoting, demoting, or terminating practices on the basis of race, religious creed, color, national origin, ancestry, physical handicap, medical condition, marital status, age, or sex in the performance of this Agreement, and to the extent they shall apply, with the provisions of the California Fair Employment and Housing Act (commencing with Gov. Code section 12900 et. seq.), and the Federal Civil Rights Act of 1964 (P. L. 88-352).
2. In the provision of benefits, the Contractor shall certify and comply with Public Contract Code 10295.3, to not discriminate between employees with spouses and employees with domestic partners, or discriminate between the domestic partners and spouses of those employees.

For the purpose of this section, Domestic Partner means one of two persons who have filed a declaration of domestic partnership with the Secretary of State pursuant to Division 2.5 (commencing with Section 297) of the Family Code.

V. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

The Contractor in this Agreement is subject to all relevant requirements contained in the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191, enacted August 21, 1996, and the laws and regulations promulgated subsequent thereto. The Contractor hereto agrees to cooperate in accordance with the terms and intent of this Agreement for implementation of relevant law(s) and/or regulation(s) promulgated under this Law. The Contractor further agrees that it shall be in compliance, and shall remain in compliance with the requirements of HIPAA, and the laws and regulations promulgated subsequent hereto, as may be amended from time to time.

W. CLEAN AIR/WATER ACTS

As required in all contracts with an estimated total value in excess of \$100,000, the Subrecipient agrees to comply with all applicable requirements issued under Section 306 of the Clean Air Act (33 U.S.C. 1368), U.S. Executive Order 11738, and Environmental Protection Agency (EPA) regulations (40 CFR, Part 15). These laws and regulations require the Subrecipient not to use facilities on the EPA list of violating facilities and to report violations to the EPA.

X. LEAD-BASED PAINT

The Subrecipient and all subcontractors, if any, shall comply with the requirements, as applicable, of the Lead-Based Paint Poisoning Prevention Act (42 U.S.C 4821-4846) and implementing regulations issued pursuant thereto (24 CFR Part 35).

Y. AUTHORITY

The individuals executing this Agreement and the instruments referenced herein on behalf of the Subrecipient each represent and warrant that they have the legal power, right, and actual authority to bind the Subrecipient to the terms and conditions hereof and thereof.

Z. DEBARMENT AND SUSPENSION

As a sub-grantee of federal funds under this Agreement, the Subrecipient certifies that it, and its principals:

1. Are not presently debarred, suspended, proposed for debarment, and declared ineligible or voluntarily excluded from covered transactions by a federal department or agency.
2. Have not within a 3-year period preceding this Agreement been convicted of or had a civil judgment rendered against them for the commission of fraud, or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction; violation of Federal or State anti-trust status or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
3. Are not presently indicated or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in the paragraph above; and
4. Have not within a 3-year period preceding this Agreement had one or more public transactions (Federal, State or local) terminated for cause or default.

**AA.COMPLIANCE WITH RULES, REGULATIONS, REQUIREMENTS, AND DIRECTIVES**

The Subrecipient shall comply with all rules, regulations, requirements, and directives of the California Department of Social Services, other applicable state agencies, and funding sources which impose duties and regulations upon DPSS which are equally applicable and made binding upon the Subrecipient as though made with the Subrecipient directly.

**BB.ENTIRE AGREEMENT**

This Agreement constitutes the entire agreement between the parties hereto with respect to the subject matter hereof and all prior or contemporaneous agreements of any kind or nature relating to the same shall be deemed to be merged herein. Any modifications to the terms of this Agreement must be made in writing and signed by the parties herein. More specifically, the Subrecipient shall not change the population to be served or make any other change inconsistent with the Application without the prior approval of DPSS and HUD.

## Before Starting the Project Application

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

### Things to Remember

- Additional training resources can be found on the HUD Exchange at <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/> - Program policy questions and problems related to completing the application in e-snaps may be directed to HUD via the HUD Exchange Ask A Question.
- Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2015 Continuum of Care (CoC) Program Competition. For more information see FY 2015 CoC Program Competition NOFA.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2015 CoC Program NOFA and the FY 2015 General Section NOFA.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with onscreen text and the hide/show instructions found on each individual screen.
- Before starting the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps.
- Carefully review each question in the Project Application. Questions from previous competitions may have been changed or removed, or new questions may have been added, and information previously submitted may or may not be relevant. Data from the FY 2014 Project Application will be imported into the FY 2015 Project Application; however, applicants will be required to review all fields for accuracy and to update information that may have been adjusted through the FY 2014 post award process or a grant agreement amendment. Data entered in the post award and amendment forms in e-snaps will not be imported into the project application.
- Expiring Shelter Plus Care projects requesting renewal funding for the first time under 24 CFR part 578, and rental assistance projects can only request the number of units and unit size as approved in the final HUD-approved Grant Inventory Worksheet (GIW).
- Expiring Supportive Housing Projects requesting renewal funding for the first time under 24 CFR part 578, transitional housing, permanent supportive housing with leasing, rapid re-housing, supportive services only, renewing safe havens, and HMIS can only request the Annual Renewal Amount (ARA) that appears on the CoC's HUD-approved GIW. If the ARA is reduced through the CoC's reallocation process, the final project funding request must reflect the reduced amount listed on the CoC's reallocation forms.
- HUD reserves the right to reduce or reject any renewal project that fails to adhere to 24 CFR part 578 and the application requirements set forth in the FY 2015 CoC Program Competition NOFA.

