Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC's project applications that were either approved and ranked, or rejected.

As the Collaborative Applicant, you are responsible for reviewing the following:

1. The FY 2026 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2026 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2026 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

1A. Continuum of Care (CoC) Identification

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

1A-1. CoC Name and Number: AL-502 - Florence/Northwest Alabama CoC

1A-2. Collaborative Applicant Name: AL-502

1A-3. CoC Designation: CA

1A-4. HMIS Lead: AL-502

1B. Coordination and Engagement–Accountable Structure and Participation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

1B-1.	Accountable Structure and Participation.	

	In the chart below for the period from June 1, 2025 to May 31, 2026:
1.	select 'Yes' or 'No' in the chart below if the entity listed participated in CoC meetings or select 'Nonexistent' if the entity does not exist in your CoC's geographic area, and
2.	enter the number of persons on the board for each category where you answered 'Yes' in the Participated in CoC Meetings column.

You must click Save at the bottom of the form before entering the number of persons for each category where you answered 'Yes'.

	Entity	Participated in CoC Meetings	Number of Board Members
1.	Affordable Housing Developer(s)	Yes	0
2.	CDBG/HOME/ESG Entitlement Jurisdiction(s)	Yes	1
3.	Certified Community Behavioral Health Clinic (CCBHC)	Yes	0
4.	Community Mental Health Center (CMHC)	Yes	0
5.	Disability Advocate(s)	Yes	1
6.	Disability Service Organization(s)	Yes	0
7.	Emergency Medical Services (EMS)/Crisis Response Team(s)	Yes	0
8.	Employment Assistance Program(s) (e.g., Local Workforce Development, American Job Center)	Yes	2
9.	Faith-based Organzation(s)	Yes	1
10.	Homeless or Formerly Homeless Person(s)	Yes	1
11.	Hospital(s)	Yes	1
12.	Other Primary Healthcare Provider(s) (e.g., Federally Qualified Health Center, Healthcare for the Homeless)	Yes	1
13.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	
14.	Law Enforcement	Yes	2
15.	Local Court Systems, Including Specialty Courts (e.g., Mental Health Court, Drug Court, Care Court)	Yes	1
16.	Local Government Staff/Official(s)	Yes	1

17.	State Government Staff/Official(s)	Nonexistent	
18.	State or Local Elected Public Official(s)	Yes	3
19.	Local Jail(s)	Yes	0
20.	Mental Health Service Organization(s)	Yes	0
21.	Mental Illness Advocate(s)	Yes	2
22.	Organization(s) led by and serving people with disabilities	Yes	0
23.	Other homeless subpopulation advocate(s)	Yes	3
24.	Other nonprofit homeless assistance provider(s)	Yes	1
25.	Other social service provider(s)	Yes	2
26.	Public Housing Agencies	Yes	0
27.	Recovery Housing or Sober Living Provider(s)	Yes	0
28.	School Administrators/Homeless Liaison(s)	Yes	0
29.	School District(s)	Yes	0
30.	Street Outreach Team(s)	Yes	2
31.	Substance Abuse Advocate(s)	Yes	2
32.	Substance Abuse Service Organization(s)	Yes	0
33.	Universities	Yes	3
34.	Veteran Serving Organization(s)	Yes	1
35.	Agencies Serving Survivors of Human Trafficking	Yes	1
36.	Victim Service Provider(s)	Yes	1
37.	Domestic Violence Advocate(s)	Yes	1
38.	Other Victim Service Organization(s)	Yes	1
39.	State Domestic Violence Coalition	No	
40.	State Sexual Assault Coalition	No	
41.	Youth Advocate(s)	Yes	0
42.	Youth Homeless Organization(s)	Yes	0
43.	Youth Service Provider(s)	Yes	0
44.	Other Homeless Assistance Provider(s)	Yes	1
45.	Local Business or Chamber of Commerce or a Member of a Business Improvement District	Yes	2
	Other: (limit 50 characters)		
46.			
47.			

1B-2.	Open Invitation for New Members.	

Describe your CoC's transparent process (e.g., communicated to the public on the CoC's website) to invite new members to join the CoC at least annually.

(limit 2,500 characters)

The Homeless Care Council of NW Alabama communicates a transparent invitation process, soliciting new members year-round with an invitation to join the CoC always posted on our website. We also advertise membership through our Facebook page, as well as through email distribution to all members and potential members.
Additionally, our Executive Director attends a monthly meeting, Shoals CAN, and speaks at each of these monthly meetings, introducing the HCCNWAL and inviting people to join.
Also, when the HCCNWAL conducts membership meetings, which are open to the public, or does presentations for civic, faith, student, community, and business organizations, we emphasize the benefits of CoC membership and extend an open invitration to join our membership. Membership meeting invitees are encouraged to bring guests and to invite those that who an interest in serving our homeless population.

Additionally, membership is made available in our HMIS Lead Office, as well as our public library and other agencies. The CoC also maintains an acitve list of members and potenital members in an email database, that allows for excellent communication of our efforts, as well as organization of membership.

Lastly, and very importantly, the CoC looks for new members by continually seeking partnerships with City officials and community organizations within all 6 counties in our geographic area. We have proven successful in these partnerships, evidenced by having multiple law enforcement and locally elected public officials serving on our Board of Directors.
The CoC holds regular meetings with the Mayor and City Council and has been invited to speak at City Council meetings, as well as serving on other area boards. These important types of partnerships and networking opportunities increase public awareness, thereby soliciting new members on an ongoing basis.

These efforts occur annually, and even throughout the year.

1B-3.	CoC's Strategy to Solicit and Consider Opinions on Preventing and Ending Homelessness.	

Describe your CoC's transparent process (e.g., communicated to the public on the CoC's website) to solicit and consider opinions regarding the CoC's general performance, strategies, and priority setting process from a broad array of individuals and organizations that have knowledge of homelessness or an interest in preventing or ending homelessness in the CoC's geographic area.

(limit 2,500 characters)

-The HCCNWAL solicits and considers opinions regarding strategies, with the top priority being our partnerships with Direct Service providers and City Officials, including but not limited to: Community Action, The Dream Center, Help Center, Salvation Army, area Mayors and Councilmen and Councilwomen, as well as others. Through these partnerships, we are able to communicate and gather input regarding our general performance and set priorities.
-Additionally, we hold quarterly membership meetings that are open to the public, where we have an open forum for discussion and input of ideas and opinions. These meetings also offer educational speakers, such as direct service providers or resource officers, so that information can be communicated to the public, and the public can, in turn, offer feedback. Our goals at these meetings include increasing the discussion surrounding the topic of homelessness, while also educating the community.
-Also, our ED regularly attends and participates in other community events and meetings, where information can be shared, and feedback is gathered.
-Possibly most importantly, in the past year, our ED has developed the "Homeless Resource Alliance", which is a group of 15-18 representatives of direct service providers, some of which include: food pantries, emergency shelters, school social workers, agencies offering utility assistance and housing assistance, faith-based organizations, law enforcement, city officials, domestic violence organizations, jail social workers, and homeless outreach. The HRA holds monthly meetings, rotating our meeting place at each agency, so that we are being educated on what that particular agency does. The purpose of these meetings is not only to network and partner with each other, but also to strategize on ideas and resources for ending homelessness. We also discuss ideas on how to empower, not enable, our homeless population. These HRA monthly meetings have proven to be an invaluable means of gathering information to improve our knowledge on homelessness in our area, and we are very proud to have developed this Alliance.
-Through this variety of outlets, we are gathering information and opinions from a broad array of individuals and organizations, and information gathered in these many forums has allowed for: meetings with city officials, business owners, and other community stakeholders, where we can present and move forward with sustainable ideas.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	

Describe your CoC's transparent process to accept and consider proposals from organizations that have not previously received CoC Program funding including faith-based organizations.

(limit 2,500 characters)

On June 9, 2026, the 2026 NOFO was posted on the CoC website, as well as to social media. Along with this NOFO post was the timeline required by the HCCNWAL. The CoC stated in the timeline that it is accepting all project application proposals, including renewals as well as those who have not previously received funding. This notice contained a link to the entire NOFO, as well as a timeline and submission requirements for submission to the CoC. The timeline was a 5 page document, that included all steps of the process, dates for deadlines, as well as a link to the entire NOFO.

Additionally, an email was sent to the ENTIRE membership of the HCCNWAL, stating that the NOFO had been announced and was on our website, and encouraged organizations to apply.

The HCCNWAL, through our efforts in membership meetings, other community meetings, and our Homeless Resource Alliance meetings, verbally encourages new organizations to apply for CoC funding, verbally encourages faith based organizations to apply for funding, encourages partnerships and alliances, and stays engaged with these organizations. Even though we did not have any new organizations apply for funding, the HCCNWAL remains committed to partnerships with all organizations who are helping the homeless community, and strives to be the coordinator amongst these agencies.

For FY2026, the HCCNWAL did not receive any new proposals or applications. Community Action remains our partner agency that receives funding, and they have proven year after year to be effective in their efforts to help the homeless community. Community Action also serves as our HMIS Lead Agency.

1B-5	Plan for Comprehensive Strategies for Reducing Homelessness.

Describe how your CoC will incorporate comprehensive strategies for reducing homelessness, including interventions in 42 U.S.C. 11386b(d) and other targeted projects for specific subpopulations, by providing a plan to address a gap in the CoC's current homelessness system.

(limit 2,500 characters)

AL-502, led by the HCCNWAL, will address a key gap identified through HMIS/PIT data, Coordinated Entry experience, feedback from direct providers, and feedback gathered from stakeholders at meetings that includes: limited access to housing and intensive supportive services for people with significant barriers to obtaining and maintaining permanent housing, particularly those experiencing chronic or unsheltered homelessness, behavioral health or substance-use needs, disabilities, and limited income.

AL-502 will strengthen the local system by continuing to coordinate amongst all providers, including but not limited to emergency shelter, outreach, transitional housing, rapid rehousing (RRH), permanent supportive housing (PSH), and supportive services. Consistent with 42 U.S.C. §11386b(d), the CoC will prioritize PSH for people experiencing chronic homelessness and RRH/flexible assistance for families while supporting new transitional housing projects and services where local data demonstrate a need. Coordinated Entry, Housing Counselors and case managers will connect individuals and families—including youth, veterans, survivors of domestic violence, persons with disabilities, and other vulnerable populations—to appropriate interventions.

HCCNWAL's Homeless Resource Alliance (mentioned previously) will provide an ongoing stakeholder forum to identify gaps, strengthen referral partnerships, and coordinate resources with housing, shelter, behavioral health, recovery, employment, mainstream benefits, and other community partners. Performance will be measured through HMIS and other available data, including: increased exits to permanent housing; reduced length of homelessness; increased successful housing placements for chronically and unsheltered homeless persons; and increased connections to supportive services, benefits, employment, and treatment. Data will be reviewed quarterly.

Within 90 days, HCCNWAL will confirm priority gaps and establish baselines within the CoC and providers. Within six months, partners will strengthen referral protocols and identify funding opportunities. Within 12 months, the CoC will evaluate outcomes and adjust strategies and funding priorities. Funding will be used from HUD CoC and ESG funds, local government/county resources, CDBG where eligible for certain programs, and direct service providers will be encouraged to seek out their own funding for their specific programs with local, state, and government partners.

1B-5a	Confirmation of Plan Coverage.

Select 'Yes' or 'No' in the chart below to indicate whether your narrative in question 1B-5 addresses the following aspects of your plan to address a gap in the CoC's current homelessness system.	
1. Identifies the gap, using data or stakeholder feedback	Yes
2. The strategy to address the needs of all relevant subpopulations	Yes
3. Sets quantifiable performance measures	Yes
4. Identifies timelines for the completion of specific tasks	Yes

5. Identifies specific funding sources for planned activities	Yes
6. An individual or body responsible for overseeing implementation of specific strategies	Yes

1C. Coordination and Engagement

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

1C-1.	**Treatment and Recovery Services—On-site Substance Use Treatment Availability.**	
	You must upload the List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment attachment to the 4A. Attachments Screen.	
	What percent of your TH/RRH/PSH projects have substance use treatment available on site?	0%

If you are a rural CoC, describe what substance use treatment is available in your CoC and how people you serve access those services.

(limit 2,500 characters)

(Per the FY 2026 CoC Rural Area Report on the HUD page, HCCNWAL/AL 502 (Florence/Northwest Alabama CoC)is considered a Rural CoC.)

CoC AL-502 is a rural CoC serving Lauderdale, Colbert, Franklin, Lawrence, Marion, and Winston Counties. Substance use treatment is available through local detoxification, residential recovery, outpatient treatment, recovery housing, and supportive-service providers. Resources identified within the CoC include Genesis Detox at Shoals Hospital, Hills Recovery Center, Lotus House, Miracle House, Mission of Mercy/MOMS, and Life House, which provide varying levels of substance-use treatment, recovery support, and/or housing-related services for individuals and families.

People experiencing homelessness access these services through multiple ways. Coordinated Entry, case managers, and homeless service providers identify substance-use needs and make referrals based on the individual's circumstances and level of care needed. Emergency shelters, outreach providers, housing programs, law enforcement, hospitals, and other community partners also make referrals to appropriate treatment and recovery resources.

