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YV Conference of Governments
Housing and Homeless Program

YVCOG Homeless Programs Revised 3-15-2017

4/30/2017 deadline

Yakima Neighborhood Health Services YNHS Community Services Resource Center

\$ 300,000.00 Requested

Submitted: 4/29/2017 6:37:21 PM (Pacific)

Project Contact

Rhonda Hauff

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Additional Contacts

none entered

Yakima Neighborhood Health Services

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EIN 91-0928817

Application Questions

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #24.

1. What Type of Organization are you?

- Private/Non-Profit
- Governmental Entity
- Corporation
- Limited Liability Corporation (LLC)
- Sole Proprietorship
- Other:

2. Please indicate which of the following is true with regard to the types of funding your organization receives:

Select all that apply

- Will Accept Federal Funds
- Will accept State Funds
- Will be serving TANF families
- Local Funds
- None of the Above

3. What are your Business Hours?

Please provide the hours when services will be provided (as applicable); and the name and primary contact person for questions about this application.

Rhonda Hauff |Main Campus (M-F 7:45-6:30; Sat 8:30-6:00); Neighborhood Connections (M-F 7:30-6:00); Sunnyside Campus (M-F 8:00-6:30; Sat 8:30-6:00) Henry Beauchamp Center (M/F 8:00-5:00; Tue/Thu 8:00-6:00); Granger (M-F 8:00-6:00)

PROJECT/PROGRAM DESCRIPTION, SERVICES & POPULATION SERVED

4. What is the Project Address (list all that apply):

Please indicate if and what services will be provided at each location.

The Community Services Resource Center is located at 201 South 6th Street; Yakima. Washington 98901.

The Community Services Resource Center provides transitional housing for up to 40 residents. Services provided onsite include:

- Stable and safe housing for chronically homeless individuals who are literally homeless
- Complete assessment of functional status, and identification of support needs, both urgent and long term, prioritizing safety and basic needs first.
- Residential management services to support housing stability and self-sufficiency. We anticipate most of these residents will need multiple contacts each week as they transition from the streets to housing units.
- Additional case management from staff off-site to provide self-sufficiency supports for medical, mental health, chemical dependency treatment, and vocational training supports.
- Offsite assessment of need for other services (mental health, chemical dependency, and permanent housing) and a connection to service providers to meet those needs.
- Assistance in assisting in the submission of applications for SSI/SSDI, basic food, Apple Health and/or other federal/state benefit programs.
- The initiation of a process for housing stabilization, connecting the resident to permanent supportive housing placement.
- Onsite computer lab, laundromat, and common area including a secured outdoor area.
- Access to resident manager 24 hours a day
- Central location providing walking access to health care, the hygiene center at Triumph Treatment Services, the homeless resource center at the Depot, City Transit Center, the Veterans Center, legal services, and more.

5. What is the specific Problem/Issue that the project or program will solve or address? Please explain how this addresses the 5 year plan. (0-4 pts)

The Community Services Resource Center (CSRC) will address the chronic need for more beds to house the homeless by providing stable and safe housing for chronically homeless individuals. The CSRC also proposes to address the following gaps identified in the Yakima County's 5-Year Homeless Plan (5-Year Plan): Housing and services for homeless individuals entering the community from jails, correctional facilities, foster care, hospitals, mental institutions, and those who are chronically unsheltered and Coordination of case management both between homeless providers and other systems of care. Additionally, this program also address the following activities in the Action Plan:

- Goal 10: Increase Capacity to add employment opportunities for self sufficiency
 - o 10.1 Create or increase systems to help homeless people get and secure income. Train case managers on SOAR.
 - o 10.3 Collaborate with the workforce, housing, and transportation systems to make employment an essential component of supportive housing models

The CSRC will also address the number of unsheltered homeless reported in the 5-Year Plan by providing housing.

