## **OPTIONAL FORM – Not a Required Part of the Application**

Central Florida Continuum of Care (CoC FL-507): 2019 Regional Application for HUD CoC Program Funding **Jurisdictional Representative Certification Form** 

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## Section 1 (to be completed by Applicant's authorized representative):

Name of Applicant:

Name of Project:

Brief Description of Project:

Applicant's Role in Project:

Check one of the following boxes that apply to the above-described Project:

- □ This is a county-specific Project (i.e., the Project will exclusively serve persons experiencing homelessness in a single county, or will incidentally serve persons experiencing homelessness outside of the single county).
- □ **This is a regional Project** (i.e. the Project will substantially serve persons experiencing homelessness in all 3 counties).

Signature of Applicant's Authorized Representative Date

## Section 2 (to be completed by an appropriate jurisdictional representative):

Jurisdiction Represented (check only one):

- Orange County City of Orlando
  - City of Kissimmee
- Osceola County □ Seminole County □ City of Sanford

Name of Jurisdictional Representative:

Title of Jurisdictional Representative:

If Applicant indicated that Project is a Single-County Project, check at least one box below, but all that apply:

 $\hfill\square$  The Project is the Jurisdiction's single highest priority for inclusion in the CoC FL-507 2017 submission to HUD.

- □ The Jurisdiction has provided financial support to homelessness assistance activities performed by the Applicant for any of the following periods (*check all that apply*):
  - □ FY 2017-18 List amount of funding provided through jurisdiction (if available):
  - □ FY 2016-17 List amount of funding provided through jurisdiction (if available):
  - □ FY 2015-16 List amount of funding provided through jurisdiction (if available):
  - □ None of the above statements apply.

## If Applicant indicated that Project is a Regional Project, check at least one box below, but all that apply:

□ The Applicant has a past history of serving persons experiencing homelessness within the jurisdiction.

- The Project already serves persons who are experiencing homelessness within the jurisdiction.
- □ None of the above statements apply.

Signature of Jurisdictional Representative

Date

Printed Name