HCCNWAL works through the CoC and Homeless Resource Alliance to strengthen connections between homeless services, treatment and recovery providers, housing programs, behavioral health services, and other community resources. This collaborative approach helps ensure that substance-use treatment is incorporated into housing stabilization plans and that people experiencing homelessness can move from crisis services to treatment, recovery supports, and permanent housing.

The HCCNWAL has MOUs with the organizations mentioned, and can provide if necessary.

1C-1a. Treatment and Recovery Services—Outpatient Treatment for Mental Health and Substance Use Disorders.

Describe how your CoC partners with, or has projects that provide, outpatient treatment for mental health and substance use disorders with a range of appropriate levels of care, psychosocial interventions, medication management, suicide prevention, and recovery supports.

(limit 2,500 characters)

HCCNWAL/AL-502 partners with local behavioral health and substance use treatment providers to connect individuals and families experiencing homelessness with appropriate treatment and recovery services. The CoC does not directly provide clinical treatment; instead, we coordinate with community providers and incorporate behavioral health referrals and linkages into Coordinated Entry, outreach, shelter, housing, case management, and supportive services. We have a broad array of partners in the community.

Community partners provide a range of appropriate levels of care, including outpatient mental health and substance use counseling, individual and group therapy, psychiatric assessment and medication management, crisis intervention, case management, medication-assisted treatment, recovery supports, and referrals to detox, residential, intensive outpatient, and other higher levels of care. Local providers such as Riverbend Center for Mental Health and Bradford Health Services provide access to behavioral health, mental health and substance use treatment, including outpatient and intensive services, medication, counseling, psychiatric services, and continuing recovery support.

The CoC and its partners address suicide risk and behavioral health crises through screening, crisis response, referral to emergency services, and connection to ongoing treatment and recovery resources. Individuals are referred based on their assessed needs, with community providers helping facilitate transitions between levels of care when outpatient treatment is not sufficient.

Through collaboration among the CoC, shelters, outreach providers, behavioral health agencies, substance use treatment providers, healthcare partners, law enforcement, and other community organizations, the HCCNWAL helps ensure that people experiencing homelessness can access appropriate behavioral health and substance use services while receiving housing-focused assistance. This coordinated approach supports continuity of care, reduces barriers to treatment, and strengthens the connection between housing stability, recovery, and long-term self-sufficiency.

The HCCNWAL has MOUs with the organizations mentioned, and can provide if necessary.

1C-1b. Treatment and Recovery Services—Peer Support and Recovery Navigation.

Describe how your CoC partners with, or has projects that provide access to, peer recovery specialists or other forms of peer support and recovery navigation.

(limit 2,500 characters)

HCCNWAL/AL-502 partners with community behavioral health, substance use treatment, recovery, and supportive service organizations to connect individuals and families experiencing homelessness with peer recovery specialists and other forms of peer support and recovery navigation. The CoC does not directly employ peer recovery specialists; however, Coordinated Entry, outreach, shelter, and housing providers facilitate referrals and connections to community-based recovery resources based on each client's needs.

Community partners provide recovery-oriented support that may include peer recovery coaching, mentoring, recovery navigation, support groups, assistance with accessing treatment and recovery services, transportation and appointment support, connection to community resources, and ongoing encouragement from individuals with lived experience of mental health or substance use recovery. These services help individuals navigate systems of care and maintain engagement with treatment and recovery supports.

The CoC encourages collaboration between housing providers and behavioral health and recovery organizations so that participants can receive peer support alongside housing assistance and other supportive services. When individuals need a higher level of substance use or behavioral health care, community partners assist with referrals and transitions to appropriate treatment while maintaining connections to recovery supports.

Through our ongoing community partnerships and the Homeless Resource Alliance, HCCNWAL provides opportunities for service providers to share resources, strengthen referral pathways, and identify gaps in recovery support. This collaborative approach helps ensure that people experiencing homelessness have access to recovery navigation and peer support that complements housing services and promotes sustained stability, treatment engagement, and connection to the community.

The HCCNWAL has MOUs with the organizations mentioned, and can provide if necessary.

1C-1c. Treatment and Recovery Services—Connecting Individuals Experiencing Serious Mental Illness with the Services Necessary to Promote Stability.

Describe how your CoC identifies individuals experiencing Serious Mental Illness and connects them with the services necessary to promote stability, such as Assertive Community Treatment teams and other models that combine intensive care coordination and assertive outreach with comprehensive treatment.

(limit 2,500 characters)

HCCNWAL/AL-502 identifies individuals experiencing Serious Mental Illness (SMI) through Coordinated Entry, outreach, shelter and housing provider assessments, and referrals from behavioral health, healthcare, substance use treatment, law enforcement, and other community partners. When behavioral health needs are identified, the CoC providers work with clients to obtain appropriate assessments and connect them with services based on their individual needs.

Through partnerships with Riverbend Center for Mental Health and other community behavioral health providers, individuals can be connected to outpatient mental health services, psychiatric assessment and medication management, case management, crisis services, substance use and co-occurring disorder treatment, and referrals to more intensive levels of care when appropriate. Providers also assist individuals who need intensive care coordination, ongoing community-based support, or assertive outreach to access the appropriate behavioral health program or treatment team.

Housing providers and behavioral health partners coordinate services so that individuals with SMI can receive treatment and supportive services while working toward and maintaining housing stability. Case managers assist participants with appointments, benefits, transportation when allowed, medication management, treatment referrals, and connections to community resources. When a client experiences a behavioral health crisis or a change in needs, providers work together to reassess the client's needs and facilitate connection to crisis services or a more intensive level of care.

Through Coordinated Entry and ongoing collaboration among the CoC, behavioral health providers, shelters, outreach teams, housing providers, healthcare organizations, and other community partners, the HCCNWAL works to ensure that individuals with SMI are not only connected to housing but also to the ongoing services and supports needed to maintain housing, improve stability, and remain connected to their community.
We have an MOU with Riverbend and can provide.

1C-1d. Treatment and Recovery Services—Coordination with Providers in Connection with Drug or Other Specialty Courts.

Identify at least one partnership the CoC has with a provider or entity providing services in connection with Drug Courts and other specialty courts serving individuals with mental and substance use disorders, Assisted Outpatient Treatment (AOT) programs, and inpatient civil commitment.

(limit 500 characters)

HCCNWAL/AL-502 partners with Lauderdale County Social Services, which serves on the Homeless Resource Alliance (HRA) & provides connections to community services for individuals with behavioral health and substance use needs. The CoC also has a Mental Health Court Judge serving on its Board of Directors, strengthening coordination and communication with the specialty court system and helping connect individuals to appropriate housing and supportive services.
We have an MOU with LCSS.

Describe how your CoC coordinates with the provider or entity identified above to support housing stability and movement towards independence, including by leveraging court orders.

(limit 2,500 characters)

HCCNWAL/AL-502 coordinates with Lauderdale County Social Services and other community partners to help individuals involved with Mental Health Court and other specialty court systems access housing and supportive services that promote stability and movement toward independence. Lauderdale County Social Services participates in the Homeless Resource Alliance (HRA), providing an established connection between the CoC and community-based services.

The CoC also benefits from having a Mental Health Court Judge serving on the HCCNWAL Board of Directors. This connection strengthens communication and collaboration between the CoC and the specialty court system. It provides an opportunity to better understand barriers faced by individuals with mental health and substance use needs who are experiencing or at risk of homelessness.

When individuals are subject to court orders requiring treatment, case management, counseling, medication management, substance use services, or other supportive interventions, the CoC and community partners work within their respective roles to help participants connect with and remain engaged in those services. Housing providers and case managers can coordinate with appropriate service providers, with necessary releases of information, to support compliance with treatment requirements and address barriers that could jeopardize housing stability.

The CoC recognizes that stable housing can provide an important foundation for successful participation in court-ordered services. By connecting individuals to housing, benefits, behavioral health treatment, substance use services, transportation when allowed, case management, and other community resources, AL-502 helps participants address the factors contributing to homelessness while working toward independence. Collaboration with specialty court partners also helps identify changing needs and facilitate referrals to more intensive services when appropriate, reducing the likelihood that untreated behavioral health or substance use needs will contribute to housing instability or a return to homelessness.
The HCCNWAL has MOUs with the organizations mentioned, and can provide if necessary.

1C-1e. Treatment and Recovery Services—Partnership with Local Crisis System of Care.

Identify at least one partnership the CoC has with the local crisis system of care including 988 and crisis contact centers, mobile crisis and outreach services, and crisis stabilization services.

(limit 500 characters)

HCCNWAL/AL-502 partners with Riverbend Center for Mental Health, the local mental health center, to connect individuals experiencing homelessness with crisis intervention and community-based behavioral health services. Riverbend provides crisis services, Assertive Community Treatment (ACT), and Adult In-Home Intervention for crisis stabilization. CoC providers also connect individuals to 988 and appropriate emergency crisis services when needed. We have an MOU with Riverbend.

1C-1f.	Treatment and Recovery Services—Availability of Units for Persons Reporting Chronic Substance Use.	
	You must upload the List of CoC Program Projects and the Number of Units that require Substance Abuse Treatment attachment to the 4A. Attachments Screen.	

Identify the number of CoC Program-funded units that require program participant engagement in substance abuse treatment services as a condition of continued participation in the program in accordance with 24 CFR 578.75.	17

1C-1g.	Treatment and Recovery Services—24/7 Access to Detox, Residential, or Inpatient Treatment.	

Is there 24/7 access to detox, residential, and inpatient behavioral health treatment within the geographic area of your CoC?	Yes

1C-1h. Treatment and Recovery Services—Formal Partnership with Behavioral and Mental Health Facilities.

Identify at least one formal partnership the CoC has with a Certified Community Behavioral Health Clinic (CCBHC), Community Mental Health Center (CMHC), SAMHSA Projects for Assistance in Transition from Homelessness (PATH) provider, Grants for the Benefit of Homeless Individuals (GBHI) provider, or a similar facility if none of the above are located in the geographic area.

(limit 500 characters)

HCCNWAL/AL-502 has a formal partnership with Riverbend Center for Mental Health, the local Community Mental Health Center. Through this partnership, the CoC connects individuals and families experiencing homelessness with mental health, substance use, crisis intervention, case management, psychiatric, and community-based services. Riverbend and CoC partners coordinate referrals and supportive services to address behavioral health needs and promote housing stability.
We have an MOU with RCMH.

1C-1i. Treatment and Recovery Services—Sober Housing Availability.

Identify at least one new or existing CoC Program-funded project that operates sober housing in accordance with 24 CFR 578.93(b)(5).

(limit 500 characters)

AL-502 does not currently have a CoC Program-funded project that operates sober housing in accordance with 24 CFR 578.93(b)(5). However, the CoC has established relationships with many community-based sober living and recovery housing providers. One such provider, MOMS, receives ESG funding and provides recovery-focused housing. The CoC utilizes these community partnerships to connect individuals experiencing homelessness with appropriate recovery housing and supportive services when available.

1C-1j. Treatment and Recovery Services—Warm Hand-Offs to Stable Housing Providers.

Describe how your CoC coordinates with the programs named in questions 1C-1a through 1C-1i to facilitate warm hand-offs to stable housing providers and prevent entry into homelessness.

(limit 2,500 characters)

HCCNWAL/AL-502 coordinates with community partners identified throughout this application, including Riverbend Center for Mental Health, MOMS, Life House, Lotus House, and other behavioral health, substance use, recovery, sober living, healthcare, and supportive service providers. These partnerships support warm hand-offs to stable housing and services and help prevent individuals from entering homelessness.

Through Coordinated Entry, outreach, shelter and housing providers, and the Homeless Resource Alliance (HRA), partners communicate about available resources and make direct connections based on each individual's needs.

Rather than relying solely on individuals to navigate multiple systems independently, providers facilitate referrals, assist with appointments and required documentation, make direct introductions to receiving providers, and provide follow-up when appropriate. When an individual needs behavioral health, substance use, recovery, or supportive services as part of maintaining housing, CoC partners work to connect the individual with the appropriate provider and level of care.

The HRA provides an ongoing forum for community partners to identify service gaps, share resources, strengthen referral pathways, and develop intentional partnerships. This collaboration allows housing and service providers to better understand available resources and coordinate services for individuals moving from homelessness into housing or transitioning from treatment, recovery, or other programs into stable housing. The Homeless Resource Alliance has been an invaluable resource for the entire CoC, proving not only to educate us on resources, but create lasting partnerships, that in turn, helps reduce homelessness.

The CoC also works with community partners to identify individuals who may be at risk of homelessness and connect them to available prevention resources, benefits, treatment, recovery housing, emergency assistance, and other supports when available. By maintaining relationships across the behavioral health, recovery, housing, and social service systems, AL-502 helps reduce gaps during transitions and promotes continuity of care and housing stability.

The HCCNWAL has MOUs with the organizations mentioned, and can provide if necessary.

1C-2.	Supportive Services Investment.	

	Number
1. Enter your CoC's FY 2026 Annual Renewal Demand (ARD).	$470,217
2. Of projects your CoC proposed to be funded in the FY 2026 CoC Program Competition, enter the total amount of funding for the supportive services budget line items.	$128,687
3. Percent of your CoC's FY 2026 ARD (from element 1 above) that is supportive services funding (from element 2 above).	27%
4. Enter the amount of funding, leverage, match, and funding commitment from other formal partnerships in supportive services for the projects included in your CoC's FY 2026 ARD.	$140,000

5. Percent of your CoC's FY 2026 ARD (from element 1 above) that is the supportive services funding in proposed projects (from element 2 above) plus the amount of funding, leverage, match, and funding commitment from other formal partnerships in supportive services (from element 4 above).	57%

1C-3.	Participation Requirements for Supportive Services.
	You must upload the Language from Project Supportive Service Agreements attachment to the 4A. Attachments Screen.

What percent of your housing projects (TH, PH-PSH, PH-RRH, and Joint projects) require program participants to take part in supportive services (e.g. case management, employment training, substance use disorder treatment) in line with 24 CFR 578.75(h)?	70.00%

1C-4. Consulting with ESG Recipients.

Describe how your CoC has and will continue to consult with ESG recipients in the planning and allocation of ESG funds.

(limit 2,500 characters)

HCCNWAL/AL-502 does not serve as an ESG recipient and does not apply for or allocate ESG funds. The City of Florence is the local ESG recipient and awards ESG funds to Salvation Army, MOMS, Inc., Safeplace, and Community Action, all of which are active partners within the CoC.

The HCCNWAL maintains ongoing communication and close working relationships with the City of Florence and these ESG-funded agencies. Through CoC meetings, Coordinated Entry, the Homeless Resource Alliance (HRA), and regular communication among providers, the CoC shares information regarding community needs, gaps in services, housing resources, homelessness trends, and priorities identified through the local homeless response system. These partnerships provide opportunities for ESG-funded agencies and the City to provide input regarding community needs and service priorities.

Going forward, the HCCNWAL will continue consulting with the City of Florence and ESG-funded partners during local planning and needs-assessment activities, including sharing information gathered through Coordinated Entry, outreach, shelter providers, and other community partners. The CoC will continue to encourage alignment of ESG-funded activities with identified community needs, available resources, and the overall goals of the local homeless response system while respecting the City's authority and responsibilities as the ESG recipient.

The HCCNWAL has MOUs with each named ESG recipient.

1C-4a. Coordination with Emergency Shelter Providers.

Describe how your CoC coordinates with shelter providers to connect individuals and families with CoC assistance.

(limit 2,500 characters)

HCCNWAL/AL-502 maintains close partnerships with local emergency shelter providers, including Salvation Army, Shoals Shelter, Central Baptist Firepit Shelter, and domestic violence service providers. These shelters serve as important access points for individuals and families experiencing homelessness and help connect people to the broader CoC system of care.

Shelter providers coordinate with Coordinated Entry to identify individuals and families who may be eligible for CoC-funded housing and supportive services. Shelter staff help participants understand available resources, facilitate referrals and connections to Coordinated Entry and other community providers, and assist with obtaining documentation and completing necessary steps to access housing assistance. When appropriate, shelter providers also communicate with outreach, housing, behavioral health, substance use, and other service partners to support continuity of care.

The CoC works with shelters to identify individuals with longer-term housing needs and connect them with available Housing options as available. Providers communicate regarding participant needs and available resources, with appropriate releases of information, to help reduce delays and prevent individuals from becoming disconnected from services.

For individuals and families experiencing domestic violence, the CoC coordinates with DV providers, such as Safeplace and One Place of the Shoals, to prioritize safety and confidentiality while connecting survivors to appropriate housing and supportive services.

Through ongoing communication, Coordinated Entry, Homeless Resource Alliance collaboration, and relationships among shelter and housing providers, the HCCNWAL works to ensure that emergency shelter is not an endpoint but a pathway to permanent housing and long-term stability. This coordinated approach helps individuals and families move from emergency shelter to appropriate CoC assistance as quickly as possible.

The HCCNWAL has MOUs with the organizations mentioned, and can provide if necessary.

1C-5. Data Sharing to Inform the Homelessness Response System.

Describe how your CoC has or will share PIT, HIC, HMIS, and System Performance data with state and local government as permitted by law in order to inform the homelessness response system.

(limit 2,500 characters)

HCCNWAL/AL-502 shares PIT, HIC, HMIS, and System Performance data with CoC partners and state and local stakeholders, as permitted by law and applicable privacy and confidentiality requirements. PIT and HIC reports are emailed to the full CoC membership, which includes local municipalities, government agencies, law enforcement, nonprofit and service providers, and other community partners. The CoC also shares appropriate information through social media and community communications to increase awareness of local homelessness trends and needs.

The CoC uses this data to inform community planning, identify gaps in housing and services, evaluate system performance, support grant applications and funding decisions, and guide discussions about community priorities. Data is also shared through CoC meetings, the Homeless Resource Alliance, and direct communication with community partners when appropriate.

The HCCNWAL will continue providing accessible, aggregate information to local and state stakeholders while protecting personally identifiable and confidential participant information. The CoC will continue using PIT, HIC, HMIS, and System Performance data to strengthen coordination, measure progress, identify emerging needs, and support informed decisions about the local homelessness response system.

1C-5a. Using Other Data Sources Alongside HMIS to Improve Care.

Describe how your CoC utilizes other data sources alongside HMIS to improve care (e.g., health care utilization and claims data, electronic health care record data; admission, discharge, and transfer data; and law enforcement and corrections system data).

(limit 2,500 characters)

HCCNWAL/AL-502 primarily utilizes HMIS and provider case management records to coordinate services, understand participant needs, track housing outcomes, and improve care. While the HCCNWAL does not currently have routine access to healthcare claims, electronic health records, or formal admission, discharge, and transfer data systems, it maintains strong working relationships with local healthcare providers, law enforcement, and corrections partners.

With appropriate participant consent and applicable privacy requirements, providers communicate relevant information and make referrals to help individuals access healthcare, behavioral health, substance use treatment, crisis services, benefits, housing, and other supports. Partnerships with law enforcement and corrections also help identify individuals experiencing or at risk of homelessness and facilitate connections to Coordinated Entry, housing, reentry resources, and community services.

The CoC uses information gathered through case management, outreach, shelter providers, healthcare and community partners, and HMIS to identify barriers, coordinate services, and support continuity of care. AL-502 will continue strengthening relationships with healthcare, law enforcement, corrections, and other systems to improve information sharing, where legally permissible, and identify opportunities to incorporate additional data sources into the homelessness response system.

1C-6. Employment and Workforce Development Partnership.

Identify at least one partnership the CoC has with employment and workforce development programs and organizations such as the Local Workforce Development Board, State Workforce Agency, American Job Center (also known as One-Stop Career Centers), registered apprenticeship program, community and technical college, union training program, adult education provider, or State Vocational Rehabilitation agency.

(limit 2,500 characters)

HCCNWAL/AL-502 partners with Community Action, which provides employment and workforce development services through its FORWARD Program and collaborates with Northwest Shoals Community College to connect individuals with education, training, employment, and career development opportunities. Through this partnership, CoC providers can refer individuals experiencing homelessness to appropriate workforce and educational resources that support employment, increased income, and long-term housing stability. The CoC will continue strengthening these partnerships to connect participants with employment and training opportunities that support movement toward self-sufficiency.

1C-7. Street Outreach–Cooperation with First Responders and Law Enforcement.

Describe in the field below how your CoC's street outreach projects (including co-response) cooperate with first responders and law enforcement to increase positive interactions in order to increase housing and service engagement and promote use of CoC services.

(limit 2,500 characters)

HCCNWAL/AL-502 has strong and growing partnerships with local law enforcement to support positive interactions with individuals experiencing homelessness and increase engagement with housing and supportive services, and with street outreach projects. The Florence Police Department has a dedicated Homeless Liaison/Homeless Resource Officer who works specifically with situations involving individuals experiencing homelessness. This officer provides an important connection between law enforcement, street outreach, shelters, Coordinated Entry, and other CoC resources, helping individuals receive appropriate services rather than relying solely on law enforcement responses.

The HCCNWAL is also developing strong working relationships with the Russellville Police Department, Colbert County Sheriff's Department, and Lauderdale County Sheriff's Department. Representatives from these agencies, including the FPD as well, assisted with the 2026 Point-in-Time Count, strengthening communication and collaboration with the CoC and increasing awareness of available resources and the needs of individuals experiencing homelessness.

The CoC also has two law enforcement representatives serving on the HCCNWAL Board of Directors, providing ongoing input and a direct connection between law enforcement and the community's homelessness response system. Through these relationships, law enforcement can help identify individuals who may benefit from outreach, shelter, Coordinated Entry, behavioral health services, substance use treatment, and housing assistance and connect them with appropriate CoC resources.

The HCCNWAL will continue strengthening these partnerships to promote respectful, service-focused interactions, improve referrals and engagement, and help individuals experiencing homelessness connect with housing and supportive services.

The HCCNWAL has an MOU with the Florence Police Department.

1C-8. Family or Support Network Reunification.

Describe how your CoC, or your recipients, assist with family or support-network reunification efforts for individuals experiencing homelessness or living in CoC Program-funded housing (e.g., case management, travel costs, arrangement of assistance in another geographic area).

(limit 2,500 characters)

HCCNWAL/AL-502 supports family and support-network reunification through the "Homeward Bound" program, a program written by the HCCNWAL and funded through the City of Florence Community Development Block Grant (CDBG). Homeward Bound provides transportation assistance, including bus tickets, for individuals experiencing homelessness who have verified family or other supportive connections in another geographic area or have a verified employment opportunity.

Before assistance is provided, individuals must meet with a case manager who verifies the individual's information, destination, and receiving family/support network or employment opportunity. This process helps ensure that reunification or relocation is safe, appropriate, and based on an established connection or viable opportunity rather than simply providing transportation without a plan.

Case managers assist individuals with planning and coordinating the transition, including confirming where the individual will stay or work and helping connect them with resources at their destination when appropriate. Over the past two years, Homeward Bound has successfully helped reunite 13 individuals with family members in other communities.

Through Homeward Bound and partnerships with local service providers, HCCNWAL helps individuals identify viable alternatives to remaining homeless locally and supports successful transitions to family, support networks, or employment in another geographic area.

1C-9	**Partnering with Public Housing Agencies—Agreement to Enable Transition to HUD Assisted Housing.**		
	Does your CoC have an agreement with at least one public housing agency to enable participants to transition from Transitional Housing, Rapid Re-Housing, and Permanent Supportive Housing to HUD assisted housing?	Yes	

1C-10. Protecting Public Safety—Cooperation with Law Enforcement.

You must upload the Evidence of Coordination and Non-Interference with Local Efforts to Advance Protecting Public Safety attachment to the 4A. Attachments Screen.

Describe how your CoC cooperates and does not interfere with or impede local efforts to advance the objectives below, and assists first responders in providing services to homeless individuals.

(limit 2,500 characters)

HCCNWAL/AL-502 recognizes that an effective homelessness response system requires strong cooperation with local governments, law enforcement, first responders, and other public-safety partners. HCCNWAL works collaboratively with these partners to connect individuals experiencing homelessness with appropriate services while respecting the authority and responsibilities of local governments and public-safety agencies.

The Florence Police Department has a dedicated Homeless Liaison/Homeless Resource Officer who works specifically with situations involving individuals experiencing homelessness. This position provides an important connection between law enforcement, street outreach, shelters, Coordinated Entry, behavioral health providers, and other CoC resources. AL-502 also has growing partnerships with the Russellville Police Department, Lauderdale County Sheriff's Department, and Colbert County Sheriff's Department. Representatives from these agencies assisted with the 2026 Point-in-Time Count, strengthening communication and coordination with the CoC.

Two law enforcement representatives also serve on the HCCNWAL Board of Directors, providing ongoing public-safety perspective in CoC planning and coordination. Through these relationships, first responders can connect individuals experiencing homelessness with shelter, Coordinated Entry, housing assistance, behavioral health services, substance use treatment, crisis services, and other community resources when appropriate.

AL-502's CoC-funded and community-based programs cooperate with local public-safety efforts and do not interfere with or impede lawful activities of law enforcement or other first responders. The CoC respects the responsibilities and authority of local governments and public-safety agencies and maintains open communication regarding situations involving individuals experiencing homelessness.

The CoC also works to reduce the need for repeated emergency responses by helping individuals connect with appropriate services and housing. Through outreach, Coordinated Entry, shelter partnerships, behavioral health connections, and case management, AL-502 assists first responders in identifying appropriate resources and pathways to services. The CoC will continue strengthening these partnerships to promote public safety, positive interactions, service engagement, and housing stability for individuals and families experiencing homelessness.
An MOU with the Florence Police Dept is on file.

1C-10a. Protecting Public Safety—Plan to Quickly Clear Tents and Encampments.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to quickly clear tents and encampments on public property and connect individuals who are camping in public with appropriate services and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

HCCNWAL/AL-502 operates within a local legal framework that affects how public spaces and encampments are addressed. The City of Florence enforces an urban camping ordinance that prohibits camping, storing personal property, or sleeping in public parks, on public benches, sidewalks, rights-of-way, and under bridges. Florence Municipal Code §§16-13, 16-14, 16-15, and 18-6 also address the use of public property and public spaces.

