#### Barrier Buster Fund Parameters & Forms

The Barrier Buster Fund was created to assist individuals/adult-only households experiencing short-, mediumand long-term homelessness with a small, **one-time** payment to move to a permanent housing destination as quickly as possible. The fund may help people access **flexible permanent housing destinations** such as permanent stays with friends and family, or relocations. Please see below for the parameters of the Barrier Buster Fund:

#### Eligible Population

- Individuals or adult-only households currently experiencing homelessness in Boston, and who have at least 1+ Boston bed or outside nights at the time of assessment, **OR**
- Those fleeing or attempting to flee domestic violence w/Boston residency.

Note: Someone is defined as experiencing Boston homelessness if they are **currently** unsheltered in Boston or in a Boston emergency shelter or transitional housing program **and** experienced homelessness in Boston for 1+ nights at the time of assessment for Barrier Buster.

#### Permanent Tenancy in Nature

Tenancies may include staying with natural supports such as family, friends, or other types of shared housing as long as it is assessed to be permanent in its nature. Below are requirements on when funds can be used to contribute to tenancies:

- There is documentation from the landlord or the host of the unit that the tenant may reside there for a **minimum of 3 months**.
- There are no rent burden minimums or maximums on tenancies unless it is a **sober home** placement without a lease. If a sober home will NOT provide a lease- the participant must include documentation of how the sober home will be paid for after Barrier Buster funds end.
- Special requirement- Public or Subsidized housing tenancies: the fund may only be used for such tenancies if the participant is able to a.) obtain their own lease for a subsidized unit, or b.) be added to a household's existing lease for a subsidized unit.

#### Eligible Cost Details

- Maximum Payment: \$3,000 (Note: not applicable to holding fees. Holding fees have a max. of two months' rent per unit)
- **Timeframe**: Once in a lifetime use
- **Eligible cost types**: are flexible- any cost type that can assist someone to move up and out of homelessness. Examples may include:
  - o Start-up costs- rent, moving truck, storage fees, security deposit
  - o Assistance to hosts- food, utility payment, assistance with rent or back rent
  - o Self-sufficiency items- travel costs, vocational/education costs
  - o Holding fees to hold units for up to two months' rent (one month request at a time) per unit
  - Other costs identified by case manager and participant to promote a move out of homelessness into a permanent housing destination.

## **Barrier Buster Application Checklist**

The Barrier Buster Fund was created to assist individuals/adults-only households experiencing homelessness with financial assistance to move to a permanent housing destination as quickly as possible. The fund may help people access flexible permanent housing destinations such as permanent stays with friends, family or other natural supports, or moving into their own unit.

Clients will be assessed as part of determining an appropriate housing pathway and if Barrier Buster is an option, the assessor will make a referral to HomeStart, with all necessary supporting documentation. Examples of potential Barrier Buster eligible expenses and sample back- up documentation are provided. This list is not comprehensive; given the flexibility of Barrier Buster there may be alternatives to resolve homelessness episodes that you may request.

Please note that holding fees are now an eligible cost for the Barrier Buster Fund. Since a holding fee request does not require that a household already be identified for the unit, the eligible population does not apply and you do not need to document eligibility status.

#### This guidance contains:

- 1.) A submission checklist with required documents to submit with a Barrier Buster application
- 2.) Barrier Buster Fund Request Form
- 3.) Holding Fee Checklist and Holding Fee Agreement
- 4.) Guidance on how to document eligibility status (Boston homeless nights or domestic violence status)
- 5.) Guidance on how to document various types of costs
- 6.) FAQs

## **Submission Checklist**

Required Documents to Submit with a Barrier Buster application (except for Holding Fee requests):

- ✓ Proof of Eligibility
  - Individuals or adult-only households currently experiencing homelessness in Boston, and who have at least 1+ Boston bed or outside nights at the time of assessment, **OR**
  - Fleeing domestic violence and a Boston resident, or displaced from Boston
- ✓ Boston Barrier Buster Fund Request Form (pages 1 and 2)
- ✔ Documentation of requested costs
- ✔ HAN Release form uploaded to the Boston Warehouse

