

**TOWN OF BROOKHAVEN  
COMMUNITY DEVELOPMENT**



**EMERGENCY SOLUTIONS GRANT (ESG) PROGRAM  
COVID-19 ROUND 2 FUNDING REQUEST APPLICATION  
CARES ACT COVID-19 FUNDING ALLOCATIONS**

**Deadline: October 30, 2020**

Alison Karppi, Commissioner  
Department of Housing and Human Services  
[Akarppi@brookhavenny.gov](mailto:Akarppi@brookhavenny.gov)  
631-451-6600

**Edward P. Romaine, Supervisor**

Valerie M. Cartright, District 1      Michael A. Loguercio Jr., District 4  
Jane Bonner, District 2              Neil Foley, District 5  
Kevin J. LaValle, District 3         Daniel Panico, District 6  
Donna Lent, Town Clerk  
Louis Maroccia, Receiver of Taxes  
Daniel Losquadro, Superintendent of Highways

**TOWN OF BROOKHAVEN**  
**EMERGENCY SOLUTIONS GRANT – COVID RELIEF FUNDS APPLICATION**

**Introduction:**

The objectives of the Emergency Solutions Grant Program are partially to increase the number and quality of emergency shelters and facilities for homeless individuals and families, to operate these facilities and provide essential social services. The program has now been revised and expanded to include a strong emphasis on homelessness prevention and on rapid re-housing.

In response to the Coronavirus Pandemic (COVID-19), the U.S. Department of Housing and Urban Development (HUD) has notified the Town of Brookhaven that it will receive a second special supplemental allocation to be used to prevent, prepare for, and respond to the Coronavirus (COVID-19). This allocation was authorized by the Coronavirus Aid, Relief, and Economic Security (CARES) Act, Public Law 116-136, which was signed into law on March 27, 2020 to respond to the growing effects of this historic public crisis.

In 2020, Point In Time (PIT) count, there were an estimated 411 homeless households (251 family households and 160 single households) in the Town of Brookhaven. Due to the lack of HUD-funded permanent housing and low vacancy rates for affordable units in the Town of Brookhaven, this Notice of Funding Availability (NOFA) prioritizes the funding of projects that can make a meaningful impact keeping people housed safely (reducing inflow into the homeless system); for households currently homeless, to keep them connected to permanent housing in an expedient and client-centered manner (increasing outflow from the homeless system).

The following principles guided the Long Island Consolidated Investment Planning (CIP) process, through which the different ESG recipients and funded-level stakeholders participated in coordination meetings to help drive their funding priorities. As such, this will be the guiding principles that the Town of Brookhaven will use to fund their programs in the expedited ESG-CV NOFA process.

The Town of Brookhaven is pleased to announce the availability of funds to assist your organization with expenses that you have incurred or are likely to incur to prevent, prepare for, and respond to limit the exposure and spread of the Coronavirus COVID-19.

**Funding Principles:**

- Town of Brookhaven will fund housing-focused programs that lead to clear pathways to permanent housing options, including targeted Homelessness Prevention (HP), Rapid Re-Housing (RRH), Street Outreach (SO), and the Emergency Shelter (ES) component to support housing problem solving and diversion.
- All Town of Brookhaven ESG-CV funded programs will implement diversion, rapid resolution and problem-solving methodologies (driven by the CoC problem-solving framework) to divert persons from the homeless system, when possible.
- All Town of Brookhaven ESG-CV funded programs must comply with the [HUD ESG-CV Notice](#) (HUD Notice CPD-20-08).
- All Town of Brookhaven ESG-CV funded programs will focus efforts on furthering racial equity across the homeless system in alignment with [HUD's framework for advancing racial equity](#). This includes (but is not limited to) strategies such as:
  - Seeking inclusion from marginalized populations, such as individuals and families most impacted by the homeless system, to participate in the development of policies and procedures that impact service delivery
  - Using data to identify the greatest disparities in access, services, housing, etc. (specifically identifying racial disparities)

