

## Before Starting the Project Application

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

Things to Remember:

- Only Collaborative Applicants may apply for CoC Planning funds using this application, and only one CoC Planning application may be submitted during the FY 2023 CoC Program grant competition.
  - Additional training resources can be found on the HUD.gov at [https://www.hud.gov/program\\_offices/comm\\_planning/coc](https://www.hud.gov/program_offices/comm_planning/coc).
- Questions regarding the FY 2023 CoC Program Competition process must be submitted to [CoCNOFO@hud.gov](mailto:CoCNOFO@hud.gov).
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to [e-snaps@hud.gov](mailto:e-snaps@hud.gov).
- Project applicants are required to have a Unique Entity Identifier (UEI) number and an active registration in the Central Contractor Registration (CCR)/System for Award management (SAM) in order to apply for funding under the Continuum of Care (CoC) Program Competition. For more information see the FY 2023 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2023 CoC Program Competition NOFO.
- Detailed instructions can be found on the left menu within e-snaps and on the HUD Exchange. They contain comprehensive instructions and should be used in tandem with the navigational guides, which are also found on the HUD Exchange.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any new or renewal project that fails to adhere to 24 CFR Part 578 and application requirements set forth in the FY 2023 CoC Program NOFO.

## 1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application: CoC Planning Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 09/26/2023

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier

6. Date Received by State:

7. State Application Identifier:

## 1B. SF-424 Legal Applicant

### 8. Applicant

- a. Legal Name:** Hearth Connection
- b. Employer/Taxpayer Identification Number (EIN/TIN):** 41-1945956
- c. Unique Entity Identifier:** MFEXEXWQPLU23

### d. Address

- Street 1:** 2446 University Ave
- Street 2:**
- City:** Saint Paul
- County:** Ramsey
- State:** Minnesota
- Country:** United States
- Zip / Postal Code:** 55114

### e. Organizational Unit (optional)

- Department Name:**
- Division Name:**

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

- Prefix:** Ms.
- First Name:** Laquita
- Middle Name:** S
- Last Name:** Love-Limo
- Suffix:**
- Title:** Coc Coordinator
- Organizational Affiliation:** Hearth Connection
- Telephone Number:** (763) 760-1143
- Extension:**
- Fax Number:** (651) 645-0677

**Email:** [laquita@mesh-mn.org](mailto:laquita@mesh-mn.org)

## 1C. SF-424 Application Details

**9. Type of Applicant:** N. Nonprofit without 501C3 IRS Status

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

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

**CFDA Number:** 14.267

**12. Funding Opportunity Number:** FR-6700-N-25

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

**13. Competition Identification Number:**

**Title:**

## 1D. SF-424 Congressional District(s)

**14. Area(s) affected by the project (state(s) only):** Minnesota  
(for multiple selections hold CTRL+Key)

**15. Descriptive Title of Applicant's Project:** 2023 SMAC Planning

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

**a. Applicant:** MN-002, MN-003, MN-004, MN-005, MN-006

**b. Project:** MN-002, MN-003, MN-004, MN-005, MN-006  
(for multiple selections hold CTRL+Key)

**17. Proposed Project**

**a. Start Date:** 12/01/2025

**b. End Date:** 11/30/2025

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

**a. Federal:**

**b. Applicant:**

**c. State:**

**d. Local:**

**e. Other:**

**f. Program Income:**

**g. Total:**

## 1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? c. Program is not covered by E.O. 12372.

## 1F. SF-424 Declaration

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

I AGREE:

### 21. Authorized Representative

**Prefix:** Mr.

**First Name:** Marcus

**Middle Name:**

**Last Name:** Schmit

**Suffix:**

**Title:** Executive Director

**Telephone Number:** (651) 645-0676  
(Format: 123-456-7890)

**Fax Number:** (651) 645-0677  
(Format: 123-456-7890)

**Email:** marcus@hearthconnection.org

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

**Date Signed:** 09/26/2023



# 1G. HUD 2880

**Applicant/Recipient Disclosure/Update Report - form HUD-2880**  
**U.S. Department of Housing and Urban Development**  
**OMB Approval No. 2506-0214 (exp.1/31/2026)**