## 1A. Application Type

### Instructions:

Type of Submission: This field is pre-populated and cannot be changed.

Type of Application: This field is pre-populated and cannot be changed.

Date Received: This field is pre-populated with the date on which the application is submitted and cannot be edited.

Applicant Identifier: Field intentionally left blank, cannot edit.

Federal Entity Identifier: Field intentionally left blank, cannot edit.

Federal Award Identifier: This is a required field for all renewal project applicants. Enter the correct expiring grant number as identified on the final HUD-approved GIW.

Date Received by State: Field intentionally left blank, cannot edit.

State Application Identifier: Field intentionally left blank, cannot edit.

Additional Resources can be found at the HUD Resource Exchange:  
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>

**1. Type of Submission:**

**2. Type of Application:** Renewal Project Application

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

**If "Other", specify:**

**3. Date Received:** 11/08/2015

**4. Applicant Identifier:**

**5a. Federal Entity Identifier:**

**5b. Federal Award Identifier:** CA1367L9D081400  
(e.g., the "Expiring Grant Number" that will also be indicated on screen 3A. Project Detail) This grant number must match the grant number on the HUD approved Grant Inventory Worksheet (GIW).

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

**6. Date Received by State:**

**7. State Application Identifier:**



## 1B. Legal Applicant

### Instructions:

The information on this screen is pre-populated from the Project Applicant Profile. If there are any discrepancies, or errors, click on "View Applicant Profile" from the left-menu bar, place the Project Applicant Profile in "edit" mode to correct the information.

When the update/correction has been completed, place the Project Applicant Profile in "complete" mode before clicking on "Back to FY 2015 Renewal Costs Project Application" from the left-menu bar.

For further instructions on updating the Project Applicant Profile, review the "Project Applicant Profile" training document on the HUD Exchange.

### 8. Applicant

**a. Legal Name:** County of Riverside

**b. Employer/Taxpayer Identification Number (EIN/TIN):** 95-6000930

	<b>c. Organizational DUNS:</b>	152240540	PL US 4	
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### d. Address

**Street 1:** 4060 County Circle Drive

**Street 2:**

**City:** Riverside

**County:** Riverside

**State:** California

**Country:** United States

**Zip / Postal Code:** 92503

### e. Organizational Unit (optional)

**Department Name:** Public Social Services

**Division Name:** Homeless Programs Unit

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

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**Prefix:** Ms.  
**First Name:** Jill  
**Middle Name:**  
**Last Name:** Kowalski  
**Suffix:**  
**Title:** Administrative Services Manager II  
**Organizational Affiliation:** County of Riverside  
**Telephone Number:** (951) 358-5636  
**Extension:**  
**Fax Number:** (951) 358-7755  
**Email:** jkowalsk@riversidedpss.org

## 1C. Application Details

### Instructions:

The information on this screen is pre-populated from the Project Applicant Profile. If there are any discrepancies, or errors, click on "View Applicant Profile" from the left-menu bar, place the Project Applicant Profile in "edit" mode to correct the information.

When the update/correction has been completed, place the Project Applicant Profile in "complete" mode before clicking on "Back to FY 2015 Renewal Costs Project Application" from the left-menu bar.

For further instructions on updating the Project Applicant Profile, review the "Project Applicant Profile" training document on the HUD Exchange.

**9. Type of Applicant:** B. County Government

If "Other" please specify:

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

**11. Catalog of Federal Domestic Assistance Title:** CoC Program

**CFDA Number:** 14.267

**12. Funding Opportunity Number:** FR-5900-N-25

**Title:** Continuum of Care Homeless Assistance Competition

**13. Competition Identification Number:**

**Title:**

## 1D. Congressional District(s)

### Instructions:

**Areas Affected By Project:** This field is required. Select the State(s) in which the proposed project will operate and serve the homeless.

**Descriptive Title of Applicant's Project:** This field is populated with the name entered on the Project Form when the project application was initiated. To change the project name, click return to the Submission List and click on "Projects" on the left hand menu. Click on the magnifying glass next to the project name to edit.

**Congressional District(s):**

a. **Applicant:** This field is pre-populated from the Project Applicant Profile. Project applicants cannot modify the pre-populated data on this form. However, project applicants may modify the Project Applicant Profile in e-snaps to correct an error.

b. **Project:** This field is required. Select the congressional district(s) in which the project operates.

**Proposed Project Start and End Dates:** In this required field, indicate the operating start date and end date for the project.

**Estimated Funding:** Fields intentionally left blank, cannot edit.

Additional Resources can be found at the HUD Resource Exchange:  
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>

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

**15. Descriptive Title of Applicant's Project:** Lighthouse SSC Rapid Rehousing

**16. Congressional District(s):**

a. **Applicant:** CA-041, CA-042, CA-050, CA-051, CA-036  
(for multiple selections hold CTRL key)

b. **Project:** CA-041, CA-042, CA-036  
(for multiple selections hold CTRL key)

**17. Proposed Project**

a. **Start Date:** 07/01/2016

b. **End Date:** 06/30/2017

**18. Estimated Funding (\$)**

**a. Federal:**

**b. Applicant:**

**c. State:**

**d. Local:**

**e. Other:**

**f. Program Income:**

**g. Total:**