

## **Before Starting the Project Listings for the CoC Priority Listing**

**The CoC Consolidated Application requires TWO submissions. Both this Project Priority Listing AND the CoC Application MUST be completed and submitted prior to the CoC Program Competition submission deadline stated in the NOFO.**

The CoC Priority Listing includes:

- Reallocation forms – must be completed if the CoC is reallocating eligible renewal projects to create new projects or if a project applicant will transition from an existing component to an eligible new component.

- Project Listings:

- New;
- Renewal;
- UFA Costs;
- CoC Planning;
- YHPD Renewal; and
- YHDP Replacement.
- Attachment Requirement

- HUD-2991, Certification of Consistency with the Consolidated Plan – Collaborative Applicants must attach an accurately completed, signed, and dated HUD-2991.

Things to Remember:

- New and Renewal Project Listings – all project applications must be reviewed, approved and ranked, or rejected based on the local CoC competition process.

- Project applications on the following Project Listings must be approved, they are not ranked per the FY 2021 CoC Program Competition NOFO:

- UFA Costs Project Listing;
- CoC planning Project Listing;
- YHPD Renewal Project Listing; and
- YHDP Replacement Project Listing.
- Collaborative Applicants are responsible for ensuring all project applications accurately appear on the Project Listings and there are no project applications missing from one or more Project Listings.
- For each project application rejected by the CoC the Collaborative Applicant must select the reason for the rejection from the dropdown provided.
- If the Collaborative Applicant needs to amend a project application for any reason, the Collaborative Applicant MUST ensure the amended project is returned to the applicable Project Listing AND ranked BEFORE submitting the CoC Priority Listing to HUD in e-snaps.

Additional training resources are available online on HUD's website.  
[https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition)

## 1A. Continuum of Care (CoC) Identification

### Instructions:

For guidance on completing this form, please reference the FY 2021 CoC Priority Listing Detailed Instructions and FY 2021 CoC Priority Listing Navigational Guide on HUD's website.  
[https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition).

**Collaborative Applicant Name:** Fall River CoC (MA-515)

## 2. Reallocation

### Instructions:

For guidance on completing this form, please reference the FY 2021 CoC Priority Listing Detailed Instructions and FY 2021 CoC Priority Listing Navigational Guide on HUD's website.  
[https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition).

**2-1. Is the CoC reallocating funds from one or more eligible renewal grant(s) that will expire in calendar year 2022 into one or more new projects?** No

## Continuum of Care (CoC) New Project Listing

### Instructions:

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

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

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

## Continuum of Care (CoC) Renewal Project Listing

### Instructions:

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

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

[https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition).

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

X

**The Collaborative Applicant certifies all renewal permanent supportive housing and rapid rehousing projects listed on the Renewal Project Listing comply with program requirements and appropriate standards of quality and habitability.**

X

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

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Rank	PSH/RRH	Comp Type	Consolidation Type	Expansion Type
The CALL - Fall R...	2021-10-26 14:17:...	1 Year	City of Fall River	\$100,088	2		SSO		
Next Step Home Pr...	2021-10-26 14:15:...	1 Year	City of Fall River	\$511,666	3	PSH	PH		
Cornerstone	2021-10-26 14:08:...	1 Year	City of Fall River	\$540,465	4	PSH	PH		

**Applicant:** Fall River CoC

MA 515

**Project:** MA-515 CoC Registration FY 2021

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Francis House	2021-10-26 14:10:...	1 Year	City of Fall River	\$108,197	7	PSH	PH		
Homeless Management...	2021-10-26 14:12:...	1 Year	City of Fall River	\$32,662	1		HMIS		
Stone Residence	2021-10-26 14:16:...	1 Year	City of Fall River	\$444,281	6	PSH	PH		
Home First Consol...	2021-10-26 14:22:...	1 Year	City of Fall River	\$203,960	5	PSH	PH		

## Continuum of Care (CoC) Planning Project Listing

### Instructions:

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

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

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

[https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition).