## Applicant/Recipient Information

### 1. Applicant/Recipient Name, Address, and Phone

**Agency Legal Name:** Hearth Connection

**Prefix:** Mr.

**First Name:** Marcus

**Middle Name:**

**Last Name:** Schmit

**Suffix:**

**Title:** Executive Director

**Organizational Affiliation:** Hearth Connection

**Telephone Number:** (651) 645-0676

**Extension:**

**Email:** marcus@hearthconnection.org

**City:** Saint Paul

**County:** Ramsey

**State:** Minnesota

**Country:** United States

**Zip/Postal Code:** 55114

**2. Employer ID Number (EIN):** 41-1945956

**3. HUD Program:** Continuum of Care Program

**4. Amount of HUD Assistance Requested/Received: \$205,236.00**

(Requested amounts will be automatically entered within applications)

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

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

**Part I Threshold Determinations**

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

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

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

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

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
Depart of Human Services	grant	\$5,734,550.00	Support Services (Hennepin Consolidated)
Depart of Human Services	grant	\$5,734,550.00	Support Services (Hennepin 2009)
Depart of Human Services	grant	\$2,510,529.00	Support Services (Hearth SE)
Depart of Human Services	grant	\$5,734,550.00	Support Services (Hearth SMAC)
Depart of Human Services	grant	\$5,734,550.00	Support Services (Ramsey RA)

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

**Part III Interested Parties**

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

**Certification**

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

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

X
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**Name / Title of Authorized Official:** Marcus Schmit, Executive Director

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

**Date Signed:** 09/26/2023

# 1H. HUD 50070

## HUD 50070 Certification for a Drug Free Workplace

**Applicant Name:** Hearth Connection

**Program/Activity Receiving Federal Grant Funding:** CoC Program

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

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
<p>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.</p>	<p>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;</p>
<p>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.</p>	<p>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;</p>
<p>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.;</p>	<p>g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.</p>
<p>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;</p>	

### Sites for Work Performance.

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

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

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

**Authorized Representative**

**Prefix:** Mr.

**First Name:** Marcus

**Middle Name**

**Last Name:** Schmit

**Suffix:**

**Title:** Executive Director

**Telephone Number:** (651) 645-0676  
**(Format: 123-456-7890)**

**Fax Number:** (651) 645-0677  
**(Format: 123-456-7890)**

**Email:** marcus@hearthconnection.org

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

**Date Signed:** 09/26/2023

## **CERTIFICATION REGARDING LOBBYING**

### **Certification for Contracts, Grants, Loans, and Cooperative Agreements**

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

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

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

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

### **Statement for Loan Guarantees and Loan Insurance**

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

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

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

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

**Applicant's Organization:** Hearth Connection

**Name / Title of Authorized Official:** Marcus Schmit, Executive Director

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

**Date Signed:** 09/26/2023

# 1J. SF-LLL

## DISCLOSURE OF LOBBYING ACTIVITIES Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352. Approved by OMB0348-0046

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

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

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

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

**Legal Name:** Hearth Connection  
**Street 1:** 2446 University Ave  
**Street 2:**  
**City:** Saint Paul  
**County:** Ramsey  
**State:** Minnesota  
**Country:** United States  
**Zip / Postal Code:** 55114

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

I certify that this information is true and complete.



**Authorized Representative**

**Prefix:** Mr.

**First Name:** Marcus

**Middle Name:**

**Last Name:** Schmit

**Suffix:**

**Title:** Executive Director

**Telephone Number:** (651) 645-0676  
**(Format: 123-456-7890)**

**Fax Number:** (651) 645-0677  
**(Format: 123-456-7890)**

**Email:** marcus@hearthconnection.org

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

**Date Signed:** 09/26/2023

## IK. SF-424B

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

**OMB Number: 4040-0007**  
**Expiration Date: 02/28/2022**

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

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

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

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

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

**Authorized Representative for:** Hearth Connection

**Prefix:** Mr.

**First Name:** Marcus

**Middle Name:**

**Last Name:** Schmit

**Suffix:**

**Title:** Executive Director

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

**Date Signed:** 09/26/2023

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## 2A. Project Detail

1. **CoC Number and Name:** MN-503 - Dakota, Anoka, Washington, Scott, Carver Counties CoC
2. **Collaborative Applicant Name:** Hearth Connection
3. **Project Name:** 2023 SMAC Planning
4. **Component Type:** CoC Planning Project Application

