To request translation or disability-related accommodations, please contact us at **hcddadmin@clackamas.us**| **971-442-3954**.

Si quiere solicitar servicios de traducción o adaptaciones para la discapacidad, contáctenos en/al **hcddadmin@clackamas.us** | **971-442-3954**.

Чтобы запросить перевод или приспособления, связанные с инвалидностью, пожалуйста, свяжитесь с нами по: **hcddadmin@clackamas.us** | **971-442-3954**.

Щоб попросити переклад або спеціальні послуги для осіб з особливими потребами, зверніться до нас, скориставшись такими контактними даними: **hcddadmin@clackamas.us** | **971-442-3954**.

如需翻译服务或残障相关的协助，请与我们联系：**hcddadmin@clackamas.us** | **971-442-3954**。

Để yêu cầu dịch vụ dịch thuật hoặc điều chỉnh liên quan đến tình trạng khuyết tật, vui lòng liên hệ với chúng tôi qua **hcddadmin@clackamas.us** | **971-442-3954.**

Clackamas County

www.clackamas.us

Health, Housing & Human Services
CLACKAMAS COUNTY

Mary Rumbaugh
Director

August 13, 2026

BCC Agenda Item: _____

Board of County Commissioners
Clackamas County

Approval of a Grant Application to the US Department of Housing and Urban Development for Continuum of Care Programs. Total Grant Value is $8,647,652 for 1 year. Funding is through the US Department of Housing and Urban Development and a required match that includes $115,742 in Budgeted County General funds.

Previous Board Action/Review: N/A
Performance Clackamas: Healthy and secure communities
Counsel Review: Yes-Andrew Naylor
Contact Person: Vahid Brown

Procurement Review: N/A
Contact Phone: 971-334-9870

EXECUTIVE SUMMARY: The Housing and Community Development Division (HCDD) of the Health, Housing & Human Services Department requests approval to apply for Continuum of Care (CoC) Funding from the US Department of Housing and Urban Development (HUD) on behalf of the County (internal) and external community partners to ensure HUD funding for homeless services throughout in Clackamas County including our rural areas.

The CoC is a HUD-mandated local administrative and organizational response to homelessness funding through a Consolidation Application process. Clackamas County CoC, as the CoC Lead Agency, serves as the connection point for federally funded homeless services provided by the County and external community partners. Both competitive funding and/or non-competitive funding opportunities are available within the Consolidated Application. The funding provided through this application funds the CoC infrastructure and yearly application process for the County as the Lead Agency.

As part of the application process, the CoC, guided by the Housing Services Steering Committee, hosts a competitive process for projects for competitive funding. The projects are scored in alignment with HUD priorities and Clackamas County goals and then ranked for recommendation for the consolidated application for HUD's review and final funding determination. A list of the projects ranked by the Scoring Committee to be included in the application can be found in the attached memorandum.

Agreements resulting from this application will be made directly between HUD and the awarded agency. Only funding awarded to Clackamas County entities will pass through to Clackamas County. Grant agreements resulting from this application will be sent out by HUD to each applicant.

Grant funding is through the US Department of Housing and Urban Development with a required match of $2,161,913. No more than $115,742 of budgeted County General Funds will be used along with $2,046,171 in various funding sources, including other federal, state and local funds, to meet this match requirement.

RECOMMENDATION: Staff respectfully recommend the Board of County Commissioners approve staff to apply for HUD FY 2026 CoC Funding and authorize Chair Roberts or his designee to sign any necessary application materials for the submission.

Respectfully submitted,

Mary Rumbaugh

Mary Rumbaugh
Director of Health Housing and Human Services

Financial Assistance Application Lifecycle Form

Use this form to track your potential award from conception to submission.

Sections of this form are designed to be completed in collaboration between department program and fiscal staff.

If renewal or direct appropriation, complete sections I, II, IV & V only. Section III is not required.

If Disaster or Emergency Relief Funding, EOC will need to approve prior to being sent to the BCC

CONCEPTION

Section I: Funding Opportunity Information - To Be Completed by Requester

Award type: ☐ Direct Appropriation (no application) ☐ Subrecipient Award ☑ Direct Award

Award Renewal? ☑ Yes ☐ No

Lead Fund *# and Department*:	240- Health Housing and Human Services
Name of Funding Opportunity:	FY 2026 Continuum of Care Competition and Youth Homeless Demonstration Program Grants NOFO

Funding Source: ☑ Federal – Direct ☐ Federal – Pass through ☐ State ☐ Local

Requestor Information: (Name of staff initiating form)	Raina SmithRoller
Requestor Contact Information:	rsmithroller@clackamas.us
Department Fiscal Representative:	Rebecca Gibbons
Program Name & Prior Project #: (please specify)	Continuum of Care (CoC) Consolidated Application

Brief Description of Project:

The consolidated application is one application for all CoC project funding (internal and external community based projects) as well as bonus funding for planning activities and the Homeless Management information System (HMIS) administration for Clackamas County. Grants awarded through this application will be awarded directly to the each project agency. County Projects will come through the county but others will be direct agreements between HUD and the outside agency. There is a 25% match required for each program which each agency had to detail in each program application.

