PSH GAP FINANCING ADDENDUM III AND APPLICATION

MICHIGAN'S HOME-ARP/HCDF/CERA AND 4% LOW-INCOME HOUSING TAX CREDIT PROGRAM

PERMANENT SUPPORTIVE HOUSING

Contents

INTRODUCTION, APPLICATION PROCESS, AND TIMELINE

NAVIGATING THE ADDENDUM III

The order of this Addendum III document is divided into five distinct sections by topic area, which are the key areas that applicants will need to focus on when creating a Permanent Support Housing (PSH) development:

1. **Project Location and Project Structure**
2. **PSH Tenant Populations Being Served**
3. **Tenant Selection Process**
4. **Service Team**
5. **Service Funding**

PRE-APPLICATION PROCESS

Applicants will submit portions of the Addendum III at two separate points in the application process. First, an initial concept packet will be required at the time of the NOFA submission (May 1, 2023). If selected to continue forward after projects are ranked, the remaining portions of the Addendum III submission will be required with Commitment Packages on August 31, 2023. Please see Initial Concept Form in Attachment B below.

APPLICATION SUBMISSION

The Addendum III must be submitted in two parts and must be completed in full prior to award of HOME-ARP funds. This includes, but is not limited to:

1. A fully completed Addendum III application
2. Completed Addendum III Exhibit Checklist with all remaining and/or updated applicable exhibits

Applicants should review the submission before submitting to ensure that everything is included. See Attachments, below, for the Addendum III Application Submission Checklist and forms.

The Michigan State Housing Development Authority (MSHDA) will reject applications with multiple material errors in documentation, incomplete information, and/or general inconsistencies found within the Addendum III submission.

The Addendum III must be complete and submitted as part of the complete HOME-ARP Application on the Due Date as shown in the HOME-ARP Plan.

APPLICATION REVIEW TEAM

MSHDA will appoint an Addendum III review committee. The Addendum III review committee will reserve the right to meet with a particular project if it is determined necessary. This committee will consist of MSHDA LIHTC and Homeless Assistance staff, along with representatives from Michigan Department of Health and Human Services (MDHHS) and other State of Michigan agencies as deemed necessary and appropriate by MSHDA. All members of the review committee will be independent of the projects they review.

The Addendum III review committee will then review the submission as part of the HOME-ARP round and will not meet with development teams during the funding round review process.

1. PROJECT LOCATION AND GENERAL PROJECT STRUCTURE

SITE SELECTION – **THRESHOLD**

The project location must meet MSHDA's Site Selection Criteria. In addition to the MSHDA Site Selection Guidelines and definitions, any project that receives a LIHTC award and which will be using HOME-ARP funds must ensure the site meets the federal program requirements of HUD regulations (Title 24 Housing and Urban Development 983 Project Based Voucher (PBV) Program).

PROJECT NARRATIVE – **THRESHOLD**

A detailed and complete narrative description of the project should be provided; this includes, at a minimum, the development team, service providers, number and breakdown of units, populations served, services provided, type of unit, income targeting, and proposed rent schedule.

PROJECT SIZE (75 UNIT MAX) – **THRESHOLD**

Projects with more than 75 units of Permanent Supportive Housing must request a waiver from MSHDA.

UTILITIES – **THRESHOLD**

Developers must include all utility costs for the permanent supportive housing units in the project expenses.

ACCESSIBLE COMMUNITY SPACE – **THRESHOLD**

To meet minimum PSH requirements, projects are required to provide accessible community or supportive service space to all projects. The accessible community space is envisioned as one room or contiguous space that may be used for activities such as dining, crafts, exercise, medical clinic, socializing, birthday parties, holiday gatherings, study areas and/or other activities for individuals with children, or any other activity or use that may benefit tenants; and does not include common space such as hallways, offices, lobbies, bathrooms laundry rooms, etc.

