



Introduction to State Grant Management

An overview of grant monitoring resources and next steps for Grantees following the execution of a new Standard Agreement.





Welcome!

Congratulations on receiving an award from one of HCD's State Grant programs! We look forward to partnering with you to ensure the success of your project.





What's Next?

- Once you've received your executed Standard Agreement, you will receive a Welcome Email from the Grant Management Representative assigned to your contract within five (5) business days. Your Grant Management Representative ("Rep") will be your point person for all program and contract-related questions moving forward.
- Included with the Welcome Email will be a "Project Contact Form" for you to fill out with the applicable contact information from your agency. Please return this to your Rep at your earliest convenience.
- Be sure to include the regular staff contact for day-to-day correspondence, as well contact information for your agency's executive director and chief financial officer.



Welcome Email

Hello,

Congratulations on your Homekey award.

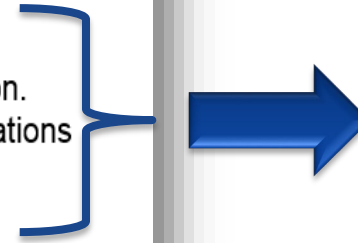
My name is Jane Doe and I will be your main point of contact here in the State Grant Management section. Please contact me for any Homekey related questions, including all funding requests and reporting obligations as outlined in your Standard Agreement.

A few things that you may find helpful:

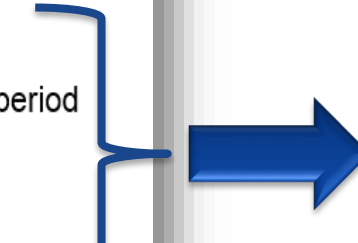
- Your Standard Agreement is in effect until December 31, 2026.
- A(n) Annual Report is due **January 31** for a total of 5 years. Reporting forms can be found on the program webpage at <https://homekey.hcd.ca.gov/>. Please be sure to use the link every reporting period to ensure you are using the most current version of the report.
- For disbursement requests please complete the Request for Funds (RFF) form located at <https://homekey.hcd.ca.gov/>. Once completed, the RFF can be emailed to me for processing.
- Grant funds must be expended by October 2026.

Lastly, please complete the attached Project Contact Form detailing all relevant contact information for your organization. This information will be added to our database and is only available to HCD staff. Please email me the completed form in Excel format within two weeks of the date of this letter.

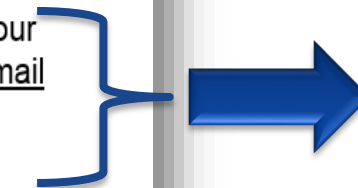
Please do not hesitate to reach out to me regarding any of the items mentioned above or for any other questions or technical assistance you may need. I look forward to working with you.



✓ Grant Management Representative introduction



✓ Important deadlines and links to program resources



✓ Request to complete Project Contact Form



Project Contact Form

- ✓ Sent to the Grantee with a welcome email and every year with the Annual Report reminder
- ✓ Provides the Department with up-to-date contact list of staff and executive contacts from the Grantee's agency

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT DIVISION OF STATE FINANCIAL ASSISTANCE STATE GRANT MANAGEMENT 2020 West El Camino, 4th Floor Sacramento, CA 95833			
Project Contact Form			
Name of Individual Completing Form:		Email:	
Contract #:		Date:	
GENERAL CONTACT INFORMATION			
General Contact Information			
Contractor:			
Street Address:			
City:		State:	
Zip:		County:	
CONTRACTOR CONTACT (Daily Contact)			
Designated representative responsible for the project (if more than one, use Additional Contacts section below)			
Contact Name:		Title:	
Phone:		Email:	
Street Address:			
City:		State:	
Zip:		County:	
CONTRACTOR PRIMARY CONTACT (Executive)			
Executive Director, President, CEO, etc.			
Contact Name:		Title:	
Phone:		Email:	
Street Address:			
City:		State:	
Zip:		County:	





The Standard Agreement

The Standard Agreement contains all requirements and expectations for your project in order to remain eligible for the award. When reviewing requests for funds or submitted reports, your Grant Management Representative will use the Standard Agreement as a primary reference document to confirm compliance.