Required Documents to Submit with a Barrier Buster Holding Fee application:

- ✓ Boston Barrier Buster Fund Request Form (pages 1 and 2)
- ✓ <u>Documentation of requested costs</u>
- ✓ Holding Fee Checklist
- ✓ Holding Fee Agreement

## **Boston Barrier Buster Fund Request Form (page 1 of 2)**

HomeStart, Inc. 105 Chauncy St. Suite 502 Boston, MA 02111 617.542.0338 (p) 617.209.6120 (f) barrierbuster@homestart.org

Date Submitted:	Client's Na	me:			
Agency:	Client's DOB:				
Housing Advocate:	Client Last 4 of SSN:				
Advocate Email:		nay take up to 10 business days to process. If required sooner, please indicate the date			
Requested Costs	payment is	payment is needed below.			
First Month's Rent: \$	If your agen	ncy has encrypted email, you may email			
Security Deposit: \$	• •	s to barrierbuster@homestart.org, with the			
Arrears – Rent \$	· · · · · · · · · · · · · · · · · · ·	"Barrier Buster." Applications can also be meStart at 617-209-6120; please write			
Arrears – Utilities \$		ster" in the subject line of the fax cover sheet.			
Relocation \$	Notes Abou	ıt Payments:			
Holding Fee \$					
Other (explain to the right) \$					
Request Total: \$					
Client's Name:	Phone #:				
New Street Address:					
City:	State:	Zip:			
1st Payment Assistance Made Payable	То:				
Landlord/Company Name:					
Street Address:					
City:	State:	Zip:			
2nd Payment Assistance Made Payable	то:				
Landlord/Company Name:					
Street Address:					
City:	State:	Zip:			

## **Boston Barrier Buster Fund Request Form (page 2 of 2)**

Is client under 25 years of age? Please circle. Y N

Did client serve in the U.S. military or have veteran status? Please circle. Y N

Race: does the client identify with any of the following communities or identities?

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White
- Prefer not to say

Ethnicity: does the client identify with any of the following communities or identities?

- Hispanic/Latino
- Non-Hispanic/Non- Latino
- Prefer not to say

Gender: does the client identify with any of the following communities or identities?

- Cis Female
- Cis Male
- Trans Female (MTF or Male to Female)
- Trans Male (FTM or Female to Male)
- Nonbinary/Genderqueer
- Prefer not to say

# of "Days in the Last Three Years" according to the Boston HMIS Warehouse:	
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# **Holding Fee Checklist**

### For Holding Fees Only:

Before requesting a noiding fee from the Barrier Buster Fund, all Items below should be completed.
Please identify which items are true on the unit for which you are requesting funds:
$\square$ Requestor has provided the landlord with the inspection checklist and/or list of common reasons for a failed inspection AND landlord certified the unit has no major barriers that would prevent a passing inspection at this time.
$\hfill\square$ Requestor has completed a Rent Reasonableness check on the unit and the unit is deemed rent reasonable.
$\hfill\square$ Requestor is attaching a completed Holding Agreement to this request.
$\Box$ There is already a program participant identified for this unit and the unit <i>does not</i> need to be added to the Unit Inventory.
$\Box$ There is not a program participant identified for this unit and the unit <b>does</b> need to be added to the Unit Inventory. Please note that HomeStart will add the unit if needed.
☐ The unit is already included on the Unit Inventory.

## **Holding Fee Agreement**

#### **Conditions**

- 1. A holding fee cannot exceed a total of one month's rent per unit at a time.
- 2. Should a participant become a tenant and move into the unit prior to the holding period's end, then the landlord will still be eligible to receive prorated rent and/or first month's rent from the rental assistance program for the overlapping time period.
- 3. The landlord agrees not to fill the vacant unit with a tenant other than a household experiencing homelessness enrolled in a rental assistance program in Boston during the holding period.
- 4. The landlord agrees to fill the unit with a household experiencing homelessness enrolled in a rental assistance program in Boston if this participant meets the screening criteria specified below.