6. Is this project eligible to execute a contract within 90 days? (0-1 pt)

- Yes
 No

7. Please summarize this funding request. What do you want to do? Describe the project in detail: (0-4 pts)

The primary goal of the Community Services Resource Center (CSRC) is to identify stable housing for residents, improve their health, increase their income and employment capacity, build their community connections, and ultimately improve

their overall satisfaction.

The basic principles of supportive housing, developed by the Corporation of Supportive Housing, include the following outcomes:

- Tenants stay housed
- Tenants improve their physical and mental health
- Tenants improve their income and employment
- Tenants have social and community connections
- Tenants are satisfied with the services and housing

The Housing First Model identifies the first and primary need is to obtain stable housing. Each resident will have a lease, along with a participation agreement. The participation agreement includes No Smoking; No alcohol, drugs on property; No criminal activity; Housing Stability Plans; 1-1 off-site appointments with a Case Manager; and Weekly apartment inspections. The goal is to stabilize housing status, increase income potential and transition to permanent housing or permanent supportive housing as indicated.

Success is measured by the following:

- Length of Stay in shelters - Length of Stay in Shelter, outdoors, or other homeless programs before accessing permanent housing.
- Housing placement - Successful placement to permanent housing.
- Housing stability - Retains permanent housing
- Recidivism - Number who return to homelessness once placed into housing.
- Health and well-being - Changes in health and well-being
- Increase economic well-being - Increased income from benefits and/or employment

Requested funds will install the sprinkler system in the facility to ensure the safety of residents. Additional funds will be used to provide the furnishing for the participants. Sprinkler System cost is based on estimate provided by the Contractor, Kitt Construction & Development, LLC. Furnishings (Beds, Mattresses, dressers, dining tables, chairs for residents) cost is based on estimate provided by the Contractor, Kitt Construction & Development, LLC to have appropriate furnishings for 5 units and 40 residents.

The International Association of Certified Home Inspectors estimate the Life Expectancy of sprinkler systems (specifically sprinkler heads) to be 10-14 years. By assigning the low-end of the scale to the furnishings and assuming the assets purchased with these funds last seven years – 280 clients will be served by this project.

8. What best practice models will be used in this project? What informed the design of your project? (0-4 pts)

The model that has informed the design of the CSRC is Housing First. This is an evidence-based practice (more rigorously studied than best-practices) and is a National model. YNHS staff have received ongoing training in this cost-effective models by national consultants specific to the populations they serve.

Housing First – The National Alliance to End Homelessness defines Housing First as a homeless assistance approach that prioritizes providing people experiencing homelessness with permanent housing as quickly as possible – and then providing voluntary supportive services as needed. This approach prioritizes client choice in both housing selection and in service participation. Housing First programs share critical elements:

- A focus on helping individuals and families access and sustain permanent rental housing as quickly as possible;
 - A variety of services delivered to promote housing stability and individual well-being on an as-needed and entirely voluntary basis; and
 - A standard lease agreement to housing – as opposed to mandated therapy or services compliance.
- While all Housing First programs share these elements, program models vary significantly depending upon the population served. For people who have experienced chronic homelessness, long-term services and support may be needed.

9. What populations identified in the 5 year plan do you intend to serve; how many individuals or households will you anticipate serving; and what needs will be met by the program? (0-4 pts)

The Community Services Resource Center will serve chronically homeless individuals, homeless veterans, and homeless elderly over the age of 62. Needs met by this program include housing, off-site case management, and supportive services.

40 individuals will be served by this program annually. Since this is a capital request for a sprinkler system and furnishings -

the International Association of Certified Home Inspectors estimate the Life Expectancy of sprinkler systems (specifically sprinkler heads) to be 10-14 years. By assigning the low-end of the scale to the furnishings and assuming the assets purchased with these funds last seven years – 280 clients will be served by this project.