These policies can assist municipalities and law enforcement in maintaining public safety and appropriate use of public property, but they can also create challenges when individuals experiencing homelessness are displaced without an immediate housing or service option. AL-502 does not have authority to enforce or modify these ordinances; however, the CoC works to mitigate the potential harmful effects of displacement by connecting individuals with appropriate services and alternatives.

The CoC maintains strong partnerships with the Florence Police Department, including its dedicated Homeless Liaison/Homeless Resource Officer, as well as other local law enforcement agencies, shelters, outreach providers, Coordinated Entry, behavioral health providers, and community organizations. When individuals are identified as camping in public spaces, these relationships provide opportunities for outreach, assessment, shelter referral, transportation, Coordinated Entry enrollment, and connection to housing and supportive services.

AL-502 will continue leveraging these partnerships by encouraging communication between municipalities, law enforcement, outreach teams, and service providers when public-space concerns arise. The CoC will work to ensure that individuals are offered available shelter, housing, treatment, and supportive-service options whenever possible rather than simply moving from one location to another.

Through continued collaboration, AL-502 will support local public-safety objectives while working to reduce returns to unsheltered homelessness and connect individuals to appropriate housing and services. The CoC will continue strengthening referral pathways and communication with municipalities and first responders so that public-space management and the needs of individuals experiencing homelessness can be addressed together.

1C-10b. Protecting Public Safety—Current Status of Tents and Encampments.

Describe the current status of tents and encampments in the CoC’s geographic area.

(limit 2,500 characters)

HCCNWAL/AL-502 does not currently have any known established or organized encampments within the CoC's geographic area. There are sporadic instances of individual tents or temporary outdoor sleeping arrangements in various locations, but these do not constitute formal or concentrated encampments. The CoC, outreach providers, shelters, and law enforcement continue to monitor and respond to these situations and connect individuals with available shelter, housing, and supportive services.

1C-10c. Protecting Public Safety—Plan to Decrease the Public Use of Illicit Drugs.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to decrease the public use of illicit drugs and quickly connect individuals who are using illicit drug in public with appropriate services and/or law enforcement and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

HCCNWAL/AL-502 operates within Alabama laws that prohibit public intoxication involving controlled substances and unlawful possession of controlled substances, including Alabama Code §§13A-11-10 and 13A-12-212, as well as laws addressing drug paraphernalia. These laws support public safety and provide a framework for law enforcement response, but enforcement alone may not address the underlying behavioral health or substance use needs of individuals experiencing homelessness.

HCCNWAL/AL-502 works with law enforcement, Riverbend Center for Mental Health, shelters, outreach providers, and Coordinated Entry to connect individuals who are publicly using substances with appropriate treatment, crisis services, shelter, housing, and recovery resources. The CoC will continue strengthening communication with first responders and service providers so that, when appropriate and legally permissible, individuals can be diverted toward treatment and supportive services rather than remaining disconnected from care. These partnerships allow AL-502 to support public-safety objectives while addressing the underlying factors contributing to substance use and homelessness.

Partners within the CoC helping with our strategy: Riverbend Center for Mental Health (Substance Abuse Services and Mental): Located in Florence, Riverbend is the main regional public provider, offering same-day assessments, case management, and Intensive Outpatient Programs (IOP) that accept Medicaid and state-funded care.
Mission of Mercy (MOMS) Inc.: Based in Florence, this program provides emergency shelter smoothly integrated with intensive substance use recovery support, cognitive behavioral therapy, and comprehensive assessments.
Bradford Health Services (Florence Outreach): Offers localized outpatient addiction treatment, detoxification coordination, and Medication-Assisted Treatment (MAT) pathways.
Genesis at Shoals Hospital: Located in Muscle Shoals, offers 24/7 detox units.

By utilizing the CoC's shared Homeless Management Information System (HMIS), in addition to partnering with the substance abuse places our area offers and local law enforcement, the CoC can work to encourage stable housing placements and reduced public substance dependency.

1C-10d. Protecting Public Safety—Current Status of Overdoses and Illicit Drug Use in Public Spaces.

Describe the current status of overdoses and illicit drug use in public spaces in the CoC's geographic area.

(limit 2,500 characters)

HCCNWAL/AL-502 does not maintain a separate system for tracking overdoses or illicit drug use in public spaces and relies primarily on information reported by community partners, law enforcement, healthcare providers, and service organizations. The Shoals area continues to experience substance use challenges, particularly among individuals experiencing unsheltered homelessness. While statewide provisional data reported by ADMH indicates a significant decline in overdose deaths, local partners continue to report concerns regarding the potency of synthetic narcotics and related public health risks. Exact local overdose and Narcan-use numbers are difficult to determine due to privacy requirements and the widespread availability of Narcan to the public, healthcare providers, and first responders.

1C-10e. Protecting Public Safety—Standards to Address Danger to Self or Others.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to utilize standards that address homeless individuals who are a danger to themselves or others (e.g., involuntary commitment) and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

HCCNWAL/AL-502 operates within Alabama's involuntary commitment laws, including Alabama Code §22-52-10.4. Under this statute, a Probate Judge may order involuntary inpatient commitment only when there is clear and convincing evidence that an individual has a diagnosed mental illness and poses a "real and present threat of substantial harm to self or others." This legal standard provides a framework for addressing serious safety concerns while protecting individual rights. The CoC does not determine or order involuntary commitment; those decisions are made by authorized individuals and entities under applicable law.

HCCNWA:/AL-502 maintains strong partnerships with Riverbend Center for Mental Health, law enforcement, shelters, healthcare providers, and other community partners to help identify individuals experiencing homelessness who may require crisis intervention or a higher level of behavioral health care. Through these relationships, individuals can be connected to crisis services, emergency evaluation, treatment, and appropriate housing and supportive services. A probate/mental health court judge serves on the HCCNWAL Board of Directors, allowing us to further strengthen our relationship with these resources.

Additionally, a representative from Lauderdale County Social Services serves on the Homeless Resource Alliance, also strengthening our partnerships with those who are helping homeless individuals in these situations.

The CoC will continue leveraging these partnerships to promote early identification, appropriate referrals, and communication between first responders and behavioral health providers. When involuntary intervention is necessary under applicable law, AL-502 will work within its role to support continuity of care and facilitate connection to housing, treatment, and community-based services following stabilization. This approach helps address immediate safety concerns while reducing the risk of individuals returning to homelessness after a behavioral health crisis.

1C-10f. Protecting Public Safety—Share Information in Accordance with SORNA.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to comprehensively share information, including location information, in accordance with the Sex Offender Registry and Notification Act (SORNA) and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

AL-502 does not maintain or have direct access to the Alabama Sex Offender Registry or other law-enforcement databases containing registry information. The CoC recognizes that law enforcement is responsible for maintaining and enforcing registration and notification requirements. Alabama Act 96-793 (Community Notification Act) establishes strict residency restrictions, including restrictions on registered individuals residing within 2,000 feet of schools or childcare facilities.

These requirements can create challenges when identifying appropriate housing for individuals experiencing homelessness who are subject to registration requirements. AL-502 works to mitigate these challenges through cooperation with local law enforcement. When registration status or location requirements are relevant to housing placement, CoC providers can coordinate with appropriate law enforcement partners to obtain information that may be legally shared and ensure housing options comply with applicable requirements.

AL-502 will continue strengthening communication with the Florence Police Department, local Sheriff's Departments, and other law enforcement partners. The CoC will encourage providers to consult with law enforcement when necessary rather than attempting to determine registration restrictions independently. This approach supports public safety and applicable registration requirements while helping individuals access appropriate housing and supportive services.

1C-11. Outreach Strategy.

Describe your CoC’s strategy to outreach to all individuals and families experiencing homelessness across your geographic area.

(limit 2,500 characters)

HCCNWAL/AL-502 uses a coordinated, community-based outreach strategy to identify and engage individuals and families experiencing homelessness throughout its six-county geographic area. Because homelessness may occur in shelters, vehicles, public spaces, motels, or other less visible locations, the CoC relies on multiple outreach and referral pathways rather than a single point of contact.

Outreach providers, shelters, law enforcement, healthcare providers, faith-based organizations, area food banks, schools, municipalities, and community partners help identify people experiencing homelessness and connect them with Coordinated Entry and available housing and supportive services. The Florence Police Department's dedicated Homeless Liaison/Homeless Resource Officer is an important connection to people encountered in the community. AL-502 is also strengthening relationships with the Russellville Police Department, Lauderdale County Sheriff's Department, and Colbert County Sheriff's Department. Law enforcement partners assisted with the 2026 Point-in-Time Count and provide an important bridge to individuals who may remain disconnected from services.

AL-502's shelter partners, including Salvation Army, Shoals Shelter, Central Baptist Firepit Shelter, and domestic violence providers, provide access points for individuals and families. Coordinated Entry operates Monday through Friday, while 2-1-1 provides another community access point. After-hours shelter and referral pathways help ensure people identified outside normal Coordinated Entry hours have a connection to services.

The CoC also uses Homeward Bound, supported by City of Florence CDBG funding, to help people with verified family or employment connections return to a stable destination. A case manager verifies the connection and destination before transportation assistance is provided. This program has facilitated 13 family reunifications over the past two years, helping individuals reconnect with their support networks rather than remain homeless locally.

AL-502 will continue strengthening outreach across the six-county area, including partnerships with faith communities, food banks, schools, healthcare providers, municipalities, law enforcement, and service organizations, to reach people who are unsheltered or difficult to locate and connect them to Coordinated Entry, shelter, housing, behavioral health, substance use treatment, employment, and other appropriate services.

1C-12.	**Collaboration Related to Children and Youth–Written Agreements with Early Childhood Services Providers.**	

Select 'Yes' or 'No' in the chart below to indicate whether your CoC or HUD-funded projects in the CoC have written agreements with the listed providers of educational supports and services for children ages 0-5:

		Written Agreement
1.	Child Care (including Child Care and Development Fund)	No
2.	Early Childhood Providers	No

3.	Early Head Start	No
4.	Home Visiting Program (including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No
5.	Head Start	Yes
6.	Healthy Start	No
7.	Public Pre-K	No
8.	Tribal Home Visiting Program	No
	Other (limit 150 characters)	
9.		

1C-12a.	Collaboration Related to Children and Youth–Formal Partnerships with Schools and Youth Education Providers.	

Select 'Yes' or 'No' in the chart below to indicate the youth education providers your CoC has a formal partnership with:

1.	McKinney-Vento Liaison(s) (including State Education Agency (SEA) or Local Education Agency (LEA))	Yes
2.	School District(s)	Yes
3.	General Education Development (GED) Program(s)	Yes
4.	Community College(s)	Yes
5.	Technical College(s)	Yes
6.	Other Post-Secondary Education Provider(s)	Yes

1C-12b.Collaboration Related to Children and Youth—Informing Individuals and Families who Become Homeless about Eligibility for Educational Services.

Describe your CoC's written policies and procedures to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,500 characters)

AL-502 incorporates information about educational resources into its Coordinated Entry, outreach, shelter, and case-management processes. When individuals or families become homeless, CoC providers assess household needs and inform participants of available educational services and resources, including assistance available through local school systems for children and youth experiencing homelessness.

HCCNWAL holds quarterly CoC membership meetings to which local school administrators and social workers are invited. These meetings provide opportunities for ongoing communication, networking, and development of referral and service partnerships. In addition, a Florence City Schools social worker serves as a member of the Homeless Resource Alliance, providing a direct connection between the school system and the community's homelessness response network.

CoC providers work with families to facilitate connections with appropriate schools and educational resources and help address barriers that may interfere with enrollment, attendance, or educational stability. AL-502 will continue strengthening these partnerships to ensure that individuals and families experiencing homelessness are informed of available educational services and connected to appropriate resources.

1C-12c. Collaboration Related to Children and Youth—Coordination with Foster Care or Child Welfare Services.

Describe how your CoC coordinates with foster care or child welfare services to assist youth transitioning from public systems of care.

(limit 2,500 characters)

HCCNWAL/AL-502 coordinates with community and public-service partners to assist youth transitioning from foster care, child welfare, and other systems of care. Through Coordinated Entry, outreach, case management, and community partnerships, and especially through our School Social workers that we partner with, youth who are experiencing or at risk of homelessness can be identified and connected to appropriate housing and supportive services.

CoC providers work with youth to identify their individual needs and make referrals for housing, benefits, education, employment, behavioral health, substance use treatment, transportation, and other resources that support a successful transition to independent living. When a youth is connected to child welfare or another public system, providers coordinate with the appropriate agency, with required consent and information-sharing protections, to support continuity of services and avoid gaps during the transition.

AL-502 also maintains relationships with local schools, social-service agencies, law enforcement, and community organizations that can help identify youth who may be at risk of homelessness after leaving public systems of care. Through these partnerships and the CoC's Coordinated Entry process, the CoC works to connect transitioning youth to available housing and supportive services as early as possible.

1C-12d. Collaboration Related to Children and Youth—Coordination with Runaway and Homeless Youth (RHY)-funded Providers.