I agree to the above conditions, numbered 1-4, for the rental unit located at:

Unit Number and Address:			
A holding fee will be paid in the	amount of \$		
The unit will be held for the fol	owing period: <b>Begin Date:</b>	End Date:	
Payable To:			
Landlord/Company Name:			
Street Address:			<u> </u>
City:	State:	Zip:	
Questions regarding the anticip	,	, , , , , , , , , , , , , , , , , , , ,	ff:
Phone:		Email Address:	
Landlord Name (print):		Staff Name (print):	
Landlord Signature:		Staff signature:	
Date:		Date:	

## **Documenting Boston Homeless Status**

Someone is defined as experiencing Boston homelessness if they are **currently** unsheltered in Boston or in a Boston emergency shelter or transitional housing program, **and** experienced homelessness in Boston for 1+ nights at the time of assessment for Barrier Buster.

#### Guidance on Documenting Eligibility

- ✓ If warehouse record shows client is currently experiencing homelessness in Boston with 1+ Boston homeless night
  - There is no need to turn in documentation to verify homeless status; HomeStart will verify through the warehouse.
- ✓ If Boston homeless nights are outside of the Warehouse
  - Include documentation of current Boston homelessness to equal at least 1+ Boston homeless nights at the time of assessment for Barrier Buster.
  - "Boston homeless nights" must be nights that were spent unsheltered in Boston, or in Boston emergency shelters or transitional housing programs.
  - Verification must follow the City of Boston's preferred order of documentation below. Staff should move down the list of this preferred order, and only use self-certification in instances where all above options have been exhausted.

# Boston's Preferred Order of Documentation of Homeless Status 1. HMIS record of Boston bed/outside nights 2. Third-party written documentation/ shelter letter 3. Oral verification to the intake worker (written by the intake worker) 4. Intake worker written observation of one's homelessness 5. Self-certification from the participant

## **Documenting Fleeing Domestic Violence**

Someone is defined as a Boston resident fleeing domestic violence if they are attempting or have fled domestic violence, dating violence, sexual assault, stalking or other life-threatening conditions that relate to domestic violence (survival sex, human-trafficking, etc.). They also must lack the resources to move to a subsequent permanent housing destination and live in Boston or have been displaced from Boston.

#### Guidance on Documenting Domestic Violence Status

Please follow the order 1-4 below and provide the dates attempted. Document 5 is required (Boston residency). A self statement will suffice for any aspect, if safety would be jeopardized. Please note that if your agency has "victim-service provider" designation, you only need to obtain oral verification documented by an intake worker or self-certification from the participant.

## **Boston's Preferred Order of Documentation of Domestic Violence Status**

- 1. Third-party written documentation
- 2. Oral verification to the intake worker (written by the intake worker)
- 3. Intake worker written observation of one's homelessness
- 4. Self-certification from the participant
- 5. Proof of a Boston address (required, see next table for guidance)

#### Guidance on Documenting Boston Residency for Those Fleeing Domestic Violence

Boston residency is an eligibility requirement to access the Barrier Buster Fund. For households fleeing or attempting to flee DV, safety is the first concern when verifying eligibility. The list below is <u>not</u> exhaustive and provides examples of that can be used to verify residency status for households fleeing or attempting to flee domestic violence. A self statement will suffice for any aspect, if safety would be jeopardized.

Any of the following could indicate Boston residency as needed to meet the residency requirement:

DV residency qualifier	Examples of documentation that may be collected			
Shelter they are residing in is in Boston	Follow the HUD's preferred order of documentation listing shelter			
Address fleeing from or attempting to flee is in Boston	<ul> <li>Mail listing the client and the Boston address</li> <li>Letter from the current and/or former landlord, if it poses no safety risk to applicant</li> <li>Letter from current and/or former neighbor who resided at the same or abutting address, if it poses no safety risk to applicant</li> <li>Letter from former housemate who resided at the same address, if it poses no safety risk to applicant</li> <li>Utility bill (gas, electric)</li> </ul>			
Address the household initially fled to is in Boston, but unstable (e.g. fled to mom's house, but can't stay)	<ul> <li>Letter from applicant and/or DV service provider</li> <li>Letter from former housemate who resided at the same address, if it poses no safety risk to applicant</li> </ul>			
Children are enrolled in Boston Public Schools (BPS)	BPS enrollment verification OR     Verification letter from BPS HERN (Homeless Education Resource Network) - established to meet the needs of homeless families			
Adult in the household works in Boston	<ul> <li>Employer written verification</li> <li>Pay stubs listing business address</li> </ul>			

