

## **Before Starting the Project Listings for the CoC Priority Listing**

**The FY 2017 CoC Consolidated Application requires TWO submissions. Both this Project Priority Listing AND the CoC Application MUST be submitted prior to the CoC Program Competition deadline as required by the FY 2017 CoC Program Competition NOFA.**

The FY 2017 CoC Priority Listing includes the following:

- Reallocation forms – must be fully completed if the CoC is reallocating eligible renewal projects to create new projects as described in the FY 2017 CoC Program Competition NOFA.
- New Project Listing – lists all new project applications created through reallocation and the permanent housing bonus that have been approved and ranked or rejected by the CoC.
- Renewal Project Listing – lists all eligible renewal project applications that have been approved and ranked or rejected by the CoC.
- UFA Costs Project Listing – applicable and only visible for Collaborative Applicants that were designated as a Unified Funding Agency (UFA) during the FY 2017 CoC Program Registration process. Only 1 UFA Costs project application is permitted and can only be submitted by the Collaborative Applicant.
- CoC Planning Project Listing – Only 1 CoC planning project is permitted per CoC and can only be submitted by the Collaborative Applicant.
- HUD-2991, Certification of Consistency with the Consolidated Plan – Collaborative Applicants must attach an accurately completed, signed, and dated HUD-2991.

Things to Remember:

- All new and renewal projects must be approved and ranked or rejected on the Project Listings.
- Collaborative Applicants are responsible for ensuring all project applications are accurately appearing on the Project Listings and there are no project applications missing from one or more Project Listings.
- If a project application(s) is rejected by the CoC, the Collaborative Applicant must notify the affected project applicant(s) no later than 15 days before the CoC Program Competition application deadline outside of e-snaps and include the reason for rejection.
- For each project application rejected by the CoC the Collaborative Applicant must select the reason for the rejection from the dropdown provided.
- If the Collaborative Applicant needs to amend a project application for any reason after ranking has been completed, the ranking of other projects will not be affected; however, the Collaborative Applicant MUST ensure the amended project is returned to the applicable Project Listing AND re-rank the project application BEFORE submitting the CoC Priority Listing to HUD in e-snaps.

Additional training resources are available online on the CoC Training page of the HUD Exchange at: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/>

## 1A. Continuum of Care (CoC) Identification

### Instructions:

The fields on this screen are read only and reference the information entered during the CoC Registration process. Updates cannot be made at this time. If the information on this screen is not correct, contact the HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/ask-a-question/>.

**Collaborative Applicant Name:** The Anchorage Coalition to End Homelessness

## 2. Reallocation

**Instructions:**

For guidance on completing this form, please reference the FY 2017 CoC Priority Listing Detailed Instructions. Submit technical question to the e-snaps HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/get-assistance/>.

**2-1. Is the CoC reallocating funds from one or more eligible renewal grant(s) that will expire in calendar year 2018 into one or more new projects?** Yes

### 3. Reallocation - Grant(s) Eliminated

**CoCs that are reallocating eligible renewal project funds to create a new project application – as detailed in the FY 2017 CoC Program Competition NOFA – may do so by eliminating one or more expiring eligible renewal projects. CoCs that are eliminating eligible renewal projects entirely must identify those projects on this form.**

<b>Amount Available for New Project: (Sum of All Eliminated Projects)</b>				
\$951,091				
<b>Eliminated Project Name</b>	<b>Grant Number Eliminated</b>	<b>Component Type</b>	<b>Annual Renewal Amount</b>	<b>Type of Reallocation</b>
Anchorage Communi...	AK0009L0C001609	PH	\$951,091	Regular

### 3. Reallocation - Grant(s) Eliminated Details

**Instructions:**

For guidance on completing this form, please reference the FY 2017 CoC Priority Listing Detailed Instructions. Submit technical question to the e-snaps HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/get-assistance/>.