## 2B. Project Description

**1. Provide a description that addresses the entire scope of the proposed project and how the Collaborative Applicant will use grant funds to comply with 24 CFR 578.7:**

The CoC will use Planning funds to ensure operation of the continuum, HMIS capacity, & CoC planning through the following activities: Activity 1: The funding will support staffing resources dedicated to implementing a system wide evaluation plan that includes two parts: 1) CoC PROJECT PERFORMANCE MANAGEMENT activities include: A) Reviewing APRs prior to submission to HUD B) Monitor APR data after submission to HUD on a quarterly basis C) Bring recommendations to Governing Board for projects needing TA D) Provide TA E) Evaluate TA F) Comprehensive report on CoC performance presented to Governing Board 2) SYSTEM-WIDE EVALUATION activities includes: A) Review, analyze and make recommendations based on HUD System Performance Measure data on a quarterly basis to the Governing Board B) Collecting & analyzing CES data. C) Developing additional systemwide measures specific to the region that will assist in improving System Performance Measures D) Reviewing ESG performance reports E) Partnering with the HMIS System Administrator to pull comprehensive reports for the Governing Board every 3 months that include data driven recommendations on program shifts and policy. Activity 2: The CoC will utilize planning funds to revise and implement written standards and monitoring plan across the CoC. 1) Stakeholder meetings will be convened to review current standards and solicit feedback. 2) Standards will be updated using the feedback provider via stakeholder meetings. 3) Trainings will be coordinated across the CoC to ensure providers understand the written standards and other CoC wide policies including the anti-discrimination policy. Activity 3: Planning funds will assist in staff time for coordination around the Point in Time & Housing Inventory Chart processes on multiple levels: 1) Work with state & local partners to develop survey & outreach process 2) Work with local planning entities to ensure coverage of the entire region and build volunteer base 3) Analyze data 4) Use data from both PIT & HIC for annual needs assessment & work plan 5) Create materials to present findings to community Activity 4: The CoC will continue to engage PHA's in exploring implementation of homeless preferences and Move On strategies. This will happen through: 1) Facilitation of meetings with PHA staff and other stakeholders within the CoC. 2) Developing an action plan to move toward implementation of a homeless preference and Move On strategies. The action plan will clearly identify what is the role of the PHA and what is the role of the CoC. 3) Begin implementation of the action plan. Activity 5: The CoC will ensure easy access to regional planning opportunities for all stakeholders in the CoC through: 1) Purchasing technology such as virtual meeting access 2) Updating & maintaining a user-friendly website for the CoC and CES.

**2. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.**

The CoC Governing Board meets monthly and is responsible for ensuring the following activities are completed in a timely manner. Activity 1: Monitoring and Evaluation Committee will meet monthly and report findings to the Governing Board. Review APRs prior to submission to HUD Ongoing. Monitor APR data after submission to HUD- Quarterly. Review ESG performance reports- Ongoing. Bring recommendations to Governing Board for projects needing TA. Winter 2024 Provide TA- Spring/Summer 2024 Evaluate TA- Fall 2024. Comprehensive report on CoC performance presented to Governing Board- Winter 2024. System Performance Measure Review – Quarterly. Collect and analyze CES data – Quarterly. Activity 2: Written standards will be revised and monitored: 1) Stakeholder meetings to happen- continuing through Spring 2024. 2) Standards for all component types updated- Fall 2024. 3) Trainings for providers will continue to be ongoing. Activity 3: Point in Time Count, sheltered and unsheltered, will be conducted in January. Planning for PIT 2024- Fall 2024. Point in Time Count takes place January 2024. Data analyzed and reviewed- Spring 2024. 2024 PIT data used for annual needs assessment and work plan- Winter 2024. Activity 4: A work group of the CoC has been developed to oversee the coordination with PHAs: 1) Meetings with additional PHAs to begin Summer 2024. 2) Action plan development- Summer/Fall 2024. 3) Begin implementation of action plan- Winter 2025. Activity 5: Ensuring easy access to regional planning. Continued access to virtual meeting software – Ongoing Updating CoC website – Ongoing

**3. How will the requested funds improve or maintain the CoC's ability to evaluate the outcome of CoC and ESG projects?**