Describe how your CoC coordinates with RHY-funded providers including Street Outreach Programs, Basic Center Programs, Transitional Living Programs, and Maternity Group Homes where such providers exist.

(limit 2,500 characters)

HCCNWAL/AL-502 does not currently have a known RHY-funded Street Outreach Program, Basic Center Program, Transitional Living Program, or Maternity Group Home operating within the CoC's geographic area. HOWEVER, Attention Homes of Northwest Alabama is an active community partner within the CoC and provides residential and supportive services to at-risk youth in the area. Attention Homes serves youth primarily in Colbert, Lauderdale, and Franklin Counties and works with juvenile court and other community partners.

Although Attention Homes is not CoC-funded or identified as an RHY-funded provider, its participation in the local homelessness response network provides an important connection to youth-serving resources. AL-502 works through Coordinated Entry, community partnerships, and referrals to connect youth experiencing or at risk of homelessness with appropriate housing, shelter, behavioral health, education, and supportive services.

If an RHY-funded provider begins operating within the AL-502 geographic area, HCCNWAL will work to establish a formal referral and coordination relationship and incorporate that provider into the CoC's existing network. AL-502 will continue strengthening partnerships with youth-serving organizations such as Attention Homes to help identify and respond to youth housing needs.

1C-13. Collaboration Related to Families with Children—TH or RRH Project Dedicated to Serving Families with Children.

Identify at least one Rapid Rehousing (RRH) or Transitional Housing (TH) project in the CoC that primarily or exclusively serves families with children experiencing homelessness in accordance with 24 CFR 578.93(b).

(limit 500 characters)

AL-502 has a Rapid Re-Housing (RRH) project that primarily serves families with children experiencing homelessness. The project provides 11 family RRH units with capacity for 35 family members, connecting households to rental assistance, housing navigation, and supportive services to help them quickly obtain and maintain permanent housing.

1C-13a. Collaboration Related to Families with Children—Supportive Services to Improve Income to Pay Rent.

Describe how the project(s) identified in 1C-13 provides supportive services focused on improving incomes to pay rent, such as workforce development, job training, or registered apprenticeship programs.

(limit 2,500 characters)

he project connects families to employment and income-building resources through community partnerships, including Community Action's FORWARD workforce program and Northwest Shoals Community College. FORWARD provides workforce-readiness training and certifications, while NWSCC offers workforce training, career technical programs, and apprenticeship/work-based learning opportunities. Case managers help participants identify appropriate programs, make referrals, and address barriers to employment so increased income can support long-term housing stability.

1C-13b. Collaboration Related to Families with Children—Leveraging Funding from Mainstream Family Service Systems.

Describe how the project(s) identified in 1C-13 leverages funding from mainstream family service systems, such as Temporary Assistance for Needy Families (TANF).

(limit 2,500 characters)

The project leverages mainstream family-service resources by connecting eligible families to Alabama Department of Human Resources (DHR) Family Assistance and JOBS services. TANF-funded programs provide temporary assistance and employment-related supports, including job readiness, skills training, employment assistance, and services to address barriers such as transportation and child care. Project case managers help families identify eligibility, make referrals, and coordinate with DHR and other community providers. The project also connects families to Community Action Agency of Northwest Alabama, which provides workforce and self-sufficiency resources, including the FORWARD workforce program. These partnerships help families access mainstream benefits and employment supports that increase household income and strengthen the ability to sustain rent after RRH assistance ends.

1C-13c. Collaboration Related to Families with Children—Combining Housing Assistance with Parental Support.

Describe how the project(s) identified in 1C-13 combines housing assistance with childcare, parenting support, pregnancy-related and child healthcare, and education.

(limit 2,500 characters)

The project combines housing assistance with connections to mainstream family and community services to address the needs of households with children. Case managers assess each family's needs and coordinate referrals to appropriate childcare, parenting, healthcare, pregnancy-related, and educational resources.

The project also connects families to the programs provided at Community Action, including the FORWARD workforce program.

Families are connected to local childcare and child-development resources, parenting support, and pregnancy-related services through community partners and referral networks. When children have healthcare needs, families are connected to appropriate medical, behavioral health, and pediatric resources. Case managers also help families connect with local schools and educational supports and work with parents to address barriers that may affect children's school enrollment, attendance, and educational stability.

The project coordinates with community partners, including schools, social-service organizations, healthcare and behavioral health providers, and other family-serving agencies. These partnerships allow housing assistance to be paired with services that support family stability, child well-being, employment, and long-term housing retention. Through Coordinated Entry, case management, and ongoing referrals, the project helps families access the combination of housing and supportive resources needed to successfully transition to and maintain permanent housing.

1C-14. Collaboration with Veteran Serving Organizations—Partnership with the U.S. Department of Veterans Affairs or Veteran Serving Organization.

Identify at least one partnership the CoC has with the Department of Veterans Affairs or other Veteran Serving Organizations.

(limit 500 characters)

The CoC maintains active partnerships with Priority Veteran, CU360 and the Birmingham VA Healthcare System to connect Veterans experiencing or at risk of homelessness with housing, healthcare, benefits, and supportive services. These partnerships strengthen coordinated referrals, improve access to VA resources, and support timely connections to appropriate housing and community-based services.

1C-14a	Collaboration with Veteran Serving Organizations.	
	Select 'Yes' or 'No' in the chart below to indicate whether the partnership(s) identified in 1C-14 does the following:	

1.	Refers veterans identified by the CoC to VA or other Veteran Serving Organizations for assistance?	Yes
2.	Coordinates the provision of emergency shelter, supportive services, and housing for veterans?	Yes
3.	Ensures access to a full spectrum of employment and career pathway opportunities?	No
4.	Shares data with the Department of Veterans Affairs as appropriate?	Yes
5.	Identifies service gaps for veterans?	Yes

6.	**Fills service gaps for veterans?**	Yes

1C-15. Collaboration with Organizations who Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.

Identify at least one partnership your CoC has with victim service providers, state domestic violence coalitions, state sexual assault coalitions, anti-trafficking service providers or other organizations who help provide shelter, housing, and services to individuals and families of persons experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking.

(limit 500 characters)

The CoC maintains active partnerships with One Place of the Shoals and Safeplace, both providing shelter, housing, advocacy, and supportive services to individuals and families fleeing domestic violence and other safety-related trauma. A One Place representative serves on the Homeless Resource Alliance, while a Safeplace representative serves on the HCCNWAL Board of Directors, strengthening collaboration and coordinated access to services.

1C-16. Collaboration with Justice System Re-entry Partners.

Identify at least one partnership your CoC has to prevent homelessness among people transitioning from prisons, jails, or court-ordered programs.

(limit 500 characters)

The CoC partners with Lauderdale County Social Services and local judicial leadership to support individuals transitioning from incarceration or court-ordered programs. A representative from Lauderdale County Social Services serves on the Homeless Resource Alliance, while a Lauderdale County Judge serves on the CoC Board of Directors. These partnerships strengthen communication, referrals, and connections to housing and supportive services to help prevent homelessness.

1C-17. Collaboration with Partners to Address High Utilizers of Healthcare Systems.

Identify at least one partnership or project your CoC has to provide specialized supportive services for homeless individuals with a high level of medical needs.

(limit 500 characters)

The CoC partners with Shoals Community Clinic to connect individuals experiencing homelessness with healthcare and specialized medical services. The CoC also benefits from the expertise of a medical doctor serving on the Board of Directors. These partnerships strengthen coordination between housing and healthcare providers and help individuals with significant medical needs access appropriate care and supportive services.

1C-18. Collaboration with Partners to Address the Needs of Aging and Elderly Individuals Experiencing Homelessness.

Identify at least one partnership or project your CoC has to serve aging and elderly individuals experiencing homelessness, such as with a provider of residential care, assisted living, or medical respite services.

(limit 500 characters)

While the CoC does not currently have a dedicated residential care, assisted living, or medical respite partner, it benefits from the expertise of a medical doctor serving on the Board of Directors. This clinical perspective helps inform CoC planning and coordination of appropriate housing, healthcare, and supportive service referrals for aging and elderly individuals experiencing homelessness.

1C-19. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Project that Prioritizes Individuals Experiencing Chronic Homelessness.

Identify at least one Rapid Rehousing (RRH) or Permanent Supportive Housing (PSH) project that prioritizes individuals experiencing chronic homelessness.

(limit 500 characters)

The CoC prioritizes individuals experiencing chronic homelessness through its Rapid Rehousing (RRH) and Permanent Supportive Housing (PSH) resources, the Chance Project, utilizing Coordinated Entry to identify and prioritize households with the highest housing needs. Through strong partnerships with local housing and service providers, the CoC works to connect individuals experiencing chronic homelessness with appropriate housing, supportive services, and long-term stability.

1C-19a. Permanent Supportive Housing for Chronically Homeless Individuals and Families—On-site Behavioral Healthcare.

Describe how the project(s) identified in 1C-19 provides on-site behavioral healthcare.

(limit 2,500 characters)

The project(s) identified in 1C-19 do not provide on-site behavioral healthcare; however, participants are connected to behavioral health, substance use treatment, and other supportive services through established community partnerships and coordinated referrals. The CoC uses its network of service providers to ensure that individuals experiencing homelessness can access appropriate care based on their individual needs.

Through Coordinated Entry and ongoing case management, participants are assessed for behavioral health and substance use needs and connected to available community resources. The CoC works closely with local behavioral health and substance use providers, including Hills Recovery Center, Genesis Detox at Shoals Hospital, and other community-based resources identified through the CoC's resource network. These partnerships provide access to services such as substance use treatment, detoxification, recovery support, mental health services, and ongoing community-based care.

The CoC also benefits from partnerships with law enforcement, healthcare providers, faith-based organizations, food banks, and other community partners that help identify individuals in need and facilitate connections to services. Shoals Community Clinic is an active CoC partner, and a medical doctor serves on the CoC Board of Directors, strengthening coordination between housing and healthcare resources.

Participants are not required to receive services on-site in order to access housing assistance. Instead, the project uses a coordinated, community-based approach that connects participants to the most appropriate provider while allowing them to receive services in settings best suited to their needs. This approach supports continuity of care and helps participants address behavioral health or substance use needs while working toward housing stability and long-term independence.

1C-19b. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Assesses Need for Higher Level of Care.

Describe how the project(s) identified in 1C-19 has a policy for assessing program participant need for higher level of care (i.e., assisted living, residential treatment).

(limit 2,500 characters)

The project(s) identified in 1C-19 assess each participant's needs through intake, Coordinated Entry, case management, and ongoing communication with community service providers. When a participant's medical, behavioral health, substance use, or daily living needs indicate that a higher level of care may be appropriate, staff work with the participant and appropriate professionals to identify available options and make referrals.

The CoC utilizes its established network of healthcare, behavioral health, substance use, and supportive service providers to facilitate appropriate referrals, including residential treatment and other higher levels of care. Partnerships with providers such as Shoals Community Clinic, Genesis Detox at Shoals Hospital, Hills Recovery Center, and other community resources support access to specialized services.

When appropriate, staff coordinate with the participant, family or natural supports, healthcare providers, and other service professionals to develop a transition plan and help ensure continuity of care. The goal is to match each participant with the least restrictive and most appropriate level of care while maintaining housing stability whenever possible.

1C-19c. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Assesses Readiness for Moving On.

Describe how the project(s) identified in 1C-19 has a policy for assessing program participant readiness for moving on to unsubsidized or other permanent housing.

(limit 2,500 characters)

The project(s) identified in 1C-19 assess participant readiness for moving to unsubsidized or other permanent housing through intake, Coordinated Entry, case management, and ongoing participant-centered assessments. Housing counselors and the field case manager work directly with participants to evaluate housing stability, income and benefits, employment or other resources, ability to maintain housing, connection to community supports, and remaining barriers to independent living.

As participants demonstrate increased stability, housing counselors and the field case manager work with them to develop an individualized transition plan and identify appropriate permanent housing options. This may include assistance with housing searches, applications, budgeting, employment, benefits, transportation, healthcare, behavioral health, and other community resources that support successful housing transitions.

The field case manager provides ongoing support and coordination in the community, helping participants address barriers and prepare for greater housing independence. The CoC's network of housing and community partners further supports referrals and continuity of services. Transition planning is collaborative and based on each participant's needs, progress, and ability to maintain stable housing with reduced or no subsidy.

1D. Project Capacity, Review, and Ranking–Local Competition

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- Frequently Asked Questions

1D-1.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question along with the required attachment as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	

You must upload the Local Competition Scoring Tool attachment to the 4A. Attachments Screen.
Select 'Yes' or 'No' in the chart below to indicate how your CoC reviewed, rated, and ranked project applications during your local competition:

1.	Established total points available for each project application type.	Yes
2.	At least 50 percent of the total available points were based on objective criteria to review, rate, and rank project applications.	Yes
3.	At least 25 percent of the total available points were based on system performance measures to review, select and rate project applications.	Yes
4.	Considered returns to homelessness in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes
5.	Considered employment income in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes
6.	Considered supportive service participation requirements in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes

1D-2.	New Proposals.	
	Does your CoC invite new proposals from entities that have not previously received funding, if such eligible entities exist?	Yes

1D-2a.	Web Posting of CoC-Approved Consolidated Application Before the CoC Program Competition Application Submission Deadline.	