**\* 3-1. Complete each of the fields below for each eligible renewal grant that is being eliminated during the FY 2017 reallocation process. Collaborative Applicants should refer to the final HUD-approved FY 2017 Grant Inventory Worksheet to ensure all information entered on this form is accurate.**

**Eliminated Project Name:** Anchorage Community Mental Health Services  
Permanent Housing

**Grant Number of Eliminated Project:** AK0009L0C001609

**Eliminated Project Component Type:** PH

**Eliminated Project Annual Renewal Amount:** \$951,091

**3-2. Describe how the CoC determined that this project should be eliminated and include the date the project applicant was notified. (limit 750 characters)**

The grantee chose not to accept these funds for the upcoming fiscal year. Funds were reallocated to new projects in the community. Applicants were notified 12 Sept 2017.

## 4. Reallocation - Grant(s) Reduced

**CoCs that are reallocating eligible renewal project funds to create a new project application – as detailed in the FY 2017 CoC Program Competition NOFA – may do so by reducing one or more expiring eligible renewal projects. CoCs that are reducing eligible renewal projects entirely must identify those projects on this form.**

Amount Available for New Project (Sum of All Reduced Projects)					
\$56,966					
Reduced Project Name	Reduced Grant Number	Annual Renewal Amount	Amount Retained	Amount available for new project	Reallocation Type
Covenant House Ri...	AK0010LOC001609	\$248,518	\$241,062	\$7,456	Regular
Anchorage Coaliti...	AK0011LOC001609	\$181,437	\$175,994	\$5,443	Regular
Rural Alaska Comm...	AK0055LOC001601	\$543,571	\$527,264	\$16,307	Regular
Anchorage Coordin...	AK0058LOC001601	\$80,000	\$77,599	\$2,401	Regular
Sponsored Based R...	AK0061LOC001601	\$714,913	\$693,466	\$21,447	Regular
Anchorage Housing...	AK0004LOC001609	\$130,411	\$126,499	\$3,912	Regular

## 4. Reallocation - Grant(s) Reduced Details

### Instructions:

For guidance on completing this form, please reference the FY 2017 CoC Priority Listing Detailed Instructions. Submit technical question to the e-snaps HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/get-assistance/>.

**4-1. Complete the fields below for each eligible renewal grant that is being reduced during the FY 2017 reallocation process. Collaborative Applicants should refer to the final HUD-approved FY 2017 Grant Inventory Worksheet to ensure all information entered here is accurate.**

**Reduced Project Name:** Covenant House Rights of Passage

**Grant Number of Reduced Project:** AK0010L0C001609

**Reduced Project Current Annual Renewal Amount:** \$248,518

**Amount Retained for Project:** \$241,062

**Amount available for New Project(s):** \$7,456  
(This amount will auto-calculate by selecting "Save" button)

**4-2. Describe how the CoC determined that this project should be reduced and include the date the project applicant was notified of the reduction. (limit 750 characters)**

The CoC Ranking and Review committee reduced all renewal budgets by three (3) percent to allow for necessary renewal and current project funding. Project applicants were notified on 12 Sept 2017.

## 4. Reallocation - Grant(s) Reduced Details

### Instructions:

For guidance on completing this form, please reference the FY 2017 CoC Priority Listing Detailed Instructions. Submit technical question to the e-snaps HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/get-assistance/>.

**4-1. Complete the fields below for each eligible renewal grant that is being reduced during the FY 2017 reallocation process. Collaborative Applicants**

**should refer to the final HUD-approved FY 2017 Grant Inventory Worksheet to ensure all information entered here is accurate.**

**Reduced Project Name:** Anchorage Coalition to End Homelessness  
Dedicated HMIS

**Grant Number of Reduced Project:** AK0011L0C001609

**Reduced Project Current Annual Renewal Amount:** \$181,437

**Amount Retained for Project:** \$175,994

**Amount available for New Project(s):** \$5,443  
**(This amount will auto-calculate by selecting "Save" button)**

**4-2. Describe how the CoC determined that this project should be reduced and include the date the project applicant was notified of the reduction. (limit 750 characters)**

The CoC Ranking and Review committee reduced all renewal budgets by three (3) percent to allow for necessary renewal and current project funding. Project applicants were notified on 12 Sept 2017.

## **4. Reallocation - Grant(s) Reduced Details**

### **Instructions:**

For guidance on completing this form, please reference the FY 2017 CoC Priority Listing Detailed Instructions. Submit technical question to the e-snaps HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/get-assistance/>.

