

**BEFORE THE BOARD OF SUPERVISORS
OF THE COUNTY OF YUBA**

**RESOLUTION AUTHORIZING THE HEALTH AND)
HUMAN SERVICES DEPARTMENT (HHSD))
DIRECTOR TO APPLY TO THE CALIFORNIA)
DEPARTMENT OF HOUSING AND COMMUNITY)
DEVELOPMENT FOR HOMELESS HOUSING,)
ASSISTANCE, AND PREVENTION (HHAP)) RESOLUTION NO. 2025-053
PROGRAM ROUND 6 GRANT FUNDS FOR THE)
PERIOD OF MARCH 1, 2025 THROUGH)
OCTOBER 1, 2029; TO EXECUTE ALL)
DOCUMENTS REQUIRED BY THE)
APPLICATION, RESULTANT ALLOCATION AND)
ALL DOCUMENTS RELATED TO THE HHAP; TO)
ACCEPT, TRANSFER AND ADMINISTER ALL)
HHAP FUNDS; AND TO ENTER INTO, EXECUTE)
AND AMEND THE MEMORANDUM OF)
UNDERSTANDING THAT MEMORIALIZES EACH)
ELIGIBLE APPLICANT’S COMMITMENT TO)
PARTICIPATE IN AND COMPLY WITH THE)
REGIONALLY COORDINATED HOMELESSNESS)
ACTION PLAN)**

WHEREAS, the California Department of Housing and Community Development (HCD) within California’s Business, Consumer Services and Housing Agency (Agency) has made grant funds available for the Homeless Housing, Assistance, and Prevention (HHAP) Program Round 6; and

WHEREAS, the intent of HHAP Program Round 6 is to prevent and expeditiously reduce unsheltered homelessness through homelessness prevention activities and sustain existing Interim Housing Solutions and Permanent Housing Solutions; and

WHEREAS, eligible applicants for this funding include California’s 44 Continuums of Care (CoC), 14 largest cities and 58 counties; and

WHEREAS, applicants for HHAP Program Round 6 must apply as part of a region, be signatory to a Regionally Coordinated Homelessness Action Plan and Memorandum of Understanding (MOU), and submit a complete application in order to receive their allocation; and

WHEREAS, the Health and Human Services Department (HHSD) Director seeks to submit a complete application, on behalf of Yuba County, for HHAP Program Round 6 grant funds and any subsequent funds allocated as part of a regional application with other eligible participating applicants while designating each eligible applicant as an Administrative Entity to receive and administer their allocation separately.

NOW, THEREFORE, BE IT RESOLVED by the Yuba County Board of Supervisors that the HHSD Director is authorized to participate in a regional application, and as the Administrative Entity for Yuba County, submit a complete application for HHAP Program Round 6 grant funds and any subsequent funds allocated.

BE IT FURTHER RESOLVED by the Yuba County Board of Supervisors that the HHSD Director is hereby authorized to: execute, subject to review and approval of County Counsel, all documents as required by the application and resultant allocation for the period of March 1, 2025 through October 1, 2029 including subsequently extended term; execute amendments, including but not limited, to amendments for additional or lesser funding; and accept, transfer and administer all HHAP Program Round 6 funds and any subsequent funds allocated for the stated period.

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BE IT FURTHER RESOLVED by the Yuba County Board of Supervisors that the HHSD Director is hereby authorized to: enter into, execute and amend as needed, on behalf of Yuba County and upon review and approval of County Counsel, the Memorandum of Understanding with other eligible participating applicants for the term of March 1, 2025 through October 1, 2029 that will reflect the Regionally Coordinated Homelessness Action Plan and memorialize each eligible applicant's commitment to participate in and comply with the Regionally Coordinated Homelessness Action Plan.

A copy of the executed agreement or any amendment thereto shall be filed in the office of the Clerk of the Board.

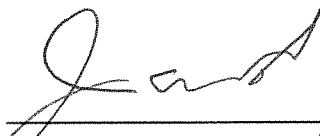
PASSED AND ADOPTED at a regular meeting of the Board of Supervisors of the County of Yuba, State of California on the 12 day of August, 2025 by the following vote:

AYES: Supervisors Vasquez, House, Fuhrer, Messick

NOES: None


ABSENT: Supervisor Bradford

ABSTAIN: None

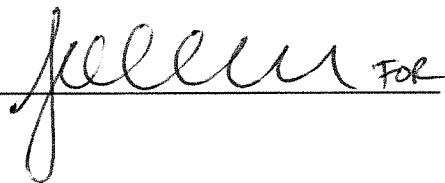


Jon Messick, Vice Chair ~~Gary Bradford, Chair~~

ATTEST: MARY PASILLAS
CLERK OF THE BOARD OF
SUPERVISORS



JANET E. BENDER
COUNTY COUNSEL
APPROVED AS TO FORM:


_____ FOR