Name of Funding Agency: US Department of Urban Development (HUD)

Notification of Funding Opportunity Web Address: https://www.hud.gov/hud-partners/coc-program-competition

OR

Application Packet Attached: ☐ Yes ☑ No

Completed By: Date:

***** NOW READY FOR SUBMISSION TO DEPARTMENT FISCAL REPRESENTATIVE *****

Section II: Funding Opportunity Information - To Be Completed by Department Fiscal Rep

☑ Competitive Application ☑ Non-Competing Application ☐ Other

Assistance Listing Number (ALN), if applicable:	14.267	Funding Agency Award Notification Date:	unknown
Announcement Date:	6/1/2026	Announcement/Opportunity #:	FR-6900-N-25
Grant Category/Title	CoC NOFO -Discretionary/Community Development	Funding Amount Requested:	$8,647,652
Allows Indirect/Rate:	Depending on project award	Match Requirement:	25% cash or in-kind
Application Deadline:	8/26/2026 8pm ET	Total Project Cost:	unknown since many are not county run programs
Award Start Date:	varies based on each award	Other Deadlines and Description:	Clackamas Competition to end 12/11/25.
Award End Date	varies based on each award		
Completed By:	Raina SmithRoller/Erin Fernald	Program Income Requirements:	depends on project
Pre-Application Meeting Schedule:			

Additional funding sources available to fund this program? Please describe:
Supportive Housing Services, other Federal, State, and local funds are used for matching. Each applicant agency in the consolidated application must specify their own match funds.

How much General Fund will be used to cover costs in this program, including indirect expenses?
The awards from last year are used to administer the CoC Adminstration of this Consolidated Application Process (CoC-Planning Grant). Additional funds for indirect expenses in H3S projecs will be covered through Supportive Housing Services Funds or other available funds.

How much Fund Balance will be used to cover costs in this program, including indirect expenses?
No prior fund balance will be used as consolidated awards are specific to each project and only those that are county projects will run through the County.

In the next section, limit answers to space available.

Section III: Funding Opportunity Information - **To Be Completed at Pre-Application Meeting by Dept Program and Fiscal Staff**

Fiscal

1. Are there other revenue sources required, available, or will be used to fund the program? Have they already been secured? Please list all funding sources and amounts.

2. For applications with a match requirement, how much is required (in dollars) and what type of funding will be used to meet it (CGF, In-kind, local grant, etc.)?

3. Does this grant/financial assistance cover indirect costs? If yes, is there a rate cap? If no, can additional funds be obtained to support indirect expenses and what are those sources?

4. Does the grant/financial assistance fund an existing program? If yes, which program? If no, what is the purpose of the program?

Organizational Capacity:

1. Does the organization have adequate and qualified staff? If no, can staff be hired within the grant/financial assistance funding opportunity timeframe?

2. Are there partnership efforts required? If yes, who are we partnering with and what are their roles and responsibilities?

3. If this is a pilot project, what is the plan for sun setting the project and/or staff if it does not continue (e.g. making staff positions temporary or limited duration, etc.)?

4. If funded, would this grant/financial assistance create a new program, does the department intend for the program to continue after initial funding is exhausted? If yes, how will the department ensure funding (e.g. request new funding during the budget process, supplanted by a different program, etc.)?

Collaboration

1. List County departments that will collaborate on this award, if any.

Reporting Requirements

1. What are the program reporting requirements for this grant/funding opportunity?

2. How will performance be evaluated? Are we using existing data sources? If yes, what are they and where are they housed? If not, is it feasible to develop a data source within the grant timeframe?

3. What are the fiscal reporting requirements for this funding?

Mission/Purpose:

1. How does the grant/funding opportunity support the Department and/or Division's Mission/Purpose/Goals?

2. Who, if any, are the community partners who might be better suited to perform this work?

3. What are the objectives of this funding opportunity? How will we meet these objectives?

Other information necessary to understand this award, if any.

