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**Section E. PHA Certification Requirements for Nonprofit Applicants**

If the applicant for this project is a private nonprofit organization, please include in this exhibit the following letter from the PHA that will administer rental assistance:

(Date)

I (name and title), authorized to act on behalf of (name of PHA), certify that this agency qualifies as a Public Housing Agency, as specified in 24 CFR 882.102, is legally qualified and authorized to carry out this proposed project, and that it (name of applicant) is selected for an SRO award, this agency will administer the rental assistance.

(Signature of PHA official)

(PHA number)

**Section F. Homeless Veterans**

Are veterans the primary target population?

☐

Yes

☐

No

**Section G. Additional Information**

HUD needs the following information to respond to public inquiries about program benefit. Your responses will not affect in any way the scoring of your submission.

1. Which of the following subpopulations will your project serve? (Check all that apply)

☐

Chronically Homeless

☐

Severely Mentally Ill

☐

Chronic Substance Abusers

☐

Dually Diagnosed

☐

AIDS and Related Diseases

☐

Victims of Domestic Violence

☐

Veterans

2. Will the proposed project be located in a rural area? (A project is considered to be in a rural area when the project will be primarily operated either (1) in an area outside of a Metropolitan Area, or (2) in an area outside of the urbanized areas within a Metropolitan Area.)

☐

Yes

☐

No