	Enter the date your CoC posted all parts of the CoC-approved Consolidated Application on the CoC's website or partner's website–which included: 1. the CoC Application, and 2. Project Priority Listings.	09/28/2026

1D-2b.	Notification to Community Members and Key Stakeholders by Email that the CoC-Approved Consolidated Application is Posted on the Website.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	09/28/2026

1D-2c.	Local Competition Selection Results for All Projects.	
	You must upload the Local Competition Selection Results attachment to the 4A. Attachments Screen.	

	Does your attachment include: 1. Project Names, 2. Project Scores, 3. Project Rank, 4. Project Status–Accepted, Rejected, Reduced Reallocated, Fully Reallocated, 5. Amount Requested from HUD, and 6. Reallocated Funds +/-.	Yes

1D-2d.	Projects Rejected/Reduced–Notification Outside of e-snaps.	

1.	Did your CoC reject or reduce any project application(s) submitted for funding during its local competition?	No

1D-2e.	Projects Accepted–Notification Outside of e-snaps.	

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps.	07/22/2026

1D-3.	Reallocation–Reviewing Performance of Existing Projects.	

	Describe:
1.	your CoC's reallocation process to reallocate from lower performing projects to create new high performing projects, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed,
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year,
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

1. AL-502 has a local competition and reallocation process designed to ensure CoC resources are directed toward projects that demonstrate effective performance and address identified community needs. Projects are reviewed using objective criteria including project performance and outcomes, grant management, utilization of funds, eligibility, alignment with community priorities, project type, and the extent to which the project addresses the needs of individuals experiencing homelessness. The CoC may consider reallocation when a project demonstrates sustained low performance, underutilization of funds, significant grant-management concerns, or is determined to be less needed based on current community needs.

2. During the FY2026 local competition, AL-502 reviewed projects using its adopted local competition criteria and considered project performance, community need, project effectiveness, and funding utilization. The CoC did not identify any existing CoC-funded project that met the threshold for reallocation based on sustained low performance or being less needed. We have a high performing project that does very well in supporting our homeless population, and we hope to improve our score so that this project can be awareded more money.

3. AL-502 did not reallocate funding from an existing CoC Program project during the FY2026 local competition.

4. Because the CoC did not identify an existing project that met the criteria for reallocation, funding was retained for existing projects that continue to address identified housing and service needs within the CoC. The CoC determined that retaining current project funding was appropriate based on the information available through the local review process. AL-502 will continue to monitor project performance and community needs and will consider reallocation in future competitions when supported by objective performance information, demonstrated community need, and the CoC's approved policies and procedures. Additionally, we are a relatively small CoC, and rely heavily on our high performing project.

1D-3a.	**Reallocation Between FY 2021 and FY 2026.**	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2021 and FY 2026?	No

2A. Homeless Management Information System (HMIS) and System Performance

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

2A-1.	HMIS Vendor.	
	Not Scored–For Information Only	

	Enter the name of the HMIS Vendor your CoC is currently using.(limit 75 characters)	Well Sky

2A-2.	HMIS Implementation Coverage Area.	
	Not Scored–For Information Only	

	Select from dropdown menu your CoC's HMIS coverage area.	Statewide

2A-3.	PIT Count–Methodology Change.	

	Describe:
1.	any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2025 and 2026, if applicable, and
2.	how the changes affected your CoC's PIT count results.

(limit 2,500 characters)

1. HCCNWAL/AL-502 made no substantive changes to its PIT count methodology or data-quality procedures between 2025 and 2026. The primary enhancement to the 2026 unsheltered PIT count was the increased involvement of law enforcement partners from multiple counties across the CoC's six-county geographic area. The Florence Police Department, Russellville Police Department, Lauderdale County Sheriff's Department, and Colbert County Sheriff's Department participated by assisting with outreach, identifying locations where individuals experiencing homelessness might be found, and volunteering their time during the count.

This expanded partnership strengthened the CoC's ability to reach individuals who may otherwise be difficult to identify, particularly those who are unsheltered or disconnected from traditional service systems. It also strengthened communication and trust between the homelessness response system and law enforcement and demonstrated the value of having first responders who regularly encounter individuals experiencing homelessness actively participate in the PIT process.

Other than this expanded law-enforcement collaboration, AL-502 did not make changes to its PIT methodology, counting procedures, or data-quality practices between 2025 and 2026. The CoC will continue to build on this successful partnership and seek opportunities to improve geographic coverage, outreach, and the quality and completeness of PIT data in future counts.

2. The expanded participation of law enforcement increased geographic coverage and strengthened the CoC’s ability to identify unsheltered individuals. Their involvement improved community outreach and confidence in the completeness of the 2026 PIT count, while no methodology changes affected year-to-year comparability.

2A-4. Reduce Encampments—Actions to Reduce Encampments.

Describe in the field below the actions your CoC took to reduce the number of encampments or the number of people residing in encampments during your evaluation period.

(limit 2,500 characters)

HCCNWAL/AL-502 has no established or organized homeless encampments within its geographic area. The CoC does encounter sporadic individual tents or small groups of tents, primarily in wooded or secluded areas, where individuals experiencing unsheltered homelessness may stay. During the evaluation period, the CoC focused on engaging these individuals through outreach, law enforcement partnerships, shelters, Coordinated Entry, and community service providers rather than allowing isolated locations to develop into larger, established encampments.

The Florence Police Department's Homeless Liaison/Homeless Resource Officer, along with growing partnerships with the Russellville Police Department, Lauderdale County Sheriff's Department, and Colbert County Sheriff's Department, has strengthened the CoC's ability to identify individuals staying in public or secluded areas and connect them with appropriate services. Shelter providers, outreach partners, healthcare providers, faith-based organizations, and other community partners also provide referral pathways to shelter, housing, behavioral health, substance use treatment, and other supportive services.

The CoC's approach emphasizes engagement and connection to appropriate services and housing while supporting local public-safety efforts. The CoC will continue monitoring sporadic tent locations through community and law-enforcement partners and will prioritize timely outreach and connection to Coordinated Entry and available housing resources to prevent the development of larger or more persistent encampments.

2A-4a.	Reduce Encampments—Number of Encampments.	

1. Enter the estimated number of encampments in the beginning of your evaluation period.	0
2. Enter the reduction in the number of encampments during your evaluation period.	0

2A-4b.	Reduce Encampments—Number of People in Encampments.	

1. Enter the estimated number of people in encampments in the beginning of your evaluation period.	0
2. Enter the reduction in the number of people in encampments during your evaluation period.	0

2A-4c.	Reduce Encampments—Plans to Reduce Encampments.

If there has been no reduction in encampments or persons in encampments in your CoC, describe the plans your CoC has to participate in efforts to reduce these numbers.

(limit 2,500 characters)

As stated above, HCCNWAL/AL-502 does not currently have established encampments, and therefore, there has been no reduction in the number of encampments or persons residing in encampments. The CoC will continue to monitor for any emerging unsheltered or encampment situations through Coordinated Entry, HMIS, PIT/HIC activities, and ongoing communication with shelters, outreach providers, municipalities, and law enforcement. If an encampment develops, the CoC will coordinate with local partners to engage individuals, connect them to shelter and housing opportunities, and provide referrals to healthcare, behavioral health, substance use treatment, and other supportive services.

2A-5. Reducing the Number of First Time Homeless–CoC's Plan.

Describe your CoC's plan to decrease the number of individuals and families becoming homeless for the first time.

(limit 2,500 characters)

HCCNWAL/ AL-502 Continuum of Care's plan to decrease the number of individuals and families experiencing homelessness for the first time is centered on early identification, prevention, strong community partnerships, and continued coordination among agencies serving individuals and families at risk of homelessness.

A key component of this effort is the Homeless Resource Alliance (HRA), which brings together community partners, municipalities, law enforcement, schools, social service organizations, housing providers, and other stakeholders to strengthen communication, identify gaps, share resources, and develop collaborative strategies. The CoC also maintains strong partnerships with law enforcement and municipalities, allowing for earlier identification of individuals and families who may be at risk of becoming homeless and creating opportunities to connect them with appropriate resources before a housing crisis occurs.

The CoC works closely with Community Action, Shoals Shelter, Salvation Army, and other community partners to connect households with emergency assistance, housing resources, case management, food, transportation, employment resources, and other supports that can help stabilize households and prevent homelessness. Ongoing conversations among partners allow the community to continually assess emerging needs, identify barriers, and develop practical responses.

The CoC also uses information gathered through the annual Point-in-Time Count, HMIS, provider experience, and community discussions to better understand local trends and identify populations and areas where additional prevention efforts may be needed. Quarterly CoC membership meetings provide another opportunity for agencies and community stakeholders to share information, discuss challenges, coordinate resources, and strategize collectively.

Through these ongoing partnerships and data-informed conversations, AL-502 will continue strengthening its ability to identify housing instability earlier, connect households to appropriate resources, and coordinate community responses that reduce the likelihood that individuals and families experience homelessness for the first time.

2A-6. Reducing Length of Time Homeless–CoC's Plan.

Describe your CoC's plan to reduce the length of time individuals and families remain homeless.

(limit 2,500 characters)

HCCNWAL/ AL-502 Continuum of Care's plan to reduce the length of time individuals and families remain homeless focuses on coordinated entry, timely referrals, strong community partnerships, and continued communication among providers to quickly identify and address barriers to housing.

The CoC works closely with Community Action, Shoals Shelter, Salvation Army, and other housing and service providers to connect individuals and families to appropriate shelter, housing opportunities, case management, benefits, employment resources, transportation, behavioral health services, and other supports needed to move toward permanent housing. Strong partnerships with law enforcement and municipalities also help identify individuals experiencing homelessness and connect them with appropriate resources more quickly.

The Homeless Resource Alliance (HRA) strengthens this coordinated response by bringing community partners together to share information, identify available resources, address service gaps, and develop strategies for individuals and families who may be experiencing prolonged homelessness. Continued communication and collaboration among partners helps reduce duplication, improve referrals, and identify solutions when individuals encounter barriers to housing.

The CoC also uses HMIS, the annual Point-in-Time Count, provider feedback, and quarterly CoC membership meetings to monitor local needs and identify opportunities to improve the community's response. Partners use these ongoing conversations to evaluate what is working, identify barriers that contribute to longer episodes of homelessness, and coordinate resources to help people move more quickly toward stable housing.

Through these coordinated efforts, AL-502 will continue strengthening relationships among housing providers, service organizations, law enforcement, municipalities, and other community partners to ensure that individuals and families are connected to the appropriate resources as quickly as possible and have a clear pathway from homelessness to permanent housing.

2A-7.	**Successful Permanent Housing Placement–Exits to Unsubsidized Housing.**	

Based on HMIS data, what percent of program participants exited from TH/RRH/PSH collectively to unsubsidized housing?	58.00%

Describe how you calculated the data for this response.

(limit 2,500 characters)

The CoC calculated this percentage using HMIS data for participants in TH/RRH/PSH projects. The HMIS data identified a total of 43 participants represented in the reporting period: 25 participants had completed their project and exited to unsubsidized housing, while 18 participants remained enrolled in their project and were still housed at the time of the report.

Of the 25 participants who completed their project, 7 were adults without children and 18 were adults with children. The 18 participants who remained housed and enrolled consisted of 6 adults without children and 12 adults with children.

The percentage was calculated by dividing the 25 participants who completed the project and exited to unsubsidized housing by the total 43 participants represented in the HMIS data:

25 ÷ 43 = 58.1%, rounded to 58%.

Therefore, based on the HMIS data, 58% of the participants included in this calculation had completed their project and exited to unsubsidized housing.

2A-8.	**Housing Inventory Count (HIC) and Point-in-Time (PIT) Count Date.**	
	Enter the date your CoC conducted its 2026 Housing Inventory Count (HIC) and Point-in-Time (PIT) count.	01/28/2026
2A-8a.	**HIC and PIT Count Data–HDX 2.0 Submission Date.**	
	Did your CoC submit its 2026 Housing Inventory Count (HIC) and Point-in-Time (PIT) count data in HDX 2.0 by April 30, 2026, 8:00 p.m. EDT?	Yes
2A-8b.	**Longitudinal System Analysis (LSA) Data–HDX 2.0 Submission Date.**	
	You must upload your CoC's FY 2026 HDX Competition Report to the 4A. Attachments Screen.	
	Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by January 16, 2026, 11:59 p.m. EST?	Yes
2A-8c.	**System Performance Measures (SPM) Data–HDX 2.0 Submission Date.**	
	Did your CoC submit its FY 2025 System Performance Measures data in HDX 2.0 by March 4, 2026, 8:00 p.m. EDT?	Yes

2A-9.	HMIS and Comparable Database Participation—Bed Coverage Rate.	

Using the FY 2026 HDX Competition Report we issued your CoC, enter data in the chart below by project type:

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds	Adjusted Total Year-Round, Current VSP Beds	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
1. Emergency Shelter (ES) beds	71	24	95	100.00%
2. Safe Haven (SH) beds	0	0	0	0.00%
3. Transitional Housing (TH) beds	16	0	0	0.00%
4. Rapid Re-Housing (RRH) beds	33	0	33	100.00%
5. Permanent Supportive Housing (PSH) beds	0	0	0	0.00%
6. Other Permanent Housing (OPH) beds	0	0	0	0.00%

2A-9a.	Partial Credit for Bed Coverage Rates of 84.99 Percent or Lower for Any Project Type in Question 2A-9.	

