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 2017 CoC Program grant competition.
- Additional training resources can be found on the HUD Exchange at https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/
- Program policy questions and problems related to completing the application in e-snaps may be directed to HUD the HUD Exchange Ask A Question
- Project applicants are required to have a Data Universal Numbering System (DUNS) 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 2017 CoC Program NOFA.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2017 CoC Program NOFA, including the General Section Technical Correction, and all requirements and criteria met.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with the instructions found on each individual screen
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps.
- 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 2017 CoC Program NOFA.

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: 09/22/2017
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: Clark County

b. Employer/Taxpayer Identification Number (EIN/TIN): 88-6000028

	c. Organizational DUNS:	083782953	PLUS 4	

d. Address

Street 1: 1600 Pinto Lane

Street 2:

City: Las Vegas

County: Clark

State: Nevada

Country: United States

Zip / Postal Code: 89106

e. Organizational Unit (optional)

Department Name: Department of Social Service

Division Name:

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

Prefix: Mrs.

First Name: Brooke

Middle Name:

Last Name: Page

Suffix:

Title: Assistant Manager

Organizational Affiliation: Clark County

Telephone Number: (702) 455-3704

Extension:

Fax Number: (702) 455-5950
Email: brooke.page@clarkcountynv.gov

1C. SF-424 Application Details

9. Type of Applicant:	B. County Government
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-6100-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):
(for multiple selections hold CTRL+Key) Nevada

15. Descriptive Title of Applicant's Project: CoC Planning Project 2017

16. Congressional District(s):

a. Applicant: NV-004, NV-003, NV-001

b. Project: NV-004, NV-003, NV-001
(for multiple selections hold CTRL+Key)

17. Proposed Project

a. Start Date: 07/01/2019

b. End Date: 06/30/2020

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?	b. Program is subject to E.O. 12372 but has not been selected by the State for review.
If "YES", enter the date this application was made available to the State for review:	
20. Is the Applicant delinquent on any Federal debt?	No
If "YES," provide an explanation:	

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: X

21. Authorized Representative

Prefix:	Mr.
First Name:	Michael
Middle Name:	J.
Last Name:	Pawlak
Suffix:	
Title:	Director
Telephone Number: (Format: 123-456-7890)	(702) 455-6584
Fax Number: (Format: 123-456-7890)	(702) 455-5950
Email:	mjp@clarkcountynv.gov
Signature of Authorized Representative:	Considered signed upon submission in e-snaps.
Date Signed:	09/22/2017

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - Form 2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2510-0011 (exp.11/30/2018)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name:	Clark County
Prefix:	Mr.
First Name:	Michael
Middle Name:	J.
Last Name:	Pawlak
Suffix:	
Title:	Director
Organizational Affiliation:	Clark County
Telephone Number:	(702) 455-6584
Extension:	
Email:	mjp@clarkcountynv.gov
City:	Las Vegas
County:	Clark
State:	Nevada
Country:	United States
Zip/Postal Code:	89106

2. Employer ID Number (EIN):	88-6000028
3. HUD Program:	Continuum of Care Program
4. Amount of HUD Assistance Requested/Received:	$392,857

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, city and state) of the project or activity: CoC Planning Project 2017 1600 Pinto Lane Las Vegas Nevada

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? (For further information, see 24 CFR Sec. 4.3). Yes

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
HUD	CoC Funding Grant	$5,704,526.00	rental assistance and supportive services for 5 projects
SAMHSA	GBHI Grant	$400,000.00	for outreach services to support PSH projects

Part III Interested Parties

You must disclose:
1. All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
2. any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds $50,000 or 10 percent of the assistance (whichever is lower).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation	Financial Interest in Project/Activity ($)	Financial Interest in Project/Activity (%)
NA	NA	NA	$0.00	0%

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 nondisclosure, is subject to civil money penalty not to exceed $10,000 for each violation.

I certify that this information is true and complete.

I AGREE: X

Name / Title of Authorized Official: Michael Pawlak, Director

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

Date Signed: 08/15/2017

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Clark County

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:		
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.	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 Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
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.	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;
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.;	g.	Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.
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;		

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

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)

Authorized Representative

Prefix:	Mr.
First Name:	Michael
Middle Name	J.
Last Name:	Pawlak
Suffix:	
Title:	Director
Telephone Number: (Format: 123-456-7890)	(702) 455-6584
Fax Number: (Format: 123-456-7890)	(702) 455-5950
Email:	mjp@clarkcountynv.gov
Signature of Authorized Representative:	Considered signed upon submission in e-snaps.
Date Signed:	09/22/2017

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:	X

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: Clark County

Name / Title of Authorized Official: Michael Pawlak, Director

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

Date Signed: 09/22/2017

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:	Clark County
Street 1:	1600 Pinto Lane
Street 2:	
City:	Las Vegas
County:	Clark
State:	Nevada
Country:	United States
Zip / Postal Code:	89106

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. [X]

Authorized Representative

Prefix:	Mr.
First Name:	Michael
Middle Name:	J.
Last Name:	Pawlak
Suffix:	
Title:	Director
Telephone Number: (Format: 123-456-7890)	(702) 455-6584
Fax Number: (Format: 123-456-7890)	(702) 455-5950
Email:	mjp@clarkcountynv.gov
Signature of Authorized Official:	Considered signed upon submission in e-snaps.
Date Signed:	09/22/2017

2A. Project Detail

1a. CoC Number and Name: NV-500 - Las Vegas/Clark County CoC

1b. Collaborative Applicant Name: Clark County Social Service

2. Project Name: CoC Planning Project 2017

3. 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 the provisions of 24 CFR 578.7.