Key Points:

- Amounts for each eligible activity
- Limits on administrative funds
- Reporting due dates
- Expenditure deadlines
- Contract expiration date
- Special Conditions and milestones

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES
STANDARD AGREEMENT
STD 213 (Rev. 03/2019)

AGREEMENT NUMBER 20-PLHA-15107	PURCHASING AUTHORITY NUMBER (if applicable)
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1. This Agreement is entered into between the Contracting Agency and the Contractor named below:
CONTRACTING AGENCY NAME
DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

CONTRACTOR'S NAME
[REDACTED]

2. The term of this Agreement is:
START DATE
Upon HCD Approval
THROUGH END DATE
6/30/2030

3. The maximum amount of this Agreement is:
\$93,631.00

4. The parties agree to comply with the terms and conditions of the following exhibits, which are by this reference made a part of the Agreement.

EXHIBITS	TITLE	PAGES
Exhibit A	Authority, Purpose and Scope of Work	5
Exhibit B	Budget Detail and Payment Provisions	3
Exhibit C*	State of California General Terms and Conditions	GTC - 04/2017
Exhibit D	PLHA Program Terms and Conditions	9
Exhibit E	Program-Specific Provisions and Special Conditions	3
TOTAL NUMBER OF PAGES ATTACHED		20

Items shown with an asterisk (*), are hereby incorporated by reference and made part of this agreement as if attached hereto. These documents can be viewed at <https://www.dgs.ca.gov/OLSR/Resources>

IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED BY THE PARTIES HERETO.

CONTRACTOR
CONTRACTOR NAME (if other than an individual, state whether a corporation, partnership, etc.)
[REDACTED]

CONTRACTOR BUSINESS ADDRESS
[REDACTED] CITY [REDACTED] STATE CA ZIP [REDACTED]

PRINTED NAME OF PERSON SIGNING
[REDACTED] TITLE
Director, Community Action Department

CONTRACTOR AUTHORIZED SIGNATURE
[REDACTED] DATE SIGNED
3-19-21

CONTRACTING AGENCY NAME
Department of Housing and Community Development

CONTRACTING AGENCY ADDRESS
2020 W. El Camino Ave., Suite 130
CITY Sacramento STATE CA ZIP 95833

PRINTED NAME OF PERSON SIGNING
Shaun Singh
TITLE
Contracts Manager, Business & Contract Services Branch

CONTRACTING AGENCY AUTHORIZED SIGNATURE
[REDACTED] DATE SIGNED
6/30/2021

[REDACTED] California Department of General Services Approval (or exemption, if applicable)



Requesting Funds

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT DIVISION OF STATE FINANCIAL ASSISTANCE STATE GRANT MANAGEMENT 2020 West El Camino, 4th Floor Sacramento, CA 95833							
PET ASSISTANCE AND SUPPORT (PAS) PROGRAM REQUEST FOR FUNDS							
Last Updated 7/28/2021							
HCD Contract Number:		HCD SGM Rep Name:		Request for Funds #:			
Project Name:		Preparer Name:		Preparer Title:			
Project Address:		Preparer E-mail:		Preparer Phone #:			
Contractor Name:		Total PAS Award:					
Contractor Address:							
Contractor City/State/Zip:							
Please select from drop-down if you are requesting 100% of your PAS award in this form:							
EXPENDITURE BREAKDOWN							
Activity Name	Award Amount	Total Previously Drawn	Draw Amount Requested This Period	Total Drawn To Date	Percent of Award Drawn	Award Remaining	HCD Approved Draw Amount This Period
Pet Assistance and Support				\$0.00	0%	\$0.00	
TOTAL:	\$0.00	\$0.00	\$0.00	\$0.00	0%	\$0.00	
CERTIFICATION							
<small>***By signing this request, I certify to the best of my knowledge and belief that the request is true, complete, and accurate, and the expenditures, disbursements and cash receipts will be for the purposes and objectives set forth in the terms and conditions of the State award. I am aware that any false, fictitious, or fraudulent information, or the commission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812)</small>							
Name of Authorized Person			Title of Authorized Person				
Signature of Authorized Person			Date				
HCD USE ONLY							
SGM Representative Signature			Date				
SGM Manager Signature			Date				

Request for funds (RFF) forms can be found on the corresponding program's website. RFFs are to be filled out when you are requesting a disbursement from your awarded funds.