	For each project type with a bed coverage rate that is 84.99 percent or lower in question 2A-9, describe:
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type, and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,500 characters)

1. For project types with a bed coverage rate of 84.99% or lower, the CoC will work with participating housing providers to identify available beds and improve the accuracy and timeliness of bed availability information. Over the next 12 months, the CoC will strengthen communication with shelters and housing programs, promote timely updates to bed inventories, identify gaps in coverage, and use Coordinated Entry and HMIS data to monitor capacity. The CoC will also engage community partners to identify opportunities to expand appropriate housing capacity and improve access to existing beds, to reach at least an 85% bed coverage rate.

2.The CoC will implement these steps through ongoing coordination with shelters, housing providers, and community partners. The CoC will work with participating projects to review bed capacity and HMIS data, identify gaps or inactive beds, and encourage timely updates to bed availability. The CoC will use Coordinated Entry and regular communication with providers to monitor access to available beds and identify barriers to utilization. Progress will be reviewed throughout the year, with providers and community partners engaged in identifying opportunities to increase capacity and improve access. These efforts will be incorporated into regular CoC coordination to work toward achieving and maintaining at least an 85% bed coverage rate.

3A. Policy Initiatives

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- Frequently Asked Questions

3A-1.	**Supporting Activities within an Opportunity Zone.**	
	You must upload the HUD-2996 Certification for Opportunity Zone Preference Points attachment to the 4A. Attachments Screen.	

1.	**Will the proposed activities/projects occur within Opportunity Zone Census Tracts?**	No
2.	**Do you expect to use at least 50% of the proposed activities/projects in Opportunity Zones Census Tracts?**	No

3A-2	**Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.**

Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No

4A. Attachments Screen For All Application Questions

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

We have provided the following guidance to help you successfully upload attachments and get maximum points:

1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.
2.	You must upload an attachment for each document listed where 'Required?' is 'Yes'.
3.	We prefer that you use PDF files, though other file types are supported–please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.
4.	Attachments must match the questions they are associated with.
5.	Only upload documents responsive to the questions posed–including other material slows down the review process, which ultimately slows down the funding process.
6.	If you cannot read the attachment, it is likely we cannot read it either.
	. We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).
	. We must be able to read everything you want us to consider in any attachment.
7.	After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.
8.	Only use the 'Other' attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.

Document Type	Required?	Document Description	Date Attached
01. 1C-1. List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment	Yes	List of Projects ...	09/27/2026
02. 1C-1f. List of CoC Program Projects and Number of Units that require Substance Abuse Treatment	Yes	List of CoC Progr...	09/24/2026
03. 1C-3. Language from Project Supportive Service Agreements	Yes	Community Action ...	09/24/2026
04. 1C-10. Evidence of Coordination and Non-Interference with Local Efforts to Advance Public Safety	Yes	AL 502 Evidence o...	09/22/2026
05. 1D-1. Local Competition Scoring Tool	Yes	Rank and Review Tool	09/22/2026

06. 1D-2c. Local Competition Selection Results	Yes	Local Competition...	09/22/2026
07. 2A-8b. FY 2026 HDX Competition Report	Yes	FY 2026 HDX Compe...	09/22/2026
08. 3A-1. HUD-2996 Certification for Opportunity Zone Preference Points	No		
09. 3A-2a. Project List for Other Federal Statutes	No		
10. 3A-DP. Your CoC's Policy or Statement to Advance Recovery	No		
11. Other	No	City of Florence ...	09/22/2026

Attachment Details

Document Description: List of Projects with On Site Treatment

Attachment Details

Document Description: List of CoC Program Projects requiring SA Treatment

Attachment Details

Document Description: Community Action Supportive Service Agreement

Attachment Details

Document Description: AL 502 Evidence of Coordination and Non Interference

Attachment Details

Document Description: Rank and Review Tool

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description: FY 2026 HDX Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: City of Florence Letter of Support

Submission Summary

Ensure that the Project Priority List is complete prior to submitting.

Page	Last Updated
1A. CoC Identification	09/27/2026
1B. Coordination and Engagement–Accountable Structure and Participation	09/27/2026
1C. Coordination and Engagement	09/27/2026
1D. Project Review/Ranking	09/27/2026
2A. HMIS Implementation	09/27/2026
3A. Policy Initiatives	09/27/2026
4A. Attachments Screen	09/27/2026
Submission Summary	No Input Required

Community Action PARTNERSHIP
Helping People. Changing Lives.

Community Action Agency of Northwest Alabama, Inc.

Serving Colbert - Lauderdale - Franklin Counties

745 Thompson Street • Florence, Alabama 35630-3867
Voice (256)766-4330 • Fax (256)766-4367 • www.caanw.org

September 24, 2026

* **CHANCE Project:** 10 units

* **Transitional Housing Project (THP):** 7 units

* **Total: 17 units**

CAANW currently operates one CoC Program-funded project and has one proposed CoC project with a combined 17 units that require program participant engagement in substance abuse treatment as a condition of continued participation: the CHANCE Project (10 units) and the proposed Transitional Housing Project (THP) (7 units). Therefore, the total number of CoC Program-funded units meeting this criterion is **17** in accordance with 24 CFR 578.75.

David Crosby, Executive Director

Helping People. Changing Lives.
Community Action PARTNERSHIP
AMERICA'S POVERTY FIGHTING NETWORK

Community Action Agency of Northwest Alabama, Inc.
Serving Colbert - Lauderdale - Franklin Counties

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Voice (256)766-4330 • Fax (256)766-4367 • www.caanw.org

Transitional Housing Project (THP)- Eligibility, Compliance & Termination

Eligibility for THP

- Be homeless, living in a temporary public shelter or hotel paid for by a local charity
- Have no nighttime residence or are staying in a place not intended for human habitation
- Fleeing domestic violence
- Exiting an institution such as jail, substance abuse treatment facility, and was homeless before entering the institution
- Must be willing to work on set goals to become self-sustaining and self-sufficient
- Must be willing to enter and participate in substance abuse treatment if needed or required
- Other criteria as federal regulations describe

Compliance for THP

THP participants will be actively engaged to obtain self-sufficiency as quickly as possible. Activities leading to self-sufficiency may include the following and/or additional items as determined by the Housing Counselor:

- Attend GED, Work Keys, and ACE classes as applicable
- Actively seek employment if unemployed, through Career Center, employment agencies, or self-referral. CL will provide proof of employment, including check stubs, to the counselor.
- Participants will show active movement in meeting goals, attending life skills activities when possible, such as financial stability training, food shopping, and nutrition preparation classes.
- Participants must complete, at a minimum, 20 hours weekly of case management to include meetings with a housing counselor.
- Households having income at least 60 days could be required to share in the cost of paying rent as feasible to encourage self-sufficiency and movement toward independence.
- Participants are mandated to check in with the Housing Counselor at predetermined times

Termination in THP

- Failure to meet scheduled appointments with counselor or referral source
- Failure to provide documentation to prove eligibility or providing falsified information
- Failure/refusal to follow self-sufficiency and life skills plans or goals and/or failure to meet deadlines
- Failure to register at Career Center, attend GED, Work Keys, Substance Abuse treatment or classes, or participate in life skills as applicable
- Lack of effort to obtain employment and budget available income
- Failure to make timely payments when sharing rent or other expenses
- Moving unauthorized persons into the dwelling not listed in the household
- Destruction of rental property
- Leaving substance abuse treatment before completion or leaving other required programs before completion

Substance Abuse Treatment Participation

As a condition of continued participation in this program, I agree to cooperate with the assessment, referral, and treatment process for substance use concerns when identified as appropriate by my case manager or qualified treatment provider. I agree to participate in recommended substance abuse treatment services, attend scheduled appointments, communicate with my treatment provider and case manager, and make a good-faith effort to follow my established treatment plan.

I understand that participation in treatment services is a condition of continued participation in the program. I also understand that the purpose of this requirement is to support my health, safety, housing stability, and progress toward greater independence. If barriers arise that affect my ability to participate, I agree to communicate with my case manager so that appropriate support or reasonable alternatives can be considered.

I certify that the information I have provided is true and correct to the best of my knowledge. I hereby give consent for this agency to verify the information I have given and for related outside sources to provide any information necessary in the completion of this application. I understand I am subject to all applicable Federal or State laws concerning fraud or if I knowingly provide false or incomplete information in order to obtain assistance. I agree I have received a copy stating the process of appeal. I also agree to unannounced home visits by Community Action Agency counselors/staff.

Case Worker_____ Date

Transitional Housing Project Participant _____Date_____

CITY OF FLORENCE, ALABAMA

Office of the Mayor

July 20, 2026

Mr. Ronald Kurtz
Assistant Secretary, Community Planning and Development
U.S. Department of Housing and Urban Development
2415 Eisenhower Avenue
Alexandria, Virginia 22314

Re: Homeless Care Council of Northwest Alabama-FY 2026 CoC Competition

Dear Assistant Secretary Kurtz,

On behalf of the City of Florence, Alabama, I am pleased to express my strong support for the FY 2026 Continuum of Care (CoC) Program application submitted by the Homeless Care Council of Northwest Alabama (HCCNWAL).

The City of Florence values the important work of HCCNWAL as the lead agency for the Northwest Alabama Continuum of Care, serving Lauderdale, Colbert, Franklin, Lawrence, Marion, and Winston counties. Through collaboration with local governments, nonprofit organizations, housing providers, healthcare organizations, educational institutions, faith-based partners, and other community stakeholders, HCCNWAL coordinates a regional response to homelessness that promotes long-term housing stability and access to supportive services.

Homelessness is a challenge that extends beyond municipal boundaries, requiring strong partnerships and coordinated planning. HCCNWAL has demonstrated an exceptional ability to unite organizations throughout Northwest Alabama to identify community needs, strengthen local resources, and improve access to housing and essential services. Their leadership has helped our communities develop a more effective and coordinated system for assisting individuals and families experiencing homelessness.

The City of Florence has a strong partnership with the HCCNWAL. By leading regional planning initiatives, administering Continuum of Care funding, and encouraging innovative solutions to homelessness, HCCNWAL has strengthened our community's ability to respond to the needs of some of our most vulnerable residents. Continued federal investment will help preserve these critical partnerships while expanding opportunities for permanent housing, supportive services, and long-term stability.

The City of Florence is honored to endorse the FY 2026 Continuum of Care Program application submitted by the Homeless Care Council of Northwest Alabama. We appreciate HUD's ongoing investment in communities working to prevent and end homelessness and respectfully request your favorable consideration of this application. Continued support for HCCNWAL will help strengthen regional collaboration, expand housing opportunities, and ensure that individuals and families experiencing homelessness have access to the resources needed to achieve long-term stability.

Sincerely,

Ron Tyler, Mayor

POST OFFICE BOX 98 | FLORENCE, AL 35631-0098
TELEPHONE 256-760-6400 | FLORENCEAL.ORG | FAX 256-760-6388

Before Starting the Project Listings for the CoC Priority Listing

The CoC Consolidated Application requires TWO submissions. Both this Project Priority Listing AND the CoC Application MUST be completed and submitted prior to the CoC Program Competition submission deadline stated in the NOFO.

The CoC Priority Listing includes:
- Reallocation forms – must be completed if the CoC is reallocating eligible renewal projects to create new projects or if a project applicant will transition from an existing component to an eligible new component.
- Project Listings:

  - New;
  - Renewal;
  - UFA Costs;
  - CoC Planning;
  - YHPD Renewal; and
  - YHDP Replacement and Reallocation.

- Consolidations and Expansions Forms – must be completed if the CoC is consolidating eligible renewal projects or applying for new projects to expand the operations of eligible renewal projects.
- Attachment Requirement

  - HUD-2991, Certification of Consistency with the Consolidated Plan – Collaborative Applicants must attach an accurately completed, signed, and dated HUD-2991.

Things to Remember:
- New, CoC Renewal, YHPD Renewal, YHDP Replacement and Reallocation Project Listings – all project applications must be reviewed, approved and ranked, or rejected based on the local CoC competition process.
- Project applications on the following Project Listings must be approved and are not ranked per the FY 2026 CoC Program Competition NOFO:

  - UFA Costs Project Listing;
  - CoC planning Project Listing;

- Collaborative Applicants are responsible for ensuring all project applications accurately appear on the Project Listings and there are no project applications missing from one or more Project Listings.
- For each project application rejected by the CoC, the Collaborative Applicant must select the reason for the rejection from the dropdown provided.
- If the Collaborative Applicant needs to amend a project application for any reason, the Collaborative Applicant MUST ensure the amended project is returned to the applicable Project Listing AND ranked or approved BEFORE submitting the CoC Priority Listing to HUD in e-snaps.