**4-1. Complete the fields below for each eligible renewal grant that is being reduced during the FY 2017 reallocation process. Collaborative Applicants should refer to the final HUD-approved FY 2017 Grant Inventory Worksheet to ensure all information entered here is accurate.**

**Reduced Project Name:** Rural Alaska Community Action Program 325  
East 3rd Avenue

**Grant Number of Reduced Project:** AK0055L0C001601

**Reduced Project Current Annual Renewal Amount:** \$543,571

**Amount Retained for Project:** \$527,264



**Amount available for New Project(s):** \$16,307  
**(This amount will auto-calculate by selecting "Save" button)**

**4-2. Describe how the CoC determined that this project should be reduced and include the date the project applicant was notified of the reduction. (limit 750 characters)**

The CoC Ranking and Review committee reduced all renewal budgets by three (3) percent to allow for necessary renewal and current project funding. Project applicants were notified on 12 Sept 2017.

## 4. Reallocation - Grant(s) Reduced Details

### Instructions:

For guidance on completing this form, please reference the FY 2017 CoC Priority Listing Detailed Instructions. Submit technical question to the e-snaps HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/get-assistance/>.

**4-1. Complete the fields below for each eligible renewal grant that is being reduced during the FY 2017 reallocation process. Collaborative Applicants should refer to the final HUD-approved FY 2017 Grant Inventory Worksheet to ensure all information entered here is accurate.**

**Reduced Project Name:** Anchorage Coordinated Entry System Project  
**Grant Number of Reduced Project:** AK0058L0C001601  
**Reduced Project Current Annual Renewal Amount:** \$80,000  
**Amount Retained for Project:** \$77,599  
**Amount available for New Project(s):** \$2,401  
**(This amount will auto-calculate by selecting "Save" button)**

**4-2. Describe how the CoC determined that this project should be reduced and include the date the project applicant was notified of the reduction. (limit 750 characters)**

The CoC Ranking and Review committee reduced all renewal budgets by three (3) percent to allow for necessary renewal and current project funding. Project applicants were notified on 12 Sept 2017.

## 4. Reallocation - Grant(s) Reduced Details

### Instructions:

For guidance on completing this form, please reference the FY 2017 CoC Priority Listing Detailed Instructions. Submit technical question to the e-snaps HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/get-assistance/>.

**4-1. Complete the fields below for each eligible renewal grant that is being reduced during the FY 2017 reallocation process. Collaborative Applicants should refer to the final HUD-approved FY 2017 Grant Inventory Worksheet to ensure all information entered here is accurate.**

**Reduced Project Name:** Sponsored Based Rental Assistance  
**Grant Number of Reduced Project:** AK0061LOC001601  
**Reduced Project Current Annual Renewal Amount:** \$714,913  
**Amount Retained for Project:** \$693,466  
**Amount available for New Project(s):** \$21,447  
(This amount will auto-calculate by selecting "Save" button)

**4-2. Describe how the CoC determined that this project should be reduced and include the date the project applicant was notified of the reduction. (limit 750 characters)**

The CoC Ranking and Review committee reduced all renewal budgets by three (3) percent to allow for necessary renewal and current project funding. Project applicants were notified on 12 Sept 2017.

## 4. Reallocation - Grant(s) Reduced Details

### Instructions:

For guidance on completing this form, please reference the FY 2017 CoC Priority Listing Detailed Instructions. Submit technical question to the e-snaps HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/get-assistance/>.

**4-1. Complete the fields below for each eligible renewal grant that is being reduced during the FY 2017 reallocation process. Collaborative Applicants**

**should refer to the final HUD-approved FY 2017 Grant Inventory Worksheet to ensure all information entered here is accurate.**

**Reduced Project Name:** Anchorage Housing Initiatives Coming Home I  
**Grant Number of Reduced Project:** AK0004L0C001609  
**Reduced Project Current Annual Renewal Amount:** \$130,411  
**Amount Retained for Project:** \$126,499  
**Amount available for New Project(s):** \$3,912  
**(This amount will auto-calculate by selecting "Save" button)**

**4-2. Describe how the CoC determined that this project should be reduced and include the date the project applicant was notified of the reduction. (limit 750 characters)**

The CoC Ranking and Review committee reduced all renewal budgets by three (3) percent to allow for necessary renewal and current project funding. Project applicants were notified on 12 Sept 2017.