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Accepted?
This list contains no items					

## Continuum of Care (CoC) YHDP Renewal Project Listing

### Instructions:

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

To upload all YHDP renewal project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of YHDP renewal and replacement projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the YHDP Renewal Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.  
[https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition).

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

☐

**The Collaborative Applicant certifies all renewal permanent supportive housing and rapid rehousing projects listed on the Renewal Project Listing comply with program requirements and appropriate standards of quality and habitability.**

☐

**The Collaborative Applicant does not have any renewal permanent supportive housing or rapid rehousing renewal projects.**

☒

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



## Continuum of Care (CoC) YHDP Replacement Project Listing

### Instructions:

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

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

[https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition).

Project Name	Date Submitted	Applicant Name	Budget Amount	Comp Type	Grant Term	Accepted?
This list contains no items						

## Funding Summary

### Instructions

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

Title	Total Amount
Renewal Amount	\$1,941,319
New Amount	\$0
CoC Planning Amount	\$0
YHDP Amount	\$0
Rejected Amount	\$0
TOTAL CoC REQUEST	\$1,941,319

## Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan (HUD-2991)	Yes	Certification of ...	10/13/2021
FY 2021 Rank Tool (optional)	No	FY 2021 Rank Tool	11/10/2021
Other	No		
Other	No		

## Attachment Details

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

## Attachment Details

**Document Description:** FY 2021 Rank Tool

## Attachment Details

**Document Description:**

## Attachment Details

**Document Description:**

## Submission Summary

**WARNING: The FY2021 CoC Consolidated Application requires 2 submissions. Both this Project Priority Listing AND the CoC Consolidated Application MUST be submitted.**

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Page	Last Updated
<b>Before Starting</b>	No Input Required
<b>1A. Identification</b>	09/07/2021
<b>2. Reallocation</b>	10/13/2021
<b>5A. CoC New Project Listing</b>	No Input Required
<b>5B. CoC Renewal Project Listing</b>	11/09/2021
<b>5D. CoC Planning Project Listing</b>	No Input Required
<b>5E. YHDP Renewal</b>	No Input Required
<b>5F. YHDP Replace</b>	No Input Required
<b>Funding Summary</b>	No Input Required
<b>Attachments</b>	11/10/2021
<b>Submission Summary</b>	No Input Required

**Applicant:** Fall River CoC

MA 515

**Project:** MA-515 CoC Registration FY 2021

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# Certification of Consistency with the Consolidated Plan

U.S. Department of Housing  
and Urban Development

OMB Approval No. 2000-012 (Exp. 06/2011)

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

Applicant Name: City of Fall River

Project Name: Homeless Management Information System

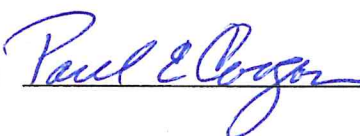
Location of the Project: City of Fall River  
One Government Center  
Fall River, Massachusetts 02722

Name of the Federal  
Program to which the  
applicant is applying: Continuum of Care 14.267

Name of  
Certifying Jurisdiction: City of Fall River

Certifying Official  
of the Jurisdiction  
Name: Paul E. Coogan

Title: Mayor

Signature: 

Date: 10/05/2021

# Certification of Consistency with the Consolidated Plan

U.S. Department of Housing  
and Urban Development

OMB Approval No. 2500-0112 (Exp. 09/30/2011)

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

Applicant Name: City of Fall River

Project Name: Home First Consolidated

Location of the Project: Steppingstone, Inc.  
542 North Main Street  
Fall River, Massachusetts 02720

Name of the Federal  
Program to which the  
applicant is applying: Continuum of Care 14.267

Name of  
Certifying Jurisdiction: City of Fall River

Certifying Official  
of the Jurisdiction  
Name: Paul E. Coogan

Title: Mayor

Signature: 

Date: 10/05/2021



# Certification of Consistency with the Consolidated Plan

U.S. Department of Housing  
and Urban Development

OMB Approval No. 2500-0112 (Exp. 06/01/2011)