Additional training resources are available online on HUD's website

1. Continuum of Care (CoC) Identification

Collaborative Applicant Name: AL-502

2. Reallocation

2-1 Is the CoC reallocating funds from one or more eligible renewal grant(s) that will expire in Calendar Year 2027 to create one or more new projects?	Yes

Alert:
As stated in the FY 2026 CoC Program Competition NOFO:
- CoCs may reallocate YHDP projects from any Round to create new YHDP Replacement projects.
- If a CoC reallocates funding from a renewal project that was previously awarded DV Bonus funding, any new project created with such funding must be 100 percent dedicated to serving individuals and families who are fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking and who qualify as homeless under paragraphs (1) or (4) of the definition of homeless at 24 CFR 578.3 or Section 103(b) of the McKinney-Vento Homeless Assistance Act.

2A. Reallocation - Grant(s) Eliminated

CoCs reallocating eligible CoC Renewal, DV Renewal or YHDP renewal project funds to create new project application(s) may do so by eliminating one or more expiring eligible projects.

YHDP Renewal Grants and DV Renewal Grants may only be reallocated to create new projects that serve the same populations/subpopulations as the projects the funding was reallocated from.

Amount Available for New CoC Projects: (Sum of All Eliminated CoC Renewal Projects)
$0
Amount Available for New YHDP Projects: (Sum of All Eliminated YHDP Restricted Projects)
$0
Amount Available for New DV Projects: (Sum of All Eliminated DV Restricted Projects)
$0

Eliminated Project Name	Grant Number Eliminated	Component Type	Funding Type	Annual Renewal Amount	Transition Grant
This list contains no items					

2B. Reallocation - Grant(s) Reduced

CoCs that are reallocating eligible CoC Renewal, DV Renewal and YHDP Renewal project funds to create new project applications may do so by reducing one or more expiring eligible renewal projects.

YHDP Renewal Grants and DV Renewal Grants may only be reallocated to create new projects that serve the same populations/subpopulations as the projects the funding was reallocated from.

Amount Available for New CoC Project(s): (Sum of All Reduced CoC Projects)
$188,087
Amount available for New YHDP Project(s): (Sum of All Reduced YHDP Projects)
$0
Amount available for New DV Project(s): (Sum of All Reduced DV Projects)
$0

Reduced Project Name	Reduced Grant Number	Funding Type	Annual Renewal Amount	Amount Retained	Amount available for YHDP Project	Amount available for DV Project	Amount available for New Project	Reallocation Type
Community Action ...	AL0044L4C022518	CoC Renewal	$451,675	$263,588	$0	$0	$188,087	Yes

Reallocation - Grant(s) Reduced Details

2B-1 Complete the fields below for each eligible renewal grant that is being reduced during the FY 2026 reallocation process.

Refer to the FY 2026 Grant Inventory Worksheet to ensure all information, including the funding type, entered is accurate.

Reduced Project Name:	Community Action PH & RRH 2025
Grant Number of Reduced Project:	AL0044L4C022518
Funding Type:	CoC Renewal
Reduced Project Current Annual Renewal Amount:	$451,675
Amount Retained by Project:	$263,588
Amount available for YHDP Project(s): (This amount will auto-calculate by selecting "Save" button)	$0
Amount available for New DV Project(s): (This amount will auto-calculate by selecting "Save" button)	$0
Amount available for New Project(s): (This amount will auto-calculate by selecting "Save" button)	$188,087

2B-2. Describe how the CoC determined that this project should be reduced and include the date the project applicant was notified of the reduction. (limit 750 characters)

The CoC Rank and Review Committee met to decide ranking, and which projects to reduce or eliminate, based on the need for more Transitional Housing. The CoC used a rank and review tool that was approved before use. The committee decided that Community Action's PH/RRH is still very much in high need, and that the need for TH is increasing; therefore, a transition grant was in order. Community Action was notified of this on July 22, 2026.

2B-3 Is the project applicant reallocating the grant, in part, to create one or more transition grants?	Yes

The Collaborative Applicant confirms the new transition grant(s) are for a new program component.	X
The Collaborative Applicant reviewed and affirms that no more than 50 percent of the funds in the new component project(s) will be for costs of eligible activities under the old component; and	X
The CoC consented to the transition of component and the new component project(s) meet the standards outlined in Section II.A.3.k of the NOFO.	X

Continuum of Care (CoC) New Project Listing

Instructions:

To upload all new project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based on the number of new projects submitted by project applicant(s) to your CoC in the e-snaps. You may update each of the Project Listings simultaneously.

To review a project on the New Project Listing, click on the magnifying glass next to each project to view project details.

To view the actual project application, click on the orange folder.

If you identify errors in the project application(s), you can send the application back to the project applicant to make the necessary changes by clicking the amend icon. It is your sole responsibility to ensure all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is prioritizing.

Project Name	Date Submitted	Comp Type	Applicant Name	Budget Amount	Grant Term	Funding Type	Transition Grant	Expansion	Rank	PSH/RRH
Transitional Hous...	2026-09-28 11:03:...	TH	Community Action ...	$188,087	1 Year	Reallocation	Yes	No	3	

Continuum of Care (CoC) Renewal Project Listing

Instructions:

Prior to starting the Renewal Project Listing, review the CoC Priority Listing Detailed Instructions available on HUD's website.

To upload all renewal project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of renewal projects submitted by project applicant(s) to your CoC in the e-snaps system. You may update each of the Project Listings simultaneously. To review a project on the Renewal Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

The Collaborative Applicant certifies that there is a demonstrated need for all renewal permanent supportive housing and rapid re-housing projects listed on the Renewal Project Listing.	X
The Collaborative Applicant certifies all renewal permanent supportive housing and rapid rehousing projects listed on the Renewal Project Listing comply with program requirements and appropriate standards of quality and habitability.	X
The Collaborative Applicant does not have any renewal permanent supportive housing or rapid re-housing renewal projects.	

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is prioritizing.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Consolidation	Accepted?	Comp Type	Rank	Expansion	PSH/RRH	Consolidation Type
HMIS Renewal FY 2026	2026-09-28 11:05:...	1 Year	Community Action ...	$18,542	no	Yes	HMIS	1	no		
PSH/RRH Joint Ren...	2026-09-28 11:04:...	1 Year	Community Action ...	$263,588	no	Yes	PH	2	no	RRH	

Continuum of Care (CoC) Planning Project Listing

Instructions:

Prior to starting the CoC Planning Project Listing, review the CoC Priority Listing Detailed Instructions available on HUD's website.

To upload the CoC planning project application submitted to this Project Listing, click the "Update List" button. This process may take a few minutes while the project is located in the e-snaps system. You may update each of the Project Listings simultaneously. To review the CoC Planning Project Listing, click on the magnifying glass next to view the project details. To view the actual project application, click on the orange folder. If you identify errors in the project application, you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

Only one CoC planning project application can be submitted and only by the Collaborative Applicant designated by the CoC which must match the Collaborative Applicant information on the CoC Applicant Profile.

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is accepting.

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Accepted?
CoC Planning Proj...	2026-09-27 16:43:...	1 Year	Homeless Care Cou...	$50,000	Yes

Continuum of Care (CoC) YHDP Renewal Project Listing

Instructions:

Prior to starting the YHDP Renewal Project Listing, review the CoC Priority Listing Detailed Instructions available on HUD's website.

To upload all YHDP Renewal project applications submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of YHDP Renewal projects submitted by project applicant(s) to your CoC in the e-snaps system.

You may update each of the Project simultaneously. To review a project on the YHDP Renewal Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked (if applicable) or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

As stated in the FY 2026 CoC NOFO, YHDP Renewal and YHDP Replacement applications are competitive and must be ranked.

The Collaborative Applicant certifies that there is a demonstrated need for all renewal permanent supportive housing and rapid rehousing projects listed on the YHDP Renewal Project Listing.	
The Collaborative Applicant certifies all renewal permanent supportive housing and rapid rehousing projects listed on the YHDP Renewal Project Listing comply with program requirements and appropriate standards of quality and habitability.	
The Collaborative Applicant does not have any renewal permanent supportive housing or rapid rehousing YHDP renewal projects.	X

WARNING: If you amend project applications back to project applicants to make changes or corrections in e-snaps, you must approve the resubmitted project applications. If you do not approve the resubmitted project applications, they will not be included on your CoC's Priority Listings, which could result in your CoC losing funding. HUD lacks the authority to fund projects unless they are included on the Priority Listings, which informs HUD which projects your CoC is accepting.

Project Name	Date Submitted	Applicant Name	Budget Amount	Comp Type	Grant Term	Accepted ?	Rank	PSH/RRH	Consolidation Type
This list contains no items									

Continuum of Care (CoC) YHDP Replacement and YHDP Reallocation Listing

Instructions:

Prior to starting the YHDP Replacement and YHDP Reallocation Project Listing, review the CoC Priority Listing Detailed Instructions available on HUD's website.

To upload all YHDP Replacement project and YHDP Reallocation project applications, submitted to this Project Listing, click the "Update List" button. This process may take a few minutes based upon the number of YHDP renewal projects submitted by project applicant(s) to your CoC in the e-snaps system.

You may update each of the projects simultaneously. To review a project on the YHDP Replacement and YHDP Reallocation Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If you identify errors in the project application(s), you can send the application back to the project applicant to make necessary changes by clicking the amend icon. It is your sole responsibility for ensuring all amended projects are resubmitted, approved and ranked (if applicable) or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

As stated in the FY 2026 CoC NOFO, YHDP Renewal and YHDP Replacement applications are competitive and must be ranked.

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Project Name	Applicant Name	Date Submitted	Comp Type	Expansion	Budget Amount	Grant Term	Funding Type	PSH/RRH	Rank
This list contains no items									

4. Consolidation & Expansion

Instructions:

For guidance on completing the CoC Priority listing, please reference the CoC Priority Listing Detailed Instructions on HUD's website.

1. Is the CoC consolidating renewal projects that will expire in Calendar Year 2027?	No
2. Is the CoC expanding renewal projects that will expire in Calendar Year 2027?	No

Funding Summary

Instructions

This page provides the total budget summaries for each of the project listings after you approved and ranked or rejected new and renewal project applications. You must review this page to ensure the totals for each of the categories is accurate.

The "Total CoC Request" indicates the total funding request amount your CoC will submit to HUD for funding consideration. As stated previously, only 1 UFA Cost project application (for UFA designated Collaborative Applicants only) and only 1 CoC Planning project application can be submitted and only the Collaborative Applicant designated by the CoC is eligible to request these funds.

Title	Total Amount
CoC Renewal Amount	$282,130
New CoC Bonus and CoC Reallocation Amount	$188,087
New DV Bonus Amount	$0
New DV Reallocation Amount	$0
YHDP Renewal and Replacement Amount	$0
YHDP Reallocation Amount	$0
CoC Planning Amount	$50,000
Rejected Amount	$0
Total Funding Request	$520,217

Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan (HUD-2991)	Yes	Certification of ...	09/22/2026
Other	No	City of Florence ...	09/22/2026
Other	No		
Project Rating and Ranking Tool (optional)	No	Rank and Review Tool	09/22/2026

Attachment Details

Document Description: Certification of Consistency with the Consolidated Plan HUD 2991

Attachment Details

Document Description: City of Florence Letter of Support

Attachment Details

Document Description:

Attachment Details

Document Description: Rank and Review Tool

Submission Summary

WARNING: The FY 2026 CoC Consolidated Application requires submissions of the CoC Priority Listing AND the CoC Application by the FY 2026 Application Submission Deadline.

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Page	Last Updated
Before Starting	No Input Required
1. Collaborative Applicant	09/27/2026
2. Reallocation	09/27/2026
2A. Grant(s) Eliminated	No Input Required
2B. Grant(s) Reduced	09/28/2026
3A. CoC New Project Listing	09/28/2026
3B. CoC Renewal Project Listing	09/28/2026
3D. CoC Planning Project Listing	09/27/2026
3E. YHDP Renewal Project Listing	No Input Required

3F. YHDP Replacement and YHDP Reallocation Project Listing	No Input Required
4. Consolidation & Expansion	09/27/2026
Funding Summary	No Input Required
Attachments	09/27/2026
Submission Summary	No Input Required

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: Homeless Care Council of NW Alabama/ AL 502

Project Name: Homeless Care Council-Planning Grant; Community Action-PH/RRH; Community Action-TH; Community Action-HMIS

Location of the Project: HCCNWAL 210 E Tennessee Street Ste 116, Florence, AL 35630

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

HUD Continuum of Care Competition

Name of Certifying Jurisdiction: City of Florence

Certifying Official of the Jurisdiction
Name: Ron Tyler

Title: Mayor

Signature: Ron Tyler

Digitally signed by Ron Tyler
Date: 2026.09.21 08:39:40 -05'00'

Date: September 21, 2026

CITY OF FLORENCE, ALABAMA

Office of the Mayor

July 20, 2026

Mr. Ronald Kurtz
Assistant Secretary, Community Planning and Development
U.S. Department of Housing and Urban Development
2415 Eisenhower Avenue
Alexandria, Virginia 22314

Re: Homeless Care Council of Northwest Alabama-FY 2026 CoC Competition

Dear Assistant Secretary Kurtz,

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Sincerely,

Ron Tyler, Mayor

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TELEPHONE 256-760-6400 | FLORENCEAL.ORG | FAX 256-760-6388