10. What is your outreach plan and who is your intended audience? (0-4 pts)

YNHS will continue to use the current outreach approaches being utilized in the form of Street Outreach program, Depot Services, health care for the homeless services, and the no wrong door approach. This will be in addition to offsite intake and assessment in order to identify service and housing needs and provide a link to the appropriate level of both as indicated. The intended audience for this outreach is chronically homeless individuals and those who are literally homeless.

11. Where will your project be located and where will services be provided? (0-1 pt)

Project will be located at 201 South 6th Street; Yakima. Washington 98901. Assessment and Case Management will occur off-site at the main campus.

12. How will services be accessible to persons with disabilities or who have special needs? (0-4 pts)

The facility will be ADA Compliant as required by law. Yakima Neighborhood Health Services also has staff trained in Trauma Informed Care as well as various staff trained to respond to behavioral and mental health needs as indicated.

13. Will your project provide case management services? (0-4 pts)

Yes

No

Not Applicable - Capital Improvement Project

PERSONNEL & MONITORING

14. Who will provide services (as applicable), supervise the project or program, and be responsible for compliance reporting requirements? Is there Internal staff capacity or how will you provide these services? (0-4 pts)

Upload resumes and job descriptions of project staff or description of experience with similar projects; OR provide the Consultant/Management firm name, scope of services, and describe how they were selected/hired.

Program Supervisor - Annette Rodriguez | Compliance Reporting – Anita Monoian, CEO

15. Will you be collaborating with other programs/agencies to complete the project/program for which you are seeking funding? (0-4 pts)

Upload any MOU's or Letters of Support relating to your project.

YNHS collaborates with many agencies in most programs and projects including, but not limited to; Yakima Housing Authority, private landlords, etc. for housing needs. For support services, YNHS rely on the expertise of Triumph Treatment Services and the YWCA of Yakima for clients with Chemical Dependency and Domestic Violence issues. YNHS also collaborates with the workforce, housing, and transportation systems to make employment an essential component of their supportive housing programs and projects.

YNHS is an access point for coordinated entry, and as a result, are working with all agencies who are participating in coordinated entry to identify the most vulnerable in the community in order to prioritize them for housing.

Additionally, YNHS has been an early adopter of HMIS data and processes and continues to promote the shared enterprise of a county-wide HMIS database. Yakima County HMIS providers share one database so they can share and see what services homeless residents in Yakima County are receiving, and are able to coordinate services among the providers.

Letters of support from Entrust Employment Services, City of Yakima, Catholic Charities, Noah's Ark, Justice Housing Yakima, La Casa Hogar and Home Street Bank are attached.

FISCAL MANAGEMENT

16. Please describe how the organization will assure proper use and safeguarding of public funds. Does your organization have policies and procedures regarding the financial operations of the organization? (0-4 pts)

YNHS has a sound set of financial policies and procedures that are approved by the Board of Directors and are reviewed annually.

17. Have recent reviews or audits of the organization by a certified public accountant (CPA) or other financial professional identified weaknesses or findings in the organization's financial internal controls? Please explain below: (0-4 pts)

Please provide a copy of your most recent audited financial statements under the Documents tab and provide an explanation below of how the organization has resolved any negative findings identified in the report.

In Fiscal Year 2016, there were no audit findings by the CPA Firm who conducted the audit. See more information in next question.

18. Please describe your organization's current and anticipated financial condition: (0-4 pts)

If the organization is facing financial challenges, describe what steps are being taken to strengthen the organization's financial condition.

The financial position is strong. Due to the complexities of health care billing function, there are ebbs and flows, however the longer-term prospect (mid-2017 onward) is very good. YNHS expects the Medicaid and Medicare services in this industry will continue to position YNHS in a sound place servicing a population that provides stable funding. 80% of YNHS revenue comes from patient fees, and 80% of those fees are generated from Medicaid patients (mostly through managed care contacts). The advent of the Affordable Care Act has strengthened the organization's abilities to respond to the health care needs in our communities. Additionally, YNHS' federal funding is largely a grant from the Bureau of Primary Health Care Public Health Service Act section 330. This supports the cost of health care services provided to the uninsured. This program has been strongly bipartisan supported for many years and continues to enjoy broad support.

