

RFP Response Form

U.S. Department of Housing and Urban Development (HUD) Permanent Supportive Housing Program for Chronically Homeless Individuals

- Describe your organization’s experience providing housing and supportive services. If you currently run any housing programs, please complete the chart below.

For 46 years EECM has served the community through our housing and sheltering programs, providing a safe place for individuals to move toward self-sufficiency. Along with serving those who are chronically homeless we also provide emergency, short term, and transitional housing for men, women, and families in need of housing or shelter. Case management is an integral part of the permanent supportive housing, transitional housing, and sheltering philosophies and is essential to helping each individual address their issues, while developing personalized plans to achieve a healthier, well-balanced life. Upon arrival, residents undergo an assessment with the case manager to establish each individual’s strengths and identify areas for improvement. We offer on-site behavioral health supports along with education and employment support for individuals who seek to improve their skills. All of our services are grounded in a continuum of care philosophy so our services are seamless across programs, providing the client with the full slate of services required for self-sufficiency.

Current Housing Programs				
Program	Population Served	Number Units/Beds	Annual Budget	Annual Utilization Rate
Emergency Shelter	Adults who are homeless	16 plus up to two wheelchair accessible beds	Enter \$	Was 95% before coordinated intake now 70%.
Short Stay	Short term transitional housing for adults who are homeless	12 plus up to two wheelchair accessible beds	Enter \$	Was 90% before changes to coordinated intake now it is 75%.
Orr Compassionate Care Center	Non-medical respite for adult men and women coming out of a physical or mental health hospital stay and need continued respite to keep from being readmitted and three beds are reserved for veterans.	8 plus up to two wheelchair accessible beds.	Enter \$	75%
Bridge Housing	Transitional housing for single adult men who are homeless	12		It was 95% prior to coordinated intake.

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Penn Free	Transitional housing for single adults with a substance abuse issue and with or without children	Up to 16		It was 95% prior to coordinated intake.
FAITH Program	PSH - Families with disability	27		100%
Safe Haven (the program for which we are completing the RFP)	Permanent Housing for chronically homeless men with a significant mental illness and 2 of the 10 beds are for individuals with additional physical disabilities.	10		100

2. Describe your organization’s ability to effectively utilize federal funds and performing the scope of services described in the RFP within funding and time limitations.
EECM has numerous local, state, and federal awards and we have successfully performed the within the scope of services for each award. We have been funning the SHP program successfully for years, and in fact have been so successful that we’ve had multiple clients remain with us for over 10 years.
3. Describe your organization’s experience in leveraging other federal, state, local and private sector funds.
As mentioned above, EECM has a history of working with federal, state, and local funding and has been required to leverage private funding to secure government support. We leverage funds every year for multiple federal awards; our finance department is very familiar with how to manage these types of awards. Of course federal funding alone does not cover the costs of the program and we utilize private funding from foundations, individuals, and corporations to make up the difference. We leverage our funding by partnering with East Liberty Family Health Center, Mercy Behavioral Health, and Western Pennsylvania Psychiatric Institute and Clinic, among other local partners.
4. Describe the basic organizational and management structure of your organization. Include evidence of effective internal communication, external coordination with outside partners and an adequate financial accounting system.
EECM is overseen by a governing board of directors. Our Executive Director reports to the Board of Directors, and each department director reports to the Executive Director. Our management team meets weekly to discuss pressing topics, and we openly develop the budget and agree to major expenses or cuts as a team. We are currently transitioning to a more powerful nonprofit accounting system, Abila’s MIP system, so we can more efficiently track expenses, revenues, contracts, and grants. We have an internal check and balance system that requires oversight from multiple departments to ensure expenses are properly coded and booked. Our IMPACTS program, which oversees the SHP, has a long history of working with external partners for trainings and referrals. As

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a community based organization we are committed to working with community partners to leverage their expertise in a specific area, for the overall benefit of the client. Additionally, they meet as a team each week to provide for the coordinated care of all of our clients. This care team meetings includes case managers, program directors and managers, behavioral health, and education and employment services. We are currently upgrading our accounting system, which will make the tracking of government grants even easier; the new system will be in place by July 1.

