



# **FY 2014-15 Comprehensive Housing Counseling Grant Application Training**

March 11, 2014

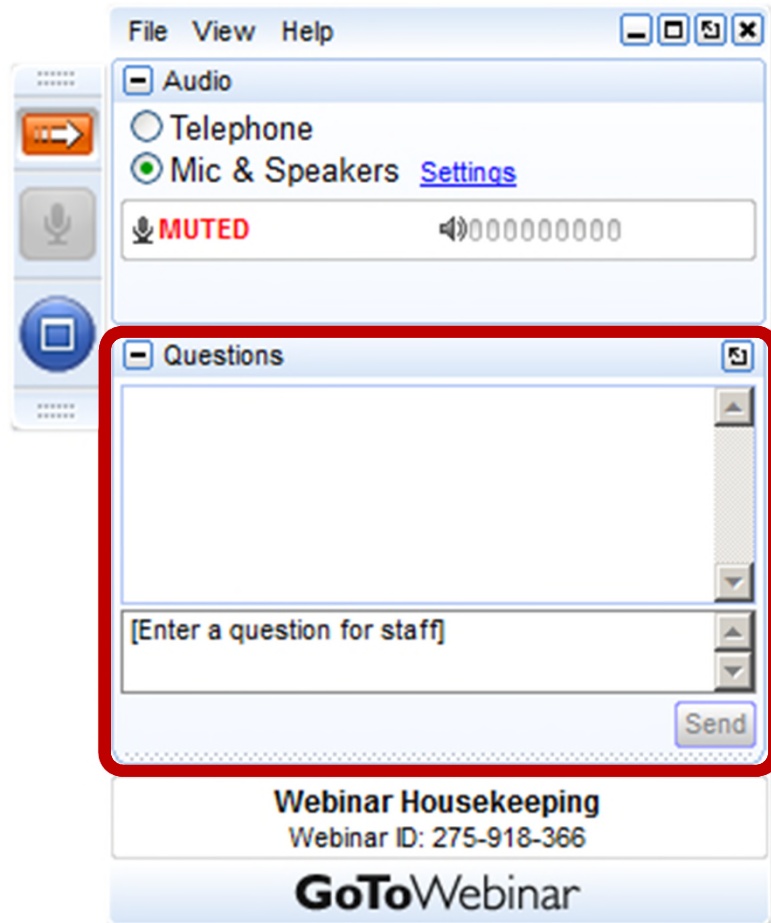


**FY 2014-15 Comprehensive Housing Counseling  
Grant Application Training  
Please call: 866-254-5937  
Participant Access Code: 320809  
to join the conference call portion of the webinar**

# Webinar Logistics

- Audio is being recorded. It will be available along with the PowerPoint at [www.hud.gov/housingcounseling](http://www.hud.gov/housingcounseling)
- Attendee lines will muted during presentation
- We will not be taking questions during the webinar but we do want you to ask them

# GoToWebinar: Ask Questions



## Your Participation

Please submit your text questions and comments using the Questions Panel.

You can also send questions and comments to

[housing.counseling@hud.gov](mailto:housing.counseling@hud.gov)

**Note:** Today's presentation is being recorded and will be provided within 48 hours. The replay information will be sent out via ListServ.

# Brief Survey

- Please complete the brief survey at the end of this session
- Your responses will help OHC better plan and present our webinars

# Opening Remarks

Brian Siebenlist, Director  
Office of Policy and  
Grant Management Administration  
Office of Housing Counseling

# Presenters

Stephanie Williams

Spry Baltz

Colleen Weiser

Anita Olson

Gail Osgood

John Olmstead

Office of Housing Counseling

# Stephanie Williams

## Presenter



# Agenda

- Changes to the application process
- Funding methodologies
- The Rating Factors
- Submission requirements and other technical issues
- Questions regarding specific program requirements go to:

[housing.counseling@hud.gov](mailto:housing.counseling@hud.gov)

# Preparing to Submit Application

- Properly registered through [www.grants.gov](http://www.grants.gov)
- System for Award Management (SAM)
  - a. Ensure registration has not expired
  - b. New agencies must register
  - c. Go to: [www.sam.gov](http://www.sam.gov) for more information

# Encouraging Networks of Counseling Agencies

- ✓ Increased support to State Housing Finance agencies and Intermediaries which manage sub-grantees/funded branches
- ✓ Encourage Local Housing Counseling Agencies to form partnerships with them
- ✓ Amount of grants to State Housing Finance Agencies and Intermediaries will depend in part on number of sub-grantees/funded branches the applicant proposes to fund

# NOFA Format

- Simplified Responses
  - ✓ Reduces time to prepare and score applications
  - ✓ Reduced emphasis on narrative responses
  - ✓ Increased emphasis on quantitative responses
- Series of charts in EXCEL for several NOFA rating factors
- Applicants DO NOT request a specific award amount

# SF424

Place \$1.00 in 18. Estimated Funding, A. Federal

| Application for Federal Assistance SF-424                                       |   |
|---|---|
| 16. Congressional Districts Of:   |   |
| * a. Applicant <input type="text"/>   | * b. Program/Project <input type="text"/>   |
| Attach an additional list of Program/Project Congressional Districts if needed. |   |
| <input type="text"/>  | <input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/> |
| 17. Proposed Project:   |   |
| * a. Start Date: <input type="text"/>   | * b. End Date: <input type="text"/>   |
| 18. Estimated Funding (\$):   |   |
| * a. Federal  | <input type="text" value="1.00"/>   |
| * b. Applicant  | <input type="text"/>  |
| * c. State  | <input type="text"/>  |
| * d. Local  | <input type="text"/>  |
| * e. Other  | <input type="text"/>  |
| * f. Program Income   | <input type="text"/>  |
| * g. TOTAL  | <input type="text" value="1.00"/>   |

# Award Information

- Housing Counseling Program funding has been provided by Congress in the amount of \$45,000,000
  - ✓ \$38.5 M for Comprehensive Housing Counseling Grants
  - ✓ \$2 M for Training Grants
  - ✓ \$4.5 M for Administration
- HUD reserves the right to establish maximum grant amounts awarded to any individual agency
- Initial period of performance is up to eighteen months assumed to be October 1, 2013 to March 31, 2015 (FY2015)

# Procedural Change

- HUD reserves the right to award both FY2014 and FY2015 funds on the basis of this single NOFA competition
- Applications received under this FY2014-FY2015 NOFA and the corresponding scores and funding methodology to make awards for FY2014
- HUD would use the same list and methodology to award FY2015 funds, when they become available, if appropriated

# Offsetting Expected Counseling Certification Costs

- Dodd-Frank Act requires HUD to test and certify housing counselors
- Final rule and its implementation date pending
- Should timing overlap with availability of funds under FY2014 NOFA, training, testing and certification expenses are eligible expenses



# Significant Funding Methodology Changes

- Successful applicants awarded a base grant amount determined by size and nature of counseling network
- Slight decrease in weighting of network size
- Increased emphasis on FTEs and network management activities with other relevant criteria

# Base Awards

- Base award for each Local Housing Counseling Agency that applies directly
- Award for LCHAs applying independently will not be calculated using the number of LHCA's Branches