The Planning grant will improve the CoC's ability to evaluate CoC and ESG project outcomes in the following ways: 1) The funding will support staffing resources toward facilitating the Operations Committee. This committee's work will create a system-wide evaluation plan that will look at the CoC as a whole beyond CoC funded projects. Further, the funding will support staffing for organizing the Monitoring and Evaluation Committee that is charged with conducting project reviews, HMIS reports, and ESG performance reports. 2) Funding will support staff costs needed to lead the CoC and ESG recipients through a review and amendment of ESG and CoC written project standards. This will include consulting with existing ESG and CoC projects, studying best practices in RRH and PSH across the country, and conducting a review of HMIS data. 3) Planning funds will provide the CoC the time to work with the state ESG staff to share monitoring and evaluation reports, align evaluation methods, and work together to monitor organizations receiving both funding sources.

### 3A. Governance and Operations

1. How often does the CoC conduct meetings of the full CoC membership? **Annually**

2. Does the CoC include membership of a homeless or formerly homeless person? **Yes**

2a. For members who are homeless or formerly homeless, what role do they play in the CoC membership? (Select all that apply)

Participates in CoC meetings:	<input checked="" type="checkbox"/>
Votes, including electing Coc Board:	<input checked="" type="checkbox"/>
Sits on CoC Board:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

3. Does the CoC's governance charter incorporate written policies and procedures for each of the following

3a. Written agendas of CoC meetings? **Yes**

3b. Coordinated Entry? (Also known as centralized or coordinated assessment) **Yes**

3c. Process for monitoring outcomes of ESG recipients? **Yes**

3d. CoC policies and procedures? **Yes**

3e. Written process for board selection? **Yes**

3f. Code of Conduct for board members that includes a recusal process? **Yes**

3g. Written standards for administering assistance? **Yes**

4. Were there any written complaints received by the CoC in relation to project review, project selection, or other items related to 24 CFR 578.7 or 578.9 within the past 12 months? **No**





### 3B. Committees

Provide information for up to five of the most active CoC-wide planning committees, subcommittees and/or workgroups, to address homeless needs in the CoC's geographic area that recommend and set policy priorities for the CoC, including a brief description of the role and the frequency of the meetings. Only include committees, subcommittees and/or workgroups, that are directly involved in CoC-wide planning and not the regular delivery of services.

Name of Group	Role of the Group (max 750 characters)	Meeting Frequency	Name of Individuals and/or Organizations Represented
Directors Council	The Directors Council is a group of individuals that have personal experience with SMAC's Coordinated Entry System. The Directors Council review and approve all new policies, initiatives, and programs the CoC plans to implement. In addition, the Directors Council is responsible for choosing the direction and priorities for the SMAC Coordinated Entry Committee's work and ensuring that SMAC's policies are as personcentered as possible.	Monthly	People with lived experience of homelessness
SMAC Equity Team	The SMAC Equity Team is responsible for overseeing planning and implementation around racial equity goals for the region.	Weekly	MESH Staff, HMIS staff, CE staff, Governing Board members, and Directors Council
SMAC Governing Board	The SMAC Governing Board is a body elected by SMAC membership to carry out the duties and responsibilities as delegated by SMAC to ensure compliance with the requirements as described in the HEARTH Act and the CoC Interim Rule. There are four distinct regions within SMAC. Membership of the Governing Board is selected by the Directors Council.	Monthly	Radius Health, Fitzgerald Home Health Care, Lutheran Social Service, Carver County, Guild Inc., Scott County, The Link, Tasks Unlimited, Mental Health Resources, Eastern Twin Cities Islamic Center, Washington County, Persons with lived experience
Coordinated Entry Communications Committee	The CES Communications Committee is tasked with ensuring that all relevant stakeholders in the CoC are aware of upcoming opportunities, trainings, and ways to get involved in CoC work and planning. They organize, plan, and support the quarterly community workshops hosted by the CoC, and they analyze Coordinated Entry data in order to identify trends that need to be communicated to the community	Monthly	CE and CoC staff, and staff from Dakota County, Ally Services, Carver County, Scott County, His House Foundation, CAP Agency, and the YMCA.