5. Describe any unresolved monitoring or audit findings for any HUD grants (including ESG) operated by your organization (if any).

There are no unresolved findings.

B. Target Population and Approach (20 points)

6. Provide a summary description of the entire scope of your organization's proposed Program. Our proposed program will house 10 mentally or physically disabled, chronically homeless, single adult men in a shared apartment complex. Two men will share an apartment (unless in one of the physically disabled units, which are bed units). On the occasion of an opening, referrals are through Allegheny Link.

An important part of the supportive housing program is building stability in the lives of those who have been chronically homeless. We meet the individuals where they are and as we build relationships with each of the men we gradually introduce possible services to them which will help improve self sufficiency. An individual who has lived their life in chronic homelessness often did not build positive external networks that can help provide for their needs. Additionally, the emotional trauma of homelessness stymies and individual's personal development. We work with each person to develop their individual care plans which will highlights their goals. For some that may be showering once a week or not taking their personal belongings with them each day when they stroll around the neighborhood. For others that may mean obtaining a job or a GED or just socializing and building trusting human relationships. For each client, their individual goals are what dictate their care plans. Goal setting is key, teaching residents that their ideas and goals are worth developing and they as individuals are able to achieve those goals. Each individual is assigned a case manager who will guide him through setting and achieving their goals. We also provide referrals to our behavioral health services if an individual is not already connected to community based treatment facilities, and a referral to East Liberty Family Health Center to start moving towards physical health as well. For those interested individuals may utilize the education & employment services offered at EECM. For those who are ready to start giving back to the community, we provide opportunities for individuals to volunteer in the food pantry, the computer lab, the community garden and various other possibilities. The ability for an individual to give back, builds pride and illustrates a sense of self-worth and accomplishment that these men have likely not felt before.

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Additionally, EECM is taking a trauma-informed approach to working with all of its clients. In doing so, we are focusing on considering individuals' behavior in a way that allows us to focus on understanding and not judging leading to good communication, building safety into all interactions with the ultimate end of helping the client achieve their goals. We are also adding motivational interviewing skills to every case manager's tool box.

The overriding goal of what has been named our "Safe Haven" program is to provide the ten men with the case management resources education and employment services and behavioral health supports so they may move toward greater self-sufficiency. Goals for self-sufficiency are personal to each individual. To monitor progress toward those goals, we utilize a self-sufficiency matrix where residents are graded on a scale of 1 through 5 on different categories of self-sufficiency. Case managers record progress in these categories to ensure each client is moving toward greater self-sufficiency. In 2015 we installed the database, utilizing the Salesforce® platform, to track client progress and establish baseline data for our sheltering, housing and education, and employment programs. As we are in the process of establishing our baseline data, at this time, we expect that each client will make progress in their journey toward self-sufficiency.

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

The individuals served in the permanent housing program meet with a case manager at least once per month – or more often as needed. The use of the case management database allows us to track goals, actions steps, responsible parties, due dates and progress towards the individual's goals. With regard to completing HMIS data entry timely, the impacts program manager has direct oversight and quality assurance for HMIS data entry. We are also utilizing Microsoft Outlook tools to ensure that annual and updated assessments are completed in a timely manner. Now that we are able to pull reports out of the HMIS system, we will also utilize that information to be sure that our data quality is as needed. It is important to our organization that we are providing effective services and timely completing our HMIS information.
8. Describe your organization's proposed staffing plan.
 - a. Staff experience working with the Target Population and in the housing community

The SHP will be staffed with a full time case manager, supervised by the impacts program manager. The IMPACTS Program Director, who has ultimate oversight of the program has over a decade of experience working in the homeless system with the target population, the IMPACTS Program Manager has worked with the community for over a decade himself, and the case manager for this program has been with EECM for a number of years, working with individuals experiencing chronic homelessness as well as significant experience working with and providing advocacy for individuals with mental illness.
 - b. Your organization's strategy for recruiting and retaining quality staff

Our organization has many long-term staff and to ensure we have the best opportunity to keep staff we pay 100% of medical benefits and recently instituted 5% raises for all employees to help bring salaries closer to market rate. Additionally, should we need to recruit additional staff we have multiple venues for posting and recruiting staff.

