



## HUD's 2006 Continuum of Care Homeless Assistance Programs Housing Inventory Chart Report

**Important Notes About This Data:** This report is based on information provided to HUD by Continuums of Care in the 2006 Continuum of Care application and has not been independently verified by HUD. CoCs were instructed to collect data for a point-in-time during the last week of January 2006. For inquiries about data reported by a specific Continuum of Care, please contact that jurisdiction directly. CoC contact information can be found on the HUD web site. In some cases, a community may have listed a program in the Housing Inventory Chart but did not provide sufficient information/detail for HUD to understand the number of beds/units available and the target population served. Those programs have been removed for the purposes of this report.

**CoC Number: NJ-516**

**CoC Name: Warren County CoC**

### Summary of all beds reported by Continuum of Care:

	Family Units	Family Beds	Indiv. Beds	Total Yr-Round Beds	Seasonal	Overflow / Voucher
<b>Emergency and Transitional Housing</b>	<b>16</b>	<b>36</b>	<b>11</b>	<b>47</b>	<b>0</b>	<b>2</b>
Emergency Shelter	15	30	0	30	0	2
Transitional Housing	1	6	11	17	n/a	n/a
<b>Permanent Supportive Housing*</b>	<b>0</b>	<b>0</b>	<b>10</b>	<b>10</b>	<b>n/a</b>	<b>n/a</b>
<b>Grand Total</b>	<b>16</b>	<b>36</b>	<b>21</b>	<b>57</b>	<b>0</b>	<b>2</b>

### CoC beds reported by Program Type:

#### Emergency Shelter for Families

Provider Name	Facility Name	Family Units	Family Beds	Individual Beds	Total Beds	Seasonal	Overflow / Voucher
DARCC	Morningside Shelter	15	30	0	30	0	2
<b>Total</b>		<b>15</b>	<b>30</b>	<b>0</b>	<b>30</b>	<b>0</b>	<b>2</b>

\*HUD's point-in-time count does not include persons or beds in permanent supportive housing as currently homeless.



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### Transitional Housing for Mixed Populations

Provider Name	Facility Name	Family Units	Family Beds	Individual Beds	Total Beds	Seasonal	Overflow / Voucher
D.A.R.C.C.	Dorothy Blake House	1	6	1	7	n/a	n/a
<b>Total</b>		<b>1</b>	<b>6</b>	<b>1</b>	<b>7</b>	<b>n/a</b>	<b>n/a</b>

### Transitional Housing for Single Individuals

Provider Name	Facility Name	Family Units	Family Beds	Individual Beds	Total Beds	Seasonal	Overflow / Voucher
Easter Seals	Transitional Housing	0	0	10	10	n/a	n/a
<b>Total</b>		<b>0</b>	<b>0</b>	<b>10</b>	<b>10</b>	<b>n/a</b>	<b>n/a</b>

### Permanent Supportive Housing for Single Individuals

Provider Name	Facility Name	Family Units	Family Beds	Individual Beds	Total Beds	Seasonal	Overflow / Voucher
Easter Seals	Oxford House	0	0	10	10	n/a	n/a
<b>Total</b>		<b>0</b>	<b>0</b>	<b>10</b>	<b>10</b>	<b>n/a</b>	<b>n/a</b>

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