



**December 3, 2025**  
**Addendum Number One (1)**  
**Request for Application – RFA#121225-CoC FY2025**  
**CoC Projects, CoC Bonus Projects and Domestic Violence Bonus Projects**

**Addendum Number One (1) Explanation:**

This addendum is to add the FY2025 CoC Pre-Application Workshop Questions and Answers. Questions were received before, during and after the pre-application workshop.

**Q1:** How is the "reasonable cost per participant based on the population served" determined?

**A1:** What 2 CFR 200.404 means (as HUD references it)

- 2 CFR 200.404 defines “reasonable” costs as those that “do not exceed what a prudent person would incur under the circumstances prevailing at the time the decision was made to incur the cost.” [HUD Exchange](#)
- That means HUD expects applicants to justify their cost assumptions with evidence: what housing and services the population needs, the local cost environment (rents, wages, service intensity), and the project’s service model.

So, in effect, “reasonable cost per participant/household served based on the population served” is a judgment-based standard. HUD does not provide a hard numeric threshold; rather, applicants must show that their per-household cost aligns with the needs, resources, and intensity of services required by that particular population.

In practice, HUD asks whether the funding request is proportionate to:

- the service model,
- the needs of the population,
- the level of staffing required, and
- comparable costs for similar projects.

If the cost appears too high *for the population served*, the project does not meet the threshold.

Where it is found in regulation:

- 2 CFR 200.404 – Reasonable costs.
- 24 CFR 578.37 – Eligible costs (used to verify that the per-participant budget items are allowable).
- 24 CFR 578.95(d) – Prohibitions on certain cost uses.



**Q2:** Does Supportive Services funding support direct housing or utility assistance funds for eligible clients?

**A2:** Supportive Services (SSO) funding does not cover ongoing rental assistance or ongoing utility payments, but it does allow certain *one-time* housing-related costs. Under 24 CFR 578.53(e), eligible supportive services may include:

- Rental application fees
- One-time utility deposits (paid directly to the utility company)
- One-time moving costs, such as truck rental or hiring movers

This information can be found in the RFA 121225-CoC posted here: <https://www.leegov.com/dhs/funding> at the bottom of page 18 and top of page 19.

Only housing project components, PSH, RRH, TH, may use funds for direct housing or utility assistance, and only under the eligible cost categories defined at 24 CFR 578.

**Q3:** Can you provide any guidance relevant to expected award amount per organization for new SSO/SSO-Street-Outreach projects?

**A3:** The funding limits are stated in the RFA #121225-CoC posted here: <https://www.leegov.com/dhs/funding> at Section III: Funding Guidelines, pages 23–24. There are no minimum requests, just maximums. These limits apply to all new projects, including SSO Standalone and SSO Street Outreach. The RFA does not state a lower or specialized cap for SSO projects.

**Q4:** For SSO projects, will priority be given to Street Outreach projects?

**A4:** For Supportive Services Only (SSO) projects, priority is effectively given to SSO Street Outreach, because HUD assigns:

1. Separate, stricter rating criteria, and
2. Higher minimum scoring thresholds
3. Mandatory law-enforcement and engagement requirements for Street Outreach projects that do not apply to SSO Standalone. This structural difference shows that HUD is more selective about SSO Street Outreach. This information can be found in RFA 121225 CoC posted here: <https://www.leegov.com/dhs/funding> pages 11,14,18, and 35.



**Q5:** Will transportation to medical care count towards healthcare coordination?

**A5:** Transportation to medical care *can* count as part of “healthcare coordination”, but only when it is tied to a documented care plan and supports access to medical or behavioral-health services.

How HUD views it:

- Transportation by itself is not “healthcare coordination.”
- But transportation as part of connecting a participant to medical care (appointments, specialists, treatment, therapies) does count as a healthcare-coordination activity.
- You must show it supports a planned health outcome and is linked to case management.

This aligns with HUD CoC Program guidance for Supportive Services (24 CFR 578.53), where transportation is eligible when it enables access to medical, mental health, or substance-use treatment.