Town of Brookhaven encourages engagement and participation of new partners and solicits specific program models to address racial equity including targeting assistance to Black single-parent households with children and for undocumented households (populations underserved in housing programs and overrepresented in Long Island's homeless and at-risk population per HMIS and the CoC Racial Equity Committee). This strategy will require engagement with non-traditional ESG partners that work with specific populations that experience homelessness disproportionately based on local data. Applicants are encouraged to consider partnering with local organizations that target these underserved populations that may be unfamiliar with the ESG-CV program.

Grantees that are selected for funding will be required to assist the Town of Brookhaven in preparing its application to HUD, including development of the written criteria for client eligibility, financial assistance, and performance standards.

### **Programs that will be funded:**

Town of Brookhaven will fund housing-focused programs that lead to clear pathways to permanent housing options, including the following:

- **Targeted Homelessness Prevention:** Targeted HP models that assist the households most likely to experience homelessness and aims to keep marginalized populations housed due to structural barriers.
  - **Requirements:**
    - Programs funded under the HP component must utilize the Coordinated Entry System Homeless Prevention assessment and prioritization criteria as defined by the Long Island CoC, and will coordinate with other homeless prevention funding (including, but not limited to: CSBG, EFSP, CRF, NCDSS and SCDSS) through the Long Island CIP HP Cohort.
    - Homeless prevention providers will expand housing focused case management practices underpinned with diversion, rapid resolution and problem-solving methodologies.
    - Services and length of assistance (including for rental assistance) will be individualized and tailored to the household's needs for achieving housing stability.
    - Serve populations that have a demonstrated need (Note: providers must demonstrate this need in the application, and it should include qualitative or quantitative data to support the need).

For example, vulnerable households include: households existing institutions or systems of care (jails/prisons or foster care); households who are likely to have to stay in an emergency shelter or unsheltered location because of individual circumstances, or because they have experienced a crisis event (e.g. DV, health problem, lost housing); households living in neighborhoods or zip codes where large numbers of people last resided before seeking help with housing assistance\*; households with heightened risk of severe impacts from COVID-19 exposure; or households who previously received assistance from the homeless system.

- **Eligible Costs:**
  - Rental Assistance: rental assistance and rental arrears
  - Financial assistance: rental application fees, security and utility deposits, utility payments, last month's rent, moving costs
  - Landlord Incentives that are reasonable and necessary to obtain housing for individuals and families at risk of or experiencing homelessness (e.g., signing bonuses, security deposits, cost to repair damages, or additional maintenance), as allowed through HUD Notice CPD-20-08.
  - Services: housing search and placement, housing stability case management, landlord-tenant mediation, tenant legal services, credit repair Diversion, Problem Solving and Rapid Resolution.
- **Minimum eligibility criteria:** Individuals and families who meet the criteria under the "at risk of homelessness" definition, or who meet the criteria in paragraph (2), (3), or (4) of the "homeless" definition in 24 CFR 576.2 and have an annual income below 30 percent of median family income for the area, as determined by HUD. Note: ESG-CV under CARES Act funding expanded income limits to up to 50% AMI. Applicants must abide by HUD requirements and Town of Brookhaven written standards.