Key Points:

- RFFs must be completely filled out and signed by the agency's authorized person, per the authorizing resolution.
- Amounts requested must align with award amounts in the Standard Agreement.
- The Department will review your Standard Agreement upon each RFF submission and approve amounts requested accordingly.
- Refer to your program's guidelines or Standard Agreement to determine when an RFF can be submitted and how much of your award can be drawn at once.

**Each program will have a unique RFF form based on eligible activities and disbursement guidelines.*



Budget Revision Request

Some programs allow for funds to be moved between activities after the Standard Agreement is executed. In these cases, the grantee must obtain Department Approval by submitting a Budget Revision Form to their Rep.

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
STATE GRANT MANAGEMENT
2020 West El Camino, 4th Floor
Sacramento, CA 95833
CESHNOFA@hcd.ca.gov



CALIFORNIA EMERGENCY SOLUTIONS AND HOUSING (CESH) PROGRAM BUDGET REVISION FORM

HCD Contract Number:		HCD Rep Name:	
CoC Name:		Preparer Name:	
Administrative Entity:		Preparer Title:	
AE Address:		Preparer E-mail:	
AE City, State & Zip		Phone Number:	

Budget Revision Breakdown

CESH Activity	Original Approved Budget	Current Approved Budget	New Budget Requested	HCD Approved Amount
Rental Assistance, Housing Relocation and Stabilization Services	\$0.00	\$0.00	\$0.00	
Operating Subsidies	\$0.00	\$0.00	\$0.00	
Flexible Housing Subsidy Funds	\$0.00	\$0.00	\$0.00	
Operating Support for Emergency Interventions	\$0.00	\$0.00	\$0.00	
Systems Support	\$0.00	\$0.00	\$0.00	
Develop or Update a CES	\$0.00	\$0.00	\$0.00	
Development of an Action Plan within CoC Service Area	\$0.00	\$0.00	\$0.00	
Administration	\$0.00	\$0.00	\$0.00	
TOTAL	\$0	\$0	\$0	\$0

CERTIFICATION

**I hereby agree that this Budget Revision Request constitutes allowable costs in accordance with terms of the approved Standard Agreement.*

Name of Authorized Representative	Title of Authorized Representative
Signature of Authorized Representative	Date

HCD USE ONLY

HCD SGM Representative Signature	Date
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Key Points:

- Budget Revision forms can be found on the applicable program website
- Not all programs allow for Budget Change requests, and those that do may limit the percentage of funds that can be moved.
- If applicable, Grantees should submit their Budget Revision forms *before* submitting their next RFF.
- Grantees will need to provide a justification for why funds are being moved.

**Review your program guidelines to see if Budget Changes are permissible. The Budget Change form will differ between programs.*



Required Reporting

Reporting on expenditures and project outcomes is a required component of all State Grant programs. Reports are due either annually, biannually or quarterly, depending on the program, for the duration established in the contract, and require the grantee to provide information on what was achieved during the reporting period.

The reports can be lengthy and may require supplemental documentation for verification. Give yourself plenty of time to complete this form by the specified deadline and work with your Rep if you have any questions.

Best Practice: Review the most current Annual Reporting form on the program's website as soon as you receive an award in order to keep track of requested information throughout the reporting period.

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
DIVISION OF STATE FINANCIAL ASSISTANCE
STATE GRANT MANAGEMENT
2020 West El Camino, 4th Floor
Sacramento, CA 95833
PLHASGM@HCD.CA.GOV



PERMANENT LOCAL HOUSING ALLOCATION (PLHA) PROGRAM

Annual Report Cover Page

Last Revised: 06/29/2021

HCD Contract Number:		Local Government:	
Preparer Name:	Enter your HCD Contract Number	Preparer Title:	
Preparer Email:		Preparer Phone Number:	
Reporting Period:	Select One	Allocation Type Pursuant to Guidelines Articles III and IV:	Select One
Was an application submitted on behalf of Local Government or Housing Trust Fund?	Select One		

Allocation Summary

Please enter award amounts that have been distributed to date. If an award year has not yet been distributed, please enter "0" in the corresponding column.