## 5. Reallocation - New Project(s)

**Collaborative Applicants must complete each field on this form that identifies the new project(s) the CoC created through the reallocation process.**

Sum of All New Reallocated Project Requests  
(Must be less than or equal to total amount(s) eliminated and/or reduced)

\$1,008,057				
Current Priority #	New Project Name	Component Type	Transferred Amount	Reallocation Type
7	Resources an...	PH	\$849,791	Regular
8	AWAIC Rapid ...	Joint TH & P...	\$158,266	Regular

## 5. Reallocation - New Project(s) Details

### Instructions:

For guidance on completing this form, please reference the FY 2017 CoC Priority Listing Detailed Instructions. Submit technical question to the e-snaps HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/get-assistance/>.

**5-1. Complete each of the fields below for each new project created through reallocation in the FY 2017 CoC Program Competition. For list of all eligible types of new projects that may be created through the reallocation process, see the FY 2017 CoC Program Competition NOFA.**

**FY 2017 Rank (from Project Listing):** 7

**Proposed New Project Name:** Resources and Initiatives to Support and Empower

**Component Type:** PH

**Amount Requested for New Project:** \$849,791

## 5. Reallocation - New Project(s) Details

### Instructions:

For guidance on completing this form, please reference the FY 2017 CoC Priority Listing Detailed Instructions. Submit technical question to the e-snaps HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/get-assistance/>.

**5-1. Complete each of the fields below for each new project created through reallocation in the FY 2017 CoC Program Competition. For list of all eligible types of new projects that may be created through the reallocation process, see the FY 2017 CoC Program Competition NOFA.**

**FY 2017 Rank (from Project Listing):** 8

**Proposed New Project Name:** AWAIC Rapid Rehousing Program

**Component Type:** Joint TH & PH-RRH

**Amount Requested for New Project:** \$158,266

## 6. Reallocation: Balance Summary

### Instructions

For guidance on completing this form, please reference the FY 2017 CoC Priority Listing Detailed Instructions. Submit technical question to the e-snaps HUD Exchange Ask A Question (AAQ) at <https://www.hudexchange.info/get-assistance/>.

**6-1 Below is a summary of the information entered on the eliminated and reduced reallocation forms. The last field on this form, “Remaining Reallocation Balance” should equal zero. If there is a positive balance remaining, this means the amount of funds being eliminated or reduced are greater than the amount of funds request for the new reallocated project(s). If there is a negative balance remaining, this means that more funds are being requested for the new reallocated project(s) than have been reduced or eliminated from other eligible renewal projects.**

### Reallocation Chart: Reallocation Balance Summary

Reallocated funds available for new project(s):	\$1,008,057
Amount requested for new project(s):	\$1,008,057
Remaining Reallocation Balance:	\$0

## Continuum of Care (CoC) New Project Listing

**Instructions:**

Prior to starting the New Project Listing, Collaborative Applicants should carefully review the "CoC Priority Listing Detailed Instructions" and the "CoC Project Listing Instructional Guide", both of which are available at: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>.

To upload all new project applications that have been submitted to this CoC Project Listing, click on the "Update List" button. This process may take a few minutes based upon the number of new projects submitted that need to be located in the e-snaps system. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). To review a project on the New Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon. The Collaborative Applicant has the sole responsibility for ensuring all amended projects are resubmitted and appear on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

Project Name	Date Submitted	Comp Type	Applicant Name	Budget Amount	Grant Term	Rank	PH/Realloc	PSH/RRH	Expansion
Resources and Ini...	2017-09-19 16:03:...	PH	Anchorage Neighbo..	\$849,791	1 Year	7	Reallocation	PSH	
Sitka Place	2017-09-21 20:19:...	PH	Rural Alaska Comm...	\$170,996	1 Year	9	PH Bonus	PSH	
AWAIC Rapid ReHou...	2017-09-25 13:35:...	PH	Abused Women's Ai...	\$158,265	1 Year	8	Reallocation	RRH	

## Continuum of Care (CoC) Renewal Project Listing

**Instructions:**

Prior to starting the New Project Listing, Collaborative Applicants should carefully review the "CoC Priority Listing Detailed Instructions" and the "CoC Project Listing Instructional Guide", both of which are available at: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>.