# Base Awards Continued

- Total Base Award for Intermediaries, State Housing Finance Agencies and Multi State Organizations
  - ✓ For each sub-grantee or funded branch
  - ✓ Grantees will determine the actual funding amounts to be distributed to sub-grantee or funded branches

# Additional Funding

- **Competitive Funding Amount**
  - ✓ Percentage of highest scorers may receive incentive funding
- **Number of counselors FTEs**
  - ✓ Based on FTEs that provide direct housing counseling services as of September 30, 2013
- **Participation in unfunded or under-funded HUD-sponsored research or pilot programs**
  - ✓ Housing counseling-related activity
- **Funding to provide support to a network**
  - ✓ For Intermediaries, State Housing Finance Agencies or Multi State Organizations
- **Funding for reverse mortgage counseling**
  - ✓ Based on number of HUD HECM Roster Counselors to be funded

# “Double Dipping”

- Applicants are prohibited from accessing grant funds from multiple sources
  - ✓ Cannot be a direct grantee and sub-grantee
- Exceptions can be found in the NOFA under “Limits on Applicants”
  - ✓ Grantee with HUD HECM Roster Counselors that are awarded Comprehensive Funds indirectly from a State Housing Finance Agency or Intermediary AND Grantee receives a single additional sub-grant for reverse mortgage counseling from an Intermediary that provides reverse mortgage counseling exclusively
  - ✓ Grantee received grant funds AND a single additional sub-grant for default counseling from an Intermediary that provides default counseling exclusively

# Review and Selection Process

# Threshold & Eligibility Requirements

- Threshold requirements are outlined in the FY2014 General Section
- Eligibility Requirements are outlined in the NOFA
- ✓ All housing counseling agencies directly approved by HUD and State Housing Finance Agencies are eligible
- ✓ An agency that has not been approved but meets the qualifications for approval may affiliate with a State Housing Finance Agency or Intermediary

# Eligible Activities

- Agencies will only be reimbursed for the following activities described in the NOFA:
  - ✓ Individual Housing Counseling
  - ✓ Group Education/classes
  - ✓ Fair Housing education or counseling
  - ✓ Lead-Based Paint education or counseling
  - ✓ Marketing and Outreach Initiatives



# More Eligible Activities

- ✓ Training
- ✓ Quality assurance
- ✓ Computer equipment and computer systems
- ✓ Administrative costs
- ✓ Network management costs
- ✓ Capacity building
- ✓ Scam awareness, identification and reporting
- ✓ Indirect Costs, if applicable

Activities eligible for reimbursement must also be consistent with agency's Housing Counseling Work Plan

# Other Program/Grant Agreement Requirements

- The NOFA outlines these requirements and has the “Application Checklist” for required forms, certifications and assurances:
  - ✓ Independent Financial Audit: No earlier than fiscal year 2011; compliant with OMB A-133 audit filing requirements
  - ✓ Client Management System: Must utilize client management system acceptable to HUD and interfaces with HUD housing counseling system
  - ✓ Documentation of Expenses: Grantees and sub-grantees must maintain source documentation of costs

# Other Program/Grant

## Agreement Requirements (continued)

- ✓ Succession Plans: Grantees will have to execute a succession plan to ensure continuity of operations
- ✓ Personnel Activity Reports: Distribution of wages and salaries must be supported by Personnel Activity Reports
- ✓ Home Inspections Materials: Grantees must provide home inspection materials to pre-purchase/homebuyer education clients
- ✓ Affirmatively Further Fair Housing: HUD has a statutory duty to affirmatively further fair housing – HUD requires the same of its funding recipients

# Application Process

**DO NOT PDF CHARTS!**

# Charts and Narratives

- NOFA uses charts in EXCEL to summarize
- Grant application download at [www.grants.gov](http://www.grants.gov) two folders:
  - ✓ Downloaded Application Instructions
  - ✓ Download Application Package
- Charts are included in the zip folder labeled “Download Application Instructions” in an Excel document titled “HUD 9906 Housing Counseling Charts.xlsx”
- DO NOT PDF Charts!

# Charts and Narratives Continued

- Summary Table on Page 18 in NOFA:
  - ✓ Gives the points for each Rating Factor
  - ✓ Identifies charts and columns needing to be filled-out and when a narrative is required.
  - ✓ List the specific pages in the NOFA
  - ✓ DO NOT send Charts as a PDF!

**THIS IS AN IMPORTANT TOOL!**

# Charts and Narratives Continued

Look for the entire  
Summary Table  
on Page 18

| BONUS POINTS  |                                | POINTS | CHART  | SEPARATE NARRATIVE                     |
|---|--------------------------------|--------|--|--|
| Preferred Sustainable Communities Status              |                                | 2      | Chart A1 or A2 and, if applicable Chart A2a, Columns B-E           | N/A                                    |
| RATING FACTOR   |                                | POINTS | CHART  | SEPARATE NARRATIVE                     |
| Rating Factor 1. Capacity of the Applicant            |                                | 33     |  |  |
| Sub-factor 1  | Capacity                       | 20     | Chart A1 or A2 and, if applicable Chart A2a, Columns B-D, F-Q      | N/A                                    |
| Sub-factor 2  | Performance Reviews/Compliance | 7      | N/A  | N/A                                    |
| Sub-factor 3  | Measuring Client Satisfaction  | 6      | Chart A1 or A2 and, if applicable Chart A2a, Columns B-D, F-I, R-S | N/A                                    |
| Rating Factor 2. Need/ Departmental Policy Priorities |                                | 14     |  |  |
| Sub-factor 1  | Needs                          | 10     | Chart A1 or A2 and, if applicable Chart A2a, Columns B-D, F-I, T-V | Sub-factor 1d<br>(See page 21 of NOFA) |
|   |                                |        | Chart F, Columns A-C   |  |

# List of Charts

(Chart will be reviewed with each Rating Factor)

- **Chart A1/A2:** Applicant Characteristics, Rating Factors 1, 2, 3, and 5
- **Chart A.2a:** Sub-Grantee's Branches
- **Chart B:** Services and Modules, Rating Factor 3, Sub-factor 2(A)
- **Chart C:** Other HUD Programs, Rating Factor 3, Sub-factor 3(B)
- **Chart D:** Leveraging, Rating Factor 4
- **Chart E1/E2:** Budget, Rating Factor 3, Sub-factor 1(B)
- **Chart F:** Affirmatively Furthering Fair Housing, Rating 3
- **Chart G1/G2:** Oversight activities, Rating Factor 3, Sub-factors 1(c) and 2(b)



# General Instructions for Charts

- Ensure Applicant's Name is on each Chart, either in the columns or as a header as required
- Put an "X" for YES in the correct column
- Some columns will ask for a brief narrative to be added to a specific column