**Q6:** I am building a new group home building (new construction) to serve developmentally and intellectually disabled individuals in Lee County. Is this project eligible for this funding?

**A6:** If the project is being built to house persons with developmental/intellectual disabilities who are *not* homeless, then it is not eligible under this RFA. The CoC Program does not fund:

- Group homes for non-homeless populations
- Licensed residential treatment or disability-care facilities
- General special-needs housing outside the homeless system

No provision in RFA121225-CoC authorizes the construction of a disability care group home.

**Q7:** Will the ARD and the bonus be separate applications?

**A7:** Applicants applying for the CoC Continuum of Care Projects, CoC Bonus Projects, and/or DV Bonus Projects must submit a separate application for each project type. This information can be found in RFA 121225-CoC posted here: <https://www.leegov.com/dhs/funding> on page 4.



There will be one main application, but it will guide you to fill out different sections depending on the type of project you choose. Even though it is one application form, you will still need to submit a separate application form for each project type you are applying for. If it is a project renewal, we will be asking for updated information.

**Q8:** For the barrier islands, if we become a cooling station for all the island (after a storm, we are all HUD homeless, no power/water), will revamping the building we have count towards shelter?

**A8:** A building upgrade to operate as a *post-storm cooling station or temporary emergency shelter for barrier island residents who temporarily lose power or water* is not eligible for funding under this RFA.

While the HUD Continuum of Care (CoC) Program allows several project components under 24 CFR 578.37, this RFA is only accepting applications for the following components:

- Permanent Housing (including PSH and RRH)
- Transitional Housing
- Supportive Services Only (SSO)

Projects must be designed to serve individuals who meet HUD's definition of homelessness under 24 CFR 578.3 and must fit within one of the eligible CoC components listed above.

A facility intended to operate as a post-storm cooling station, emergency shelter, or disaster-response space does not fall within these eligible CoC project types and therefore cannot be funded through this RFA. CoC funds cannot be used for building upgrades or operations for purposes outside of Permanent Housing, Transitional Housing, or Supportive Services Only programming.

Eligible project applications can be found in RFA 121225-CoC posted here: <https://www.leegov.com/dhs/funding> pages 19-21

**Q9:** Does SSO/healthcare coordination cover cancer patients who are at risk of homelessness/need housing assistance due to treatment?



**A9:** For a cancer patient to be eligible:

1. They must meet the HUD homeless definition (living in shelter, unsheltered, fleeing DV, or losing housing within 14 days).
2. SSO funds can then support healthcare coordination, such as:
  - Transportation to chemotherapy or other treatment,
  - Help connecting to oncology care,
  - Coordinating medical appointments,
  - Linking to Medicaid/SSI, as long as this supports housing stability.

If the person is not HUD-homeless, the project cannot serve them under SSO healthcare coordination.

**Q10:** Our organization, Guiding Grace Family Support Network, was founded in Omaha, Nebraska, and has been in operation there since June 2024. We just opened a second center last month in Cape Coral in Lee County. Since we have been in operation as an organization for 17 months, but only one month in Cape Coral, would we be eligible for a grant?

**A10:** You are eligible to apply. The RFA requires that an applicant have provided continuous direct services for at least 12 months, but it does not require that those services were delivered in Lee County.

This information can be found in RFA 121225-CoC posted here:

<https://www.leegov.com/dhs/funding> on the following pages:

- Eligibility Criteria – Page 6–7:  
Must have provided continuous direct services for at least 12 months prior to the application deadline.
- Required Documentation – Page 7:  
Evidence that the organization has provided continuous direct services for at least 12 months (Form 990 or Board Chair attestation accepted)

**Q11:** Just to confirm, of the Annual Renewal Demand, only 30% maximum is allowed of the grant funding for PH (RRH, PSH, and joint TH and PH-RRH). How does this formula apply for the Bonus funding?

**A11:** The 30% Permanent Housing (PH) cap *does apply* to Bonus-funded PH projects in the FY2025 HUD CoC NOFO. In the NOFO, the rule appears in the Application Review



and Selection Process, which governs *all* project types in Tiers 1 and 2, including CoC Bonus and DV Bonus projects. In Section V.D.2.a.(3)) – HUD states that during the selection process: “If at any point, HUD selects Permanent Housing projects in an amount more than 30 percent of a CoC’s Annual Renewal Demand (ARD), HUD will remove all remaining unselected Permanent Housing projects from that CoC’s priority listing...”