To meet threshold, the accessible community space must, at a minimum be sized according to the gird below AND must have at least one additional, separate private meeting space or office of at least 100 square feet for every 20 PSH units. The separate private meeting space must be in addition to the square footage of community space detailed in the grid below. The space must be located within a reasonable proximity to the proposed project if the space is provided in a separate building. If an accessible community space being shared by multiple phases of the same project is proposed, it must meet the minimum square footage requirement for all units in all phases of the project that will share the accessible community space. Additionally, in the case of multiple phases, an easement agreement must be executed to allow the phases to have equal access to the accessible community space. A certification signed by the project Architect, Applicant, and Contractor must be submitted to demonstrate that the project will contain the minimum required amount of Accessible Community Space. Along with the certification, an as-built drawing of the community space will also be required after construction completion to demonstrate that the requirements have been met.

Minimum Required Accessible Community Space (not including private meeting spaces)	
Number of units	**Minimum Square Feet**
1 to 50 units	**500**
51 to 100 units	**1,000**
101 + units	**1,500**

Note: For example, if there are 50 PSH units, there must be at least 3 private meetings spaces of at least 100 square feet each in the development (50 / 20 = 2, rounded up to 3). If there are not enough private meeting spaces and/or if they are not at least 100 square feet each, the project will not meet threshold and will not be eligible for credit.

2. PSH TENANT POPULATION(S) BEING SERVED

35% PSH THRESHOLD – **THRESHOLD**

Projects applying for HOME-ARP funding must have at least 35% of the total units in the development targeted to people who meet the definitions outlined in Attachment D. HUD Category 1 (Literally Homeless), as defined in section 103(a) of the McKinney-Vento Homeless Assistance Act, must be included as a target population for all PSH developments.

Note: If 35% of the units is not a whole number, the development must round up to the next whole unit to meet this criterion. For example, if there are 50 units, there must be at least 18 permanent supportive housing units in the development (35% x 50 = 17.5, rounded up to 18). Manager units do not count towards either the total number of units or the supportive housing units in the development. If there are not enough units set aside for PSH tenants, the project will not meet threshold and will not be eligible for credit.

ELDERLY-ONLY POPULATIONS – **THRESHOLD**

Elderly-only populations are excluded from the Permanent Supportive Housing Category. The entire project must be open to all ages.

INCOME ELIGIBILITY OF TENANTS – 30% AMI – **THRESHOLD**

Tenant incomes must be at or below 30% AMI to be eligible for targeted Supportive Housing units.

Include the **Utilities, Income, and Unit Summary** tabs from the 2022-2023 LIHTC Program Application to demonstrate 1) utilities for the PSH units are being paid by the owner; 2) the rents and applicable rental assistance for all units; and 3) the unit mix and breakdown. If applicable, provide a description of how the project will make the targeted units affordable to persons whose incomes are extremely low. If there is a current commitment for subsidy, attach the funding commitments or list details of any anticipated applications to provide subsidy to supportive housing tenants. Do **not** include an application for MSHDA Project Based Vouchers.

CONTINUUM OF CARE COORDINATION - **THRESHOLD**

The development team must meet with the local Continuum of Care (CoC) housing planning body prior to May 31, 2023 (three months before Commitment Packages are due on August 31). The intent of this meeting should be to discuss project concepts and to allow the opportunity for the CoC to provide input. Continuing discussions with the CoC should ensure the stability of tenants, that the project is integrated in the community, and that there are strong social support networks available to meet the needs of the supportive housing tenants.

*Continuum of Care Minutes - **THRESHOLD***

Please include the minutes from the initial CoC meeting, to confirm the development team met with the local CoC housing planning body prior to May 31, 2023 to discuss this project. This should include project and developer identification, the member(s) of the CoC housing planning body involved in the discussion, and the date of initial meeting.

*Letter of Support from Continuum of Care – **THRESHOLD***

The letter of support from the CoC should include the total number of units, the number of PSH units, the targeted population(s), description of the housing units, bedroom mix of the PSH units, location of the development, the proposed services and amenities, and identification of the development team. The CoC letter of support must be dated within one year from the HOME-ARP deadline.

COUNTY HMIS DATA – **FOR POINTS**

Provide the county's most recent annual literally homeless (category 1) count. Please contact your local Continuum of Care Chairperson for this report.

