NOTICE OF RENEWAL OF CONTRACT

TO:
DOORWAYS FOR WOMEN & FAMILIES
P.O. BOX 100185
ARLINGTON, VA 22210

DATE ISSUED: JULY 11, 2014
CURRENT REFERENCE NO: 200-11
CONTRACT TITLE: TRANSITIONAL HOUSING
PRIOR REFERENCE NO: 305-10

THIS IS A NOTICE OF RENEWAL OF CONTRACT AND NOT AN ORDER. NO WORK IS AUTHORIZED UNTIL THE VENDOR RECEIVES A VALID COUNTY PURCHASE ORDER ENCUMBERING CONTRACT FUNDS.

This is your notice that the above referenced contract has been renewed. The contract term covered by this Notice of Award is effective IMMEDIATELY and expires on JUNE 30, 2015.

The contract documents consist of the terms and conditions of Agreement No. 364-07, including any exhibits, attachments or amendments thereto.

CONTRACT PRICING:
REFER TO AMENDMENT NO. 1 THROUGH 8 TO AGREEMENT NO. 364-07

ATTACHMENTS:
AMENDMENT NO. 1 THROUGH 8 TO AGREEMENT NO. 364-07

EMPLOYEES NOT TO BENEFIT:
NO COUNTY EMPLOYEE SHALL RECEIVE ANY SHARE OR BENEFIT OF THIS CONTRACT NOT AVAILABLE TO THE GENERAL PUBLIC.

VENDOR CONTACT: CAROLINE JONES
EMAIL ADDRESS: cjones@doorwaysva.org
VENDOR TEL. NO.: 703-522-8858
VENDOR PAYMENT TERMS: NET 30 DAYS
VENDOR FAX. NO.: 703-522-4338
COUNTY CONTACT: NANCY HART
COUNTY TEL. NO.: 703-228-1327

CONTRACT AUTHORIZATION

DATE: 7/11/14
BID FOLDER: 1

INETTE GONZALEZ, CPPS
PROCUREMENT OFFICER
ARLINGTON COUNTY, VIRGINIA
AGREEMENT NO. 200-11

AMENDMENT NUMBER 8

This Amendment Number 8 (Amendment) is made on the date of execution of the Amendment by the County and amends Agreement Number 236-07 as amended by Amendment Number 1 thru 7 (Main Agreement) and made between Doorways for Women and Families, P.O. Box 100165, Arlington, VA 22210 (Contractor) and the County Board of Arlington County, Virginia (County).

Whereas the County and the Contractor desire to amend the term of the Main Agreement, the Contractor and the County, in consideration of the promises and other good and valuable consideration specified in this Amendment, amend the Main Agreement as follows.

1. **CHANGE CONTRACT TITLE:** Change contract title from “Transitional Housing” to “Rapid Re-Housing.”

2. **REPLACE:** All references to “Coordinated Intake process” with “Centralized access system.”

3. **REPLACE:** All references to “Transition in place” or “TIP” with “Rapid Re-housing”

4. **REVISE THE SCOPE OF WORK, SECTION II:**
   a. Item B: Revise to read: “Participating households must be homeless.”
   b. Item C: Revise to read: “Providers will accept eligible residents only from the centralized access system”
   c. Item D: Revise to read: “Clients coming to the program are expected to have income within four months of entry, exceptions to this may be determined by the centralized access system.”
   d. Item E: Revise to read: “This is a voluntary program. Households must be willing to accept the terms of program participation, such as, but not limited to, working with their case manager, progressing with their service plan, signing the needed releases for HMIS (Information on clients who are survivors of domestic violence is collected in an alternative manner that protects their anonymity).”
   e. Item F: Delete Item F.

5. **REVISE SCOPE OF WORK, SECTION III:**
   a. Item B: Revise to read: “The gross income of locally funded households may not exceed 50 percent of the AMI based on the family size and may not exceed locally determined resource limits. Households funded through State and Federal Programs must adhere to their program guidelines including Income and resource limits.”
   b. Item D: Revise to read: “Household income changes will be made according to policy established.”
   c. Item E: Revise to read: “Formal assessments on program continuation beyond six months and at each six months thereafter will be discussed with the centralized access system.”
6. **REVISE SCOPE OF WORK, SECTION V:** Replace “Potential removals must be discussed with the DHS Homeless Coordinator who will participate in the assessment and planning for the household” (last sentence of paragraph one) with “Potential removals must be discussed with the centralized access system who will participate in the assessment and planning for the household.”

7. **REVISE EXHIBIT B (ATTACHED):**
   b. Replace chart with:
      - “Report quarterly the Performance Measures adopted by the CoC for Rapid Re-housing (previously “Transition in Place”)
      - “Report quarterly the number of families who left the program in FY 2014. For each of those note who:
         - Have maintained stable housing for 3, 6 and 9 months. This does not need to be in the original unit nor be an apartment in which they are the primary leaseholder.
         - You know are in unstable housing.
         - You have lost contact with.”

**Terms and Conditions**
The work and payment called for under this Amendment shall be subject to all terms and conditions of the Agreement. All terms and conditions of the Agreement shall remain in full force and effect for the work covered by this Amendment unless specifically changed by the terms and conditions of this Amendment.

WITNESS these signatures:

**THE COUNTY BOARD OF ARLINGTON COUNTY, VIRGINIA**

AUTHORIZED SIGNATURE: [Signature]

NAME AND TITLE: [Signature] [Title]

DATE: 7/11/14

**DOORWAYS FOR WOMEN AND FAMILIES**

AUTHORIZED SIGNATURE: [Signature]

NAME AND TITLE: [Signature] [Title]

DATE: 7/11/14
REVISED EXHIBIT B
Rapid Re-housing: Quarterly Outcome Report

Report quarterly the Performance Measures adopted by the CoC for Rapid Re-housing (previously "Transition in Place")

Report quarterly the number of families who left the program in FY 2014. For each of those note who:

- Have maintained stable housing for 3, 6 and 9 months. This does not need to be in the original unit nor be an apartment in which they are the primary leaseholder.
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