- **Special Note:** ESG and ESG-CV funds are unable to provide rental arrears during a federal (CDC Eviction Moratorium) or state-level (Safe Harbor Act) eviction moratorium. Rental assistance can still be provided for eligible clients in limited circumstances and the Town of Brookhaven encourages those applying for HP to focus on diversion, problem solving and rapid resolution strategies during the eviction moratoria.
- **Rapid Re-housing funds** will be used to support a robust program model that includes elements of successful rapid re-housing programs including system-level coordinated landlord engagement, expansion of housing focused case management practices and underpinned with diversion, rapid resolution and problem-solving methodologies.
  - **Requirements:**
    - RRH projects will be expected to utilize progressive engagement model aligned with the CoC and ESG written standards. Housing-focused case managers and other support staff should employ an individualized, strengths-based approach, assuring that RRH participants will be successful in their housing placements. While some participants will achieve stability through the short-term financial assistance and case management, others may require a longer-term subsidy with more intensive supports.
    - Funding options for rapid exit in which a program participant can be immediately enrolled if a safe housing option has been secured and financial assistance is required.
    - Funding options for households with a higher acuity, understanding housing-focused case management will be provided commensurate to the needs of the household. In cases where additional assistance is needed beyond maximum allotted assistance (24 months for ESG and 12 months for ESG-CV), the providers will coordinate with other PH and PSH partners and the coordinated entry system to identify an appropriate household placement (e.g., RRH to PSH bridge).
    - Funding for one landlord engagement specialist for the Town of Brookhaven whose position will coordinate with other landlord engagement staff (including existing staff at LICH) specialized across Nassau and Suffolk Counties and whose position is primarily focused on housing search and placement. This includes activities to assist in finding and retaining suitable housing including tenant counseling, making moving arrangements; help with leases, securing utilities, mediation and outreach to property owners to secure housing.
  - **Eligible Costs:**
    - Rental Assistance: rental assistance and rental arrears
    - Financial Assistance: rental application fees, security and utility deposits, utility payments, last month's rent, moving costs
    - Landlord Incentives that are reasonable and necessary to obtain housing for individuals and families at risk of or experiencing homelessness (e.g., signing bonuses, security deposits, cost to repair damages, or additional maintenance), as allowed through HUD Notice CPD-20-08.
    - Services: housing search and placement, housing stability case management, landlord-tenant mediation, tenant legal services, credit repair, Diversion, Problem Solving and Rapid Resolution
  - **Minimum eligibility criteria:** Eligible program participants: Individuals and families who meet the criteria under paragraph (1) of the "homeless" definition in 24 CFR 576.2 or who meet the criteria under paragraph (4) of the "homeless" definition and live in an emergency shelter or other place described in paragraph (1) of the "homeless" definition.
  - **Special Note:** The Town of Brookhaven is looking to fund one (1) FTE landlord engagement specialist that must coordinate with other landlord engagement staff at LICH and other programs funded through ESG-CV in Suffolk and Nassau Counties.

- **Street Outreach funds** will be used to implement housing focused street outreach models whose primary goal is to house unsheltered persons quickly. Town of Brookhaven will prioritize funding housing navigation services.
  - **Requirements:** The street outreach funded programs will coordinate with existing street outreach programs across Long Island to assure unsheltered persons receive access to coordinated entry and housing resources.
  - **Eligible Costs:**
    - Essential Services related to reaching out to unsheltered homeless individuals and families connecting them with emergency shelter, housing, or critical services
    - Providing urgent, non-facility-based care
    - Engagement
    - Case management
    - Emergency health and mental health services
    - Food
    - Transportation
    - Diversion, Problem Solving and Rapid Resolution
  - **Minimum Eligibility Requirements:** Eligible program participants: Individuals and families who qualify as homeless under paragraph (1) (i) of the “homeless” definition under 24 CFR 576.2.
  - **Special Note:** The Town of Brookhaven does not intend to fund street outreach programs that focus on survival street outreach models. ESG-CV Street Outreach models must include a focus on housing those unsheltered in the Town of Brookhaven.
  