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- c. Your organization’s professional development and staff training program
 IMPACTS program staff have started training in trauma-informed care (all agency staff trained as well), and have recently finished motivational interviewing training to better assist clients in identifying and achieving their goals. Both trauma-informed care and motivational interviewing are primary areas of focus and training for impacts management staff and all case managers over the next three years. Each impacts staff person will attend the mental health first aid training. We are in process of provide CPR and first aid training on site for staff as well.
 - d. Your organization’s plan for staff performance management
 Each staff person receives a yearly evaluation which reviews goals from the previous year and establishes goals for the upcoming year. In addition to the yearly evaluation, IMPACTS managers regularly review staff performance to provide both positive reinforcement as well as performance improvement plans.
9. The Target Population for this RFP is adults experiencing chronic homelessness. Beyond that, the Program has not identified a specific subpopulation focus. If your organization will propose serving a specific subpopulation, please identify it by completing the Population Focus chart below. Provide a narrative describing the specific subpopulation(s) and why you propose the specific focus.

Population Focus			
Chronically Homeless	<input checked="" type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth under 25	<input type="checkbox"/>	Mental Illness	<input checked="" type="checkbox"/>
Families	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
Other: Specify – Physical disability (2 ACCESSIBLE UNITES)			

[Click here to enter text.](#)

10. In the charts below, summarize your organization’s proposed Program. The numbers are intended to reflect your organization’s plan for the Program at maximum capacity. Numbers should reflect a single point in time and not the number serviced over the course of a year or grant term.

Persons in Households without Children			
	Adults over age 24	Adults ages 18-24	Total Persons
Chronically Homeless Non-Veterans	5	Enter #	5
Chronically Homeless Veterans	5	Enter #	5
Non-Chronically Homeless Veterans	Enter #	Enter #	Enter #
Chronic Substance Abuse	Enter #	Enter #	Enter #
People with HIV/AIDS	Enter #	Enter #	Enter #
People with Severe Mentally Illness	Enter #	Enter #	Enter #
Victims of Domestic Violence	Enter #	Enter #	Enter #
People with a Physical Disability	Enter #	Enter #	Enter #
People with a Developmental Disability	Enter #	Enter #	Enter #
People not represented by listed subpopulations	Enter #	Enter #	Enter #

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Housing Type	Units	Beds	Dedicated CH Beds	Non-CH Beds
Apartment Complex	10	10	10	0

Households	Households with at least one adult and one child	Adult households without children	Households with only children	Total
Total number of households	0	6	0	6

Characteristics	Persons in households with at least one adult and one child	Adult persons in households without children	Persons in households with only children	Total
Adults over age 24	0	10	0	10
Adults over age 18-24	0	0	0	0
Accompanied children under age 18	0	0	0	0
Unaccompanied children under age 18	0	0	0	0
Total Persons	0	10	0	10

C. Housing Services (10 points)

11. Describe your organization’s housing facility or facilities including physical description, number of beds and geographic location.

The apartment complex for this program is in Pittsburgh’s East Liberty neighborhood, with access to bus lines and in close proximity to EECM’s Community House. The location is also close to other services residents would likely require such as the social security office, a community health center, banking, and grocery stores. The building offers two single occupancy apartments on ground level for residents who suffer from a physical disability and both units are wheelchair accessible. The other four units are dual occupancy. All units have a fully equipped kitchen and are furnished. There are 10 beds in 6 units.

12. Please fill out the following charts to indicate if you will follow a Housing First model. (Note: if a project does not choose all of the selections in the following charts, except none of the above, then the project is not considered Housing First.)

