

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 FY2013 CoC Program grant competition.
- Additional training resources can be found on the OneCPD Resource Exchange at <https://www.onecpd.info/e-snaps/guides/coc-program-competition-resources/>
- 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 2013 CoC NOFA.
- To ensure that applications are considered for funding, all sections of the FY 2013 CoC Program NOFA and the FY 2013 General Section NOFA, including the General Section Technical Correction, should be read carefully, and all requirements and criteria met.
- 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 the CoC Program interim rule (24 CFR part 578) and application requirements set forth in the FY 2013 CoC Program NOFA.

1A. Application Type

Instructions:

Type of Submission: This field is pre-populated and cannot be changed.

Type of Application: This field is pre-populated and cannot be changed.

Date Received: This field is pre-populated with the date on which the application is submitted and cannot be edited.

Applicant Identifier: Field intentionally left blank, cannot edit.

Federal Entity Identifier: Field intentionally left blank, cannot edit.

Federal Award Identifier: Field intentionally left blank, cannot edit.

Date Received by State: Field intentionally left blank, cannot edit.

State Application Identifier: Field intentionally left blank, cannot edit.

Additional Resources can be found at the OneCPD Resource Exchange:
<https://www.onecpd.info/e-snaps/guides/coc-program-competition-resources/>

1. Type of Submission:

2. Type of Application: CoC Planning Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 01/22/2014

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier

6. Date Received by State:

7. State Application Identifier:

1B. Legal Applicant

Instructions:

The information on this form is pre-populated from the Project Applicant Profile. If there are any discrepancies, or errors, click on "View Applicant Profile" from the left-menu bar, place the Project Applicant Profile in "edit" mode to correct the information.

When the update/correction has been completed, place the Project Applicant Profile in "complete" mode before clicking on "Back to FY 2013 UFA Costs Project Application" from the left-menu bar.

For further instructions on updating the Project Applicant Profile, review the "Project Applicant Profile" training document on the OneCPD Resource Exchange.

8. Applicant

a. Legal Name: Oswego County Opportunities, Inc.

b. Employer/Taxpayer Identification Number (EIN/TIN): 16-0979876

	c. Organizational DUNS:	091975847	PL US 4	
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d. Address

Street 1: 239 Oneida St.

Street 2:

City: Fulton

County: Oswego

State: New York

Country: United States

Zip / Postal Code: 13069

e. Organizational Unit (optional)

Department Name:

Division Name:

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

Prefix: Ms.

First Name: Sarah

Middle Name:

Last Name: Irland

Suffix:

Title: Deputy Executive Director

Organizational Affiliation: Oswego County Opportunities, Inc.

Telephone Number: (315) 598-4717

Extension: 1047

Fax Number: (315) 592-7533

Email: sirland@oco.org

1C. Application Details

Instructions:

The information on this form is pre-populated from the Project Applicant Profile. If there are any discrepancies, or errors, click on "View Applicant Profile" from the left-menu bar, place the Project Applicant Profile in "edit" mode to correct the information.

When the update/correction has been completed, place the Project Applicant Profile in "complete" mode before clicking on "Back to FY 2013 CoC Planning Project Application" from the left-menu bar.

For further instructions on updating the Project Applicant Profile, review the "Project Applicant Profile" training document on the OneCPD Resource Exchange.

9. Type of Applicant: M. Nonprofit with 501(c)(3) IRS Status (Other than Institution of Higher Education)

If "Other" please specify:

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-5700-N-31B

Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:

Title:

1D. Congressional District(s)

Instructions:

Areas Affected By Project: This field is required. Select the State(s) in which the proposed project will operate and serve the homeless.

Descriptive Title of Applicant's Project: This field is populated with the name entered on the Project form when the project application was initiated. To change the project name, click return to the Submission List and click on "Projects" on the left hand menu. Click on the magnifying glass next to the project name to edit.

Congressional District(s):

a. Applicant: This field is pre-populated from the Project Applicant Profile. Project applicants cannot modify the pre-populated data on this form. However, project applicants may modify the Project Applicant Profile in e-snaps to correct an error.

b. Project: This field is required. Select the congressional district(s) in which the project operates. For new projects, select the district(s) in which the project is expected to operate.