# Rating Factor 1

Spry Baltz

Presenter

# Chart A – Rating Factors 1, 2, 3 and 5

## CHART A1 -- LHCA CHARACTERISTICS

### RATING FACTORS 1, 2, 3 AND 5

| Rating Factor 1   |                     |   |  |   |   |   |   |   |   |  |                                    |  |                                 |                                     |   |   |                     |                          | Rating Factor 2        |                                      |  | Rating Factor 3 |   | Rating Factor 5  |                            |   |             |                              |  |                          |   |   |   |
|-------------------|---------------------|---|--|---|---|---|---|---|---|--|------------------------------------|--|---------------------------------|-------------------------------------|---|---|---------------------|--------------------------|------------------------|--------------------------------------|--|-----------------|---|--|----------------------------|---|-------------|------------------------------|--|--------------------------|---|---|---|
| B                 | C                   | D   | E  | F | G | H | I | J | K   | L  | M                                  | N  | O                               | P                                   | Q   | R   | S                   | T                        | U                      | V                                    | W  | X               | Y   | Z  | AA                         | AB  | AC          | AD                           | AE   | AF                       | AG  | AH  |   |
| Name of Applicant | Location City/State | Agency's HUD Housing Counseling System (HCS) Number | Preferred Sustainable Communities - HUD 2995 Certified |   |   |   |   |   | Number of Housing Counselor Full-Time Equivalents (FTE) | Number of HUD HECM Roster Counselors (if applicable) | Formal Housing Counseling Training | Require Testing/Certification for Counselors | Alternate Mode(s) of Counseling | Adopted National Industry Standards | Counseling Services available in Multiple Languages | Alternate Formats Accessible to Persons with Disabilities | Client Exit Surveys | Follow-up Client Surveys | Serves Rural Community | Serving Area with No Internet Access | Physically Located in Geographically Isolated Agency |                 | Name(s) of Housing Counseling Related Networks/Collaboratives, if any | Uses Reviews by Senior Management Staff with Results Reported to | Publishes Performance Data | Link to Published Performance Data, if Available Online | Name of CMS | Uses CMS to Generate Reports | Use CMS to Record Notes, Action Plan, Financial Analysis and Follow-up | Uses CMS to Track Grants | Performs Quality Control Review of CMS Data | Pulled Credit Reports 6 or More Months after Counseling was Completed | Uses Other Methods of Evaluating Program Services |

# Bonus Points Chart A

## Preferred Sustainable Communities

An "X"  
means  
"Yes"

| Rating Factor 1   |                     |   |  |
|-------------------|---------------------|---|--|
| B                 | C                   | D   | E  |
| Name of Applicant | Location City/State | Agency's HUD<br>Housing<br>Counseling<br>System (HCS)<br>Number | Preferred Sustainable Communities - HUD 2995 Certified |
|                   |                     |   |  |
|                   |                     |   |  |

# Bonus Points

## Preferred Sustainable Communities

- 2 points
- See Section V of General Section
- Chart A1 or A2-Column E
- No narrative
- Get certificate from POC for designated community or HUD Regional Administrator using form HUD 2995
  - ✓ For applicant and each sub-grantee indicated with an “X” in column
  - ✓ Applicants must obtain copies of the HUD 2995

# Rating Factor 1: Capacity of Applicant

- 33 points
- To evaluate the readiness and ability of the Applicant and sub-grantees to immediately begin and to successfully implement the proposed work plan described in Rating Factor 3
- To evaluate how adjustments to the work plan were managed

# Chart A – Applicant Characteristics

## Rating Factor 1-1 Capacity

| J   | K  | L                                  | M  | N                               | O                                   | P   | Q   |
|---|--|------------------------------------|--|---------------------------------|-------------------------------------|---|---|
| Number of Housing Counselor Full-Time Equivalents (FTE) | Number of HUD HECM Roster Counselors (if applicable) | Formal Housing Counseling Training | Require Testing/Certification for Counselors | Alternate Mode(s) of Counseling | Adopted National Industry Standards | Counseling Services available in Multiple Languages | Alternate Formats Accessible to Persons with Disabilities |

# Rating Factor 1: Sub-factor 1: Capacity

- 20 points
- Capacity to implement proposed activities in a timely and effective manner
- Higher score to applicants with greater capacity
- Complete Chart A1 or A2 - Column J through Q
- Applicants with sub-grantees must complete each column for each sub-grantee



# Rating Factor 1: Sub-factor 1: Capacity (continued)

Place an “X” in the column if the applicant, sub-grantees or branches has a requirement for:

- **Column J:** Number of Housing Counselors Full-time equivalents
- **Column K:** Number of HUD HECM roster counselors
- **Column L:** Formal Housing Counseling Training (50% or more of counselors received housing counseling related training) within the past 2 years (not counting on-the-job training)

# Rating Factor 1: Sub-factor 1: Capacity (continued)

- **Column M:** Require testing/Certification of Counselors
- **Column N:** Offer alternate modes of counseling
- **Column O:** Adopted national industry standards prior to NOFA publication date
- **Column P:** Service are available in multiple languages
- **Column Q:** Alternate formats accessible to persons with disabilities

# Rating Factor 1: Sub-factor 2

## Performance Reviews/Compliance

- 7 points
- HUD will use its own records to score this factor
- There is no chart to complete
- No narrative required

## Rating Factor 1: Sub-factor 3

## Measuring Client Satisfaction Chart A1/A2, R & S

**NOTE:** If the Applicant's main office provides direct housing counseling activities, the main office must be included in the list of sub-grants. Complete the blank Chart on Page 2. **NOTE: Entering an "x" indicates a "Yes" response.**

| Rating Factor 1                     |  |                     |   |  |                                  |   |                                       |   |   |                                      |                                    |  |                                 |                                     |   |   |                     |                          | R | S |
|-------------------------------------|--|---------------------|---|--|----------------------------------|---|---------------------------------------|---|---|--------------------------------------|------------------------------------|--|---------------------------------|-------------------------------------|---|---|---------------------|--------------------------|---|---|
| A                                   | B  | C                   | D   | E  | F                                | G   | H                                     | I   | J   | K                                    | L                                  | M  | N                               | O                                   | P   | Q   | R                   | S                        |   |   |
|                                     | Name of Applicant, Funded Branches and Sub-grantees Applicant proposes to Fund With this NOFA  | Location City/State | Agency's HUD Housing Counseling System (HCS) Number | Preferred Sustainable Communities - HUD 2995 Certified | Funded Branch of an Intermediary | Sub-grantee that is NOT HUD-Approved LHCA | Sub-grantee that is HUD-approved LHCA | Number of Sub-grantee Branches. Provide Sub-grantee Branches on Chart A2a | Number of Housing Counselor Full-Time Equivalents (FTE) | Number of HUD HECM Roster Counselors | Formal Housing Counseling Training | Require Testing/Certification for Counselors | Alternate Mode(s) of Counseling | Adopted National Industry Standards | Counseling Services available in Multiple Languages | Alternate Formats Accessible to Persons with Disabilities | Client Exit Surveys | Follow-up Client Surveys |   |   |
| Applicant                           | ABC Intermediary<br><i>NOTE: If Applicant is providing counseling directly, enter information below with the appropriate boxes marked.</i> | Alexandria, VA      | 12345   | x  |                                  |   |                                       |   |   |                                      |                                    |  |                                 |                                     |   |   |                     |                          |   |   |
| Funded Branches and/or Sub-grantees | ABC Intermediary   | Alexandria, VA      | 12346   | x  | x                                |   |                                       |   | 2   |                                      | x                                  |  | x                               | x                                   | x   | x   | x                   |                          |   |   |
|                                     | Housing Resources  | Alamosa, CO         | 56789   |  |                                  |   | x                                     |   | 3   | 1                                    | x                                  | x  |                                 |                                     | x   | x   | x                   | x                        |   |   |
|                                     | Housing Affiliate  | Erie, PA            | 98765   | x  |                                  | x   |                                       | 2   | 8   |                                      | x                                  |  | x                               | x                                   | x   | x   | x                   |                          |   |   |
|                                     |  |                     |   |  |                                  |   |                                       |   |   |                                      |                                    |  |                                 |                                     |   |   |                     |                          |   |   |
| TOTAL                               |  |                     |   | 3  | 1                                | 1   | 1                                     | 2   | 13  | 1                                    | 3                                  | 1  | 2                               | 2                                   | 3   | 3   | 3                   | 1                        |   |   |