Does the project ensure that participants are not screened out based on the following items? Select all that apply	
Having too little or no income	<input checked="" type="checkbox"/>

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Active history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of domestic violence	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

Does the project ensure that participants are not terminated from the program for the following reasons? Select all that apply	
Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>
Being a victim of domestic violence	<input checked="" type="checkbox"/>
Any other activity not covered in a lease agreement typically found in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

D. Supportive Services (10 points)

13. Describe your organization's plan for coordinating with outside partners to ensure that the Program is successful, including your plan for leveraging funds and support.

As an agency EECM works very closely with WPIC, Mercy Behavioral Health, and East Liberty Family Health Care Center, social security administration, Northside Christian Health Center, Goodwill, East End Thrift Store, Milestone, and the Veterans Administration.

14. In the following Supportive Services chart indicate who will provide the Supportive Services and how often Participants will receive the Supportive Services that your organization plans to offer. The chart has drop-down lists that provide specific answers for you to use. If your organization will not be providing or subcontracting the listed service in the chart, then do not complete that particular service. Provide a brief narrative on your organization's plan for Supportive Services in the narrative box below.

Supportive Service	Provider	Frequency
Assessment of Service Needs	Your organization	Monthly
Assistance with Moving Costs	Your organization	As needed
Case Management	Your organization	Daily
Education Services	Your organization	As needed
Employment Assistance & Job Training	Your organization	As needed
Food	Your organization	As needed
Housing Search & Counseling Services	Your organization	As needed
Legal Services	A non-partner agency	As needed
Life Skills Training	Your organization	As needed
Mental Health	A partner agency	As needed

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Outpatient Health Services	A partner agency	As needed
Outreach Services	Your organization	As needed
Substance Abuse Treatment	A partner agency	As needed
Transportation	Your organization	As needed
Utility Deposits	Choose an item.	Choose an item.

Most supportive services are provided directly by EECM. We provide case management services on site. Clients work directly with their case manager to assessment their goals and service needs based on those goals. the case manager will make either an internal referral for service provided by EECM such as the food pantry, education and employment services and if needed and the client in not involved in community based services behavioral health counseling – though most behavioral health is provided by partner agencies such as WPIC or Mercy Behavioral Health. Utility deposits are not needed because we are a facility based program.

E. Performance Outcomes (10 points)

15. Describe your organization’s plan to track and achieve the HUD performance standards and fill out the chart below:
- a. Maintaining permanent housing or exiting to permanent housing
Our goal is for all clients to either remain in permanent housing or to exit to permanent housing. We use both HMIS and our internal case management database to track length of stay and discharge information.
 - b. Maintaining or increasing income
Most of the clients in the program have significant mental and physical health disabilities which make employment difficult for most. The focus for maintaining and/or increasing income is through benefits such as social security disability, VA benefits and possibly pensions. We work diligently with clients who are not already on disability to apply, as appropriate, for benefits so as to maximize their income. Income is tracked through HMIS and our internal database.
 - c. Maintaining or increasing non-cash benefits (e.g., Food Stamps)
Part of each client’s assessment we determine what non-cash benefits each person has and what benefits they still need to obtain. The case manager then assists the clients to obtain food stamps, health insurance and any other benefits to which the person is entitled. Non-cash benefits are tracked through HMIS and our internal database.

Housing Measures			
Proposed Measure	Target (#)	Universe (#)	Target (%)
Participants remaining in permanent housing or exiting to permanent housing destinations at the end of the operating year	9	10	90
Participants maintaining or increasing their total income (from all sources) at the end of the operating year	9	10	90

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Participants maintaining or increasing their non-cash benefits at the end of the operating year	9	10	90
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16. Describe other outcomes that your organization plans to achieve and your organization’s plan for tracking and achieving those outcomes. Use the chart below to summarize those outcomes. Insert or delete lines/charts as necessary.

Additional Performance Measures
Participants will remain substance free through the operating year. We will track this information through our internal database. We are able to provide for lab-based drug testing and breathalyzers as needed.
Click here to enter text.
Click here to enter text.