Proposed Project Start and End Dates: In this required field, indicate the operating start date and end date for the project. For new project applications, indicate the estimated operating start and end date of the project.

Estimated Funding: Fields intentionally left blank, cannot edit.

Additional Resources can be found at the OneCPD Resource Exchange:
<https://www.onecpd.info/e-snaps/guides/coc-program-competition-resources/>

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

15. Descriptive Title of Applicant's Project: CoC PLanning Application 2013

16. Congressional District(s):

a. Applicant: NY-024, NY-022

b. Project: NY-024, NY-022

(for multiple selections hold CTRL+Key)

17. Proposed Project

a. Start Date: 04/01/2014

b. End Date: 03/31/2015

18. Estimated Funding (\$)

- a. Federal:**
- b. Applicant:**
- c. State:**
- d. Local:**
- e. Other:**
- f. Program Income:**
- g. Total:**

1E. Compliance

Instructions:

Is Application Subject to Review by State Executive Order 12372 Process: In this required field, select the appropriate dropdown option that applies to the Applicant applying for homeless assistance funding. Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process.

Click the following link to access the lists of those States that have chosen to participate in the intergovernmental review process: http://www.whitehouse.gov/omb/grants_spoc

If the applicant is located in a state or U.S. territory that is required review by State Executive Order 12372, enter the date this application was made available to the State or U.S. territory for review.

Is the Applicant Delinquent on any Federal Debt: In this required field, select the appropriate dropdown option that applies to the project applicant. This question applies to the project applicant's organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans, and taxes.

If "Yes" is selected an explanation is required in the space provided on this screen.

Additional Resources can be found at the OneCPD Resource Exchange:
<https://www.onecpd.info/e-snaps/guides/coc-program-competition-resources/>

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. Declaration

Instructions:

The authorized person for the project applicant organization must agree to the declaration statement in order to proceed to the project application. The list of certifications and assurances are contained in the FY 2013 CoC Program NOFA (Section VI.A.1.b) and in the e-snaps Project Applicant Profile.

Authorized Representative: The authorized representative's information is pre-populated on this form from the Project Applicant Profile. A copy of the governing body's authorization for this person to sign the project application as the official representative must be on file in the applicant's office.

Additional Resources can be found at the OneCPD Resource Exchange:
<https://www.onecpd.info/e-snaps/guides/coc-program-competition-resources/>

All forms, 1A – 1F must be completed in full before the project applicant will have access to the Project Application in e-snaps.

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

I AGREE:

21. Authorized Representative

Prefix: Ms.

First Name: Diane

Middle Name:

Last Name: Cooper-Currier

Suffix: MSW

Title: Executive Director

Telephone Number: (315) 598-4717
(Format: 123-456-7890)

Fax Number: (315) 592-7533
(Format: 123-456-7890)

Email: dcurrier@oco.org

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

Date Signed: 01/22/2014

2A. Project Detail

Instructions:

CoC Number and Name: Select the number and name of the CoC that the project applicant – also the collaborative applicant – represents. This is the CoC that will submit the CoC Consolidated Application to HUD by the designated submission deadline.

CoC Applicant Name: Select the name of the CoC Applicant, also known as the Collaborative Applicant, from the dropdown. The selection should be the same as the project applicant for the CoC planning grant. In most cases, there will only be one name from which to choose; however, in the case of a Competing CoC, there may be more than one name from which to choose. Make sure to select the correct applicant name.

Project Name: This is pre-populated from the "Project" form and cannot be edited.

Component Type: This field is pre-populated with the value "CoC Planning Project Application" and cannot be edited.

Additional Resources can be found at the OneCPD Resource Exchange:
<https://www.onecpd.info/e-snaps/guides/coc-program-competition-resources/>

1a. CoC Number and Name: NY-509 - Oswego County CoC

1b. Collaborative Applicant Name: Oswego County Opportunities, Inc.

2. Project Name: CoC PLanning Application 2013

3. Component Type: CoC Planning Project Application

2B. Project Description

Instructions:

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: This is a required field. The project description must clearly describe the proposed planning activities that will be carried out by the CoC with these grant funds and how the CoC will ensure compliance with the provisions of 24 CFR 578.7.

2. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work: This is a required field. The description must clearly demonstrate the estimated schedule of implementing the proposed activities, the management plan in place to ensure timely start of the project if awarded, and a description of how the Collaborative Applicant will complete the proposed activities.

3. How will the requested funds improve the CoC's ability to evaluate the outcome of CoC and ESG projects: This is a required field. The narrative should include the Collaborative Applicant's increased capacity for evaluation, and how that capacity will allow for the evaluation of both CoC and ESG projects.

4. How will the planning activities continue beyond the expiration of HUD financial assistance: This is a required field. The narrative should provide a brief description of how the planning activities paid for by the grant funds might continue beyond the grant term listed in this application and without HUD funds.

Additional Resources can be found at the OneCPD Resource Exchange:
<https://www.onecpd.info/e-snaps/guides/coc-program-competition-resources/>

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.

The NY-509 CoC has established a set of By-Laws, a governance structure, Standards for Homeless Service Providers and Standards for Homeless Services Coordination. Additional formal processes need to be established. As a result of the funding received from this planning grant, the following goals will be achieved:

- 1) Develop systems for reporting program activities and outcomes from homeless service providers;
- 2) Conduct a needs and gaps analysis to update CoC Strategic Plan;
- 3) Develop centralized assessment process and including collection/compilation of key homeless data by all homeless providers;
- 4) Develop interagency partnership agreements;
- and 5) Develop HMIS Charter, Privacy standards in preparation for expanding HMIS for use by other service providers.

This project proposal is to support the aforementioned planning and coordination activities of the CoC to assure successful completion with the next 12 months.

The CoC Governing Board will oversee the coordination and planning activities related to this project proposal including: the formalization of interagency agreements, Partnership agreements with members of the CoC and homeless service providers and a gaps analysis for prevention and intervention services. The CoC Governing Board will secure the necessary resources to complete the above mentioned planning and coordination activities. The funding requested through this proposal will be used to pay personnel dedicated to work on the HMIS charter, agreements, procedures and planning/data collection activities. Funding will also offset copying, advertising other miscellaneous costs associated with these activities.

All CoC members will be partners in these activities and will work collaboratively with the CoC Governing Board to establish Memorandums and partnership agreements. Homeless Service providers throughout the CoC region will be critical when formalizing procedures for reporting and reviewing their program activities and outcomes to the CoC. CoC and other community partners will be involved in the planning activities including the needs and gaps analysis which will lead to an updated strategic plan.

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

The estimated schedule for the proposed activities is 12 months from the date funding is receive. The method for monitoring and managing the activities and measures laid out in this proposal include the use of a logic model. Oswego County Opportunities, Inc. the Collaborative lead and who is responsible for this funding, will use a Logic Model as a planning and management tool. This Logic Model is a grid that identifies the needs to be addressed, the expected outcome, the outcome measurement and time frame to be completed by, activities and objectives that lead to the achievement of the expected outcome and tools to measure progress towards the outcome. This Logic Model will be used by not only the Collaborative Agency, but also the CoC Governing Board to mark progress towards the expected outcomes. The Board will review this report at each Board meeting and discuss barriers that may potentially prevent an outcome from being achieved in the expected time frame.

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

While the Oswego County has been successful in establishing a governance structure, By Laws, Service and Coordination Standards, it has been a challenge to develop and organize systems of accountability and coordination without the fiscal resources to support staff time, development, implementation, research and other costs. It takes a great deal of time and resources to conduct a coordinated, collaborative community organizing activity towards ending homelessness. Progress to date has been a result of generous in-kind donations of staff time from CoC members. As a result, it has been a slow, labourous process to achieve the milestones that have been achieved. Accomplishment of the proposed goals will: 1) formalize a uniform data collection and reporting systems for homeless services. The CoC does not have a system wide HMIS. As a result, service providers are collecting different data which makes it difficult for the CoC to monitor progress. Currently, only the ESG provider submits data on individuals served, return to homelessness, mainstream benefit access, etc. Developing similar data points will assure homeless service providers are collecting and reporting similar data to the CoC and the CoC will realize improvements in monitoring provision of services, homeless numbers and impact on decreasing homelessness. Establishment of an HMIS charter will prepare the CoC as it expands the use of HMIS beyond the current ESG provider. This will clarify for CoC members, homeless providers and local county government the critical role HMIS has in monitoring, reporting, managing and mitigating homelessness. With partnership agreements in place, CoC members will understand their role and responsibilities as CoC members towards ending homelessness in Oswego County.