3. TENANT SELECTION PROCESS

HARA REFERRALS – **THRESHOLD**

The Housing Assistance and Resource Agency (HARA) must be included as a referral source for Permanent Supportive Housing Units. The HARA must use their CoC's coordinated entry assessment process including all HOME ARP populations when assessing applicants for Permanent Supportive Housing. The HARA's role may include referrals or services. They do not have to be the lead agency; however, their role should be defined within the MOU. If there is a different lead agency, the MOU must define their role in the development and be signed by their executive director. In all cases, the MOU must be signed by the HARA.

TENANT SELECTION CRITERIA – **THRESHOLD**

Include the property's tenant selection plan and describe how PSH tenants will be served. This description should include the targeted populations, any screening processes that will be utilized, along with criminal and credit screening processes and details of any appeal process and eviction diversion plans for the permanent supportive housing tenants. The tenant selection plan must include the Housing First components. Include a description of referral process and centralized intake assessment that prioritizes the referrals for the waiting list that will be utilized at this development. See below for Housing First criteria.

HOUSING FIRST CERTIFICATION – **THRESHOLD**

The Housing First Certification (found at the end of the Addendum III Application and Checklist) must be completed and filled out by the owner. The commitments in the Housing First Certification must also be included in the Tenant Selection Criteria.

4. PSH SERVICE TEAM

MEMORANDUM OF UNDERSTANDING – **THRESHOLD**

The development team must submit written documentation between the developer, management company, and service provider(s) that outlines mutual roles and responsibilities in the development. The Memorandum of Understanding ("MOU") should incorporate the service coordination plan agreed to by the parties, and provide:

a) Demonstration of an ongoing commitment by the developer and/or landlord to assure sustained availability of supportive services; and
b) Inclusion of the Housing Assessment Resource Agency (HARA) within the MOU;
c) A description of the referral and screening process that will be used to refer tenants to the project, which follows the acceptable guidelines and uses assessment tools as required by MSHDA and other State or Federal service funding agencies, and a willingness of all parties to negotiate reasonable accommodations to facilitate the admittance of persons with disabilities into the development;
d) A communication plan between the management company and the lead agency that will accommodate staff turnover and assure continuing linkages between the development and lead agency for the duration of the compliance period;
e) Acknowledgment of the property's rent structure and a description of how supportive housing tenants may access rental assistance, should they require it, to afford the apartment rents;
f) Certification that participation in supportive services will not be a condition of tenancy unless otherwise required by a Federal subsidy;
g) Agreement to affirmatively market to persons with disabilities;
h) Agreement to include a section on reasonable accommodation in the property management's application for tenancy;
i) Agreement to accept Housing Choice Vouchers or other rental assistance for eligible tenants and not require total income for persons with rental assistance beyond that which is reasonably available to supportive housing tenants; and
j) A description of how the project will make the targeted units affordable to supportive housing tenants with very low incomes.

The MOU must de dated after January 1, 2023.

At the time of submission, the MOU must be in its final form and signed by all parties who provide services to the tenants. These parties should be documented on the Supportive Services Commitment Chart.

SERVICE COORDINATION PLAN – **THRESHOLD**

On-site service coordination must be available to all supportive housing tenants.

The services cannot be funded through the operations of the development. The on-site services may be provided through partnership with the local service organizations.

The following schedule serves as a minimum standard number of hours of on-site service that must be provided. Additional on-site services may be needed depending on the population served by the

supportive housing project. Please note that the intent of the on-site services is to provide convenient options for residents to receive any services that they choose. Tenants may choose to receive services off-site at a different location, through a different service provider of their choosing, or they may choose to decline the services completely. With the exception of certain federal programs, tenants cannot be mandated to participate in any of the offered or available services, nor can non-participation itself be a factor in their lease or rental history. Tenants are not required to participate in the offered services or may choose to participate in these or similar services off-site.

The service coordination plan will clearly state that the ownership entity and management agent will:

- expressly include reasonable accommodations in the application for tenancy;
- not ask applicants/residents for medical or other protected information unless and only to the extent legally necessary (e.g., processing reasonable accommodations);
- use standard leases with the same rights available to, and responsibilities expected of, all households, including duration of tenancy (cannot be transitional);
- ensure participation in any supportive services is entirely voluntary (not a formal or implied condition of occupancy); and
- not give a preference based on either disability type (actual or perceived) or being a client of a particular provider.