Additional Performance Measures Detail			
Proposed Measure	Target (#)	Universe (#)	Target (%)
Participants will remain substance free through the operation year.	4	8	50%
Data source and data collection method: INTERNAL DATABASE			
Specific data elements and formula proposed for calculating results: DRUG/BREATHALYZER TEST RESULTS AND CASE NOTES			
Rationale for why the proposed measure is an appropriate indicator of performance: Prior experience indicates a greatly likelihood of maintaining permanent housing with sustained sobriety and therefore, assisting clients with achieving and/or maintaining sobriety will strengthen likelihood of remaining in or exiting to permanent housing.			

Additional Performance Measures Detail			
Proposed Measure	Target (#)	Universe (#)	Target (%)
Click here to enter text.	Enter #	Enter #	Enter %
Data source and data collection method: Click here to enter text.			
Specific data elements and formula proposed for calculating results: Click here to enter text.			
Rationale for why the proposed measure is an appropriate indicator of performance: Click here to enter text.			

Additional Performance Measures Detail			
Proposed Measure	Target (#)	Universe (#)	Target (%)
Click here to enter text.	Enter #	Enter #	Enter %
Data source and data collection method: Click here to enter text.			
Specific data elements and formula proposed for calculating results:			

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Click here to enter text.
Rationale for why the proposed measure is an appropriate indicator of performance: Click here to enter text.

F. Referral and Outreach (5 points)

17. Describe your organization’s plan for securing beds for participants.
Because we are a facility based program we are able to guarantee all beds needed for this program. When someone is ready to exit the program, we are able to work with our many housing and landlord partners to locate and secure permanent housing.
18. Describe the outreach plan to bring chronically homeless individuals into the project.
We work directly with Allegheny link for referrals of chronically homeless individuals. The program is 100% chronically homeless. We have historically had very little turn over in the program.

Enter the percentage of project participants that will be coming from each of the following locations	
33	Directly from the street or other locations not meant for human habitation
34	Directly from emergency shelters
33	Directly from safe havens
100	Total of above percentages

G. HMIS (5 points)

19. Describe your organization’s previous experience inputting data into HMIS.
EECM uses HMIS on a daily basis, for all sheltering and housing programs.
20. Describe your organization’s plan for managing referrals through HMIS, strategy for inputting the required data into HMIS in a timely manner and who on your staff is responsible for this.
All case manager are responsible for inputting information into HMIS. We work diligently to follow the requirements set out by DHS. Additionally, the IMPACTS program manager and the impacts evening supervisor are primarily responsible for requesting, contacting and admitting referrals for the programs (with the exception of F.A.I.T.H. and Penn Free) all referrals into EECM’s homeless programming are through HMIS.
21. Describe your organization’s quality assurance procedures for inputting data in HMIS and correcting data when necessary.
The impacts program manager directly oversees HMIS and provide quality assessments to ensure timeliness of data entry. He works directly with Allegheny link, county homeless staff and the help desk to make any needed corrections to the data. EECM’s expectations for their employee is that all data will be entered in accordance with the requirements set forth by DHS. EECM will provide additional training internally and if needed request additional training through HMIS should staff have difficulty inputting data into HMIS.

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H. Budget and Budget Narrative (15 points)

Attach an audited financial report for your organization and describe how it reflects your financial policies and organizational stability (does not count towards page limit).

Please provide a detailed budget and narrative that clearly supports the Program. The charts below are HUD’s specific budget format. Use the charts to provide details on your organization’s proposed budget. Please see charts below.

Select the costs for which funding is being requested	
Acquisition/Rehabilitation/New Construction	<input type="checkbox"/>
Leased Units	<input checked="" type="checkbox"/>
Leased Structures	<input type="checkbox"/>
Rental Assistance	<input type="checkbox"/>
Supportive Services	<input type="checkbox"/>
Operations	<input type="checkbox"/>
HMIS	<input type="checkbox"/>

Rental Assistance Budget			
Total request for grant term			120,049
Total units			10
Type of rental assistance	FMR Area	Total Units Requested	Total Request
PRA	PA - Pittsburgh, 4200399999	10	37,680

Type of Rental Assistance: Choose an item.