Regarding recent reviews (no space allotted in previous question), the Bureau of Primary Health Care (BPHC) evaluates processes every three years, and YNHS has met all 19 of the BPHC's 19 program requirements. In the previous year (FY2015), there was one deficiency noted (not a material weakness), where YNHS billed a federal grant for a payroll period that crossed over into the new grant year. YNHS developed a procedure that clearly outlines its year end grant draw down process. This process requires a review by management of grant funds and related draw downs, so as to guarantee funds are drawn from the appropriate grant cycle.

19. Describe the organization's fiscal management systems. (0-4 pts)

YNHS uses an electronic financial accounting system called "Profund", and has used this system for more than a decade. YNHS has a staff of five accountants, supervised by a controller who has been with YNHS for 9 years and who manage the daily business of the organization, and a contracted CFO, who has been with YNHS for 16 years and has 24 years of experience in this industry. YNHS also has an electronic practice management system, which provides for electronic billing and collection of patient claims, as well as cash management. YNHS produces monthly financial statements and a Financial and Operational dashboard report that is presented on a timely basis to the CEO, Deputy Director and the Board of Directors. Month over month and actual to budget variances are noted and explained. There variances are not just related to financial statement variances, but also variances of key agency indicators, such as productivity by provider, health services payor mix, days in accounts receivable, as well as others.

Additionally, the auditors review internal controls annually, the Bureau of Primary Health Care, which is a major source of federal funding, reviews policies and procedures once every three years. YNHS has successfully met these review requirements. YNHS has developed time and attendance, tracking processes and recording of revenues and expenses to meet federal grant requirements.

20. What additional dollars are you leveraging for the project/program and what would be the impact of not receiving full funding for the project? (0-4 pts)

Capital funds for the Community Services Resource Center will be matched by \$2.3 million from the Housing Trust Fund, and a significant investment from YNHS.

YNHS leverages several sources of funding to maximize a comprehensive range of services to clients in our communities. Agency wide, YNHS is leveraging the following funding: HUD McKinney funding provides 65 units of permanent supportive housing, along with case management (approximately \$387,000 annually). The Yakima Housing Authority provides ten "look-alike" subsidized housing units for families who were previously supported by the Washington Families Fund, which YNHS continues to support (housing valued at \$90,000 per year, case management value of \$45,000 annually).

The YVCOG funding provides the necessary funding gap to complete our holistic approach to service the population in Yakima County. YNHS will value any funding YVCOG is able to provide to the Community Services Resource Center. Question 30 did not have the space available to answer the questions about priorities for partial funding:

- Priority 1 – Furnishings - \$230,000
- Priority 2 – Sprinkler System - \$70,000

21. How are you going to determine and document client eligibility for your proposed project? (0-2 pts)

The CSRC will use the following methods to determine and document eligibility based on their current circumstances:

- Street (Those who are permanently camping; do not have a home; those who state they live on the street or in their cars; those living in abandoned buildings or other structures not meant for human habitation)
 - o Signed and dated statements validating situation on letterhead from outreach workers and/or organizations that assisted the person in the recent past OR
 - o Written verification signed and dated on letterhead from referring social service organization or outreach worker providing information regarding where the person has been residing OR
 - o Verification from Homeless Network member known by YNHS staff with first-hand knowledge of client situation.
 - o Documentation already verified in Yakima County HMIS System.
- Literally Homeless (Continually Homeless 1 Year or 4 Episodes in 3 Years that add up to 1 year):
 - o Verification signed and dated on shelter letterhead.
 - o Shelter's bed-night roster.
 - o Verification from Homeless Network member known by YNHS staff with first-hand knowledge of client situation.
 - o Documentation already verified in Yakima County HMIS System.
- From Transitional Housing:
 - o Written verification from Transitional Housing provider, showing date client entered transitional housing and verifying client was previously homeless.
 - o Verification from Homeless Network member known by YNHS staff with first-hand knowledge of client situation.
 - o Documentation already verified in Yakima County HMIS System.
- Institutions / Treatment Centers: (must have been homeless prior to being institutionalized):
 - o Written, signed and dated verification on letterhead from institution's staff that participant is being discharged without housing and lacks resources to obtain housing.
 - o Verification from Homeless Network member known by YNHS staff with first-hand knowledge of client situation.
 - o Documentation already verified in Yakima County HMIS System.