# of PSH units in development	Minimum # of hours required
25 or fewer PSH units	20 hours per week
26 – 50 PSH units	40 hours per week
51 – 75 PSH units	60 hours per week
75+ PSH units	60 hours plus 20 hours for every 25 additional units

Note: PSH developments are restricted to 75 units or less. However, if a waiver is granted of this requirement and the development has more than 75 units, the minimum required service hours calculation would be: 60 + (20* ([# of PSH units – 75] / 25)). If the result is not a round number, you must round up.

*Service Coordination Plan – **THRESHOLD***

There should be one specific and comprehensive service plan submitted, regardless of the specific tenants or population(s) targeted for the supportive housing units. The Service Coordination Plan will describe how the project will meet the supportive service needs of the targeted tenants. It will include the targeted population(s), information about the service provider(s), specific types of services provided, and the number of hours of on-site services provided. The Service Coordination Plan and other applicable documents must make it clear that service participation is not a factor in the lease.

*Inclusion of a Community Mental Health Provider – **THRESHOLD***

Inclusion of a Community Mental Health (CMH) provider in the service team and plan and as a signer on the MOU is required. The Service Coordination Plan should consider the high level of service need that this target population will likely require to maintain housing

stability. ***Failure to include the CMH as part of the supportive service team and in the appropriate documents, including MOUs, may be considered a material deficiency and may make the project ineligible for an award of tax credits. ***

*Service Coordination Funding Letter(s) of Support – **THRESHOLD***

A letter of support from the Executive Director of the agency(ies) providing funding for the on-site supportive services hours and any funding being used for points must be included in the Addendum III submission. The letter(s) of support must be dated within six (6) months of the HOME-ARP deadline. It must include the name and location of the development, the number of hours of on-site service committed, the specific amount of funding, and a description of how the agency is funded, detailing their past service funding in order to demonstrate a history of reliable service funding sources in amounts that are sufficient to support their share of yearly project service expenses. The services cannot be funded through the operations of the development. If being used for points, the funding should be provided in full to the project by the end of the second year of the compliance period, funding should be specific to the project (not to the agency) and must be able to be used for housing or related services. In kind contributions will not be considered.

SUPPORTIVE HOUSING DEVELOPMENT TEAM EXPERIENCE – **FOR POINTS**

For each of the General Partners/Members, Management Agent, and Lead Agency taking points, provide a listing of the permanent supportive housing developments owned or operated and the population(s) served, as applicable. Points will only be awarded for prior experience with the target population assisted in the proposed development (ex. Must have prior experience with chronic homeless if electing to serve chronic homelessness in proposed development). The Supportive Housing Development Team Experience form should include name of the development team member, names of the developments, location, number of units, target population served, number of years owned/operated, last year owned/operated, and type of project. Provide a separate list for each development team member requesting points. For each category (General Partner/Member, Management Agency, and Lead Agency) only one team member may receive points. If there are joint venture or other partnership agreements between two or more general partners, management agents, or lead agencies, partners will receive PSH points only if the agreements meet the requirements for LIHTC points as outlined in the 2022-2023 QAP and Scoring Summary.

MEDICAID EXPERIENCE – **FOR POINTS**

If the project is requesting points for Medicaid experience, the experience must be documented in the letter of support from the partner entity with Medicaid experience, including the types of Medicaid services performed, the approximate number of clients served, and Medicaid funds used.

Note: Support for Medicaid Experience should be included in the relevant exhibit. Do not include this information twice.

5. PSH SERVICE FUNDING

ADDENDUM III FUNDING ANALYSIS – **THRESHOLD**

An Addendum III Funding Analysis must be completed for the project that clearly breaks out all supportive services funding and projected expenses for the 15-year compliance period.

Addendum III Funding Analysis – THRESHOLD

The Addendum III Funding Analysis can be found in the 2022-2023 LIHTC Application. This tab needs to be completed in its entirety and submitted with the Addendum III exhibits. Projects are required to show documented evidence of service funding to support the projected expenses for a minimum of the initial year with renewals available **and** a detailed description of future funding sources through year 15. Those funding sources receiving points for Service Funding Commitments should be clearly included.