To upload all renewal project applications that have been submitted to this Renewal Project Listing, click on the "Update List" button. This process may take a few minutes based upon the number of renewal projects that need to be located in the e-snaps system. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). To review a project on the Renewal Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon. The Collaborative Applicant has the sole responsibility for ensuring all amended projects are resubmitted and appear on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

**The Collaborative Applicant certifies that there is a demonstrated need for all renewal permanent supportive housing and rapid re-housing projects listed on the Renewal Project Listing.**

**The Collaborative Applicant does not have any renewal permanent supportive housing or rapid re-housing renewal projects.**

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Rank	PSH/RRH	Comp Type
Rights of Passage	2017-09-20 13:04:...	1 Year	Covenant House Al...	\$241,062	6		TH
2017 CoC ANC SRA	2017-09-20 21:03:...	1 Year	Alaska Housing Fi...	\$693,466	5	PSH	PH
Anchorage Coordin...	2017-09-21 20:33:...	1 Year	Anchorage Coaliti...	\$77,600	2		SSO
Anchorage Dedicat...	2017-09-21 20:33:...	1 Year	Anchorage Coaliti...	\$175,994	1		HMIS
325 East 3rd Avenue	2017-09-21 20:20:...	1 Year	Rural Alaska Comm...	\$527,264	4	PSH	PH



**Applicant:** Anchorage CoC

AK-500

**Project:** Anchorage CoC Registration 2017

COC\_REG\_2017\_149700

Coming Home I	2017-09-25 15:21:...	1 Year	Anchorage Housing...	\$126,499	3	PSH	PH
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## Continuum of Care (CoC) Planning Project Listing

### Instructions:

Prior to starting the CoC Planning Project Listing, Collaborative Applicants should carefully review the "CoC Priority Listing Detailed Instructions" and the "CoC Project Listing Instructional Guide," both of which are available at: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>.

To upload the CoC planning project application that has been submitted to this CoC Planning Project Listing, click on the "Update List" button. This process may take a few minutes as the project will need to be located in the e-snaps system. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). To review the CoC Planning Project Listing, click on the magnifying glass next to view the project details. To view the actual project application, click on the orange folder. If there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon.

Only one CoC Planning project application can be submitted by a Collaborative Applicant and must match the Collaborative Applicant information on the CoC Applicant Profile. Any additional CoC Planning project applications must be rejected.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Comp Type
CoC Planning Proj...	2017-09-21 20:35:...	1 Year	Anchorage Coaliti...	\$85,498	CoC Planning Proj...

## Funding Summary

### Instructions

For additional information, carefully review the "CoC Priority Listing Detailed Instructions" and the "CoC Priority Listing Instructional Guide", both of which are available at: <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>.

This page contains the total budget summaries for each of the project listings for which the Collaborative Applicant approved and ranked or rejected project applications. The Collaborative Applicant must review this page to ensure the totals for each of the categories is accurate. The "Total CoC Request" indicates the total funding request amount the Collaborative Applicant will submit to HUD for funding consideration. As stated previously, only 1 UFA Cost project application (for UFA designated Collaborative Applicants only) and only 1 CoC Planning project application can be submitted and only the Collaborative Applicant designated by the CoC is eligible to request these funds.

Title	Total Amount
Renewal Amount	\$1,841,885
New Amount	\$1,179,052
CoC Planning Amount	\$85,498
Rejected Amount	\$0
<b>TOTAL CoC REQUEST</b>	<b>\$3,106,435</b>

## Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan	Yes	Combined Certific...	09/25/2017
FY 2017 Rank (from Project Listing)	No	Project Rating an...	09/25/2017
Other	No	2017 GIW	09/26/2017
Other	No		

## **Attachment Details**

**Document Description:** Combined Certificates of Consistency

## **Attachment Details**

**Document Description:** Project Rating and Ranking Tool

## **Attachment Details**

**Document Description:** 2017 GIW

## **Attachment Details**

**Document Description:**

## Submission Summary

**WARNING: The FY2017 CoC Consolidated Application requires 2 submissions. Both this Project Priority Listing AND the CoC Consolidated Application MUST be submitted.**