# Rating Factor 1: Sub-factor 3

## Measuring Client Satisfaction

- 6 points
- Applicants that measure customer satisfaction will be awarded a higher score
- For the period of October 1, 2012 through September 30, 2013 (FY2013)
- Complete Chart A1 or A2: Columns R and S

# Rating Factor 1: Sub-factor 3

## Measuring Client Satisfaction (Continued)

Indicate the Yes answers with an “X” in the appropriate row/column.

- **Column R:** Issued client exit surveys at the end of the counseling or education sessions
- **Column S:** Issued follow-up client surveys after the counseling was completed

# Rating Factor 2

## Colleen Weiser

### Presenter

# Rating Factor 2: Needs/NOFA Priorities

Chart  
A

| Rating Factor 2        |                                      |  |
|------------------------|--------------------------------------|--|
| T                      | U                                    | V  |
| Serves Rural Community | Serving Area with No Internet Access | Physically Located in Geographically Isolated Agency |
|                        |                                      |  |
|                        |                                      |  |

Chart F

|   |  |  |
|---|--|--|
| <b>Applicant Name:</b>  |  |  |
| <b>Instructions:</b><br><b>Columns A - E:</b> All Applicants must complete Columns A through E of the chart below to demonstrate how the Applicant will use Housing Counseling grant funds. |  |  |
| <b>Rating Factor 2, Sub-Factor 1(c)</b>   |  |  |
| <b>(A)</b>  | <b>(B)</b>   | <b>(C)</b>   |
| <b>Jurisdiction/ Service Area</b>   | <b>Brief description of impediments to fair housing choice in the jurisdiction/service area identified in Column A</b> | <b>Information Source for Impediments identified in Column B (e.g. applicable state or local Consolidated Plan and Analysis of Impediments to Fair Housing Choice)</b> |
|   |  |  |



# Rating Factor 2: Needs/NOFA Priorities

- 14 points
- Addresses the specific topics identified in the Rating Factor. A narrative describing the general need for housing counseling services is not required.
- Describe the degree to which the Applicant's Work Plan substantively address NOFA priorities.
- Complete Chart A, Columns U through V
- Complete Chart F, Columns B-C
- Provide a Narrative for Sub-factor 1d, Persons with Disabilities and Limited English Proficiency

# Rating Factor 2: Sub-factor 1: Needs

- 10 points
- **Chart A:** Indicate the following about the area(s) to be served by putting an “X” for Yes
  - ✓ **Column T:** Serves Rural Communities
  - ✓ **Column U:** Agency serves a Rural Area that lacks internet access
  - ✓ **Column V:** Geographically isolated housing counseling agency

# Rating Factor 2: Sub-factor 1: Needs

(Continued)

- **Chart F: Impediments to Fair Housing Choice**
  - ✓ Complete Column A: Jurisdiction
  - ✓ Complete Column B: Brief descriptions of the impediments for each jurisdiction or service area identified in Column A
  - ✓ Complete Column C: Identify the applicable state or local consolidated plan or other information sources on impediments
  - ✓ Persons with Disabilities and Limited English Proficiency (LEP) briefly describe how meaningful program access will be provided
- Written narratives are put in the columns on Chart F

# Rating Factor 2: Sub-factor 2:

## NOFA Priorities

- 4 points maximum
  - ✓ Up to 2 points for each priority
  - ✓ Applicant may address as many priorities as they want but will only receive the maximum of 4 points
  - ✓ Each of the priorities consists of multiple parts each worth up to one point
- Narrative (limited to 500 words per priority)
  - ✓ Describe how the work plan substantially addresses a NOFA priority.
  - ✓ Applicants managing a network must specifically state that 1/3 or more of sub-grantees and branches meet the criteria and must provide at least 3 specific examples

# Rating Factor 2: Sub-factor 2:

## Departmental NOFA Priorities (Continued)

- Review the full descriptions of the NOFA Priorities found in the General Section (Appendix A). For this program section they are:
  - ✓ Affirmatively Furthering Fair Housing (AFFH)
  - ✓ Increased Energy Efficiency and the Health and Safety of Homes

# Rating Factor 3

Anita Olson

Presenter

# Rating Factor 3: Soundness of Approach/ Scope of Housing Counseling Services

- 39 points
- The quality and effectiveness of Applicant's past and proposed housing counseling activities
- Evaluate past impact of services, complexity of projected work plan and degree of coordination with other organizations, programs, and HUD programs
- Refer back to the NOFA to find Charts A, B, C, E, F, and G related to this factor

# Rating Factor 3: Sub-factor 1: Past Performance-Impact

- 22 points
- For the period October 1, 2012 through September 30, 2013
- 1(a) Impact: HUD 9902 will be used
- 1(b) Budget: program budget that corresponds to the HUD 9902 for FY13



# Chart E-Budget Rating Factor 3 (1B)

## Housing Counseling Budget 10/1/12-9/30/13

| CHART E.1. Intermediaries, SHFAs and MSOs |  |  |  |
|---|--|--|--|
| 1   | <b>Applicant Name:</b>   |  |  |
| 2   | FY 2013 Grant Period Applicant's Total Budget, All Sources of Funding                    |  |  |
| 3   | FY 2013 Grant Period HUD Housing Counseling Grant Funding Amount                         |  |  |
| 4   | FY 2013 Grant Period Percentage of HUD Funds Sub-allocated to Sub-grantees and Funded Br |  |  |
| 5   | (A)  | (B)  | (C)  |
| 6   | Expenses   | Applicant's Total Administrative Budget, All Sources (Do Not Include Funds Sub-allocated to Sub-grantees/ Funded Branches) | Total Budget of all Sub-Grantees/ Funded Branches, All Sources (Include Main Office that Provides Direct Counseling) |
| 7   | Salaries   |  |  |
| 8   | Housing Counselors   |  |  |
| 9   | Housing Counseling Program Managers  |  |  |
| 10  | All Other Housing Counseling Program Staff   |  |  |
| 11  | Fringe Benefits  |  |  |
| 12  | Housing Counselors   |  |  |
| 13  | Housing Counseling Program Managers  |  |  |
| 14  | All Other Housing Counseling Program Staff   |  |  |
| 15  | Total Other Direct Costs   |  |  |
| 16  | Other (Must Provide Explanation of Other Expenses in Narrative)                          |  |  |
| 17  | <b>Total Direct Costs</b>  | \$ -   | \$ -   |
| 18  | Indirect Cost Allocation Amount (if applicable)  |  |  |
| 19  | <b>TOTAL BUDGET</b>  | \$ -   | \$ -   |