Addendum III Funding Letters of Support – THRESHOLD

The Addendum III submission must include supporting documentation for all the funding sources included in the Supportive Services Chart and those receiving points for Service Funding Commitments. The letters of support must be from the Executive Director of all funding agencies and outline the amount of funding provided, the number of years, and any other relevant information. Projects will be required to show documented evidence of service funding to support the projected expenses for a minimum of the initial 1-year with renewals available and a detailed description of future funding sources. Additionally, all funding agencies must provide a letter detailing the history of their past service funding in order to demonstrate a history of reliable service funding sources in amounts that are sufficient to support their share of yearly project service expenses.

All letters of support must be dated after January 1, 2023.

ATTACHMENT A. ADDENDUM III SUBMISSION CHECKLISTS

The following are a list of documents required to be submitted, in the order presented here:

At time of initial NOFA submission (May 1, 2023):

- ☐ 1. Addendum III Application – **Threshold**
- ☐ 2. PSH Gap Financing Scoring Summary – **For Points**
- ☐ 3. Project Narrative – **Threshold**
- ☐ 4. Utilities, Income, and Unit Summary tabs from the 2022-2023 LIHTC Program Application – **Threshold**
- ☐ 5. County HMIS Data – **For Points**
- ☐ 6. Supportive Housing Development Team Experience Form – **For Points**
- ☐ 7. Medicaid Experience Letter – **For Points**
- ☐ 8. Tenant Selection Criteria – **Threshold/For Points**
- ☐ 9. Specific On-Site Services Narrative – **For Points**
- ☐ 10. Supportive Services Commitment Chart – **Threshold**
- ☐ 11. Housing First Certification – **Threshold**

At time of full application (August 31, 2023):

- ☐ 1. Architects Certification of Accessible Community Space and As-Built Drawing of the Community Space – **Threshold**
- ☐ 2. Continuum of Care Minutes – **Threshold**
- ☐ 3. Letter of Support from Continuum of Care – **Threshold**
- ☐ 4. Memorandum(s) of Understanding – **Threshold**
- ☐ 5. Service Coordination Plan – **Threshold**
- ☐ 6. Service Coordination Letter(s) of Support – **Threshold**
- ☐ 7. Funding Letter(s) of Support – **Threshold**
- ☐ 8. Addendum III Funding Analysis – **Threshold**

ATTACHMENT B: INITIAL CONCEPT FORM

Project Name: Click or tap here to enter text.

PSH Gap Financing Submission

All applicants applying for PSH Gap Financing funds will be required to submit the following form at time of NOFA submission.

1. **Please provide the name and address of the project, including the county**.

   Click or tap here to enter text.

2. **Please attach the following:**
   a. **A site map and proposed drawings of the project.**

3. **Please describe the process for which PSH tenant referrals will be made to the development for the PSH units. Please describe the number of units designated for HOME ARP qualifying population 1 (Category 1 homeless) and number of units for HOME APR populations 2-4. This should be a summary and not the entire Tenant Selection Plan.**

   Click or tap here to enter text.

4. **Please provide an explanation of the services that will be available at the property or that will be available on a referral basis to residents, the service providers that will be performing those services, and the funding sources that the service providers will utilize to make the services available (including Medicaid billing). This should be a summary and not the entire Service Coordination Plan.**

   Click or tap here to enter text.

5. **Has the project been presented to the Continuum of Care (CoC)? What conversations are being held regarding the project and the targeted population(s)? Does the CoC support the project?**

   Click or tap here to enter text.

Thank you for completing this form. Please submit this form along with the documentation that is requested in the Checklist and MSHDA will contact you to schedule a meeting to discuss the project, if necessary.

ATTACHMENT C: PSH GAP FINANCING ADDENDUM III APPLICATION

Project Name:

A. OWNER IDENTIFICATION:

Organization	
Primary Address	
Contact Person	
Contact Phone	
Contact Fax	
Contact Email	
President/CEO	

B. PROPERTY MANAGEMENT COMPANY IDENTIFICATION INFORMATION:

Organization	
Primary Address	
Contact Person	
Contact Phone	
Contact Fax	
Contact Email	
President/CEO	

C. LEAD ORGANIZATION IDENTIFICATION INFORMATION:

Organization	
Primary Address	
Contact Person	
Contact Phone	
Contact Fax	
Contact Email	
President/CEO	