**WARNING: The FY2017 CoC Consolidated Application requires 2 submissions. Both this Project Priority Listing AND the CoC Consolidated Application MUST be submitted.**

Page	Last Updated
<b>Before Starting</b>	No Input Required
<b>1A. Identification</b>	09/24/2017
<b>2. Reallocation</b>	09/24/2017
<b>3. Grant(s) Eliminated</b>	09/26/2017
<b>4. Grant(s) Reduced</b>	09/26/2017
<b>5. New Project(s)</b>	09/25/2017
<b>6. Balance Summary</b>	No Input Required
<b>7A. CoC New Project Listing</b>	09/25/2017
<b>7B. CoC Renewal Project Listing</b>	09/25/2017

<b>7D. CoC Planning Project Listing</b>	09/25/2017
<b>Funding Summary</b>	No Input Required
<b>Attachments</b>	09/25/2017
<b>Submission Summary</b>	No Input Required

# Certification of Consistency with the Consolidated Plan

U.S. Department of Housing  
and Urban Development

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.  
(Type or clearly print the following information:)

Applicant Name: Anchorage Coalition to End Homelessness

Project Name: Continuum of Care Planning Project

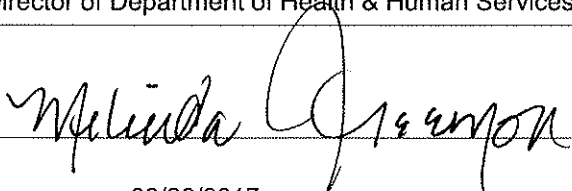
Location of the Project: Anchorage Coalition to End Homelessness  
PO Box 243041  
Anchorage, AK 99524

Name of the Federal Program to which the applicant is applying: Continuum of Care

Name of Certifying Jurisdiction: Municipality of Anchorage

Certifying Official of the Jurisdiction Name: Melinda L. Freemon

Title: Director of Department of Health & Human Services

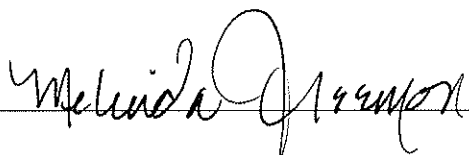
Signature: 

Date: 09/20/2017



**Certification of Consistency  
with the Consolidated Plan**U.S. Department of Housing  
and Urban Development

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.  
(Type or clearly print the following information:)

Applicant Name: Anchorage Coalition to End HomelessnessProject Name: Anchorage Coordinated Entry System ProjectLocation of the Project: Anchorage Coalition to End Homelessness  
PO Box 243041  
Anchorage, AK 99524Name of the Federal  
Program to which the  
applicant is applying: Continuum of CareName of  
Certifying Jurisdiction: Municipality of AnchorageCertifying Official  
of the Jurisdiction  
Name: Melinda L. FreemonTitle: Director of Department of Health & Human ServicesSignature: Date: 09/20/2017

**Certification of Consistency  
with the Consolidated Plan**U.S. Department of Housing  
and Urban Development

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.  
(Type or clearly print the following information:)

Applicant Name: Anchorage Coalition to End HomelessnessProject Name: Anchorage Dedicated HMIS ProjectLocation of the Project: Anchorage Coalition to End HomelessnessPO Box 243041Anchorage, AK 99524Name of the Federal  
Program to which the  
applicant is applying: Continuum of CareName of  
Certifying Jurisdiction: Municipality of AnchorageCertifying Official  
of the Jurisdiction  
Name: Melinda L. FreemonTitle: Director of Department of Health & Human ServicesSignature: Date: 09/20/2017

**Certification of Consistency  
with the Consolidated Plan**U.S. Department of Housing  
and Urban Development

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.  
(Type or clearly print the following information:)

Applicant Name: Alaska Housing Finance CorporationProject Name: Anchorage Sponsor Based Rental Assistance ProgramLocation of the Project: Alaska Housing Finance CorporationPO Box 101020Anchorage, AK 99510Name of the Federal  
Program to which the  
applicant is applying: Continuum of CareName of  
Certifying Jurisdiction: Municipality of AnchorageCertifying Official  
of the Jurisdiction  
Name: Melinda L. FreemonTitle: Director of Department of Health & Human ServicesSignature: Date: 09/19/2017