Clark County Department of Social Service (CCSS), as the collaborative applicant of the Southern Nevada CoC, would like to continue to pursue activities to strengthen the Southern Nevada CoC in the areas of HUD Compliance and Coordination. Under HUD Compliance, the CoC will continue activities and process improvement towards coordinated intake for all subpopulations, perform an annual gaps analysis, and continual evaluation and refinement of the Southern Nevada Regional Plan to End Homelessness. Under Coordination, CCSS would like to continue providing evidence-based best practice training and capacity-building experiences for providers towards coordinated outreach, affinity of housing first, harm reduction, development and standardization of case management, and critical time intervention in service delivery. Coordination will also include measurement of efforts towards ending homelessness per the Federal goals in Opening Doors, developing and utilizing tools to track and measure coordinated outreach efforts, integration and tracking of by-name-lists, and building capacity for outreach teams.
This project would also include Project Monitoring activities to include monitoring of projects funded through the CoC and ESG to evaluate outcomes and performance. Creation of monitoring policies and standards will enhance oversight of the performance and heath of funded projects. Technical assistance will also be implemented for improved collection of data towards system performance measure, improving measurement of outcomes.
Also, this project will implement a third-party facilitation of the local continuum of care application process, including provision of training on scoring, ranking, and technical assistance towards building a strong and competitive consolidated application.

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

Upon notification of award, CCSS staff will work with local partners to determine suitable and qualified technical assistance vendors available to provide expertise during the period of the grant. During the time period between notification of award and receipt of the executed agreement, staff will work with the Southern Nevada Homelessness Continuum of Care Board (SNHCoC) Planning Working to assist in selection of vendors in anticipation of up-to-12 months of service delivery. Staff will work within County and State statutes and procedures towards securing qualified vendors to deliver the services. Staff will work closely with selected vendors on setting and meeting reasonable timelines, receive regular reporting from vendors on completion of tasks, review vendor invoices prior to payment.

3. How will the requested funds improve the CoC's ability to evaluate the

outcome of CoC and ESG projects?

With the assistance of capacity building and coordination activities under this planning grant, organizations will be able to improve the quality of their service delivery funded by the CoC and ESG. The CoC will also be able to conduct ongoing evaluation and monitoring of CoC and ESG projects by ensuring that the project scorecards are measuring the most relevant data elements and outcomes to determine project quality. This will also enhance the ability of SNHCoC Evaluation and Monitoring Working Groups to make data driven, outcome focused funding decisions, therefore improving the CoC's ability to fund and provide high quality, high producing and effective homeless service projects. This will also meet the needs of our community by reducing the length of time persons experience homelessness and reduce the recidivism rate of those returning to homelessness.

4. How will the planning activities continue beyond the expiration of HUD financial assistance?

CCSS staff will continue to lead planning activities in cooperation with the Southern Nevada Homelessness Continuum of Care Board and its Planning, Evaluation, Monitoring, HMIS and Community Engagement Working Groups towards remaining in compliance with HUD and the HEARTH Act, engaging partners and the public on issues related to homelessness, and improving coordination of a healthy homeless service delivery and response system in Southern Nevada.

3A. Governance and Operations

1. How often does the CoC conduct meetings of the full CoC membership? Semi-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:	X
Votes, including electing Coc Board:	X
Sits on CoC Board:	X
None:	

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

a. Written agendas of CoC meetings? Yes

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

c. Process for monitoring outcomes of ESG recipients? No

d. CoC policies and procedures? Yes

e. Written process for board selection? Yes

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

g. 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.