D. SERVICE ORGANIZATION IDENTIFICATION INFORMATION:

Organization	
Primary Address	
Contact Person	
Contact Phone	
Contact Fax	
Contact Email	
President/CEO	

E. CONTINUUM OF CARE IDENTIFICATION (COC) INFORMATION:

Organization	
Primary Address	
Contact Person	
Contact Phone	
Contact Fax	
Contact Email	
President/CEO	

F. HOUSING ASSESSMENT AND RESOURCE AGENCY (HARA) IDENTIFICATION INFORMATION:

Organization	
Primary Address	
Contact Person	
Contact Phone	
Contact Fax	
Contact Email	
President/CEO	

G. UNIT DESCRIPTION

Number of Units	**Efficiency**	**1 Bedroom**	**2 Bedrooms**	**3 Bedrooms**	**4+ Bedrooms**	**Total Number of units**
Total Project						
Supportive Housing						
With Rental Assistance						
Barrier Free						

Identify number of buildings and the number of stories per building:

Identify number of units per building:

Identify accessible features available for targeted units:

Identify the type of units:(apartment, single family home, townhouse, duplex)

Does the building(s) have an elevator?

Attachment D: Definitions

Please review the following definitions before completing a service plan for Supportive Housing Tenants. This is relevant when applying for any MSHDA program, including HOME or Low-Income Housing Tax Credits. ***To be eligible for funding, the entire housing development must be open and available to adult persons of all ages.***

A) Eligible Supportive Housing Tenants

Under the PSH Gap Financing program eligible supportive housing tenants must meet one of the following definitions:

1) Homeless, as defined in section 103(a) of the McKinney-Vento Homeless Assistance Act (**42 U.S.C. 11302(a)**);
2) At-risk of homelessness, as defined in section 401(1) of the McKinney-Vento Homeless Assistance Act (**42 U.S.C. 11360(1)**);
3) Fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking, as defined by the Secretary;
4) In other populations where providing supportive services or assistance under section 212(a) of the Act (**42 U.S.C. 12742(a)**) would prevent the family's homelessness or would serve those with the greatest risk of housing instability;
5) Veterans and families that include a veteran family member that meet one of the preceding criteria.

B) Supportive Services Plan

For a project to be eligible for tax credit supportive housing points or HOME funds, the proposal must include a plan for the provision of a *substantial level of services targeted* to the supportive housing units. The services must include those that are essential for supportive housing tenants to *sustain* themselves in permanent housing.

The project must be an on-going active collaboration between the owner, Management Company, and identified supportive service provider(s). The formulation of this relationship, along with a commitment to sustain the agreed upon services over a period of time, must be agreed to *by the collaborators and incorporated into a written "Memorandum of Understanding."*

The supportive services plan should outline and specify the following:

- Conditions which would qualify the proposed tenant(s) for the supportive housing units;
- Expected life-skills areas for which supportive services are likely to be required;
- The supportive services to be provided. **Participation in supportive services must be voluntary unless required by a Federal rental subsidy.**
- How service coordination will be provided.

Tenants' must have the option to receive service coordination on-site. For the purpose of meeting this requirement, *service coordination* shall be available in a form that contains the following

elements:

a) An individual assessment of service needs and life goals will be completed with the full participation of each tenant and others of their choosing.

b) A plan will be developed in response to each tenant's assessment, which will include long and short-range goals, with specific steps to achieve them. Principles of person centered planning and self-determination will be incorporated into the planning process.

c) Service coordination will include advocacy, brokering, linking and monitoring of support services detailed in each tenant's plan.

d) Service coordinators will help tenants gain access to entitlements, financial assistance programs, and legal representation, in accordance with the tenant's plan.

e) A re-assessment, and revision of each tenant's plan, will be completed on at least an annual basis. Copies of that plan and annual update will be placed in each tenant's file.

f) Tenants shall have a designated individual or team responsible for the coordination of services.

g) Emphasis shall be placed on tenant empowerment and the development of natural/community supports.