Under F. Program History – “...no more than 30 percent of a CoC’s Annual Renewal Demand (ARD) under this NOFO will fund Permanent Housing projects, including PH-PSH, PH-RRH and Joint TH and PH-RRH projects.”

Even though Bonus funds are not part of ARD, HUD still counts the type of project toward the 30% program balance requirement. So, HUD uses ARD to set a “ceiling,” but they apply the ceiling to every PH project requested.

**Q12:** Would you be sharing this presentation with everyone?

**A12:** The presentation will be emailed to everyone in attendance.

**Q13:** The provision of 40 hours of services does not mean the applicant is responsible for all 40 hours as they can connect clients to other supporting organizations (treatment, job training, education, etc), correct?

**A13:** The requirement to deliver 40 hours of supportive services does not mean the applicant must provide all 40 hours directly. HUD allows these services to be delivered by the applicant or through partnerships with other qualified organizations. The applicant remains responsible for coordinating and documenting that participants receive a total of 40 hours of services, regardless of whether those hours are provided directly or through partner organizations.

The FY2025 HUD CoC NOFO also emphasizes the importance of formal partnerships to ensure access to treatment, recovery supports, mainstream benefits, employment services, education, and other supportive services. Applicants may demonstrate these partnerships through MOUs, letters of commitment, contracts, or other written agreements.

**Q14:** If we already have a street outreach program, can we still apply and use SSO to supplement or enhance our program?



**A14:** HUD allows SSO-Street Outreach funds to supplement an existing outreach program as long as the new funding adds capacity rather than replaces current funding. Acceptable enhancements include extended hours, expanded geographic coverage, added outreach staff, or strengthened coordination with law enforcement and treatment providers. The request must show a clear expansion or improvement, not duplication of what is already funded.

SSO funds may supplement, but cannot supplant, your current street outreach budget. Supplementing means adding new capacity; supplanting means replacing existing funding, which HUD prohibits.

**Q15:** If you are reallocating an existing project to a project type emphasized by HUD, is the application designated as new?

**A15:** Under the FY2025 HUD CoC NOFO, any project that changes to a different component through reallocation must be submitted as a new project application. Because the original renewal project is eliminated when reallocated, the replacement application is always considered new, even when the same agency continues to operate the project. Options under reallocation include: (1) retaining the existing *component and recipient*, as a renewal, which is not a new project; (2) consolidating multiple renewal projects that share the *same component and recipient*, which results in a consolidated renewal project rather than a new project; and (3) reallocating an existing project to create a new TH, PSH, or SSO project that aligns with HUD priorities, which is treated as a new project application. This includes cases where the component stays the same (e.g., PSH to PSH) but the population served changes, that change requires a new project.

**Q16:** Will that change the date of the deadline once the application has actually been released?

**A16:** The deadlines are established in the FY2025 HUD CoC NOFO and remain the same regardless of when the local application is released. As the Collaborative Applicant, Human and Veteran Services structures the local timeline to ensure we meet all requirements and submission dates set by the HUD NOFO.

**Q17:** Will there be word/character limits on the responses?

**A17:** The character limit is not listed in the FY 2025 NOFO, but e-snaps uses strict character limits (not word limits) for most narrative fields. Limits vary by question but are





typically 2500 characters, including spaces. The system will not allow text beyond the limit and it will cut off excess characters.

**Q18:** Is PSH for individuals that are 62 years old or older OR physically disabled.

**A18:** Under FY2025 NOFO, PSH is no longer broadly prioritized. Instead, it is narrowly targeted to individuals who are 62+ **and** have a qualifying physical disability.

This population is treated as the administration's "priority eligibility" group for the limited PSH funding that remains under the 30% cap.