As a result of these systems being implemented, the Oswego County CoC will have established a solid, transparent foundation of systems and understanding which will increase its capacity to fulfill its role of coordinating, planning and monitoring efforts to end homelessness.

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

As a result of the activities proposed in this project application, the CoC will have established and implemented policies, procedures, structures and systems of accountability for the CoC, its partners and homeless service providers. These systems, once developed, will be the responsibility of the CoC Governing Board to maintain and oversee. Financial resources are needed to develop and implement these systems, but once established, will not require the amount of resources to maintain and update as required for their establishment. As a result, financial support for these specific activities will not be required. There will most likely be future coordination and planning activities the CoC may need to undertake. In this event, the CoC will look to its partners for financial support as well as local foundation support.

3A. Sources of Match/Leverage

Instructions:

Match and Leverage are two distinct categories of funds from other sources that will be used in conjunction with this project, if awarded. Match (cash or in-kind) must be used for eligible program costs only and must be equal to or greater than 25% of the total grant request for all eligible costs under the CoC Program interim rule with the exception of leasing costs. Leverage funds can be used for any program related costs and there is no minimum requirement; however, the determination of the CoC's leveraging score will be calculated using data from this form. Please review the CoC Program interim rule and the FY2013 CoC Program NOFA for more detailed information concerning Match and Leverage.

Will this commitment be used towards Match or Leverage? Select Match or Leverage to categorize each commitment being entered.

Type of Commitment: Select Cash (\$) or In-kind (non-cash) to denote the type of contribution that describes this match or leveraging commitment.

Type of source: Select Private or Government to denote the source of the contribution. The Neighborhood Stabilization Program (NSP) and HUD-VASH (VA Supportive Housing program) funds may be considered Government sources. Project applicants are encouraged to include funds from these sources, whenever possible. A CoC may receive a higher leveraging score if any of its project applicants identify NSP funds as a source of leverage for one or more projects.

Name the Source of the Commitment: (Be as specific as possible and include the office or grant program as applicable) Enter the name of the entity providing the contribution. It is important to provide as much detail as possible so that the local HUD office can quickly identify and approve of the commitment source.

Date of written commitment: Enter the date of the written contribution.

Value of written commitment: Enter the total dollar value of the contribution.

The values entered on each detailed Match/Leverage form will populate the form "3B. Funding Request." The Cash, In-Kind, and Total Match will also automatically populate the Summary budget where the 25% match minimum will be calculated and applied.

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

Summary for Match

Total Value of Cash Commitments:	\$1,000
Total Value of In-Kind Commitments:	\$1,000
Total Value of All Commitments:	\$2,000

Summary for Leverage

Total Value of Cash Commitments:	\$0
Total Value of In-Kind Commitments:	\$1,500
Total Value of All Commitments:	\$1,500

Match/ Leverage	Type	Source	Contributor	Date of Commitment	Value of Commitments
Match	Cash	Government	New York State De...	10/01/2013	\$1,000
Match	In-Kind	Private	Oswego County Opp...	01/22/2014	\$1,000
Leverage	In-Kind	Private	Oswego County Opp...	01/22/2014	\$1,500

Sources of Match Details

- 1. Will this commitment be used towards Match or Leverage?** Match
- 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)** New York State Dept. Of State Community Service Block Grant
- 5. Date of Written Commitment:** 10/01/2013
- 6. Value of Written Commitment:** \$1,000

Sources of Match Details

- 1. Will this commitment be used towards Match or Leverage?** Match
- 2. Type of Commitment:** In-Kind
- 3. Type of Source:** Private
- 4. Name the Source of the Commitment: (Be as specific as possible and include the office or grant program as applicable)** Oswego County Opportunities, Inc.
- 5. Date of Written Commitment:** 01/22/2014
- 6. Value of Written Commitment:** \$1,000

Sources of Match Details

- 1. Will this commitment be used towards Match or Leverage?** Leverage
- 2. Type of Commitment:** In-Kind

3. Type of Source: Private

4. Name the Source of the Commitment: (Be as specific as possible and include the office or grant program as applicable) Oswego County Opportunities, Inc. 4 employees participating in CoC meetings & SubCommittee meetings

5. Date of Written Commitment: 01/22/2014

6. Value of Written Commitment: \$1,500

3B. Funding Request

Instructions:

Is it feasible for the project to be under grant agreement by September 30, 2015: This is a required field. Select "Yes" or "No" to indicate if this project application is awarded if it will be in a position to begin operating by September 30, 2015. The FY 2013 HUD Appropriations Act requires HUD to obligate FY 2013 CoC Program funds by this date. If "No" is selected, or if the deadline is not met may result in the rejection of a grant or the recapture of conditionally awarded funds.