22. Indicate the population(s) served: (0-2 pts)

Select all that apply. Refer to Library for definitions and additional information.

- Low Income Households (<80% AMI)
- Very Low-Income Households (<50% AMI)
- Extremely Low-Income Households (<30% AMI)
- Homeless Individuals
- Homeless Families with Children
- Households at Risk of Homelessness
- Special Needs Populations (Veterans, DD, CD, MI, DV)
- Homeless Youth/Young Adults
- Chronically Homeless

23. Indicate if Funding Requested is to:

- Fund a Current Program

- Expand an Established Program
- Start a New Program

PROJECT/PROGRAM SPECIFIC INFORMATION

24. PLEASE INDICATE THE PROJECT OR PROGRAM TYPE FOR WHICH YOU ARE SUBMITTING THIS APPLICATION:

Please choose only one. If you are requesting funding from more than one of the following choices, you must submit a separate application for each. Disregard number sequencing, as different questions will be omitted depending on your answer below:

- Capital Improvement Project - Questions #25-33
- Community Investment Project (CIP) - Questions #34 & 35
- Rapid Re-Housing/Rent Assistance - Questions #36 & 37
- Operations & Maintenance - Question #36
- Emergency Shelter - Questions #38-40

25. Indicate the Program Type:

For Capital Improvements only. Select all that apply.

- Permanent Supportive Housing: Acquisition
- Permanent Supportive Housing Rehabilitation
- Permanent Supportive Housing: New Construction
- Affordable Housing: Rental Housing
- Affordable Housing: Rehabilitation
- Affordable Housing: Acquisition
- Affordable Housing: New Construction
- Affordable Housing: Home Ownership
- Transitional Housing with Services
- Other:
- Not Applicable

26. Do you have site control? (0-1 pt)

Please attach documentation showing site control.

- Yes
- No
- Other:

27. Does proposed use comply with zoning code? (0-1 pt)

If yes, please attach supporting documentation including any correspondence with the jurisdiction in which you intend to operate.

- Yes
- No
- Other:

28. Is this a phased project?

No – anticipated project completion date is in the Fall of 2018.

29. Describe in detail your plan for overcoming barriers and achieving a timely and successful completion of the project: (0-2 pts)

If funded, it is expected that the project will begin within 90 days of being issued a fully executed contract and completed within 12 months.

YNHS has secured the Office of Rural and Farmworker Housing (ORFH) as the Developer for this project. ORFH has a long history providing expertise across the state providing direct, comprehensive development services to local nonprofit

corporations, housing authorities, growers/employers and other organizations and individuals interested in developing new or preserving existing affordable housing. Areas of expertise include:

- Market analyses of local housing need and demand and analyses of local agricultural trends.
- Land assembly, including site inventories and feasibility analyses of suitable parcels, purchase negotiations, preparing option/purchase agreements and environmental assessments.
- Applications/negotiations for construction and permanent financing from public and private sources.
- Assistance with loan closing, construction processing, project closeout and other owner responsibilities in the development process.
- Low interest pre-development loans for land options, architectural work, surveys, soil testing and other costs incurred prior to closing on construction/permanent financing.
- Management assistance and training to assure long-term viability.
- ORFH offers all the necessary services to obtain capital financing and assure the quality of housing construction and property management.

YNHS plan on overcoming barrier and achieving a timely and successful completion of the project (beginning within 90 days and completion with 12 months of a fully executed contract) is to rely on the expertise and experience of their Developer – ORFH.