- **Emergency Shelter diversion/problem solving** will be used to aid existing shelter programs with de-densifying the shelter population and providing proactive housing-based case management to aid in rapid exit of shelter residents through diversion or through coordinated entry system housing placements.
  - **Requirements:** The emergency shelter component will be funded for the primary purpose of diverting households from entering the homeless system and/or engaging in rapid exit strategies, so households are connected to a safe housing option shortly after entering the shelter.
  - **Eligible Costs:**
    - Problem solving, diversion and rapid resolution
    - Housing-focused Case Management
    - Transportation
    - Vocational Certifications & Licenses
    - Background/Credit Check
    - Obtaining IDs and Birth Certificate
    - Food/Groceries
    - Legal Services
  
- **Additional requirements:**
  - All ESG-CV funded programs (except victim service providers) must participate in the existing HMIS of the Long Island CoC which provides geographic coverage over Nassau and Suffolk Counties.
  - All ESG-CV funded programs must follow the CoC coordinated entry policies and procedures for assessing, prioritizing, and referring households, and which must be aligned in the written standards for Town of Brookhaven.
    - All ESG-CV funded programs must follow the established ESG Written Standards for the Town of Brookhaven.

**All proposals must be received at Town of Brookhaven, Department of Housing and Human Services office no later than October 30, 2020 at 4:30p.m.** Please keep in mind that all services to be provided must be located within the Town of Brookhaven.

**TOWN OF BROOKHAVEN  
EMERGENCY SOLUTIONS GRANT – COVID RELIEF FUNDS APPLICATION**

**I. General Organizational Information**

A. Applicant Organization: \_\_\_\_\_

B. Address: \_\_\_\_\_

C. Contact Person: \_\_\_\_\_

D. Year(s) organization and any shelters have been functioning:

E. Telephone Number: \_\_\_\_\_

F. Fax Number: \_\_\_\_\_

G. E-mail Address: \_\_\_\_\_

H. Total amount of ESG-COVID(2) Dollars Requested: \$ \_\_\_\_\_

I. Total amount of ESG Dollars Awarded to your organization by Town of Brookhaven or other organizations in 2019:

2019 \$ \_\_\_\_\_

J. Total amount of other homelessness funding awarded to your organization in:

2018 \$ \_\_\_\_\_

2019 \$ \_\_\_\_\_

Sources: \_\_\_\_\_

**TOWN OF BROOKHAVEN  
EMERGENCY SOLUTIONS GRANT – COVID RELIEF FUNDS APPLICATION**

**II. Activity Information**

- A. Brief description of your agency’s present program (s) to prevent homelessness and/or serve the homeless in the Town of Brookhaven. Include target population, services, housing, etc. (Mission Statement).

---

---

---

---

---

---

---

---

- B. If you operate shelters in the Town of Brookhaven, please provide the following information:

**Specific Location for Project #1:**

Project Name: \_\_\_\_\_ Address: \_\_\_\_\_

1. Owned (attach deed) \_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_  
2. Rented (attach lease) \_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_

**Specific Location for Project #2:**

Project Name: \_\_\_\_\_ Address: \_\_\_\_\_

1. Owned (attach deed) \_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_  
2. Rented (attach lease) \_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_

- C. Project Description(s) and Anticipated Accomplishments as they relate to COVID-19 Pandemic:  
Provide a detailed description of proposed activity, including the number of persons expected to be served to prevent, prepare for and respond to the Coronavirus.  
***(Please attach separately)***

**TOWN OF BROOKHAVEN**  
**EMERGENCY SOLUTIONS GRANT – COVID RELIEF FUNDS APPLICATION**

- D. Please check all applicable proposed program activities in accordance with and 24 CFR 576.100 - 576.109:
- Rapid Re-Housing-Rental Assistance
  - Rapid Re-Housing-Housing Relocation and Stabilization Services
  - Homelessness Prevention-Rental Assistance
  - Homelessness Prevention-Housing Relocation and Stabilization Services
  - HMIS
  - Emergency Shelter-Shelter Operations
  - Emergency Shelter-Essential Services

- E. If funding for essential services or homeless prevention services is being sought, is the service a new service:  YES  NO  N/A
- If this is a new service as it relates to COVID-19 Pandemic, please give a detailed description as to how you will provide services during the eviction moratorium:

---

---

---

- F. Goals and Performance Measurement - Please provide a description of the expected outcome of this activity. (e.g. 20 families will be re-housed).