## **Documenting Barrier Buster Requested Costs**

Examples of potential Barrier Buster eligible expenses and sample back- up documentation are provided below. This list is not comprehensive; given the flexibility of Barrier Buster there may be alternatives to resolve homelessness episodes that you may submit for as long as it fits the fund's parameters and you have provided back-up documentation to verify the costs.

Type of Cost	Back-Up Documentation			
Move-in Costs - Client is on the lease	<ul> <li>W-9 from property client is moving to         Proof of costs needed to move in (may be a letter from the landlord, or specified on the lease)     </li> <li>Proof of Ownership from landlord (may be deed, print out from city's assessor website, tax bill, mortgage, etc.)</li> <li>Copy of signed lease (may be a year lease or month-to-month)</li> <li>Proof of participant's income dated within the last 3 months</li> <li>Proof of costs needed to move in (may be a letter from the landlord, or specified on the lease) · Proof of participant's income dated within the last 3 months</li> </ul>			
Back rent to return to a tenancy	<ul> <li>W-9 from property where debt is owed.</li> <li>Proof of rental arrearage cost, documentation dated within 90 days</li> <li>Proof of Housing Option (where the client is moving to upon payment) This could be a letter from a friend or family member stating that the client can move in if the back debt is paid. If written confirmation can't be obtained, a verbal confirmation should be obtained from the person that is allowing the client to move in.</li> <li>Proof of Host's Tenancy: If moving in with friends/family, that host must certify in writing that they have a current tenancy. If written documentation can't be obtained, a verbal confirmation of the tenancy should be obtained.</li> </ul>			
Arrears to move forward with a subsidized housing placement	<ul> <li>W-9 from property where debt is owed.</li> <li>Proof of rental arrearage cost, documentation dated within 90 days</li> <li>Proof of Housing Option / Offer from the PHA or Subsidy         Administrator: Proof of offer of housing that is contingent upon payment of arrears owed     </li> </ul>			

Travel Costs to move or return to a housing option	<ul> <li><u>Proof of Housing Option</u> (where the client is moving to upon payment) Verbal confirmation that the client has a place to move into; confirmation can be provided by a friend or family member confirming that the client can stay for the duration of the COVID public health crisis.</li> <li><u>Proof of transportation cost</u> (bus ticket, airline ticket, train, etc.)</li> </ul>			
Move in with friend/family member	<ul> <li>W-9 for friend/family member if payment going to friend/family member</li> <li>Proof of Host's Tenancy: If moving in with friends/family, obtain proof of existing tenancy (i.e. copy of lease, proof of ownership). If written documentation can't be obtained, a verbal confirmation from the host should be obtained.</li> <li>Proof of Housing Option (where the client is moving to upon payment) This could be a letter from a friend or family member stating the duration of the tenancy (i.e. the duration of the public health crisis or longer), the address, when person can move in and the stipulations (if any). Verbal confirmation sufficient if written documentation can't be obtained.</li> <li>If a household will be living with a friend/family member and will not be added to the lease, the household must self-certify it is allowable to live in the unit.</li> </ul>			
Holding Fees	<ul> <li>W-9 from landlord</li> <li>Proof of Ownership from landlord (may be deed, print out from city's assessor website, tax bill, mortgage, etc.)</li> <li>Holding Fee Checklist</li> <li>Holding Fee Agreement</li> </ul>			
Other Options	<ul> <li>Barrier Buster is meant to quickly resolve a household's episode of homelessness. Households often know what may be needed to end their homelessness- Barrier Buster will strive to allow for creative options. If you use an option not listed above, document expenditures.</li> </ul>			

# **Barrier Buster FAQs**

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