Committee Name	Role of the Committee (max 750 characters)	Meeting Frequency	Name of Individuals and/or Organizations Represented
Southern Nevada Homelessness Continuum of Care Board	Governance of regional activities related to homelessness	Monthly	4 City Governments,Clark County,CCSD,Business,Nonprofit Providers, LVFR, LVMPD, Touro University, VA, UNLV, SNAMHS, NHA,SNRHA, Nevada HAND, Faith Groups, Neighborhood Association, United Way of Southern Nevada, Formerly Homeless & Military Veterans
SNHCoC Evaluation Working Group	Evaluates performance and operations of the CoC, including input on the consolidated application	Monthly	Henderson,Las Vegas,North Las Vegas,Clark County,CCSD, DV Provider, LVMPD, VA, SNAMHS, NHA,SNRHA, Nevada HAND, Faith Group, Neighborhood Association,United Way of Southern Nevada, DWSS, Formerly Homeless
SNHCoC Planning Working Group	Oversees activities related to regional planning	Monthly	Henderson,Las Vegas,North Las Vegas,Clark County, Nonprofit Partners, Business Partners
SNHCoC Monitoring Working Group	Oversees activities related to monitoring of CoC projects and community service delivery	Monthly	Henderson,Las Vegas,North Las Vegas,Clark County, Nonprofit Partners, Business Partners
SNHCoC HMIS Working Group	Develop and compliance of governance related to HMIS	Monthly	Henderson, Las Vegas, Clark County, Nonprofit Partners

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:	$98,214
Total Value of In-Kind Commitments:	$0
Total Value of All Commitments:	$98,214

1. Does this project generate program income as described in 24 CFR 578.97 that will be used as Match for this grant? No

Match	Type	Source	Contributor	Date of Commitment	Value of Commitments
Yes	Cash	Government	CCSS Staff Salaries	08/24/2017	$98,214

Sources of Match Details

1. Will this commitment be used towards Match?	Yes
2. Type of commitment:	Cash
3. Type of source:	Government
4. Name the source of the commitment: (Be as specific as possible and include the office or grant program as applicable)	CCSS Staff Salaries
5. Date of Written Commitment:	08/24/2017
6. Value of Written Commitment:	$98,214

4B. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 30, 2019? 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	Capacity-building trainings to improve services delivery, coordination of service delivery and outreach	$67,857
2. Project Evaluation	On-site monitoring of CoC and ESG projects, technical assistance for corrective action and evaluation of system performance	$125,000
3. Project Monitoring Activities		
4. Participation in the Consolidated Plan		
5. CoC Application Activities	Facilitaiton of the local CoC competition process	$80,000
6. Determining Geographical Area to Be Served by the CoC		
7. Developing a CoC System		
8. HUD Compliance Activities	Coordinated intake evaluation and implementation, gaps analysis, needs assessment	$120,000
Total Costs Requested		$392,857
Cash Match		$98,214
In-Kind Match		$0
Total Match		$98,214
Total Budget		$491,071

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	Clark County Soci...	08/24/2017
2. Other Attachment(s)	No		

Attachment Details

Document Description: Clark County Social Service Match

Attachment Details

Document Description:

5B. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race,color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or

disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance.

It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

Additional for Rental Assistance Projects:

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

B. For non-Rental Assistance Projects Only.

20-Year Operation Rule.

For applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 20 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

1-Year Operation Rule.

For applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provided.

C. For Rental Assistance Only.

Supportive Services.

It will make available supportive services appropriate to the needs of the population served and equal in value to the aggregate amount of rental assistance funded by HUD for the full term of the rental assistance.

D. Explanation.

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall attach an explanation behind this page.

Name of Authorized Certifying Official: Michael Pawlak

Date: 09/22/2017

Title: Director

Applicant Organization: Clark County

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, ficticious, or fraudulent statements or claims may subject me to	X

criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001). ☐

6A. Submission Summary

Page	Last Updated
1A. SF-424 Application Type	No Input Required
1B. SF-424 Legal Applicant	No Input Required
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	09/07/2017
1E. SF-424 Compliance	08/24/2017
1F. SF-424 Declaration	08/24/2017
1G. HUD 2880	08/24/2017
1H. HUD 50070	08/24/2017
1I. Cert. Lobbying	08/24/2017
1J. SF-LLL	08/24/2017
2A. Project Detail	08/24/2017

2B. Description	09/07/2017
3A. Governance and Operations	08/24/2017
3B. Committees	09/07/2017
4A. Match	08/24/2017
4B. Funding Request	09/07/2017
5A. Attachment(s)	08/24/2017
5B. Certification	08/24/2017

Department of Social Service

Michael J. Pawlak, Director

Bobby J. Gordon, Assistant Director

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August 24, 2017

To Whom It May Concern,

Clark County Department of Social Service serves as the Collaborative Applicant for the Las Vegas/Clark County Continuum of Care (CoC), and serves as the fiduciary agent for the Southern Nevada Homelessness Continuum of Care Board. The Board serves the region covering five local government jurisdictions of Boulder City, Clark County, Henderson, Las Vegas, and North Las Vegas. I am pleased to offer support for the Southern Nevada Continuum of Care Planning Project.

Clark County Department of Social Service will provide $98,214 in staff salaries and benefits of those who work with our CoC and Board as cash match. Staff provides support to working groups of the Board whose efforts include monitoring of the outcomes and performance of the Continuum of Care and its associated projects, evaluation of projects with service and funding priorities of the CoC, and planning around local initiatives towards ending homelessness in our community.

We look forward to the opportunity to continue to enhance regional service delivery and coordination through effective tools to enrich our planning efforts.

Sincerely,

Michael J. Pawlak