Project Monitoring and Evaluation Committee	The CoC Project Monitoring and Evaluation Committee is responsible for scoring and ranking the CoC projects during the local NOFO competition. This committee is also responsible for keeping the scoring tool updated and ensuring projects are aware of changes in the scoring methodology. This committee will keep track of project performance throughout the year and develop Technical Assistance plans with projects that are underperforming. Committee members may not have a conflict of interest with any of the funded projects. Membership is determined by the Governing Board and will be representative of stakeholder groups across the CoC	Monthly	Lutheran Social Services, Scott County, Carver County, Washington County, Radius Health Persons with lived experience of homelessness
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## 4A. Sources of Match

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

### Summary for Match

Total Value of Cash Commitments:	\$10,262
Total Value of In-Kind Commitments:	\$41,048
Total Value of All Commitments:	\$51,310

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

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

Type	Source	Contributor	Value of Commitments
In-Kind	Government	Carver County	\$10,262
In-Kind	Government	Scott County	\$10,262
In-Kind	Government	Dakota County	\$10,262
In-Kind	Government	Anoka	\$10,262
Cash	Government	Washington County	\$10,262

## Sources of Match Details

- 1. **Type of commitment:** In-Kind
- 2. **Source:** Government
- 3. **Name of source:** Carver County  
(Be as specific as possible and include the office or grant program as applicable)
- 4. **Value of Written Commitment:** \$10,262

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

## Sources of Match Details

- 1. **Type of commitment:** In-Kind
- 2. **Source:** Government
- 3. **Name of source:** Scott County  
(Be as specific as possible and include the office or grant program as applicable)
- 4. **Value of Written Commitment:** \$10,262

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

## Sources of Match Details

- 1. **Type of commitment:** In-Kind
- 2. **Source:** Government
- 3. **Name of source:** Dakota County  
(Be as specific as possible and include the office or grant program as applicable)

**4. Value of Written Commitment: \$10,262**

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

## **Sources of Match Details**

**1. Type of commitment:** In-Kind

**2. Source:** Government

**3. Name of source:** Anoka

**(Be as specific as possible and include the office or grant program as applicable)**

**4. Value of Written Commitment: \$10,262**

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

## **Sources of Match Details**

**1. Type of commitment:** Cash

**2. Source:** Government

**3. Name of source:** Washington County

**(Be as specific as possible and include the office or grant program as applicable)**

**4. Value of Written Commitment: \$10,262**

## 4B. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 30, 2025? Yes

2. Does this project propose to allocate funds according to an indirect cost rate? No

3. Select a grant term: 1 Year

**A description must be entered for Quantity. Any costs without a Quantity description will be removed from the budget.**

Eligible Costs:	Quantity AND Description (max 400 characters)	Annual Assistance Requested (Applicant)
1. Coordination Activities	Coordination of PIT, local CoC meetings, working with housing developers, implementing anti-discrimination policy. Virtual meeting capability.	\$47,043
2. Project Evaluation	NOFO project ranking, Implementing CoC project performance management plan, ESG program evaluation	\$30,000
3. Project Monitoring Activities	Ongoing CoC project performance monitoring through quarterly data review. Work with local ESG providers to ensure programs are in compliance.	\$35,000
4. Participation in the Consolidated Plan	Work closely with local partners to ensure the regional needs are aligned with CoC objectives	\$21,193
5. CoC Application Activities	NOFO application	\$27,000
6. Determining Geographical Area to Be Served by the CoC		
7. Developing a CoC System	HMIS data analysis on System Performance Measures and use of data in system planning. Improving and monitoring implementation of written standards.	\$25,000
8. HUD Compliance Activities	Work on the HDX, HIC, LSA and GIW	\$20,000
<b>Total Costs Requested</b>		<b>\$205,236</b>
<b>Cash Match</b>		<b>\$10,262</b>
<b>In-Kind Match</b>		<b>\$41,048</b>
<b>Total Match</b>		<b>\$51,310</b>
<b>Total Budget</b>		<b>\$256,546</b>

**Click the 'Save' button to automatically calculate the Total Assistance**

## 5A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1. Other Attachment(s)	No		
2. Other Attachment(s)	No		

## Attachment Details

Document Description:

## Attachment Details

Document Description:



## 5A. In-Kind MOU Attachment

Document Type	Required?	Document Description	Date Attached
In-Kind Match MOU	No	In Kink Match MOU	09/26/2023

## Attachment Details

**Document Description:** In Kink Match MOU

## 5B. Certification

**Applicant and Recipient Assurances and Certifications - form HUD-424B (Title)  
U.S. Department of Housing and Urban Development OMB Approval No.  
2501-0017  
(expires 01/31/2026)**

