

## FY 2024 HUD CoC Program Competition San Diego CoC New Applicant Requirements

### GENERAL THRESHOLD REQUIREMENTS CHECKLIST

Please answer the following questions. Refer to the 2024 HUD NOFO for additional information as needed. An authorized representative of the organization must sign and date the Checklist. The completed and signed checklist must be uploaded into the agency NOFO Dropbox by the **new project application due date**.

**Agency Name:** \_\_\_\_\_

Yes	No	N/A	<b>GENERAL THRESHOLD REQUIREMENTS CHECKLIST</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Does the Applicant have an active registration in SAM? <i>Please provide a copy of the SAM tracking or information page.</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Does the SAM registration include a Unique Entity Identifier (UEI)?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Do the Unique Entity Identifier (UEI), Tax ID, and applicant name/address on the E-snaps application match what is in SAM?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Does the Applicant have any unresolved civil rights matters as defined in the General NOFO "Resolution of Outstanding Civil Rights Matters?" <i>If <u>any</u> of these stated conditions can be answered "yes," please provide a detailed description as an attachment to the General Threshold Requirements checklist.</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Has the Applicant been debarred or suspended from doing business with the Federal Government, or is the Applicant proposed to be debarred from doing business with the Federal Government?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Is the Proposed Project consistent with the Consolidated Plan? <u>Provide a reference to the section and page(s) in the Consolidated Plan for the jurisdiction in which the proposed project will be located. Include this as an attachment to the General Threshold Requirements Form.</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Does the Applicant have any unresolved delinquent Federal debt? <i>If yes, please provide a detailed description as an attachment to the General Threshold Requirements Form.</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Has an Independent Audit been completed for the applicant agency during the last 18 months? Please submit a copy of the audit in the assigned agency Dropbox.

Yes	No	N/A	<b>GENERAL THRESHOLD REQUIREMENTS CHECKLIST</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. All non-profit applicants must attach evidence of organizational eligibility (501(c)(3) verification letter for the applicant agency and all sub-recipients. Please submit a copy of the audit in the assigned agency Dropbox.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. Do the Applicant and all sub-recipients agree to comply with all Fair Housing and Civil Rights Laws?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11. Does the Applicant agree to affirmatively further fair housing, as defined by HUD in the General NOFO?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12. Does the Applicant agree to ensure meaningful access to their programs and activities for persons with Limited English Proficiency?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	13. If the proposed project involves rehabilitation or new construction, does the Applicant agree to comply with Section 3 of the HUD Act of 1968, 12 USC 1701u and 24 CFR Part135? If not applicable, indicate "N/A" in the box to the left. Projects with alternate resources for these costs may submit a request for other CoC eligible activities as described in the NOFO.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	14. Does the Applicant agree to comply with 24 CFR part 578 and the standards in 2 CFR part 200?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15. Does the Applicant agree to comply with Section 508 of the Rehabilitation Act to make technology accessible to disabled clients you may serve?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16. If the Proposed Project involves the acquisition of real property and displacements resulting from the acquisition, rehabilitation, or demolition of real property, does the Applicant agree to comply with the Uniform Relocation Assistance (URA)? If not applicable, indicate "N/A" in the box to the left.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17. Has the Applicant provided evidence of a current Code of Conduct already recognized by HUD or included a current Code of Conduct with their application that will be submitted to HUD?  Provide a copy as an attachment to the General Threshold Requirements Attachments Form (a) a screen-shot of HUD's webpage that shows your agency on the approved list, or (b) a copy of your current Code of Conduct that will be submitted via E-Snaps. Please note that HUD has specific requirements for Codes of Conduct.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. If the Applicant is a state agency or agency of a political subdivision of a state, or contracting with such an agency for work performed under a HUD-assisted contract, do they agree to comply with Section 6002 of the Solid Waste Disposal Act? If none of the above, indicate "N/A" in the box to the left.

Yes	No	N/A	<b>GENERAL THRESHOLD REQUIREMENTS CHECKLIST</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. Does the applicant agree to participate as requested in HUD-funded research or evaluation?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	20. Does the Applicant agree to comply with the limits on costs as defined in the NOFO?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21. Does the Applicant commit to participation in the local HMIS system?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22. Does the Applicant commit to participating in the local Coordinated Entry System (CES)?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	23. If the Proposed Project includes physical development activities such as: property acquisition, rehabilitation, conversion, demolition, leasing, repair, or construction, does the Applicant agree to comply with all applicable environmental review requirements? If not applicable, indicate "N/A" in the box to the left.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	24. Does the Applicant agree to comply with the Prevention of Family Separation provisions as described by HUD? (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	25. Does the Applicant agree to comply with the HUD requirement for a Drug Free Workplace as defined in the General NOFO?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	26. Does the Applicant agree to comply with the HUD requirement for safeguarding of resident/client files as defined in the General NOFO?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	27. Is the Applicant aware of and willing to comply with the rules and requirements of the Transparency Act?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	28. Does the Applicant agree to comply with the Equal Access to Housing Regardless of Sexual Orientation or Gender Identity requirement?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	29. Does the Applicant agree to comply with Lead-Based Paint Requirements?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30. Does the Applicant agree to meaningfully include persons with Lived Experience in homelessness in agency or program development and decision-making

Organization Name:

As an authorized representative of the organization listed above, I have verified and attest to the Content of the General Threshold Requirements Checklist and attachments as indicated.

Name and Title of Authorized Representative:

Signature:

Date: