

***Transitional Housing Program (THP)
Round 7 Allocation Acceptance Form***

***Housing Navigation and Maintenance Program (HNMP)
Round 4 Allocation Acceptance Form***



**Gavin Newsom, Governor
State of California**

**Tomiquia Moss, Secretary
Business, Consumer Services and
Housing Agency**

**Gustavo Velasquez, Director
Department of Housing and
Community Development**

**651 West Bannon Street, Suite 400
Sacramento, CA 95811
Telephone: (916) 263-2771
Website: www.hcd.ca.gov
Email: TAY@hcd.ca.gov**

September 2025

Transitional Housing Program (THP) Allocation Acceptance Round 7										Rev. 08/19/25											
County Allocation (select Applicant County in row 7 below):										\$436,317											
Pursuant to item 2240-102-0001 of Section 2.00 of the Budget Act of 2025 (Chapter 4 of the Statutes of 2025) and Chapter 11.7 (commencing with Section 50807) of Part 2 of Division 31 of the Health and Safety Code (HSC), the Department of Housing and Community Development (HCD) shall allocate funding to counties for the purpose of housing stability to help young adults 18 to 24 years of age, inclusive, secure and maintain housing, with priority given to young adults formerly in the foster care or probation systems.																					
Housing First																					
The Contractor shall certify to employ the core components of Housing First, pursuant to Welfare and Institutions Code Section 8255 (b) as shown below:																					
1) Tenant screening and selection practices that promote accepting applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services;																					
2) Applicants are not rejected on the basis of poor credit or financial history, poor or lack of rental history, criminal convictions unrelated to tenancy, or behaviors that indicate a lack of "housing readiness";																					
3) Acceptance of referrals directly from shelters, street outreach, drop-in centers, and other parts of crisis response systems frequented by vulnerable people experiencing homelessness;																					
4) Supportive services that emphasize engagement and problem solving over therapeutic goals and service plans that are highly tenant-driven without predetermined goals;																					
5) Participation in services or program compliance is not a condition of permanent housing tenancy;																					
6) Tenants have a lease and all the rights and responsibilities of tenancy, as outlined in California's Civil, Health and Safety, and Government codes;																					
7) The use of alcohol or drugs in and of itself, without other lease violations, is not a reason for eviction;																					
8) In communities with coordinated assessment and entry systems, incentives for funding promote tenant selection plans for supportive housing that prioritize eligible tenants based on criteria other than "first-come-first-serve," including, but not limited to, the duration or chronicity of homelessness, vulnerability to early mortality, or high utilization of crisis services. Prioritization may include triage tools, developed through local data, to identify high-cost, high-need homeless residents;																					
9) Case managers and service coordinators who are trained in and actively employ evidence-based practices for client engagement, including, but not limited to, motivational interviewing and client-centered counseling;																					
10) Services are informed by a harm-reduction philosophy that recognizes drug and alcohol use and addiction as a part of tenants' lives, where tenants are engaged in nonjudgmental communication regarding drug and alcohol use, and where tenants are offered education regarding how to avoid risky behaviors and engage in safer practices, as well as connected to evidence-based treatment if the tenant so chooses; and																					
11) The project and specific apartment may include special physical features that accommodate disabilities, reduce harm, and promote health and community and independence among tenants.																					
Allocation Applicant																					
Allocation Applicant is a County										Yes											
Pursuant to Section 50807(b) of the HSC, HCD consulted with the Department of Social Services, the Department of Finance, and the County Welfare Directors Association to develop a formula allocation schedule for the purpose of distributing these funds to counties. The allocation is based on each county's percentage of the total statewide number of young adults 18 through 20 years of age in foster care and homeless unaccompanied young adults (ages 18 through 24).																					
Applicant County		Monterey																			
Legal name of Applicant as stated on resolution:				County of Monterey																	
Address		1000 South Main St.				City		Salinas		State		CA		Zip		93901					
Auth Rep Name		Becky Cromer				Title		Finance Manager III		Auth Rep Email		CromerBL@countyofmonterey.gov				Phone		(831) 755-4430			
Address		1000 South Main St. Suite 306				City		Salinas		State		CA		Zip		93901					
Contact Name		Chelsea Chacon				Title		Management Analyst III		Email		ChaconC@countyofmonterey.gov				Phone					
Address		1000 South Main St. Suite 205				City		Salinas		State		CA		Zip		93901					
Federal Tax ID Number (FEIN)				94-6000524																	
Administrative Fiscal Representative																					
Contact Name		Becky Cromer				Title		Finance Manager III				Contact Email		CromerBL@countyofmonterey.gov							
Phone		(831) 755-4430		Address		1000 South Main St. Suite 306				City		Salinas		State		CA		Zip		93901	
File Name:		App Resolution		Reference sample resolution document								Attached to email?		Yes							
File Name:		App GovTIN Form		Reference Taxpayer Identification Number (TIN) document								Attached to email?		Yes							
Use of Funds																					
Funds shall be used to help young adults who are 18 to 24 years of age, inclusive, secure and maintain housing with priority given to young adults formerly in the state's foster care or probation systems. Use of funds may include, but are not limited to:																					
1) Identify and assist housing services for this population in your community;																					
2) Assist this population to secure and maintain housing (with priority given to those in the state's foster care or probation system);																					
3) Improve coordination of services and linkages to community resources within the child welfare system and the Homeless Continuum of Care; and																					
4) Provide engagement in outreach and targeting to serve those with the most severe needs.																					
Expenditure of Funds																					
Any grant funds remaining unexpended as of two years from the "Effective Date" of the fully executed Standard Agreement as stated in the STD 213, paragraph 2, must be returned to the State. Checks shall be payable to the Department of Housing and Community Development and mailed to 651 Bannon Street, Suite 400, Attention: Administration and Management Division, Accounts Payable, Sacramento CA 95811 and must reference the Contract Number.																					
Allocation Acceptance Requirements																					
In order to accept and receive an allocation, applicants must submit the following: 1. Signed Allocation Acceptance Form, 2. GovTIN Form, and 3. Signed Resolution. If Signed Resolution is not available by submittal date please include the scheduled date of Board of Supervisors meeting and anticipated date the Signed Resolution will be submitted to the Department. The Department will only accept applications electronically via email no later than 5:00 p.m. on:																					
Tuesday, September 18, 2025																					
HCD will only accept applications electronically at the following email address:																					
TAY@hcd.ca.gov																					
Reporting Requirements																					
Applicant acknowledges and agrees to submit a bi-annual report to the Department for the two years following contract execution addressing the following:										Yes											
A. Number of program participants served who were homeless at time of program entry;																					
B. Number of program participants served who were in the State's foster care system;																					
C. Number of program participants served who were formerly in the State's foster care or probation systems;																					
D. Number of program participants who exited homelessness into temporary housing;																					
E. Number of program participants who exited homelessness into permanent housing;																					
F. Itemization on use of program fund expenditures;																					
G. Who were the housing navigators or other subcontractor(s)?																					
H. Subpopulation data including:																					
1. Number of participants that are employed;																					
2. Number of participants identified as LGBTQ+;																					
3. Number of participants having a disability;																					
4. Number of participants with minor children in the household; and,																					
5. Average number of children per household.																					
California Public Records Act																					
The application, including any and all supplemental documents submitted during the review process, is a public record, which is available for public review pursuant to the California Public Records Act (CPRA) (Division 10 (commencing with Section 7920.000) of Title 1 of the Government Code). After final awards have been issued, the Department may disclose any materials provided by the Applicant to any person making a request under the CPRA. The Department cautions Applicants to use discretion in providing information not specifically requested, including but not limited to, bank account numbers, personal phone numbers, and home addresses. By providing this information to the Department, the Applicant is waiving any claim of confidentiality and consents to the disclosure of submitted material upon request.																					
Certification																					
On behalf of the entity identified in the signature block below, I certify that:																					
The information, statements and attachments included in this Allocation Acceptance Form are, to the best of my knowledge and belief, true and correct.																					
I possess the legal authority to submit this Allocation Acceptance Form on behalf of the entity identified above.																					
In addition, I acknowledge that all information in this application and attachments is public, and may be disclosed by the State.																					
Becky Cromer		Finance Manager III																			
Authorized Rep Printed Name		Title of Authorized Rep				Signature				Date											

Housing Navigation and Maintenance Program (HNMP) Allocation Acceptance Round 4												Rev. 08/19/25									
County Allocation (select Applicant County in row 7 below):												\$68,349									
Pursuant to item 2240-103-0001 of Section 2.00 of the Budget Act of 2025 (Chapter 4 of the Statutes of 2025) and Chapter 11.8 (commencing with Section 50811) of Part 2 of Division 31 of the Health and Safety Code (HSC), the Department of Housing and Community Development (HCD) shall allocate funding to counties for the support of housing navigators to help young adults 18 years and up to 24 years of age, inclusive, secure and maintain housing, with priority given to young adults currently or formerly in the foster care system.																					
Housing First																					
The Contractor shall certify to employ the core components of Housing First, pursuant to Welfare and Institutions Code Section 8255.																					
1) Tenant screening and selection practices that promote accepting applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services; 2) Applicants are not rejected on the basis of poor credit or financial history, poor or lack of rental history, criminal convictions unrelated to tenancy, or behaviors that indicate a lack of "housing readiness"; 3) Acceptance of referrals directly from shelters, street outreach, drop-in centers, and other parts of crisis response systems frequented by vulnerable people experiencing homelessness; 4) Supportive services that emphasize engagement and problem solving over therapeutic goals and service plans that are highly tenant-driven without predetermined goals; 5) Participation in services or program compliance is not a condition of permanent housing tenancy; 6) Tenants have a lease and all the rights and responsibilities of tenancy, as outlined in California's Civil, Health and Safety, and Government codes; 7) The use of alcohol or drugs in and of itself, without other lease violations, is not a reason for eviction; 8) In communities with coordinated assessment and entry systems, incentives for funding promote tenant selection plans for supportive housing that prioritize eligible tenants based on criteria other than "first-come-first-serve," including, but not limited to, the duration or chronicity of homelessness, vulnerability to early mortality, or high utilization of crisis services. Prioritization may include triage tools, developed through local data, to identify high-cost, high-need homeless residents; 9) Case managers and service coordinators who are trained in and actively employ evidence-based practices for client engagement, including, but not limited to, motivational interviewing and client-centered counseling; 10) Services are informed by a harm-reduction philosophy that recognizes drug and alcohol use and addiction as a part of tenants' lives, where tenants are engaged in nonjudgmental communication regarding drug and alcohol use, and where tenants are offered education regarding how to avoid risky behaviors and engage in safer practices, as well as connected to evidence-based treatment if the tenant so chooses; and 11) The project and specific apartment may include special physical features that accommodate disabilities, reduce harm, and promote health and community and independence among tenants.																					
Allocation Applicant																					
Allocation Applicant is a County												Yes									
Pursuant to Section 50811 of the HSC, HCD consulted with the Department of Social Services, the Department of Finance, and the County Welfare Directors Association to establish the formula allocation for the purpose of distributing these funds to counties. The formula allocation is based on each county's percentage of the total statewide number of young adults 17 through 21 years of age in the foster care and probation system. The allocation excludes Alpine and Mono counties because their calculation did not demonstrate need. The housing navigation and maintenance program for a county that accepts an allocation of money pursuant to this section shall provide training to its child welfare agency social workers and probation officers who serve nonminor dependents. The training shall address an overview of the housing resources available through the local coordinated entry system, homeless continuum of care, and county public agencies, including, but not limited to, housing navigation, permanent affordable housing, THP-Plus, and housing choice vouchers. The training shall also address how to access and receive a referral to existing housing resources, the social worker's and probation officer's role in identifying unstable housing situations for youth, and referring youth to housing assistance programs.																					
Applicant County		Monterey																			
Legal name of Applicant as stated on resolution:				County of Monterey																	
Address		1000 South Main St.				City		Salinas		State		CA		Zip		93901					
Auth Rep Name		Becky Cromer				Title		Finance Manager III		Auth Rep Email		CromerBL@countyofmonterey.gov				Phone		(831) 755-4430			
Address		1000 South Main St. Suite 306				City		Salinas		State		CA		Zip		93901					
Contact Name		Chelsea Chacon				Title		Management Analyst III		Email		ChaconC@countyofmonterey.gov				Phone		(831) 755-8596			
Address		1000 South Main St. Suite 205				City		Salinas		State		CA		Zip		93901					
Federal Tax ID Number (FEIN)				94-6000524																	
Administrative Fiscal Representative																					
Contact Name		Becky Cromer				Title		Finance Manager III		Contact Email		CromerBL@countyofmonterey.gov									
Phone		(831) 755-4430		Address		1000 South Main St. Suite 306				City		Salinas		State		CA		Zip		93901	
File Name:		App Resolution		Reference sample resolution document												Attached to email?		Yes			
File Name:		App TIN		Reference Taxpayer Identification Number (TIN) document												Attached to email?		Yes			
Use of Funds																					
The HNMP program funds housing navigators for counties. The role of a housing navigator is to act as a housing specialist to assist young adults with their pursuits of locating available housing and overcoming barriers to locating housing. Housing navigation and maintenance activities may include, but are not limited to: 1) Assist young adults aged 18-24 years of age, inclusive, secure and maintain housing (with priority access given to young adults in the state's foster care system); 2) Provide housing case management which include essential services in emergency supports to foster youth; 3) Prevent young adults from becoming homeless; and 4) Improve coordination of serves and linkages to key resources across the community including those from within the child welfare system and the local Continuum of Care.																					
Expenditure of Funds																					
Any grant funds remaining unexpended as of two years from the "Effective Date" of the fully executed Standard Agreement as stated in the STD 213, paragraph 2, must be returned to the State. Checks shall be payable to the Department of Housing and Community Development and mailed to 651 Bannon Street, Suite 400, Attention: Administration and Management Division, Accounts Payable, Sacramento CA 95811 and must reference the Contract Number.																					
Allocation Acceptance Requirements																					
In order to accept and receive an allocation, applicants must submit the following: 1. Signed Allocation Acceptance Form, 2. GovTIN Form, and 3. Signed Resolution. If Signed Resolution is not available by submittal date please include the scheduled date of Board of Supervisors meeting and anticipated date the Signed Resolution will be submitted to the Department. The Department will only accept applications electronically via email no later than 5:00 p.m. on: Tuesday, September 18, 2025 HCD will only accept applications electronically at the following email address: TAY@hcd.ca.gov																					
Reporting Requirements																					
Applicant acknowledges and agrees to submit a bi-annual report to the Department for the two years following contract execution addressing the following: A. Number of program participants served with program funds; B. Itemization of use of program funds; C. Details on housing navigators and other subcontractors; D. Number of program participants served who were in the State's foster care system; E. Number of program participants who were homeless at time of program entry; F. Number of program participants who exited homelessness into temporary housing; G. Number of program participants who exited homelessness into permanent housing; and, H. Subpopulation data including: 1. Number of participants that are employed; 2. Number of participants identified as LGBTQ+; 3. Number of participants with a disability; 4. Number of participants with minor children in the household; and, 5. Average number of children per household.												Yes									
California Public Records Act																					
The application, including any and all supplemental documents submitted during the review process, is a public record, which is available for public review pursuant to the California Public Records Act (CPRA) (Division 10 (commencing with Section 7920.000) of Title 1 of the Government Code). After final awards have been issued, the Department may disclose any materials provided by the Applicant to any person making a request under the CPRA. The Department cautions Applicants to use discretion in providing information not specifically requested, including but not limited to, bank account numbers, personal phone numbers, and home addresses. By providing this information to the Department, the Applicant is waiving any claim of confidentiality and consents to the disclosure of submitted material upon request.																					
Certification																					
On behalf of the entity identified in the signature block below, I certify that: The information, statements and attachments included in this Allocation Acceptance Form are, to the best of my knowledge and belief, true and correct. I possess the legal authority to submit this Allocation Acceptance Form on behalf of the entity identified above. In addition, I acknowledge that all information in this application and attachments is public, and may be disclosed by the State.																					
Becky Cromer				Finance Manager III																	
Authorized Rep Printed Name				Title of Authorized Rep				Signature				Date									