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

Applicant Name: City of Fall River

Project Name: Next Step Home Program

Location of the Project: Steppingstone, Inc.  
466 North Main Street  
Fall River, Massachusetts 02720

Name of the Federal  
Program to which the  
applicant is applying: Continuum of Care 14.267

Name of  
Certifying Jurisdiction: City of Fall River

Certifying Official  
of the Jurisdiction  
Name: Paul E. Coogan

Title: Mayor

Signature: 

Date: 10/05/2021

# Certification of Consistency with the Consolidated Plan

U.S. Department of Housing  
and Urban Development

OMB Approval No. 2000-0112 (Exp. 06/30/21)

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

Applicant Name: City of Fall River

Project Name: Stone Residence

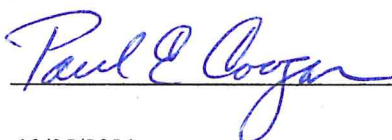
Location of the Project: Steppingstone, Inc.  
177 North Main Street  
Fall River, Massachusetts 02720

Name of the Federal  
Program to which the  
applicant is applying: Continuum of Care 14.267

Name of  
Certifying Jurisdiction: City of Fall River

Certifying Official  
of the Jurisdiction  
Name: Paul E. Coogan

Title: Mayor

Signature: 

Date: 10/05/2021

# Certification of Consistency with the Consolidated Plan

U.S. Department of Housing  
and Urban Development

OMB Approval No. 2500-012 (Exp. 03/2012)

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

Applicant Name: City of Fall River

Project Name: Cornerstone

Location of the Project: Catholic Social Services, Inc.  
1600 Bay Street  
Fall River, Massachusetts 02724

Name of the Federal  
Program to which the  
applicant is applying: Continuum of Care 14.267

Name of  
Certifying Jurisdiction: City of Fall River

Certifying Official  
of the Jurisdiction  
Name: Paul E. Coogan

Title: Mayor

Signature: 

Date: 10/05/2021

# Certification of Consistency with the Consolidated Plan

U.S. Department of Housing  
and Urban Development

OMB Approval No. 2000-0122 (Exp. 06/2011)

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

Applicant Name: City of Fall River

Project Name: Francis House

Location of the Project: Catholic Social Services, Inc.  
1600 Bay Street  
Fall River, Massachusetts 02724

Name of the Federal  
Program to which the  
applicant is applying: Continuum of Care 14.267

Name of  
Certifying Jurisdiction: City of Fall River

Certifying Official  
of the Jurisdiction  
Name: Paul E. Coogan

Title: Mayor

Signature: 

Date: 10/05/2021

# Certification of Consistency with the Consolidated Plan

U.S. Department of Housing  
and Urban Development

OMB Approval No. 2500-0112 (Exp. 06/30/11)

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

Applicant Name: City of Fall River

Project Name: The CALL - Coordinated Entry System

Location of the Project: Catholic Social Services, Inc.  
1600 Bay Street  
Fall River, Massachusetts 02724

Name of the Federal  
Program to which the  
applicant is applying: Continuum of Care 14.267

Name of  
Certifying Jurisdiction: City of Fall River

Certifying Official  
of the Jurisdiction  
Name: Paul E. Coogan

Title: Mayor

Signature: 

Date: 10/05/2021

## Funding Requests

		2018 Grant Award minus CDA Admin	2018 Funds Expended	% Expended	FY2021 Request	2021 PIT # of beds	Dedicated CH	Priority CH	Youth 18-24	Youth Under 18	Veteran	Subpops	HF
Cornerstone	MA038311T151806	470,547.00	400,615.00	85.14%	540,465.00	64	64	0	3	0	4	Y,DV,F,V	yes
Francis House	MA041711T151807	95,695.00	67,590.00	70.63%	108,197.00	8	4	4	8	0	0	Y, DV	yes
Home First Consolid	MA057811T151802	178,176.00	182,434.00	102.39%	203,960	12	12	0	3	0	1	Y, V	yes
Next Step Home	MA023611T151811	451,769.00	405,234.00	89.70%	511,666	66	66	0	0	0	2	DV, F, V	yes
Stone Residence	MA023811T151811	386,888.00	394,896.00	102.07%	444,281	22	22	0	3	0	2	V	yes

CH = Chronically Homeless

Subpopulations: Y=Youth, DV=Victims of Domestic Violence, F=Families w/Children, V=Veterans

Beds in family programs are recorded based on # of beds occupied during PIT Count.

