Housing Assistance Program (HAP)

The Housing Assistance Program (HAP) is funding and programming for housing and supportive services for homeless individuals and families. The HUD Continuum of Care (COC) must be the lead agency for each HAP application. The lead agency will distribute funds to sub-recipients within their system. The State will coordinate contracts, payments, and compliance with the lead agency. The lead agency must completely respond to all parts of the Application to describe how the COC would use HAP funds. Each sub-recipient must complete a HAP Sub-Recipient Application.  
  
Funding

$300,000 is available for HAP in 2019-2020, allocated as follows:

|  |  |
| --- | --- |
| **HUD COC** | **Allocation** |
| Balance of State COC | $175,000 |
| Madison COC | $50,000 |
| Milwaukee COC | $50,000 |
| Racine COC | $25,000 |

**Eligible Sub-Recipients**

Eligible sub-recipients must:

* Be a city, county, tribal agency, private non-profit agency, or for-profit corporation that is both organized under Chapter 180 in Wisconsin and in good standing;
  + Private non-profit agencies must also:
    - Be exempted from taxation under Subtitle A of Section 501(c) of the Internal Revenue Code;
    - Be governed by a voluntary board of directors;
    - Use approved accounting systems;
    - Practice nondiscrimination in the provision of assistance;
* Use HMIS (or an HMIS-equivalent database for victim services agencies) to record client data;
* Use grant funds to support a housing program that does all of the following:
  + Subsidizes only existing buildings;
  + Subsidizes only units which meet Habitability Standards;
  + Facilitates appropriate case management and supportive services;
  + Requires that at least 25% of participants’ income be spent on rent;

**Eligible Activities**

* **Services**: Case Management, Child Care, Education Services, Employment Assistance, Outpatient Health Services, Life Skills Training, Mental Health Services, Substance Abuse Treatment, and Transportation
* **Operations**: Maintenance, Rent, Security and Insurance, Utilities, Food, Furnishings and Supplies
* **Administration**: Up to 10% of each total grant may be spent on administrative costs. These are defined as non-program expenses incurred by the grantee in the course of providing services to program participants. They include but are not limited to clerical, office, printing, mailing, travel, training, accounting, auditing, and reporting expenses.

# HAP Lead Applicant Application

# Part 1: Lead Applicant Information

|  |  |
| --- | --- |
| Legal Name of Lead Applicant: |  |
| DUNS Number: |  |
| Mailing Address: |  |
| Address for Reimbursement (check payable to): |  |
| Individual Authorized to Sign Grant Agreement and Title: |  |
| Lead Contact and Title: |  |
| Contact Phone Number: |  |
| Contact Email Address: |  |
| Name of Local Continuum of Care: |  |
| All Counties Served: |  |

***Official Authorized to Commit Applicant Organization to this Agreement***

|  |  |
| --- | --- |
| **Print Name & Title** |  |
| **Signature & Date** |  |

**Part 2: Consolidated Budget**

List each agency and all of the activities (administration, services, or operations) and amounts for which they are requesting funds. Add more rows as necessary.

|  |  |  |
| --- | --- | --- |
| **Agency** | **Activity (Services, Operations, or Admin)** | **Funding Request** |
|  |  | $ |
|  |  | $ |
|  |  | $ |
|  |  | $ |
|  |  | $ |
|  |  | $ |
| **Total Funding Request** | | $ |

**Part 3: Lead Agency Responsibilities**

|  |  |
| --- | --- |
| **By writing “YES” the Lead Agency confirms that it will:** | **Yes/No** |
| 1. Collect and review invoices from sub-recipients to ensure proper payment requests. |  |
| 1. Work with the Division of Energy, Housing, and Community Resources (DEHCR) to resolve disallowed invoices or payments and ensure funds are spent in an appropriate manner within the agreed upon budget. |  |
| 1. Ensure timely payment disbursement to sub-recipients. |  |
| 1. Issue agreements or contracts with each sub-recipient laying out expectations regarding matters such as use of grant funds, monitoring expectations, payment request, and eligible activities. |  |
| 1. Collect and ensure timely submission of all reports required by DEHCR in the grant agreement. |  |
| 1. At least once during the grant agreement period, perform a desk or site monitoring visit to ensure each sub-recipient meets obligations specified in the grant agreement and minimum fiscal standards such as maintenance of required insurance, proper financial standards, and adequate privacy and security controls. During this monitoring, the lead agency must also review documentation supporting reimbursement requests, such as invoices and timesheets, to ensure proper payment requests are being made. |  |
| 1. Cooperate with DEHCR regarding any other state or federal monitoring that is conducted. |  |
| 1. Before and during a scheduled DEHCR monitoring visit, facilitate the collection of requested information from sub-recipients for review and help with planning activities associated with the visit. |  |
| 1. Ensure that each sub-recipient meets Homeless Management Information System (HMIS) compliance standards. |  |
| 1. Halt payments and notify DEHCR immediately if contractual issues arise with the agency or a sub-recipient’s performance. |  |
| 1. Ensure that the process for allocating EHH funds locally is fair and transparent. |  |
| 1. Ensure that information such as new rules or income/rent limits is promptly passed along to sub-recipients. |  |
| 1. Notify DEHCR and the local continuum of care to which the agency belongs if there is a finding that may result in the forfeiture of funds or unresolved questioned costs in a financial audit. |  |
| 1. Facilitate communications and gatherings for sub-recipients, and participate fully in the local and HUD continua of care. |  |

**Part 4: Allocation Process**

Describe the process by which projects were chosen and funding was allocated. Describe how and by whom funding decisions were made and the various inputs used to inform the decisions such as other resources or analyses. List the names and agencies of the individuals who were responsible for the allocation.

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| --- |
| HAP Allocation Process |
|  |