---

---

---

- G. Plan for involving homeless or formerly homeless persons in program design and operation.

---

---

---

- H. Experience: Describe the experience of your organization in implementing the activities that you have proposed in the application. Specifically, include the years of experience of staff and your organization.

---

---

---

**TOWN OF BROOKHAVEN  
EMERGENCY SOLUTIONS GRANT – COVID RELIEF FUNDS APPLICATION**

I. What steps have been undertaken, or will be undertaken, to ensure timely completion of this project or activity?

---

---

---

J. Anticipated project start date: \_\_\_\_\_

K. Anticipated project completion date: \_\_\_\_\_

L. Additional HUD Activity Set Up Information:

Is the primary purpose of the activity to:

Help prevent homelessness?                    \_\_\_ YES    \_\_\_ NO

Help the homeless?                            \_\_\_ YES    \_\_\_ NO

**TOWN OF BROOKHAVEN  
EMERGENCY SOLUTIONS GRANT – COVID RELIEF FUNDS APPLICATION**

**III. Budget Information**

**A. Total Program Budget**

Please provide a program budget listing all expected sources of funds. Attach copies of any funding commitment letters or requests for funding from all other sources.

<b>TOTAL PROGRAM BUDGET</b>	<b>BUDGET (IF ANY)</b>	<b>FUNDING REQUESTED FOR COVID-19</b>
Town of Brookhaven ESG		
Other Federal (List)		
1)		
2)		
3)		
State		
Suffolk County DDS		
Local Government		
Private		
Organizational Contribution (List Sources)		
1)		
2)		
3)		
<b>Total Project Cost:</b>		

**If more space is needed, please attach separately.**

**TOWN OF BROOKHAVEN  
EMERGENCY SOLUTIONS GRANT – COVID RELIEF FUNDS APPLICATION**

**A. Matching Requirements**

**The Emergency Solution Grant – COVID funds do not require a match.**

**B. ESG Budget Details**

Please provide a detailed budget of the intended use of the requested Emergency Solutions Grant funding from the Town of Brookhaven.

<b>BUDGET CATEGORY</b>	<b>ESG-CV(2) FUNDS (\$)</b>		<b>TOTAL (\$)</b>
RRH – RENTAL ASSISTANCE			
RRH-HOUSING RELOC. & STAB. SERVICES			
HP – RENTAL ASSISTANCE			
HP – HOUSING RELOC. & STAB. SERVICES			
EMERGENCY SHELTER OPERATIONS			
EMERGENCY SHELTER ESSENTIAL SERVICE			
HMIS			
<b>TOTAL:</b>			

**IV. Past Performance**

A. Please describe any past experience with the Emergency Solutions Grants program. (Non-COVID)

---



---



---



---



---



---



---

**TOWN OF BROOKHAVEN  
EMERGENCY SOLUTIONS GRANT – COVID RELIEF FUNDS APPLICATION**

**CERTIFICATION OF PARTICIPATION IN CONTINUUM OF CARE  
ATTENDANCE AND PARTICIPATION FORM**

All ESG-COVID applicants must submit this Form, completed by the chairperson of their Continuum of Care, with their Emergency Solutions Grant Application.

Attention CoC leaders: Please complete the information below and check the appropriate level of participation. Funding consideration will be based in part on the extent of the applicant's participation in the local CoC.

**To be completed by Applicant:**

Date: \_\_\_\_\_

Agency Applying: \_\_\_\_\_

Agency applying for ESG funding in: Town of Brookhaven

**To be completed by CoC lead Agency:**

CoC leader Print Name: \_\_\_\_\_

CoC Leader Signature: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_ YES, the above agency has been an active participant in the Local Continuum of Care meetings in 2020. We have had \_\_\_\_\_ meetings and they have attended \_\_\_\_\_ of the meetings. (75% or more)

\_\_\_\_\_ NO, the above agency has not been an active participant in the Local Continuum of Care meetings in 2020. We have had \_\_\_\_\_ meetings and they have attended \_\_\_\_\_ of the meetings. (less than 75%). At this time, they have not been a consistent active member.