# Chart E-Budget Rating Factor 3 (1B)

## Housing Counseling Budget 10/1/12-9/30/13

| CHART E.2. LHCA's |   |                                       |
|-------------------|---|---------------------------------------|
| 1                 | Applicant Name:   |                                       |
| 2                 | (A)   | (B)                                   |
| 3                 | Expenses  | Applicant's Total Budget, All Sources |
| 4                 | Salaries  |                                       |
| 5                 | Housing Counselors  |                                       |
| 6                 | Housing Counseling Program Managers                             |                                       |
| 7                 | All Other Housing Counseling Program Staff                      |                                       |
| 8                 | Fringe Benefits   |                                       |
| 9                 | Housing Counselors  |                                       |
| 10                | Housing Counseling Program Managers                             |                                       |
| 11                | All Other Housing Counseling Program Staff                      |                                       |
| 12                | Total Other Direct Costs  |                                       |
| 13                | Other (Must Provide Explanation of Other Expenses in Narrative) |                                       |
| 14                | Total Direct Costs  | \$ -                                  |
| 15                | Indirect Cost Allocation Amount (if applicable)                 |                                       |
| 16                | TOTAL BUDGET  | \$ -                                  |

# Rating Factor 3: Sub-factor 1:

## Past Performance (continued)

- 1(c) Oversight Activities: provide brief narrative describing oversight and quality control activities actually performed as part of FY2013 work plan (not proposed activities)
- If applicable for Intermediaries, MSOs, and SHFAs, explain how sub-grantees, that are not HUD approved met, or exceed HUD housing counseling program requirements

# Rating Factor 3: Sub-factor 2:

## Projected Performance – Work Plan

- 12 points
- Proposed housing counseling services and other activities that will be performed from October 1, 2013 through March 31, 2015
- Higher scores for
  - ✓ Greatest variety of services and delivery modes
  - ✓ Comprehensive plans for oversight activities
  - ✓ Affirmatively further fair housing

# Rating Factor 3: Sub-factor 2: Projected Performance – Work Plan

(Continued)

- 2(a): Counseling and Education Services – the reach and complexity of proposed services
  - ✓ Chart A1/A2: Column W: % of award to be sub-allocated
  - ✓ Chart B: Services and Modes
    - Complete for each service listed

## Chart A2-Intermediary Characteristics

### Column W

**CHART A.2. -- INTERMEDIARY, SHFA OR MSO CHARACTERISTICS**  
**RATING FACTORS 1, 2, 3 AND 5**

[illegible]



# Chart B – Services and Modes

## Rating Factor 3(2A)

**Applicant Name:**

**NOTE:** Below is a completed example of Chart B. Complete the blank Chart on Page 2. Applicants proposing to fund sub-grantees and/or funded branches must indicate the number of proposed sub-grantees and branches which will provide the proposed services. *\*Funded branches include funded branches of sub-grantees.*

| A  | B  | C   | D  | E   | F                                  | G   | H                                      | I  | J   | K   | L  | M  |
|--|--|---|--|---|------------------------------------|---|--|--|---|---|--|--|
| EXAMPLE: Housing Counseling Service                  | Indicate if one-on-one Counseling is provided by Applicant | # of Sub-grantees and/or * Funded Branches that provide One-on-one Counseling | Indicate if Group Education is provided by Applicant | # of Sub-grantees and/or * Funded Branches that provide Group Education | Service Will be Provided In Person | # of Sub-grantees and/or * Funded Branches that provide Service In Person | Service Will be Provided Via Telephone | # of Sub-grantees and/or * Funded Branches that provide Service Over the Telephone | Service will be provided Over the Internet? | # of Sub-grantees and/or * Funded Branches that provide Service Over the Internet | Service Will Be Available in Multiple Languages? | # of Sub-grantees and/or * Funded Branches that provide Services Available in Multiple Languages |
| Pre-purchase/Home buying                             | x  | 5   | x  | 4   | x                                  | 5   |  |  | x   | 2   |  |  |
| Resolving/Preventing Mortgage Delinquency or Default | x  | 5   |  |   | x                                  | 5   | x                                      | 5  |   |   | x  | 2  |
| Non-Delinquency Post-Purchase                        |  |   |  |   |                                    |   |  |  |   |   |  |  |
| Rental   |  |   |  |   |                                    |   |  |  |   |   |  |  |
| Shelter/Services for the Homeless                    |  |   |  |   |                                    |   |  |  |   |   |  |  |
| Reverse Mortgage                                     |  |   |  |   |                                    |   |  |  |   |   |  |  |
| <b>TOTAL</b>   | <b>2</b>   | <b>10</b>   | <b>1</b>   | <b>4</b>  | <b>2</b>                           | <b>10</b>   | <b>1</b>                               | <b>5</b>   | <b>1</b>                                    | <b>2</b>  | <b>1</b>   | <b>2</b>   |

# Rating Factor 3: Sub-factor 2:

## Projected Performance – Work Plan

(Continued)

- 2(b): Oversight Activities
  - ✓ Provide brief narrative describing oversight and quality control activities
  - ✓ Intermediaries, MSOs and SHFAs must complete Chart G1 to describe network management activities that will be performed as part of the proposed work plan
  - ✓ LHCAs must complete Chart G2 to describe process through which they requested and justified disbursements under the grant



**CHART G -- OVERSIGHT ACTIVITIES**  
**RATING FACTOR 3 SUB-FACTORS 1 (c) and 2 (b)**

**Applicant Name:**

**CHART G.1: INTERMEDIARIES, MSOs AND SFHAs ONLY**

For **Rating Factor 3, Sub-factor 1(c)**, in addition to providing a narrative describing network management activities performed as part of the actual FY 2013 work plan, Intermediaries, MSOs and SFHAs must complete Chart G.1, by placing an **X** in **Column B** and the **number** of sub-grantees/funded branches in which oversight and quality control activities were performed as part of the actual FY 2013 work plan in **Column C**.