ATTACHMENT E: CERTIFICATION OF COMMITMENT TO HOUSING FIRST

The United States Interagency Council on Homelessness calls Housing First "a proven approach in which people experiencing homelessness are provided with permanent housing directly and with few to no treatment preconditions, behavioral contingencies, or barriers." The Council has compiled a Housing First Checklist listing the elements of a Housing First approach at a project and community level. Some of those elements are included in this Certification. By signing this Certification, the development and service teams are committing to applying the Housing First approach in the development. Each member must sign. This approach includes the following elements:

- Tenants have full rights, responsibilities, and legal protections under Federal, state, and local housing laws, tenants are educated about their lease terms, given access to legal assistance, and encouraged to exercise their full legal rights and responsibilities, and landlords and providers abide by their legally defined roles and obligations; and
- Admission/tenant screening and selection practices affirm that acceptance of applicants regardless of their sobriety, use of substances, completion of treatment, and participation in services; and
- Applications are seldom rejected for poor credit or financial history, poor or lack of rental history, distant past criminal convictions, or behaviors that indicate a lack of "housing readiness"; and
- Supportive services emphasize engagement and problem-solving over therapeutic goals, service plans are tenant-driven without predetermined goals, and participation in services or program compliance are not a condition of tenancy (except as required by federal requirements); and
- Use of drugs or alcohol in and of itself is not considered a reason for eviction, unless a requirement under a federal program; and
- The Tenant Selection Plan includes a prioritization of eligible tenants based on high SPDAT score (or other similar coordinated assessment system); and
- Permanent supportive housing tenants are given reasonable flexibility in paying their tenant share of rent on time and offered special payment arrangements for rent arrears and/or assistance with financial management; and
- A harm reduction philosophy, where tenants are offered education regarding how to avoid risky behaviors and engage in safer practices, is in place; and
- Units may include special physical features that accommodate disabilities, reduce harm, and promote health among tenants; and
- Every effort is made to avoid eviction.

These criteria should be found and reaffirmed in the project's Tenant Selection Plan. Any material differences or inconsistencies between the Tenant Selection Plan and this Certification may be considered reasons for rejection.

The undersigned agree to follow Housing First and incorporate the standards above into the project, management, and Tenant Selection Plan.

Dated: _____ Owner: _____

By: _____

Its: _____

Dated: _____ Management Company: _____

By: _____

Its: _____

Dated: _____ Lead Agency: _____

By: _____

Its: _____

ATTACHMENT F: SUPPORTIVE SERVICES COMMITMENT CHART

	Name of Agency Providing Service ***Must sign MOU***	**Included in the Addendum III Submission**	**Name of Agency Funding Services** ***Must provide Letter of Support***
Tenant Stabilization – Assist tenants to care for their apartment, ADL's, get along with neighbors, landlord, etc.		☐ Yes	
Building Support Systems – Assist tenants to re-engage with local community.		☐ Yes	
Basic Needs – Assist tenants to obtain resources (food, clothing, transportation, etc.).		☐ Yes	
Benefit Assistance - Provide on-going support including referrals, assistance obtaining benefits, linkages with services, "whatever it takes".		☐ Yes	
Employment Related Services		☐ Yes	
Mental Health – ACT, counseling, therapy, medications, and medication management.		☐ Yes	
Substance Abuse Services – Outpatient treatment, self-help options, and counseling.		☐ Yes	
Legal Services – Related to civil arrears, family law, uncollected benefits.		☐ Yes ☐ N/A	

ATTACHMENT G. SUPPORTIVE HOUSING DEVELOPMENT TEAM EXPERIENCE FORM – **FOR POINTS**

Points will be award to a development team that has experience in permanent supportive housing for the targeted populations in the proposed development. Experience can be included for LIHTC PSH units or HUD funded PSH units through programs such as HUD 811 or HUD PSH programs through the Continuum of Care.

This page must be filled out for each member of the Supportive Housing Development Team claiming experience points in **the PSH Gap Financing Scoring Criteria**. Failure to fully complete this chart or provide all information necessary for experience points for all may result in a loss of points.

Please note that if the Owner/Developer and Management entities are claiming experience points, this section must align with the PSH Gap Financing application.

Development Team Member:								
Role:								
Name and Project Number	**City and State**	**Total # of Units**	**# of PSH Units**	**Population(s) Served**	**Date of Ownership/Services**		**Date Project Last Placed in Service**	**Type of Financing/ Vouchers/Etc.**
					Begin	**End**		