

Emergency Solutions Grants (ESG) Required Forms for Shelters

To be considered for reimbursement processing: The following forms must be completed and submitted to New Castle County along with the client documents and draw for reimbursement. Incomplete documents will be returned and will not be processed.

REQUIRED FORMS:

☐ ESG Client File Checklist Form
□ NCC Parcel Search Results showing address prior to homelessness was outside the City of Wilmington limits (parcel numbers beginning with a 26 are not eligible for NCC ESG funds).
☐ Agency Intake Application & Related Orientation Forms ☐ Homeless Certification Form (completed entirely, proving literally homeless status and signed by client and staff)
Referral Email or Information from Housing Alliance Delaware
☐ Community Management Information System (CMIS) Client Documents
-Service Point: Entry/Exit Assessment Screen showing Housing Status
☐ Income Related Source Documents, Photo ID & Vital Statistics Documentation*
☐ Termination & Appeal Policy & Procedure (proof client received a copy of them)
* 4 - 4 - :1 -11

*As Available





New Castle County (NCC) Emergency Solutions Grants (ESG) Program HUD's DEFINITION of HOMELESSNESS and CERTIFICATION

Date:	
This is to certify the above individual or household is currently homeless based on the category checked and	i
required documentation.	
CHRONICALLY HOMELESS CERTIFICATION	
CHRONICALLY HOMELESS: Is Eligible for Rapid Re-housing Assistance. Individual or family:	
Is homeless and resides in a place not meant for human habitation, a safe haven, or in an emergency shelter and h	
been homeless and residing in such a place for at least 12 months or on at least four separate occasions in the three (3) years where the combined occasions must total at least 12 months; and	ast
(ii) Has a head of household with a diagnosable substance use disorder, serious mental illness, developmental disa (as defined in Section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002)), post-traumatic stress disorder, cognitive impairments resulting from a brain injury, or chronic physical or disability.	
NOTE:	
 Transitional Housing <u>does not</u> qualify an individual/family for chronic status; 	
 Veterans receiving Supportive Services for Veteran Families (SSVF) or other grant per-diem programs offered Veterans Administration <u>do</u> maintain their Chronic Status; 	y the
 ESG Rapid Re-housing is not considered transitional housing; 	
 Institution stays of less than 90 days do not constitute a break and <u>can be</u> included in the time calculation as to the individual/family were on the streets, in emergency shelter, or safe haven when they began; 	ng as
 Stays in "housed" environments that are <u>less</u> than seven (7) consecutive nights <u>do not</u> constitute a break in homelessness. 	
 A BREAK in homelessness is defined as a stay in housing that lasts at least seven (7) consecutive nights; therefore client <u>must have</u> at least four (4) separate occasions to qualify under this option. 	re a
To certify individual living in a place not meant for human habitation, a safe haven or an emergency shelter, the following documentation must be provided.	
Option 1:	
An CMIS record or record from a comparable database. If not documented in CMIS for 12 months proceed Option 2.	to
Option 2**:	
A written observation by an outreach worker of the conditions where the individual was living or	
A written referral by another housing or service provider where the individual was living.	
**Note: One encounter per month, documented breaks in CMIS (stayed with relative for night etc. counts as home is acceptable documentation. Must be documented in client file.	less)
Option 3: For use only in situations where no third-party certification is available; self-certification can be used of after attempts to collect documentation of Options 1 and 2 above.	nly
Self-certification by the individual seeking assistance, which must be accompanied by the intake worker's	
documentation of the living situation of the individual or family seeking assistance and the steps that were to obtain evidence in Steps 1 and 2.	aken
To certify head of household disability, the following documentation must be provided: Verification of Disability	



New Castle County (NCC) Emergency Solutions Grants (ESG) Program

HUD's DEFINITION of HOMELESSNESS and CERTIFICATION **GENERAL HOMELESS CERTIFICATION

**Categories 1 and 4 are eligible for Emergency Shelter and Rapid Re-housing Assistance CATEGORY 1: Literally Homeless Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: (i) Has a primary nighttime residence that is a public or private place not meant for human habitation; or (ii) Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs). To certify homeless status for the above must provide documentation of two of the following: Written referral by another housing or service provider; or Written observation by the outreach worker; or Certification by the individual or head of household seeking assistance stating that (s)he was living on the streets or in shelter. Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: (iii) Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution (documentation must include one of the above forms of evidence AND 1 of the following). Discharge paperwork or written/oral referral; or Written record of intake worker's due diligence to obtain above evidence and certification by individual that they exited institution. **Categories 2 and 3 are considered "homeless" and eligible for Emergency Shelter. CATEGORY 2: Imminent Risk of Homelessness Individual or family who will imminently lose their primary nighttime residence, provided that: (i) Residence will be lost within 14 days of the date of application for homeless assistance; (ii) No subsequent residence has been identified; and (iii) The individual or family lacks the resources or support networks needed to obtain other permanent housing. Documentation must include 1 of the following: A court order resulting from an eviction action notifying the individual or family that they must leave; or For individual and families leaving a hotel or motel—evidence that they lack the financial resources to stay;

Self-certification or other written documentation that the individual lack the financial resources and support

A documented and verified oral statement.

necessary to obtain permanent housing.

In addition to 1 of the above, documentation must include <u>BOTH</u> of the following:

Certification that no subsequent residence has been identified; <u>AND</u>