HMIS	MA032311T151810	\$30,526	\$29,416	96%	\$32,662
The CALL (SSO-CE)	MA052611T151500	\$97,256	\$53,592	55%	\$100,088

Annual Renewal Demand

Tier 1 (100% of ARD)

Tier 2

Total Funding Request

Difference (Tier 2)

\$1,941,319  
\$1,941,319  
\$0  
\$1,941,319  
\$0

No Bonus requests  
No consolidations  
No reallocations

State abbreviation	Project ID number	App Type	FO Code	CoC #	FY of App	renew
MA	0238	L	1T	15	18	11

**Project Rating Tool - System Performance Measures**

**Exits to Permanent Housing**

SPM 7b.1 & 7b.2

percent (%) remain in or move to permanent housing

CS	FH	HFC	NSHP	SR
97.50%	100.00%	80.00%	100.00%	91.00%

Minimum	points
%	
90	25

**Returns to Homelessness**

SPM 2

percent (%) of participants return to homelessness within 12 months of exit to PH

CS	FH	HFC	NSHP	SR
0.00%	0.00%	0.00%	0.00%	0.00%

Maximum	points
%	
15	15

**New or Increased Income and Earned Income**

SPM 4.1

percent (%) new or increased earned income for project stayers

CS	FH	HFC	NSHP	SR
13.00%	33.00%	0.00%	6.00%	21.00%

Minimum	points
%	
8	2.5

percent (%) new or increased non-employment income for project stayers

SPM 4.2

CS	FH	HFC	NSHP	SR
60.00%	67.00%	57.00%	71.00%	57.00%

Minimum	points
%	
10	2.5

All Stayer

67	100	57	77	64
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percent (%) new or increased earned income for project leavers

SPM 4.4

CS	FH	HFC	NSHP	SR
0.00%	67.00%	0.00%	25.00%	0.00%

Minimum	points
%	
8	2.5

percent (%) new or increased non-employment income for project leavers

SPM 4.5

CS	FH	HFC	NSHP	SR
43.00%	33.00%	33.00%	50.00%	44.00%

Minimum	points
%	
10	2.5

All Leaver

43	100	33	75	33
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Higher score = the project lends itself to low barrier/housing first model  
**Serve High Need Populations**

APR - Q5a

TOTAL CLIENTS ENTERING THE PROGRAM DURING APR TERM				
CS	FH	HFC	NSHP	SR
Adults	10	12	48	30
Children	0	0	24	0
<b>Total</b>	10	12	72	30

percent (%) of participants with zero income at entry (adults only)

APR - Q16

CS	FH	HFC	NSHP	SR
Adults	5	4	2	6
%	50.00%	33.33%	4.17%	20.00%

Minimum	points
80	10

percent (%) of participants with more than one disability type at entry (all)

APR - Q13a2

CS	FH	HFC	NSHP	SR
All	3	12	39	28
%	30.00%	100.00%	54.17%	93.33%

Minimum	points
75	10

percent (%) of participants entering project from place not meant for human habitation (adults only)

APR - Q15

CS	FH	HFC	NSHP	SR
Adults	9	12	40	28
%	90.00%	100.00%	83.33%	93.33%

Minimum	points
75	10



Coordinated Entry Participation

Housing First and/or Low Barrier Implementation

Documented, secured minimum match

Project has reasonable costs per permanent housing exit, as defined locally

Project is financially feasible

Applicant is active CoC participant

Application is complete and data are consistent

Data quality at or above 90%

Bed/unit utilization rate at or above 90%

Acceptable organizational audit/financial review

Documented organizational financial stability