**Certification of Consistency  
with the Consolidated Plan****U.S. Department of Housing  
and Urban Development**

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.  
(Type or clearly print the following information:)

Applicant Name: Anchorage Housing InitiativesProject Name: Coming Home ProjectLocation of the Project: Anchorage Housing InitiativesPO Box 202222Anchorage, AK 99520Name of the Federal  
Program to which the  
applicant is applying: Continuum of CareName of  
Certifying Jurisdiction: Municipality of AnchorageCertifying Official  
of the Jurisdiction  
Name: Melinda L. FreemonTitle: Director of Department of Health & Human ServicesSignature: Date: 09/19/2017

**Certification of Consistency  
with the Consolidated Plan****U.S. Department of Housing  
and Urban Development**

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.  
(Type or clearly print the following information:)

Applicant Name: Abused Women's Aid in Crisis (AWAIC)Project Name: AWAIC Rapid Re-housing ProgramLocation of the Project: AWAIC  
100 W. 13th Avenue  
Anchorage, AK 99501Name of the Federal  
Program to which the  
applicant is applying: Continuum of Care - AWAIC Rapid Re-housing ProgramName of  
Certifying Jurisdiction: Municipality of AnchorageCertifying Official  
of the Jurisdiction  
Name: Melinda L. FreemonTitle: Director of Department of Health & Human ServicesSignature: Date: 09/19/2017

# Certification of Consistency with the Consolidated Plan

U.S. Department of Housing  
and Urban Development

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.  
(Type or clearly print the following information:)

Applicant Name: Covenant House Alaska

Project Name: Rights of Passage

Location of the Project: Covenant House Alaska  
PO Box 100620  
Anchorage, AK 99510

Name of the Federal  
Program to which the  
applicant is applying: Continuum of Care

Name of  
Certifying Jurisdiction: Municipality of Anchorage

Certifying Official  
of the Jurisdiction  
Name: Melinda L. Freemon

Title: Director of Department of Health & Human Services

Signature: 

Date: 09/19/2017

**Certification of Consistency  
with the Consolidated Plan****U.S. Department of Housing  
and Urban Development**

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.  
(Type or clearly print the following information:)

Applicant Name: NeighborWorks AlaskaProject Name: Resources & Initiatives to Support & Empower (RISE)Location of the Project: NeighborWorks Alaska2515 A StreetAnchorage, AK 99503Name of the Federal  
Program to which the  
applicant is applying: Continuum of CareName of  
Certifying Jurisdiction: Municipality of AnchorageCertifying Official  
of the Jurisdiction  
Name: Melinda L. FreemonTitle: Director of Department of Health & Human ServicesSignature: Date: 09/19/2017

# Certification of Consistency with the Consolidated Plan

U.S. Department of Housing  
and Urban Development

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.  
(Type or clearly print the following information:)

Applicant Name: Rural Alaska Community Action Program

Project Name: 325 East 3rd Avenue

Location of the Project: Rural Alaska Community Action Program  
325 East 3rd Avenue  
Anchorage, AK 99501

Name of the Federal  
Program to which the  
applicant is applying: Continuum of Care

Name of  
Certifying Jurisdiction: Municipality of Anchorage

Certifying Official  
of the Jurisdiction  
Name: Melinda L. Freemon

Title: Director of Department of Health & Human Services


Signature: 

Date: 09/21/2017



**Certification of Consistency  
with the Consolidated Plan****U.S. Department of Housing  
and Urban Development**

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.  
(Type or clearly print the following information:)

Applicant Name: Rural Alaska Community Action ProgramProject Name: Sitka PlaceLocation of the Project: Rural Alaska Community Action Program731 East 8th AvenueAnchorage, AK 99501Name of the Federal  
Program to which the  
applicant is applying: Continuum of CareName of  
Certifying Jurisdiction: Municipality of AnchorageCertifying Official  
of the Jurisdiction  
Name: Melinda L. FreemonTitle: Director of Department of Health & Human ServicesSignature:   
Melinda L. FreemonDate: 09/21/2017