

EMERGENCY RENTAL ASSISTANCE PROGRAM (ERAP)

Written Attestation of Need

This is to attest that I, _____, currently residing at:

<i>Address (include apt. #)</i>	<i>City</i>	<i>zip</i>

If address does NOT match the address on the ID/drivers license copy you are providing, attach a utility bill that shows your address.

am providing the following proof of need in order to apply for (check one or both)

___ Rental Assistance

___ Utility Assistance

due to the fact that I have lost income as a result of the COVID-19 pandemic. My proof of this is attached as *(check how you are proving income loss and then attach that documentation)*

___ unemployment benefit letter *(copy is attached)*

OR

___ reduction in income as proven by:

- Letter from employer stating you were laid off and eligible to return
OR
- Paystubs proving reduction in income
OR
- Computation sheet for self-employment with attachments

AND I am at risk of homelessness because: *(check one and provide documentation)*

_____ I am past due on rent (provide copy of lease AND landlord certification AND W9 for Landlord

OR

_____ I am past due on a utility that is needed for housing (provide copy of past due bills)

OR

_____ I am living in unsafe conditions and need to move (payments can only be made for moving if tenant is leaving the county currently in project)

I also, hereby attest that I have NOT received assistance through other federal, state or local assistance programs for this same time period OR if I have, I will provide proof so that duplication of service is prevented.

Signed _____