Program Approval:

Raina Smith-Roller	08/03/2026	Raina Smith-Roller
Name (Typed/Printed)	Date	Signature

***** NOW READY FOR PROGRAM MANAGER SUBMISSION TO DIVISION DIRECTOR*****
*****ATTACH ANY CERTIFICATIONS REQUIRED BY THE FUNDING AGENCY. COUNTY FINANCE OR ADMIN WILL SIGN*****

Section IV: Approvals

DIVISION DIRECTOR (or designee, if applicable)

Shannon Callahan	8/3/2026	
Name (Typed/Printed)	Date	Signature

DEPARTMENT DIRECTOR (or designee, if applicable)

Mary Rumbaugh	Aug 3, 2026	Mary Rumbaugh Mary Rumbaugh (Aug 3, 2026 17:10:20 PDT)
Name (Typed/Printed)	Date	Signature

FINANCE ADMINISTRATION

Bouavieng Bounnam	Aug 3, 2026	Bouavieng Bounnam
Name (Typed/Printed)	Date	Signature

EOC COMMAND APPROVAL (*WHEN NEEDED FOR DISASTER OR EMERGENCY RELIEF APPLICATIONS ONLY)*

Name (Typed/Printed)	Date	Signature

Section V: Board of County Commissioners/County Administration

*(Required for all grant applications. If your grant is awarded, all grant **awards** must be approved by the Board on their weekly consent agenda regardless of amount per local budget law 294.338.)*

For applications $150,000 and below:

COUNTY ADMINISTRATOR	Approved: ☐	Denied: ☐
Name (Typed/Printed)	Date	Signature

For applications up to and including $150,000 email form to BCC staff at CA-Financialteam@clackamas.us for Gary Schmidt's approval.

For applications $150,000.01 and above, email form with Staff Report to the Clerk to the Board at ClerktotheBoard@clackamas.us to be brought to the consent agenda.

BCC Agenda item #: _____ Date: _____

OR

Policy Session Date: _____

County Administration Attestation

County Administration: re-route to department at _____

and

Grants Manager at financegrants@clackamas.us

when fully approved.

Department: keep original with your grant file.

Projects Certified to be Consistent with the Clackamas County Consolidated Plan for FY26 HUD CoC Application

Clackamas County Department of Health, Housing, and Human Services

- Homeless Management Information System (HMIS) Renewal Project
- Coordinated Housing Access (CHA) Renewal Project
- Housing the People PSH Renewal Project
- Housing our Heroes PSH Renewal Project
- Housing our Families RRH Renewal Project
- HOPE II PSH Renewal Project
- HOPE Leasing PSH Renewal Project
- Veteran street Outreach Project
- Social Services/NWFS Partnership TH New Project
- Social Services/CWS Partnership TH New Project
- CoC Planning Grant

Housing Authority of Clackamas County

- Shelter + Care (S+C)

NW Housing Alternatives

- Annie Ross Housing Services HUD Rapid Rehousing Renewal Project

4D Recovery

- TH New Project

The Father's Heart

- SSO-SO New Project

Clackamas Women's Services

- PH-RRH Renewal Project
- PSH Renewal Project
- SSO-CE Renewal Project
- SSO-CE DV Bonus New Project

Northwest Family Services

- YHDP Diversion, Prevent, and Access Renewal Project

Parrott Creek

- Monarch Housing Transitional Housing Project

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development

OMB Number. 2501-0044
Expiration Date: 2/28/2027

Public Reporting Burden Statement: This collection of information is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of the requested information. Comments regarding the accuracy of this burden estimate and any suggestions for reducing this burden can be sent to: U.S. Department of Housing and Urban Development, Office of the Chief Data Officer, R, 451 7th St SW, Room 8210, Washington, DC 20410-5000. Do not send completed forms to this address. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid OMB control number. This agency is authorized to collect this information under Section 102 of the Department of Housing and Urban Development Reform Act of 1989. The information you provide will enable HUD to carry out its responsibilities under this Act and ensure greater accountability and integrity in the provision of certain types of assistance administered by HUD. This information is required to obtain the benefit sought in the grant program. Failure to provide any required information may delay the processing of your application and may result in sanctions and penalties including of the administrative and civil money penalties specified under 24 CFR §4.38. This information will not be held confidential and may be made available to the public in accordance with the Freedom of Information Act (5 U.S.C. §552). The information contained on the form is not retrieved by a personal identifier, therefore it does not meet the threshold for a Privacy Act Statement.

I/We, the undersigned, also certify under penalty of perjury that the information provided below is true, correct, and accurate. Warning: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties (18 U.S.C §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. § 3729, 3802; 24 CFR § 28.10(b)(1)(iii)).

I/We, the undersigned, certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan. (Complete the fields below.)

Applicant Name: OR 507 All Applicants

Project Name: OR 507 All Projects See Attached List

Location of the Project: Clackamas County, Oregon

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

Continuum of Care Program Competition

Name of Certifying Jurisdiction: Clackamas County

Certifying Official of the Jurisdiction
Name: Craig Roberts

Title: Chair, Board of County Commissioners

Signature: Date:

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