Select a grant term: This field is populated with the value "1 Year" and cannot be edited.

Eligible Costs: For items 1 through 8, enter a "Quantity AND Description" and amount of assistance for each activity for which funds are being requested. "Quantity AND Description" details should be thorough, and failure to enter adequate "Quantity AND Description" may result in conditions being placed on an award and a delay of grant funding. Once a "Quantity AND Description" and an amount have been entered into one or more of the items, click "Save" and e-snaps will total the assistance requested and determine the total Match amount required.

Total Costs Requested: This field is automatically calculated based total amount requested for each eligible cost.

Cash Match: This field is automatically populated. If it needs to be changed, return to form "3A. Sources of Match/Leverage" to make changes to this field.

In-Kind Match: This field is automatically populated. If it needs to be changed, return to form "3A. Sources of Match/Leverage" to make changes to this field.

Total Match: This field will automatically calculate the total combined value of the Cash and In-Kind Match. The total match must equal 25% of the request listed in the field "Total Eligible Costs Request" minus the amount requested for Leased Units and Leased Structures. There is no upper limit for Match. If an ineligible amount is entered, the system will report an error and prevent application submission. To correct an inadequate level of match, return to form "3A. Sources of Match/Leverage" to make changes.

Cash and In-Kind Match entered into the budget must qualify as eligible program expenses under the CoC program regulations. Compliance with eligibility requirements will be verified at grant agreement.

The Total Budget automatically calculates when you click the "Save" button.

Additional Resources can be found at the OneCPD Resource Exchange:
<https://www.onecpd.info/e-snaps/guides/coc-program-competition-resources/>

1. will it be feasible for the project to be under grant agreement by September 30, 2015? Yes

2. Select a grant term: 1 Year

A quantity AND description must be entered for each requested cost. Any cost without a quantity and a description will be removed from the budget.

Eligible Costs:	Quantity AND Description (max 400 characters)	Annual Assistance Requested (Applicant)
1. Coordination Activities	.05 FTE CoC Planning Coordinator: responsible for working with CoC to accomplish all goals identified in application: salary (\$3,100) & fringe (@ 32% = \$992) for a total of \$4,000 annually; copy costs @ \$.05 per copy X 1000 copies = \$50; office supplies including paper, flip charts, markers, etc. - \$264.00	\$4,564
2. Project Evaluation		
3. Project Monitoring Activities		
4. Participation in the Consolidated Plan		
5. CoC Application Activities		
6. Determining Geographical Area to Be Served by the CoC		
7. Developing a CoC System		
8. HUD Compliance Activities		
Total Costs Requested		\$4,564
Cash Match		\$1,000
In-Kind Match		\$1,000
Total Match		\$2,000
Total Budget		\$6,564

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

4A. Attachment(s)

Instructions:

Other Attachment(s): Attach any additional information supporting the project funding request.
Use a zip file to attach multiple documents.

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

Attachment Details

Document Description:

Attachment Details

Document Description:

4B. 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: Diane Cooper-Currier

Date: 01/22/2014

Title: Executive Director

Applicant Organization: Oswego County Opportunities, Inc.

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, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).

X

5A. Submission Summary

Page	Last Updated
1A. Application Type	No Input Required
1B. Legal Applicant	No Input Required
1C. Application Details	No Input Required
1D. Congressional District(s)	01/22/2014
1E. Compliance	01/17/2014
1F. Declaration	01/17/2014
2A. Project Detail	01/22/2014
2B. Description	01/22/2014
3A. Match/Leverage	01/22/2014
3B. Funding Request	01/22/2014
4A. Attachment(s)	No Input Required
4B. Certification	01/22/2014