Options include tenant-based (TRA), sponsor-based (SRA), and project-based assistance (PRA). Each type has unique requirements and Proposers should refer to the 24 CFR 578.51 before making a selection.

Metropolitan or non-metropolitan fair market rent area: [Click here to enter text.](#)

Select the FY 2016 FMR area in which the project is located. The selected FMR area will be used to populate the rents in the chart below. See <https://www.huduser.gov/portal/datasets/fmr.html> for more information and how to determine your organization’s FMR area.

Rental Assistance Budget Detail						
Size of Units	Number of Units		Fair Market Rent		Number of Months	Total
SRO		X		X	=	
0 bedroom		X		X	=	
1 bedroom	2	X	204.00	X	12	= 4,896
2 bedroom	4	X	683.00	X	12	= 32,784

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3 bedroom		X		X		=	
4 bedroom		X		X		=	
5 bedroom		X		X		=	
6 bedroom		X		X		=	
7 bedroom		X		X		=	
Total	6	X	612.00	X	12	=	37,680

Supportive Services Budget		
Category	Quantity and Description	Annual Assistance Requested
Assessment of Service Needs		
Assistance with Moving Costs		
Case Management	1 FTE Case Manager, 1.5 FTE Monitoring Staff	67,648
Child Care		
Educational Services		
Employment Assistance		
Food	Groceries	500
Housing/Counseling Services		
Legal Services		
Life Skills		
Mental Health Services		
Outpatient Health Services		
Outreach Services		
Substance Abuse Treatment Services		
Transportation	Client transportation	2,000
Utility Deposits		
Operating Costs		
Total Services Requested		70,148

Summary for Match	
Total Value of Cash Commitments	30,100
Total Value of In-Kind Commitments	0
Total Value of All Commitments	30,100

Summary for Leverage	
Total Value of Cash Commitments	0
Total Value of In-Kind Commitments	16,421
Total Value of All Commitments	16,421

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Match or Leverage	Type	Source	Contributor	Date of Commitment	Value of Commitments
Leverage	In-Kind	Government	Allegheny County Department of Human Services	ongoing	16,421
Match	Cash	Private	East End Cooperative Ministry	Ongoing	30,100
Choose an item.	Choose an item.	Choose an item.	Click here to enter text.	Enter Date	Enter \$

Summary Budget			
Eligible Costs	Annual Assistance Requested	Grant Term	Total Assistance Requested for Grant Term
1a. Acquisition			
1b. Rehabilitation			
1c. New Construction			
2a. Leased Units	37,680	1 year	37,680
2b. Leased Structures			
3. Rental Assistance			
4. Supportive Services	70,148	1 year	70,148
5. Operating	4,368	1 year	4,368
6. HMIS			
7. Sub-total Costs Requested	150,		112,196
8. Admin (up to 7%)			7,853
9. Total Assistance Plus Admin Requested			120,049
10. Cash Match			30,100
11. In-Kind Match			0
12. Total Match			30,100
13. Total Budget			150,149

ATTACHMENTS

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Please submit the following attachments with your Response Form. These can be found at: [http://www.alleghenycounty.us/Human-Services/Resources/Doing-Business/Solicitations-\(RFP/RFQ/RFI\).aspx](http://www.alleghenycounty.us/Human-Services/Resources/Doing-Business/Solicitations-(RFP/RFQ/RFI).aspx)

- Allegheny County Vendor Creation Form
- Cover Page
- W9 Form
- MWDBE Participation Statement Form
- MWDBE Waiver Request Form

CERTIFICATION

Please read the below statement and check the box to indicate agreement with its content.

By submitting this Proposal, I certify and represent to the County that all submitted materials are my work and that all responses are true and accurate.