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

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

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

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

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

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

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

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

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

**Name of Authorized Certifying Official:** Marcus Schmit

**Date:** 09/26/2023

**Title:** Executive Director

**Applicant Organization:** Hearth Connection

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

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

X
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## 6A. Submission Summary

Page	Last Updated
1A. SF-424 Application Type	No Input Required
1B. SF-424 Legal Applicant	09/19/2023
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	09/20/2023
1E. SF-424 Compliance	09/19/2023
1F. SF-424 Declaration	09/19/2023
1G. HUD 2880	09/20/2023
1H. HUD 50070	09/19/2023
1I. Cert. Lobbying	09/19/2023

<b>1J. SF-LLL</b>	09/19/2023
<b>IK. SF-424B</b>	09/19/2023
<b>2A. Project Detail</b>	09/20/2023
<b>2B. Description</b>	09/20/2023
<b>3A. Governance and Operations</b>	09/20/2023
<b>3B. Committees</b>	09/20/2023
<b>4A. Match</b>	09/21/2023
<b>4B. Funding Request</b>	09/21/2023
<b>5A. Attachment(s)</b>	No Input Required
<b>5A. In-Kind MOU Attachment</b>	09/26/2023
<b>5B. Certification</b>	09/20/2023



## Carver County

### Health and Human Services

Human Services Building

602 East Fourth Street • Chaska, MN 55318-2102

Office (952) 361-1600 • Fax (952) 361-1660 • [www.co.carver.mn.us](http://www.co.carver.mn.us)

09/15/2023

#### To: Suburban Metro Area Continuum of Care (MN-503) Planning Grant Applicant—Hearth Connection

Please accept this letter as certification that **Carver County Housing Unit** commits to providing the following otherwise non-obligated, eligible **in-kind** matching support for the entire duration of the grant term for the following CoC project as part of the FFY2023 HUD CoC Program.

**PROJECT NAME:** Hearth SMAC CoC Planning Grant

**GRANT TERM:** 11/1/23—10/31/24

**PROJECT APPLICANT:** Hearth Connection

**ELIGIBLE ACTIVITIES (check all that apply):**

- Work with CoC Board, Membership, and committees across SMAC to prevent and end homelessness**
- Lead system and/or project design and planning for the homeless response system**
- Conduct project monitoring through activities like site visits, HMIS data collection, and monitoring and evaluation**
- Monitor budgets of CoC projects**

- Coordinate with health care and public housing agencies**
- Promote racial equity and help to address racial disparities in our homeless response system**
- Other efforts that advance our CoC's ability to prevent and end homelessness**

**IN-KIND SOURCES MATCH** will be provided by Jennifer Romero at an average hourly rate of \$53.20. The total amount of in-kind match is \$10,261.80.

Please reach out with any questions.

Sincerely,

Jennifer Romero

Housing Unit Supervisor

Carver County Health and Human Services

612-214-7742

[jromero@co.carver.mn.us](mailto:jromero@co.carver.mn.us)



## SCOTT COUNTY HEALTH and HUMAN SERVICES DIVISION

GOVERNMENT CENTER WEST • HOUSING  
200 FOURTH AVE. WEST • SHAKOPEE, MN 55379-1220  
(952) 445-7751 • Fax (952) 279-6132 • [www.scottcountymn.gov](http://www.scottcountymn.gov)

BARBARA DAHL  
Director

**9/1/2023**

To: Suburban Metro Area Continuum of Care (MN-503) Planning Grant Applicant—Hearth Connection

Please accept this letter as certification that it is Scott County Health and Human Services intention to commit to providing the following otherwise non-obligated, eligible in-kind matching support for the entire duration of the grant term for the following CoC project as part of the FFY2023 HUD CoC Program.

PROJECT NAME: Hearth SMAC CoC Planning Grant

GRANT TERM: 11/1/23—10/31/24

PROJECT APPLICANT: Hearth Connection

ELIGIBLE ACTIVITIES (*check all that apply*):

- Work with CoC Board, Membership, and committees across SMAC to prevent and end homelessness
- Lead system and/or project design and planning for the homeless response system
- Conduct project monitoring through activities like site visits, HMIS data collection, and monitoring and evaluation
- Monitor budgets of CoC projects
- Coordinate with health care and public housing agencies
- Promote racial equity and help to address racial disparities in our homeless response system
- Other efforts that advance our CoC's ability to prevent and end homelessness

IN-KIND SOURCES MATCH will be provided by Housing Coordinators at an average hourly rate of \$35 and by Housing Unit Supervisor at an average hourly rate of \$45. The total amount of in-kind match is a \$10,262 value in staff allocated time.