30. Can your project be partially funded?

If yes, identify your priority items and amounts, indicating what accomplishments/phases could be completed and accomplishments that can expect to be completed from partial funding.

| | |
|---|---|
| <input type="text" value="230000"/> | Priority 1 |
| <input type="text" value="70000"/> | Priority 2 |
| <input type="text" value="None"/> | Priority 3 |
| <input type="text" value="None"/> | Priority 4 |
| <input type="text" value="N/A"/> | Not Applicable - Project cannot be partially funded |
| <input type="text" value="300,000.00"/> | TOTAL |

31. Describe your current plan for completing this project, including responsible parties, phase dates, and all sources of funds.

If other funds are committed, please upload a letter of commitment from the identified funding source(s) under the Documents tab.

Rehabilitation is on track to begin in September 2017 and the targeted completion date is in Fall of 2018. This is not a phased project. YNHS plan timely and successful completion of the project (beginning within 90 days and completion with 12 months of a fully executed contract) is to rely on the expertise and experience of their Developer – the Office of Rural and Farmworker Housing.

The responsible parties include the following:

- Developer – The Office of Rural and Farmworker Housing (ORFH): ORFH has a long history providing expertise across the state providing direct, comprehensive development services to local nonprofit corporations, housing authorities, growers/employers and other organizations and individuals interested in developing new or preserving existing affordable housing.
- Contractor – Kitt Construction & Development, LLC: This organization has multiple years of construction management in the community which has included remodels and new construction projects in a variety of industries including; agricultural, medical, dental, financial, and commercial projects.
- Architect – Studied Impact Design: The identified Architect Studied Impact Design provides high quality and environmentally conscious architecture and design services. They have a history of smart and integrated actions to economically minimize the impact that their designs have on the natural environment, while producing energy and cost savings to project owners.

32. Are owners or residential or business tenants currently occupying the site. If applicable, will anyone be required to move, either temporarily or permanently, as a result of this project? How will you manage relocation? (0-2 pts)

No - not applicable.

33. If an Environmental Review (ER) has been commenced or completed, please indicate the name of the firm that conducted the ER, the type of review conducted and date of review, and the determination of that ER: (0-1 pt)

Please read the Environmental Review criteria in the Library for more information. If available, upload the existing ER, any completed assessments, as well as any other information regarding the environmental condition of project site.

Steve Wing, Environmental Professions, from BMEC Inc. conducted the Phase 1 Site Assessment on August 1, 2016. The Phase 1 Site Assessment has been uploaded to Dropbox due to size per instructions from William Denton 4/29/2017.

This assessment has revealed no evidence of Recognized Environmental Conditions in connection with the property with the exception of the following:

- According to the OSHA Asbestos Construction Standard (29 CFR 1926.1101), building owners and employers are required to identify the potential asbestos hazards within their pre-1989 facilities, and provide that information upon request to employees that may work near those hazards. During the on-site inspection, various suspect asbestos-containing materials building materials were observed. Also, the building itself was initially constructed in 1957. As defined in NESHAP 61.141, the observed materials may be classified as regulated asbestos-containing materials, and prior to demolition, renovation, or any other activity that may disturb these materials, either an inspection should be performed by an AHERA accredited Building Inspector or the materials should be handled as asbestos-containing.
- Effective June 3, 1993, the Lead in Construction Standard codified in 29 CFR 1926.62 applies to sources or potential sources of lead exposure present in an "employment-related" context. The trigger mechanism for application of the standard is an activity that by its inherent nature may cause exposure to lead. Therefore, within the content of regulatory compliance for OSHA, the subject property did not appear to require further response to suspect lead-based paint. However, prior to renovation, demolition, or any activity that will cause a disturbance of any suspect lead-based paint, sampling to determine lead content is recommended.