For **Rating Factor 3, Sub-factor 2(b)**, in addition to providing a narrative describing network management activities that will be performed as part of the actual FY 2014 work plan, Intermediaries, MSOs and SFHAs must complete Chart G.1, by placing an **X** in **Column D** and the **number** of sub-grantees/funded branches in which oversight and quality control activities that will be performed as part of the proposed FY 2014 work plan in **Column E**.

| A                 |   | Rating Factor 3, Sub-factor 1 (c)                       |  | Rating Factor 3, Sub-factor 2 (b)     |   |
|-------------------|---|---|--|---------------------------------------|---|
|                   |   | B   | C  | D                                     | E   |
| Type of Oversight |   | Actual FY 2013 Work Plan Conducted Oversight Activities | Number of Sub-grantees/Funded Branches Oversight was Performed for FY 2013 | FY 2014 Proposed Oversight Activities | Proposed Number of Sub-grantees/Funded Branches Oversight will be Performed for FY 2014 |
| i.                | Train and provide technical assistance to sub-grantees/funded branches.   |   |  |                                       |   |
| ii.               | Monitoring, evaluating and ensuring quality of services provided by sub-grantees/funded branches including:     |   |  |                                       |   |
|                   | Verifying sub-grantees that are not HUD-approved and funded branches meet or exceed HUD's approval standards.   |   |  |                                       |   |
|                   | Monitoring the grant funded work of sub-grantees/funded branches on an ongoing basis throughout the grant year. |   |  |                                       |   |
|                   | Identifying and rectifying service delivery deficiencies and non-compliance issues in its network.              |   |  |                                       |   |
| iii.              | Process sub-grantees and funded branches disbursements under the grant including:                               |   |  |                                       |   |

## CHART G.2: LHCA's ONLY

For **Rating Factor 3, Sub-factor 1(c)**, in addition to providing a narrative describing the process through which the applicant requested and justified disbursements under the grant, LHCA's must complete Chart G.2, by placing an **X** in **Column B** for the actual oversight activities conducted during FY 2013.

For **Rating Factor 3, Sub-factor 2(b)**, in addition to providing a narrative describing the process through which the applicant will request and justify disbursements under the grant, LHCA's must complete Chart G.2, by placing an **X** in **Column C** for oversight and quality control activities that will be performed as part of the proposed FY 2014

| A                 |  | Rating Factor 3, Sub-factor 1 (c)                       | Rating Factor 3, Sub-factor 2 (b)     |
|-------------------|--|---|---------------------------------------|
|                   |  | B   | C                                     |
| Type of Oversight |  | Actual FY 2013 Work Plan Conducted Oversight Activities | FY 2014 Proposed Oversight Activities |
| i.                | Maintaining disbursement supporting documentation, including personnel activity reports. |   |                                       |
| ii.               | Recording how disbursement decisions are made.   |   |                                       |
| iii.              | Conducting Quality Control of disbursement process.                                      |   |                                       |
| iv.               | Identifying and rectifying service delinquencies and noncompliance issues.               |   |                                       |
| v.                | Other (Applicant must list other activities to receive credit)                           |   |                                       |

# Rating Factor 3: Sub-factor 2:

## Projected Performance – Work Plan

(Continued)

- 2(c): Affirmatively Furthering Fair Housing
  - ✓ Chart F: Columns D and E: applicants must describe at least one activity that addresses an impediment to fair housing choice in Applicant's service area, and if applicable, in at least three of its sub-grantees' distinct service area and how it will measure outcomes to the proposed activity

# Chart F – Affirmatively Furthering Fair Housing Rating Factor 3

| Rating Factor 3, Sub-Factor 2(c)  |   |
|---|---|
| (D)   | (E)   |
| Brief description of an activity that addresses an impediment to fair housing choice identified in Column B | Brief description of how Applicant will measure outcomes related to the activity proposed in Column D |
|   |   |

# Rating Factor 3: Sub-Factor 3

## Coordination

- 5 points
- 3(a): Housing Counseling-related partnerships/ collaboratives: Applicants will be rewarded for active participation
  - ✓ Chart A1/A2: Column X: name of partnership/collaborative
- 3(b): Complementing Other HUD Programs
  - ✓ Chart C: Indicate the HUD programs for which the Applicant provided Housing Counseling services from October 1, 2012 through September 30, 2013

**CHART C -- OTHER HUD PROGRAMS  
RATING FACTOR 3 (3B)**

**Applicant Name:**

**NOTE:** Applicants proposing to fund sub-grantees and/or branches must indicate the number of proposed sub-grantees and branches (Column D below) which will provide housing counseling services in conjunction with other HUD programs that are marked in Column C below.

|   | <b>B</b>                           | <b>C</b>   | <b>D</b>  |
|---|------------------------------------|--|---|
| <b>HUD Program</b>  | <b>Administering Office</b>        | <b>Enter an "X" if Applicant Provides Housing Counseling Services in Conjunction with HUD Programs</b> | <b>For Intermediaries, SHFAs and MSOs Number of Sub-grantees and/or Branches That Provide Service(s) in Conjunction with HUD Programs</b> |
| Second Mortgage Assistance for First-Time Homebuyers                              | Community Planning and Development |  |   |
| Rural Housing Stability Grant Program   | Community Planning and Development |  |   |
| Public Housing Operating Fund   | Public and Indian Housing          |  |   |
| Section 8 Tenant-Based Rental Assistance Homeownership Option                     | Public and Indian Housing          |  |   |
| Demolition and Disposition of Public Housing                                      | Public and Indian Housing          |  |   |
| Family Self-Sufficiency   | Public and Indian Housing          |  |   |
| Public Housing Resident Homeownership Programs                                    | Public and Indian Housing          |  |   |
| Conversion of Distressed Public Housing to Tenant-Based Assistance                | Public and Indian Housing          |  |   |
| Low Income Housing Preservation and Resident Homeownership Act Prepayment Options | Public and Indian Housing          |  |   |
| Native American Housing Assistance Self Determination Act Housing Block Grants    | Public and Indian Housing          |  |   |
| Native Hawaiian Housing Block Grants  | Public and Indian Housing          |  |   |
| Section 8 Rental Assistance   | Public and Indian Housing          |  |   |
| HUD-Sponsored Housing Counseling-Related Research or Pilot Program: Must specify  |                                    |  |   |
| Other: Must specify   |                                    |  |   |
| <b>TOTAL</b>  |                                    | <b>0</b>   | <b>0</b>  |



# Rating Factor 4

Gail Osgood

Presenter

# Rating Factor 4: Chart D Leveraging

|                | A  | B  | C  | D   | E  |             | F   | G   |
|----------------|--|--|--|---|--|-------------|---|---|
|                | Applicant/<br>Sub-grantee/<br>Funded<br>Branch | Names of Applicant, Sub-<br>grantees/Branch Offices<br>Proposed to be Funded | Organization Providing<br>Leveraged Funds/In-kind<br>Contributions and Point of<br>Contact | Type of<br>Contribution<br>(Cash, Fees, In-<br>kind, Program<br>Income) | Funds Must be Available<br>During the Grant Period |             | Use of Funds -- Only Include<br>Funds that are Exclusively<br>Allocated for Housing Counseling<br>Program | Only Include the<br>Amount Funds that<br>are Available from<br>October 1, 2013 to<br>March 31, 2015 |
| 1              | Applicant                                      | Example: ABC<br>Intermediary   | ABC Intermediary   | Fees  | 10/01/13   | -- 03/31/15 | Foreclosure Prevention<br>Counseling  | \$50,000.00   |
| 2              | Sub-grantee                                    | Housing Affiliate  | Jane Dough Foundation/<br>John Dough (719) 222-<br>3232                                    | Cash  | 10/01/13   | -- 03/31/15 | Foreclosure Prevention<br>Counseling  | \$25,000.00   |
| 3              | Sub-grantee                                    | Housing Affiliate  | Chase Bank Foundation/<br>Sally Clams (719) 224-7676                                       | Cash  | 10/01/13   | -- 03/31/15 | Pre-purchase Counseling   | \$37,500.00   |
| 4              |  |  |  |   |  |             |   |   |
| 5              |  |  |  |   |  |             |   |   |
| 6              |  |  |  |   |  |             |   |   |
| 7              |  |  |  |   |  |             |   |   |
| 8              |  |  |  |   |  |             |   |   |
| SUBTOTAL/TOTAL |  |  |  |   |  |             |   | \$112,500.00  |