**TOWN OF BROOKHAVEN  
EMERGENCY SOLUTIONS GRANT – COVID RELIEF FUNDS APPLICATION**

**V. GOALS AND PERFORMANCE MEASURES, ACTIVITY AND STAFFING**

Please provide the anticipated outcome and list the program staff and title along with the time dedicated to the project

GOALS AND PERFORMANCE MEASURES			STAFFING	
1	2	3	4	5
ACTIVITY	HOUSEHOLD UNITS/MONTH	TOTAL UNITS/ YEAR	STAFF MEMBER & TITLE	% OF TIME DEDICATED TO ACTIVITY
Case Management	Households/ month	/Households		%
Homeless Prevention	Households/ month	/Households		%
Rapid Re-Housing	Households/ month	/Households		%
Supervision	Households/ month	/Households		%
Case Review	Households/ month	/Households		%
Housing Relocation	Households/ month	/Households		%
Business Office	TBD	TBD		

**TOWN OF BROOKHAVEN  
EMERGENCY SOLUTIONS GRANT – COVID RELIEF FUNDS APPLICATION**

If you have any questions, or need assistance in completing this application, please call the Department of Housing and Human Services at (631) 451-6600. The Town of Brookhaven reserves the right to reject any or all proposals, or to accept only a portion of a proposal, including modification of requested funding levels.

**THE DEADLINE FOR SUBMITTING APPLICATIONS IS October 30, 2020 – Complete applications can be emailed to Alison Karppi at [Alarppi@brookhavenny.gov](mailto:Alarppi@brookhavenny.gov). If you have any questions, please contact Alison at (631) 451-6596.**

Please read this entire page and then sign below

The applicant certifies that all information in this application, and all information furnished in support of this application, is given for the purpose of obtaining funding under the Town of Brookhaven’s ESG–COVID(2) program is true and complete to the best of the Applicant’s knowledge and belief.

I understand that providing false or incomplete information will disqualify my organization for consideration and/or represent a criminal offense in the Town of Brookhaven Emergency Solutions Grant COVID(2) Program.

I understand that this is not an offer and that the terms and conditions of the Town of Brookhaven Emergency Solutions Grant COVID(2) Program may be changed at any time by the U.S. Department of Housing and Urban Development (HUD) and/or by the Town of Brookhaven. I further understand that notices by the Town may be made in such manner as the Town may determine, including solely by advertisements.

Please note that Town of Brookhaven is not responsible to any party for the loss of funding or any other damages which may arise as a result of the applicant’s failure to adhere to the terms of the Town of Brookhaven Emergency Solutions Grant COVID(2) Program Guidelines, as stated in this document.

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**TOWN OF BROOKHAVEN  
EMERGENCY SOLUTIONS GRANT - COVID RELIEF FUND APPLICATION**

Please attach the following checklist and requested documents to the application. The application will not be processed without the following documents.

**REQUIRED ATTACHMENTS TO INCLUDE WITH YOUR APPLICATION**

- Articles of Incorporation and By-Laws
- State and Federal Tax Exemption Determination Letters
- Current List of Board of Directors
- Board of Directors' Designation of Authorized Official
- Organizational Chart
- Resume of Program Administrator
- Resume of Fiscal Officer
- Copy of Most Recent Audited Financial Statements
  - OMB Circular A-133
  - IRS Form 990
  - CHPR 500
- Copy of Deed for all properties or Lease Agreements affected by this application
- Copy of most recent Property Tax Bill, if applicable
- Most recent letter of 501 (c) (3) non-profit status determination
- Certificate of participation in local Continuum of Care (attached)