Joan Davenport, SEPA Responsible Official, with the City of Yakima - Department of Community Development – Planning Division, conducted a Type 2 Review, Administrative Adjustment, and State Environmental Policy Act (SEPA) on March 27, 2017. The Determination letter has been uploaded as an attachment stating that there was an issuance of a Determination of Non-Significance (DNS), which was not appealed during the following 14-day appeal period that ended April 10, 2017. As stated in the attachment, this determination was made after review of a completed environmental checklist and other information on file with the lead agency. This checklist was not available at the time of submission and one has been recreated using the provided template. The original will be available upon request.

This assessment has determined that this project does not have a probable significant adverse impact on the environment and that an environmental impact statement is not required under RCW 43.21C.030(2)(c).

34. Indicate the Priority Goal for the Funding being requested:

-answer not presented because of the answer to #24-

35. Indicate the number of and briefly describe the roles of volunteers needed to help achieve Program objectives and outcomes: (0-1 pt)

-answer not presented because of the answer to #24-

36. Will your program participate in Coordinated Entry? (0-1)

-answer not presented because of the answer to #24-

37. Indicate the type of program you will implement:

-answer not presented because of the answer to #24-

38. Complete the table below. Attach additional documentation or explanation as needed under the 'Documents' tab. (0-4 pts)

-answer not presented because of the answer to #24-

39. Have you operated an Emergency Shelter program before? (0-1 pt)

-answer not presented because of the answer to #24-

40. Are you providing any additional services other than overnight shelter? (0-4 pts)

If so, please describe:

Budget

| CAPITAL IMPROVEMENT PROJECT BUDGET | Responsible Parties, Methods | This Request | Other Federal | State/Local | Private or Other | TOTAL |
|---|------------------------------|----------------------|----------------|------------------------|------------------------|----------------|
| Design & Inspection | | | | | \$ 250,000.00 | \$ 0.00 |
| Project Manager/Consultants | | | | | \$ 200,000.00 | \$ 0.00 |
| Relocation Costs (if applicable) | | | | | | \$ 0.00 |
| Title Insurance | | | | | | \$ 0.00 |
| Environmental Review | | | | | \$ 25,000.00 | \$ 0.00 |
| Permits & Fees | | | | | | \$ 0.00 |
| Land Acquisition | | | | | \$ 585,000.00 | \$ 0.00 |
| Site Development & Landscape | | | | \$ 2,300,000.00 | | \$ 0.00 |
| Utilities | | | | | | \$ 0.00 |
| Spinklers and Furnishings: | | \$ 300,000.00 | | | | \$ 0.00 |
| Total | \$ 0.00 | \$ 300,000.00 | \$ 0.00 | \$ 2,300,000.00 | \$ 1,060,000.00 | \$ 0.00 |

| ALL OTHER PROGRAM TYPES BUDGET | CIP Funding | Rapid Re-Housing/Rental Assistance Funding | Operations & Maintenance Funding | Emergency Shelter Funding | Private or Other Funding |
|--|----------------|--|----------------------------------|---------------------------|--------------------------|
| Personnel Costs | | | | | |
| Case Management Costs | | | | | |
| Rent/Mortgage | | | | | |
| Insurance | | | | | |
| Operating Supplies (phone, printing/copying, etc.) | | | | | |
| Facilities | | | | | |
| Equipment | | | | | |
| Transportation | | | | | |
| Utilities | | | | | |
| Rental Assistance | | | | | |
| Services | | | | | |
| Administrative Costs | | | | | |
| Indirect Costs | | | | | |
| In-Kind Donations | | | | | |
| Other: | | | | | |
| Total | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 |

Budget Narrative

Responsible parties are listed below in the narrative as the Budget form would only allow numbers. Total project cost is \$3,660,000. Budgeted amounts are based on actual and estimated costs as determined by the Site Developer, Contractor, and Architect.