1. Total amount of Fees in the amount of \$50,000 are available during entire grant period so enter **\$50,000** in Column G on Chart D and in Block 15.f. Program Income of SF-424.
2. Funds are available from January 2013 through December 2013, include only 3 months (October 1 through December 31, 2013) of funding (e.g., only **\$25,000** of a \$100,000 grant should be entered on Chart D).
3. Funds are available for two years, the total amount of funds must be pro-rated (e.g., \$100,000 leverage available July 1, 2012 through June 30, 2014, only **\$37,500** should be entered on Chart D for the months of October 1, 2013 through June 30, 2014).



# Rating Factor 4: Leveraging Resources

- 4 points
  - ✓ Points will be awarded based on amount of leveraged funds
- Additional non-Federal funds include grants, fees, in-kind contributions
  - ✓ Attorneys General Mortgage Settlement funds can be included
- Fee income can be included
- Do not include funds from federal sources
- Available from October 1, 2013 through March 31, 2015
- Evidence of the funds must be maintained

# Acceptable Funding/Leveraged Resources (Non-Federal)

- Direct financial assistance (grants)
- Fees
- In-Kind contribution (services, equipment office space and labor support housing counseling activities)
- Attorneys General Mortgage Settlement

# Not Acceptable/Funding Leveraged Resources (Federal)

- Leveraging resources cannot be federal funds, which are directly or indirectly passed through local governments.

## Examples:

- ✓ National Foreclosure Mitigation Counseling Program Funds (NFMC)
- ✓ Hardest Hit Funds (HHF)
- ✓ Community Development Block Grants (CDBG)
- ✓ Emergency Homeowner Loan Program (EHLPP)
- ✓ Fair Housing Initiatives program (FHIP)
- ✓ Home Investment Partnerships program (HOME)

# Rating Factor 4: Leveraging Resources

(Continued)

- Chart D: Leveraging - All columns must be completed
- Provide an itemized list of all leveraged funds for the applicant and proposed sub-grantees for FY2014 grant period (October 1, 2013 through March 31, 2015)
  - ✓ **Column A:** Applicant/Sub-grantee/Funded Branch
  - ✓ **Column B:** Applicant/Sub-Grantee/Branch to be funded
  - ✓ **Column C:** Organization providing funding

# Rating Factor 4: Leveraging Resources

## (Continued)

- ✓ **Column D:** Type of contribution
- ✓ **Column E:** Timeframe funds should be available
- ✓ **Column F:** Use of funds - only include funds used for housing counseling program
- ✓ **Column G:** Amount of funds
- No narrative

# Rating Factor 4: Leveraging Resources

## (Continued)

- Include only funds that will be available during the grant period October 1, 2013 through March 31, 2015
- If funding is available outside of the FY2014 grant, funds must be pro-rated
- **Example 1**: If funds are available from January 2013 through December 2013, include only 3 months (October 1 through December 31, 2013) of funding (e.g. only \$25,000 of \$100,000 grant should be entered on Chart D)

# Rating Factor 4: Leveraging Resources

## (Continued)

- **Example 2**: Funds are available from January 2013 through December 2013, include only 3 months (October 1 through December 31, 2013) of funding (e.g., only \$25,000 of a \$100,000 grant should be entered on Chart D)
- **Example 3**: Funds are available for two years, the total amount of funds must be pro-rated (e.g., \$100,000 leverage available July 1, 2012 through June 30, 2014, only \$37,500 should be entered on Chart D for the months of October 1, 2013 through June 30, 2014)
- Program Income and/or fees must be entered on SF424

# SF-424: Program Income

Application for Federal Assistance SF-424

16. Congressional Districts Of:

\* a. Applicant  \* b. Program/Project

Attach an additional list of Program/Project Congressional Districts if needed.

17. Proposed Project:

\* a. Start Date:  \* b. End Date:

18. Estimated Funding (\$):

|                     |  |
|---------------------|--|
| * a. Federal        | <input type="text" value="1.00"/>      |
|                     | <input type="text"/>                   |
|                     | <input type="text"/>                   |
|                     | <input type="text"/>                   |
| * e. Other          | <input type="text"/>                   |
| * f. Program Income | <input type="text" value="50,000.00"/> |
| * g. TOTAL          | <input type="text" value="50,001.00"/> |

Enter total of Program Income and/or Fees that are listed on Chart D. Leveraging here (f. Program Income)

\* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?

☐ a. This application was made available to the State under the Executive Order 12372 Process for review on .

☐ b. Program is subject to E.O. 12372 but has not been selected by the State for review.

☐ c. Program is not covered by E.O. 12372.

\* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)



# **Rating Factor 5 and Final Overview**

**John Olmstead**  
**Presenter**

# Chart A: Rating Factor 5: Sub-factor 1: Components of Evaluation (6 points)

Chart A1/A2

| Rating Factor 5  |   |    |    |    |    |    |    |    |    |
|--|---|----|----|----|----|----|----|----|----|
| Y  | Z | AA | AB | AC | AD | AE | AF | AG | AH |
| Uses Reviews by Senior Management Staff with Results Reported to       |   |    |    |    |    |    |    |    |    |
| Publishes Performance Data   |   |    |    |    |    |    |    |    |    |
| Link to Published Performance Data, if Available Online                |   |    |    |    |    |    |    |    |    |
| Name of CMS  |   |    |    |    |    |    |    |    |    |
| Uses CMS to Generate Reports   |   |    |    |    |    |    |    |    |    |
| Use CMS to Record Notes, Action Plan, Financial Analysis and Follow-up |   |    |    |    |    |    |    |    |    |
| Uses CMS to Track Grants   |   |    |    |    |    |    |    |    |    |
| Performs Quality Control Review of CMS Data                            |   |    |    |    |    |    |    |    |    |
| Pulled Credit Reports 6 or More Months after Counseling was Completed  |   |    |    |    |    |    |    |    |    |
| Uses Other Methods of Evaluating Program Services                      |   |    |    |    |    |    |    |    |    |

# Rating Factor 5: Achieving Results and Program Evaluation

- 10 points
- To ensure that Applicants meet the commitments made in the application
- Applicants must indicate how they evaluate program success.
- Applicants who use a variety of methods to evaluate performance will get higher points

# Rating Factor 5: Sub-factor 1:

## Components of Evaluation

- 6 points
- Complete Chart A1/A2: Columns Y through AH list components of evaluation
- If the answer to AH: Other Methods of Evaluation is yes (x), the Applicant must list or briefly describe the other methods to be used
  - ✓ Intermediaries, State Housing Finance Agencies and Multi State Organizations must list at least 3 examples