Important Notes:

- Age 62+ alone is not enough; a physical disability must also be documented.
- Individuals under 62 can still qualify for PSH if they meet HUD's chronic homelessness + disability criteria, but they are not part of the FY2025 priority group and may be less competitive.
- The administration's policy shift greatly restricts PSH and pushes most communities toward TH, SSO, and recovery-oriented models.

**Q19:** Renewals projects that were for "Dedicated Plus" remain in that category or will they meet the new standard that does not require chronic homelessness?

**A19:** The FY2025 NOFO states that for Dedicated Plus projects 100% of the beds are dedicated to serving individual households with children, and unaccompanied youth, including pregnant and parenting youth.

For a project to renew, it must remain the same project type, serving the same population; otherwise, it should be a transition grant or reallocation, both of which are new projects.

A Renewal PSH project is allowed to continue serving its existing eligible population, even if that population is not "62+ with a physical disability."

The 62+ with a physical disability requirement applies only to NEW PSH projects under the FY2025 NOFO.

HUD is prioritizing new PSH for 62+ individuals with physical disabilities. While renewals remain eligible, they do not align with this new federal priority, which may:

- Reduce the project's competitive strength in local ranking.





- Lower the CoC's overall application score in certain scoring categories tied to HUD priority populations.
- Make it less likely to be competitive for reallocation or bonus opportunities in future years.

**Q20:** Supportive Services stand alone. Is this for individuals 62 or older or physically disabled? Clarification on who can be served on this grant.

**A20:** Supportive services projects can serve any HUD-eligible homeless population; the 62+ with physical disability requirement applies only to NEW PSH projects.

**Q21:** Will a PSH project renewal be required to support individuals who are 62 yrs old or older or physically disabled or IDD only?

**A21:** For a project to renew, it must remain the same project type, serving the same population. Otherwise, it should be a transition grant or reallocation, both of which are new projects.

A Renewal PSH project is allowed to continue serving its existing eligible population, even if that population is not "62+ with a physical disability."

The 62+ with a physical disability requirement applies only to NEW PSH projects under the FY2025 NOFO.

The downside to this is that renewals serving other populations may score lower in the FY2025 NOFO, because HUD is prioritizing new PSH for 62+ individuals with physical disabilities. While renewals remain eligible, they do not align with this new federal priority, which may:

- Reduce the project's competitive strength in local ranking.
- Lower the CoC's overall application score in certain scoring categories tied to HUD priority populations.

Make it less likely to be competitive for reallocation or bonus opportunities in future years.

In the FY2025 NOFO, there is no mention of IDD only. IDD has always been an eligible disabling condition for PSH under HUD's definition of "disability" in 24 CFR 578.3.



**Q22:** Is this application for 1 year or multiple years? If for multiple years, how many?

**A22:** HUD awards CoC funding on annual 12-month grant cycles, so applicants may request funding for one year only. If the project is awarded and meets all HUD and local performance, spending, and compliance requirements, it will be eligible to renew in the next CoC competition as part of the Annual Renewal Demand (ARD).

**Q23:** If we are planning expanding our current HOT program do we submit the entire annual HOT team budget or do we submit just the parts we are expanding?

**A23:** You submit only the portion of the HOT program you are expanding. CoC funding can only be requested for the new, expanded activities, not the entire program budget.

**Q24:** Are we able to combine the SSO-Street Outreach and SSO- Standalone in the same application if we plan on providing both? Previously we have provided a combination of both types of services in one application.

**A24:** Under the FY2025 NOFO and RFA #121225-CoC, each project application must include only one project component. If you plan to provide both Street Outreach and Standalone Supportive Services, you must submit two separate applications, each with its own budget and scope.

**Q25:** In regards to the application and materials due on December 12<sup>th</sup> what do we submit as the local project application is not yet available?

**A25:** You must submit all required RFA materials by December 12th. We are preparing a local project application based on the FY2025 NOFO guidance in the event HUD does not release its application in time. The application deadline will remain December 12, 2025, at 12 p.m., unless HUD issues an extension for the collaborative application and project applications due to them.

The local project application will be posted on <https://www.leegov.com/dhs/funding> as soon as it is available. Please check the website regularly for updates.