# RESOLUTION OF THE GOVERNING BODY OF [FULL LEGAL NAME OF PUBLIC ENTITY]

**NO PLACE LIKE HOME: NON-COMPETITIVE ALLOCATION**

# [Name of project as it appears in the No Place Like Home application]

IN THE MATTER OF: RESOLUTION NO. \_\_\_\_\_\_\_\_\_\_\_\_\_\_

AUTHORIZATION TO PARTICIPATE IN

THE NO PLACE LIKE HOME PROGRAM

 WHEREAS, the State of California, Department of Housing and Community Development (“Department”) issued a Notice of Funding Availability, dated August 15, 2018 as amended on October 30, 2018, on October 23, 2020, on October 29, 2021 and as may be further amended from time, (collectively, the “NOFA”) under the No Place Like Home Program (“NPLH” or “Program”) authorized by Government Code section 15463, Part 3.9 of Division 5 (commencing with Section 5849.1) of the Welfare and Institutions Code, and Welfare and Institutions Code section 5890;

 WHEREAS, the NOFA relates to the availability of approximately $19 million in Non-Competitive Allocation funds under the NPLH Program; and

 WHEREAS, **[Full Legal Name of Public Entity]** is a County and an Applicant (“County”), as those terms are defined in the NPLH Program Guidelines, enacted in 2020 (“Guidelines”).

NOW, THEREFORE, BE IT RESOLVED, that the **[Enter governing body]** **[Board of Supervisors]** for County does hereby determine and declare as follows:

SECTION 1. That County is hereby authorized and directed to apply for and if awarded, accept funds from the NPLH Program not to exceed [**Enter amount of funds**] (the “NPLH Loan”).

 SECTION 2. That **[TITLE of Authorized Signatory]**, [Optional: or his or her designee,] is hereby authorized and directed to act on behalf of County in connection with an award of the NPLH Loan, and to enter into, execute, and deliver any and all documents required or deemed necessary or appropriate to evidence the NPLH Loan, the County’s obligations related thereto, and the Department’s security therefore. These documents may include, but are not limited to, a State of California Standard Agreement (“Standard Agreement”), a regulatory agreement, a promissory note, a deed of trust and security agreement, a capitalized operating subsidy reserve agreement and any and all other documents required or deemed necessary or appropriate by the Department as security for, evidence of, or pertaining to the NPLH Loan, and all amendments thereto (collectively, the “NPLH Program Documents”).

 SECTION 3. That County shall be subject to the terms and conditions that are specified in the Standard Agreement; that the application in full is incorporated as part of the Standard Agreement; that any and all activities funded, information provided, and timelines represented in the application are enforceable through the Standard Agreement; and that County will use the NPLH Loan in accordance with the Guidelines, other applicable rules and laws, the NPLH Program Documents, and any and all NPLH Program requirements.

 SECTION 4. That County will make mental health supportive services available to each project’s NPLH tenants for at least 20 years and will coordinate the provision of or referral to other services (including, but not limited to, substance use services) in accordance with the County’s relevant supportive services plan, and as specified in Section 202 of the Guidelines.

PASSED AND ADOPTED this \_\_\_\_\_\_ [Insert numerical day] day of \_\_\_\_\_\_ [Insert month], 20\_\_\_\_ [Insert year, preceded by 20], by the following vote:

AYES: \_\_\_\_\_ [Insert Number of Ayes]

NOES: \_\_\_\_\_ [Insert Number of Noes]

ABSTENTIONS: \_\_\_\_\_ [Insert Number of Abstentions]

ABSENT: \_\_\_\_\_ [Insert Number Absent]

 CERTIFICATE OF THE [SECRETARY/CLERK] OF THE PUBLIC ENTITY

The undersigned, **[Secretary/Clerk]** of the County, does hereby attest and certify that the foregoing is a true, full and correct copy of a resolution of the County’s governing body adopted at a duly convened meeting on the date above-mentioned, and that the resolution has not been altered, amended, modified, repealed, rescinded, or annulled.

DATE:

 **[Full Name] [Secretary/Clerk]**