# Rating Factor 5: Sub-factor 2: Transition or Succession Plan

- 2 points
- Applicants must provide a plan to ensure continuity for services in the event that the applicant becomes ineligible, including its sub-grantees or branches, discontinues housing counseling services, becomes ineligible or does not receive continued funding from HUD or other sources

# **Rating Factor 5: Sub-factor 3: Participation in HUD-Sponsored Research or Pilot Program**

- 2 points
- Applicants that participate in housing counseling-related research or pilot programs
- Do not include any research pilot programs which are fully compensated by HUD

# Finding the application And Submitting

[www.grants.gov](http://www.grants.gov)



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- The FY2014-FY2015 NOFA can be found at [www.hud.gov/housingcounseling](http://www.hud.gov/housingcounseling) and at [www.grants.gov](http://www.grants.gov)
- Be sure to read both documents
  - ✓ The General Section has important information on the submission process and other details.
  - ✓ The Program Section gives specific information on the application

- Go to <http://www.grants.gov/view-opportunity.html?oppld=252176> to download the application itself
  - ✓ Funding Opportunity Number FR-5800-N-02
  - ✓ Catalog of Federal Domestic Assistance #14.169 Housing Counseling Assistance Program

# First – Be sure to check your registration with SAM

- Before you start your application, make sure that the SAM registration for your agency is current.
- If not your application will be rejected.
- Verify that you have access to your record and that the registration will not expire before the application deadline.
- Make sure that the agency is authorized to SUBMIT, not just registered to submit
- Verify that you know the user name and password.
- Have more than one person authorized to the submit the application

- There have been some changes in the process so carefully read the registration information on [www.grants.gov](http://www.grants.gov)
- Also go to [www.sam.gov](http://www.sam.gov) for information and registration



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#### CREATE USER ACCOUNT

Your CCR username will not work in SAM. You will need a new SAM User Account to register or update your entity records. You will also need to create a SAM User Account if you are a government official and need to create Exclusions or search for FOUO information.

[Create User Account](#)

#### REGISTER/UPDATE ENTITY

You can register your Entity (business, individual, or government agency) to do business with the Federal Government. If you are interested in registering or updating your Entity, you must first create a user account.

[Register/Update Entity](#)

Submitted a SAM registration?

[Check Status](#)

#### SEARCH RECORDS

All entity records from CCR/FedReg and ORCA and exclusion records from EPLS, active or expired, were moved to SAM. You can search these records and new ones created in SAM. If you are a government user logged in with your SAM user account, you will automatically have access to FOUO information.

[Search Records](#)

## VIEW GRANT OPPORTUNITY



FR-5800-N-02

Comprehensive Housing Counseling Grant Program  
Department of Housing and Urban Development

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**SYNOPSIS DETAILS**

VERSION HISTORY

FULL ANNOUNCEMENT

APPLICATION PACKAGE

The synopsis for this grant opportunity is detailed below, following this paragraph. This synopsis contains all of the updates to this document that have been posted as of **3/4/2014**. If updates have been made to the opportunity synopsis, update information is provided below the synopsis.

If you would like to receive notifications of changes to the grant opportunity click [send me change notification emails](#). The only thing you need to provide for this service is your email address. No other information is requested.

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**FR-5800-N-02**

**Comprehensive Housing Counseling Grant Program**  
**Department of Housing and Urban Development**

[SYNOPSIS DETAILS](#)

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## DOWNLOAD APPLICATION PACKAGE

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Download Opportunity Instructions and Application. You have chosen to download the application for the following opportunity:

CFDA Number: 14.169: Housing Counseling Assistance Program

Opportunity Number: FR-5800-N-02: Comprehensive Housing Counseling Grant Program

Competition ID: CHC-02

Competition Title: Fiscal Year 2014 and 2015 Comprehensive Housing Counseling Program

Agency: Department of Housing and Urban Development

Opening Date: 03/04/2014

Closing Date: 04/07/2014

Since you did not subscribe, you will not be notified of any future changes to this opportunity. [If you would like to receive notifications please click here.](#)

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- You will submit the applications at [www.grants.gov](http://www.grants.gov)
- The application is due on **April 7, 2014**
  - Must be received by Grants.gov by 11:59:59 pm Eastern Standard Time on April 7, 2014
  - Submit the application 2-3 days in advance of deadline to ensure that [www.grants.gov](http://www.grants.gov) has accepted it
  - Watch email often to make sure application was validated or rejected
    - ✓ Make sure that [www.grants.gov](http://www.grants.gov) has a valid email for you

- Instructions for downloading, completing, submitting, and tracking grant application packages are available at [www.grants.gov](http://www.grants.gov)
- To know whether your application was rejected with errors and the reason(s) why, you must:
  - ✓ Login to [www.grants.gov](http://www.grants.gov), select “Applicants” from the top navigation, and select “Track my application” from dropdown list
  - ✓ If the status is “rejected with errors,” you have the option to correct the error(s) and resubmit your application before the Grace Period ends
  - ✓ If your application was “rejected with errors” and you do not correct these errors before the grace period ends, HUD will not review your application
  - ✓ If your status is “validated” your application will be forwarded to HUD by [www.grants.gov](http://www.grants.gov)

# Submission Information

- The General Section provides critical details on the format and submission process. Read section IV: APPLICATION AND SUBMISSION INFORMATION.
- Your submission must use WORD 2010 (or earlier), EXCEL 2010 (or earlier) and Adobe (.pdf) that is compatible with Adobe Reader 9.4
  - Do not use Adobe Reader 11 as using it will create an error that rejects your application.
- Narrative Portions of response to Rating Factors must not exceed 25 double-spaced, 12 point font, single sided pages.
- The pages must be numbered with a header indicating the applicant name and Rating Factor (number and title).
- File names cannot be longer than 50 characters and cannot contain any special characters

# For Assistance

- Contact your representative for general information on the NOFA. Do not ask about your application specifically
- Contact [www.grants.gov](http://www.grants.gov) regarding issues/problems with technology

# For Help

- Technical Assistance/Customer Services for [grants.gov](http://grants.gov)
  - ✓ 800-518-GRANTS
  - ✓ [support@grants.gov](mailto:support@grants.gov)
  - ✓ Available 24/7
- Be sure to keep copies of any emails that you send to grants.gov regarding submission problems.
  - ✓ If you need to appeal a late submission, those communications are critical to support your appeal

# Tips for Success

- Read the General Section and the NOFA. Very carefully follow all of the instructions
  - ✓ Use the correct software and file names
- Understand the charts, how to fill them out, and how to submit them
- Answer all of the questions. DO NOT provide information that was not requested
- Make sure all the pages are numbered and named
- DO NOT ask for a specific grant amount or provide a budget for FY2014
- SUBMIT EARLY and watch for emails accepting or rejecting your application

- We look forward to working with all successful applicants to provide outstanding housing counseling services
- PowerPoint and broadcast will be posted to the OHC website the day after the presentation

# For More Information

Office of Housing Counseling web page:  
[www.hud.gov/housingcounseling](http://www.hud.gov/housingcounseling)

Email questions or comments with subject line  
“NOFA 2014-2015”:

[housing.counseling@hud.gov](mailto:housing.counseling@hud.gov)