Please reach out with any questions.

Sincerely,

Danielle Fox  
HHS Deputy Director  
Scott County Health and Human Services





August 29, 2023

**To: Suburban Metro Area Continuum of Care (MN-503) Planning Grant Applicant—Hearth Connection**

Please accept this letter as certification that **Dakota County** commits to providing the following otherwise non-obligated, eligible **in-kind** matching support for the entire duration of the grant term for the following CoC project as part of the FFY2023 HUD CoC Program.

**PROJECT NAME: Hearth SMAC CoC Planning Grant**

**GRANT TERM: 11/1/23—10/31/24**

**PROJECT APPLICANT: Hearth Connection**

**ELIGIBLE ACTIVITIES (check all that apply):**

- Work with CoC Board, Membership, and committees across SMAC to prevent and end homelessness
- Lead system and/or project design and planning for the homeless response system
- Conduct project monitoring through activities like site visits, HMIS data collection, and monitoring and evaluation

- Monitor budgets of CoC projects
- Coordinate with health care and public housing agencies
- Promote racial equity and help to address racial disparities in our homeless response system
- Other efforts that advance our CoC’s ability to prevent and end homelessness

**IN-KIND SOURCES MATCH** will be provided by a Dakota County Social Services Coordinator at an average hourly rate of \$40 and by a Dakota County Social Services Supervisor at an average hourly rate of \$50. The total amount of in-kind match is \$10,262.

Please reach out with any questions.

Sincerely,  
by:

Madeline Kastler

Deputy Director, Social Services

P: 651-554-5918

E: [madeline.kastler@co.dakota.mn.us](mailto:madeline.kastler@co.dakota.mn.us)



## Social Services

**A Dakota County Northern Service Center** • 1 Mendota Road West Ste. 300 • West St. Paul • MN 55118  
**P** 651-554-6000 **F** 651-554-6043

**A Dakota County Western Service Center** • 14955 Galaxie Ave. Ste. 266 • Apple Valley • MN 55124  
**P** 952-891-7400 **F** 952-891-7473

**W** [www.dakotacounty.us](http://www.dakotacounty.us)



**Certificate Of Completion**

Envelope Id: 6B6ACAA94A634488BB7A53D914C3ACA0	Status: Completed
Subject: Complete with DocuSign: CoC Match Commitment Letter 2023_ Planning Grant_Hearth Connection.docx	
Source Envelope:	
Document Pages: 2	Signatures: 1
Certificate Pages: 2	Initials: 0
AutoNav: Disabled	Envelope Originator:
Enveloped Stamping: Disabled	Madeline Kastler
Time Zone: (UTC-06:00) Central Time (US & Canada)	Madeline.Kastler@co.dakota.mn.us
	IP Address: 97.116.138.247

**Record Tracking**

Status: Original 9/21/2023 10:48:43 AM	Holder: Madeline Kastler Madeline.Kastler@co.dakota.mn.us	Location: DocuSign
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: Dakota County Social Services	Location: DocuSign

**Signer Events**

Madeline Kastler  
 Madeline.Kastler@co.dakota.mn.us  
 Social Worker  
 Dakota County  
 Security Level: Email, Account Authentication (None)

**Signature**

DocuSigned by:  
  
 784BF6C169B54B5...  
 Signature Adoption: Pre-selected Style  
 Using IP Address: 97.116.138.247

**Timestamp**

Sent: 9/21/2023 10:49:07 AM  
 Viewed: 9/21/2023 10:49:15 AM  
 Signed: 9/21/2023 10:49:26 AM  
 Freeform Signing

**Electronic Record and Signature Disclosure:**  
 Accepted: 9/21/2023 10:49:15 AM  
 ID: c3691376-eb2f-4bc7-8815-381dc3e3cef6