- Design & Inspection line item is match provided by YNHS
- Project Manager/Consultants line item is match provided by YNHS
- Environmental Review line item is match provided by YNHS
- Land Acquisition line item is match provided by YNHS
- Site Development and Landscape includes the Hard Construction costs for the Building Rehabilitation and landscaping to ensure the site beautifies the neighborhood and screens the area from street.
- Sprinkler System line item cost is based on estimate provided by the Contractor, Kitt Construction & Development, LLC.
- Furnishings (Beds, Mattresses, dressers, dining tables, chairs for residents) line item cost is based on estimate provided by the Contractor, Kitt Construction & Development, LLC to have appropriate furnishings for 5 units and 40 residents.

The International Association of Certified Home Inspectors estimate the Life Expectancy of sprinkler systems (specifically sprinkler heads) to be 10-14 years. By assigning the low-end of the scale to the furnishing and assuming the assets purchased with these funds last seven years – a high estimated cost per client for Community Services Resource Center is \$1,071 per individual (\$300,000/(40 individuals x 7 years).

Logic Models

ALL OTHER PROGRAM TYPES LOGIC MODEL

| PROGRAM PLAN, OUTCOME PLAN & MEASUREMENT PLAN | Program Plan: Inputs- What we have) | Program Plan: Activities- What we do) | Program Plan: Target Group (Who we serve) | Outcome Plan: What we will accomplish (and how we will measure it) after 6 months and after | Measurement Plan: Key Measurements and Measurement Tools (How we will know) |
|---|-------------------------------------|---------------------------------------|---|---|---|
| At 6 months | | | | | |
| At 12 months | | | | | |

ALL OTHER PROGRAM TYPES LOGIC MODEL

| PROGRAM PLAN, OUTCOME PLAN & MEASUREMENT PLAN | Program Plan: Inputs- What we have) | Program Plan: Activities- What we do) | Program Plan: Target Group (Who we serve) | Outcome Plan: What we will accomplish (and how we will measure it) after 6 months and after | Measurement Plan: Key Measurements and Measurement Tools (How we will know) |
|---|-------------------------------------|---------------------------------------|---|---|---|
| At 6 months | | | | | |
| At 12 months | | | | | |

Documents

Documents Requested *

Commitment letters for all leveraged funds/Letters of Support

Required? Attached Documents *



[LOS Catholic Charities](#)

[LOS City of Yakima](#)

[LOS Entrust](#)

[LOS Home Street Bank](#)

[LOS Justice Housing Yakima](#)

[LOS La Casa Hogar](#)

| | | |
|---|---|--|
| | | LOS Noah's Ark |
| Verification and Signature download template | ✓ | Verification and Signature |
| Project Map/Program Service Area | | Map of service area FEMA Map Map of Airport and Railroads Map of 4 lane roads and highways Map of Hospital schools and parks |
| For Non-Profits: IRS Form 990 | ✓ | IRS Form 990 |
| For Non-Profits: Board Documentation (List of Board Members, Charter, ByLaws) | ✓ | List of Board Members Bylaws |
| For Non-Profits: 501(c)3 Tax Exempt Letter | ✓ | IRS tax exempt status Tax ID Certification |
| General Liability Insurance Certificate | ✓ | General Liability Insurance Certificate |
| Agency's Audit Report for the most recent Fiscal Year | ✓ | Audit Report for the most recent Fiscal Year |
| Purchase or Option Agreement (if applicable) | | Proof of Ownership |
| Uniform Relocation Act (URA) compliance Documentation (if applicable) | | |
| Project Management Capacity Documentation (if applicable) | | |
| Environmental Review Checklist and Other Information/Documentation (if applicable/available) download template | | Environmental Review Checklist SEPA and Zoning Findings of Fact Zoning letter for 201 S 6th St Environmental Site Assessment, Phase I |
| Other (Photos, program brochure, etc.) | | Program Supervisor - Annette Rodriguez Compliance Reporting – Anita Monoian, CEO |

* ZoomGrants™ is not responsible for the content of uploaded documents.

Application ID: 80870

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