2019 Allocation:	2020 Allocation	2021 Allocation	2022 Allocation	2023 Allocation	Total Allocated
					\$0.00

Eligible Activity Summary

Activity	Award for this Activity? Select Yes or No	Award Amount	% Of Total
Activity 1: §301(a)(1) The predevelopment, development, acquisition, rehabilitation, and preservation of multifamily, residential live-work, rental housing that is Affordable to Extremely low-, Very low-, Low-, or Moderate income households, including necessary operating subsidies	Please Select One		0.00
Activity 2: §301(a)(2) The predevelopment, development, acquisition, rehabilitation, and preservation of Affordable rental and ownership housing including Accessory Dwelling Units (ADUs), that meets the needs of a growing workforce earning up to 120% of AMI, or 150% of AMI in high-cost areas. ADUs shall be available for occupancy for a term of no less than 30 days.	Please Select One		0.00
Activity 3: §301(a)(3) Matching Portion of Funds placed into Local or Regional Housing Trust Funds	Please Select One		0.00
Activity 4: §301(a)(4) Matching portions of funds available through the Low- and Moderate-Income Housing Asset Fund pursuant to subdivision (d) of HSC Section 34176	Please Select One		0.00
Activity 5: §301(a)(5) Capitalized Reserves for Services connected to the preservation and creation of new Permanent supportive housing.	Please Select One		0.00
Activity 6: §301(a)(6) Assisting persons who are experiencing or At risk of homelessness, including, but not limited to, providing rapid rehousing, rental assistance, supportive case management services that allow people to obtain and retain housing, operating and capital costs for navigation centers and emergency shelters, and the new construction, rehabilitation, and preservation of permanent and transitional housing.	Please Select One		0.00
Activity 7: §301(a)(7) Accessibility modifications in Lower-income Owner-occupied housing.	Please Select One		0.00
Activity 8: §301(a)(8) Efforts to acquire and rehabilitate foreclosed or vacant homes and apartments.	Please Select One		0.00
Activity 9: §301(a)(9) Homeownership opportunities, including, but not limited to, down payment assistance	Please Select One		0.00

**Each program will have a unique Report workbook based on reporting requirements in the program guidelines and NOFA.*



Program Websites and Contacts

- Most required forms, FAQs and other program information can be found at the corresponding program website.
- A program report or form may be updated periodically (no later than one month in advance for Expenditure Report forms). If you are unsure, confirm with your State Grant Management Representative that the form on the website is the most current version.
- If a document or question is not answered by the website, contact your Grant Management Representative or send a message to the SGM Contact Email in the upper-left corner of the page.

Reporting Requirements

[Annual Report \(XLS\)](#) - The County must submit a completed annual report each year by June 30. HCD will grant a 30 day grace period before the Annual Report is considered late.

Program Forms

- [THP Request for Funds Form \(XLS\)](#)
- [THP Representative by County \(PDF\)](#)

Contact

General Program Questions
THP@hcd.ca.gov

For all Reporting, Disbursement, and Program Questions following Standard Agreement Execution:
THPSGM@hcd.ca.gov

Program Details

- [Purpose](#)
- [Assistance Type](#)
- [Eligible Applicants](#)
- [Eligible Activities](#)
- [Get Funding](#)
- [Reporting Requirements](#)
- [Previous NOFAs](#)
- [Awards](#)

SGM Program Websites

SGM Program	Program Acronym	Web Link
CalHome	CalHome	https://hcd.ca.gov/grants-funding/active-no-funding/calhome.shtml
California Emergency Solutions and Housing	CESH	https://hcd.ca.gov/grants-funding/active-funding/cesh.shtml
Golden State Acquisition Fund	GSAF	www.goldenstate-fund.com
Homekey 1.0 and 2.0	Homekey	https://homekey.hcd.ca.gov/
Housing for a Healthy California	HHC Article II	https://hcd.ca.gov/grants-funding/active-funding/hhc.shtml
Housing Navigators Program	HNP	https://hcd.ca.gov/grants-funding/active-funding/hnp.shtml
Joe Serna, Jr. Farmworker Housing Grant Program	FWHG	https://hcd.ca.gov/grants-funding/active-funding/fwhg.shtml
Local Housing Trust Fund	LHTF	https://hcd.ca.gov/grants-funding/active-funding/lhtf.shtml
Pet Assistance and Support Program	PAS	https://hcd.ca.gov/grants-funding/active-funding/pas.shtml
Permanent Local Housing Allocation	PLHA	https://hcd.ca.gov/grants-funding/active-funding/plha.shtml
Transitional Housing Program	THP	https://hcd.ca.gov/grants-funding/active-funding/thp.shtml



Housing and Community Development

We look forward to
working with you!