**In Person Signer Events**

**Signature**

**Timestamp**

**Editor Delivery Events**

**Status**

**Timestamp**

**Agent Delivery Events**

**Status**

**Timestamp**

**Intermediary Delivery Events**

**Status**

**Timestamp**

**Certified Delivery Events**

**Status**

**Timestamp**

**Carbon Copy Events**

**Status**

**Timestamp**

**Witness Events**

**Signature**

**Timestamp**

**Notary Events**

**Signature**

**Timestamp**

**Envelope Summary Events**

**Status**

**Timestamps**

Envelope Sent	Hashed/Encrypted	9/21/2023 10:49:07 AM
Certified Delivered	Security Checked	9/21/2023 10:49:15 AM
Signing Complete	Security Checked	9/21/2023 10:49:26 AM
Completed	Security Checked	9/21/2023 10:49:26 AM

**Payment Events**

**Status**

**Timestamps**

**Electronic Record and Signature Disclosure**

**Dakota County Social Services**  
**Electronic Signature Notice and Consent**

I agree that my electronic signature is the legal equivalent of my wet (ink) signature. I further agree to receive a copy of the electronically signed form by email to the email address on file with Dakota County Social Services. Finally, I acknowledge and agree that I am not required to electronically sign this form, and that I may request a paper version from Dakota County Social Services.



# Anoka County

## HUMAN SERVICES DIVISION

Community Social Services and Behavioral Health

DATE: September 25, 2023

To: Suburban Metro Area Continuum of Care (MN-503) Planning Grant Applicant—Hearth Connection

Please accept this letter as certification that Anoka County Community Social Services and Behavioral Health Department commits to providing the following otherwise non-obligated, eligible in-kind matching support for the entire duration of the grant term for the following CoC project as part of the FFY2023 HUD CoC Program.

PROJECT NAME: Hearth SMAC CoC Planning Grant

GRANT TERM: 11/1/23—10/31/24

PROJECT APPLICANT: Hearth Connection

ELIGIBLE ACTIVITIES (check all that apply):

PROJECT NAME: Hearth SMAC CoC Planning Grant

GRANT TERM: 11/1/23—10/31/24

PROJECT APPLICANT: Hearth Connection

ELIGIBLE ACTIVITIES (check all that apply):

- Work with CoC Board, Membership, and committees across SMAC to prevent and end homelessness
- Lead system and/or project design and planning for the homeless response system
- Conduct project monitoring through activities like site visits, HMIS data collection, and monitoring and evaluation
- Monitor budgets of CoC projects
- Coordinate with health care and public housing agencies
- Promote racial equity and help to address racial disparities in our homeless response system
- Other efforts that advance our CoC's ability to prevent and end homelessness

IN-KIND SOURCES MATCH will be provided by Jennifer Crottea, Lead Program Planner at an average hourly rate of \$60.00. The total amount of in-kind match is \$10,261.80.

Please reach out with any questions.

Sincerely,

George J. Borrell  
Planning & Operation Service Area Manager  
Anoka County Community Social Services and Behavioral Health Department

**Meeting People's Needs Through Quality Services**

Community Social Services & Behavioral Health  
Government Center ▲ 2100 3<sup>rd</sup> Avenue N, Suite 500 ▲ Anoka, MN 55303-9945  
PHONE: 763-324-1400 ▲ FAX: 763-324-1110 ▲ [www.anokacountymn.gov](http://www.anokacountymn.gov)

**Affirmative Action / Equal Opportunity Employer**



To: Laquita Love-Limo, Suburban Metro Area Continuum of Care Coordinator  
Re: Suburban Metro Area Continuum of Care (MN-503) Planning Grant Applicant—Hearth Connection  
Date: September 25, 2023

Dear Ms. Love-Limo:

Please accept this letter as certification that Washington County Community Services commits to providing the following otherwise non-obligated, one-time **cash match** for the grant term for the following CoC project as part of the FFY2023 HUD CoC Program.

PROJECT NAME:	Hearth SMAC CoC Planning Grant
GRANT TERM:	11/1/23—10/31/24
PROJECT APPLICANT:	Hearth Connection
CASH MATCH AMOUNT:	\$10,262

This check will be made payable to Hearth Connection.

Please reach out with any questions.

Sincerely,

*Sarah Tripple*

Sarah Tripple, Division Manager  
Washington County Community Services  
Email: [Sarah.tripple@co.washington.mn.us](mailto:Sarah.tripple@co.washington.mn.us)  
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