Covid-19 Emergency Rental Assistance Program

Weber Housing Authority
237 26th Street, #E220
Ogden, Utah 84401
Phone: 801-399-8691
Fax: 801-399-8690
Weber Housing Authority
Covid-19 Emergency Rental Assistance Program Guidelines

1. Program Summary
The Weber Housing Authority Covid-19 Emergency Rental Assistance Program is designed to assist households in maintaining their current living situation and avoid eviction. The program is for participants that are in a temporary crisis that is beyond the control of the participant that has significantly affected their ability to pay their rent. Participants must be a victim of Covid-19 and must not be receiving Unemployment Benefits. The participant must have exhausted all other resources and have no other way to alleviate the crisis but for the assistance of the program. Rental payment must be in arrears or due within 10 calendar days and the assistance must stop the eviction process. The payment will not exceed $1,500 per household and will be paid directly to the landlord or property management agency. Funding will be offered as it is available and on a first come, first serve basis and will only be offered once per household. The process of applying is outlined below.

2. Homeless Prevention
It is intended that the funds will be used to assist households in avoiding homelessness as a result of Covid-19. The funding may only be used to prevent homelessness by avoiding eviction.

3. Eligible Households
Verification must be provided that the household has applied for Unemployment Benefits and that they have been denied assistance. There must be reasonable proof that the family will be able to resume full monthly housing payments in the following months. The participant should provide proof that they are currently working or planning to work or that sufficient income will be able to support the household with future expenses.

Households that comprise of undocumented citizens do not qualify for assistance under this program.¹

4. Projected Household Income Requirements
Income documentation in the form of most recent pay-stubs and tax returns are required to apply for the Weber Housing Authority Emergency Rental Assistance Program. Every member of the household age 18 and older must submit income information regardless of their participation on the program. The annual household income (all members age 18 and older) cannot exceed 80% of the area median income. Weber Housing Authority Emergency Rental Assistance Program utilizes the HUD adjusted gross income definition for determining the projected household annual income. These yearly household income

¹ "The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 imposed restrictions on eligibility for receipt of public benefits. Essentially, the law provides that illegal aliens are not to receive public benefits and specifies how the inquiry into a person's status is to be conducted."

limits, based on household size, are listed below:

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Maximum Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$48,350</td>
</tr>
<tr>
<td>2</td>
<td>$55,250</td>
</tr>
<tr>
<td>3</td>
<td>$62,150</td>
</tr>
<tr>
<td>4</td>
<td>$69,050</td>
</tr>
<tr>
<td>5</td>
<td>$74,600</td>
</tr>
<tr>
<td>6</td>
<td>$80,100</td>
</tr>
<tr>
<td>7</td>
<td>$85,650</td>
</tr>
<tr>
<td>8</td>
<td>$91,150</td>
</tr>
</tbody>
</table>

Assistance is offered on a first come, first serve basis.

4. **Application Verifications**
   1. Weber Housing Authority Emergency Rental Assistance Program Application
   2. Social Security Cards for all household members
   3. Income information (consecutive and most recent 60 days of pay stubs) AND letter from employer explaining your current employment situation (if applicable)
   4. Tax information for 2019
   5. Denial letter from DWS regarding Unemployment Benefits
   6. Current lease
   7. Current rent ledger

5. **Property Qualifications**
   Properties must be located within Weber County, but may not be in Ogden City. The current target area is anywhere in Weber County outside of the Ogden City limits. The qualifying cities that may participate in the program are:

   - Farr West
   - Harrisville
   - Hooper
   - Marriott-Slaterville
   - North Ogden
   - Plain City
   - Pleasant View
   - Riverdale
   - Roy
   - South Ogden
   - Washington Terrace
   - West Haven

**Process Guidelines**

1. A fully completed application will be sent to Weber Housing Authority will all required documentation. The application (with all required documentation) may be dropped off, faxed, emailed or mailed to Weber Housing Authority staff. Please do not submit an incomplete application.
2. Participants will be contacted once a completed application is submitted.
3. The landlord will be contacted once the application is approved. Weber Housing Authority staff will explain to the landlord that a rental payment will be made on behalf of the tenant. The date the landlord can expect to receive a check will also be detailed.

Once all required documentation has been submitted with the completed application, there is NO GUARANTEE that funds will still be available or that you will qualify for the assistance. The following guidelines will help determine if you qualify for funding assistance:

- You must show that your crisis is directly related to Covid-19; you have contracted Covid-19 and lost employment or lost your employment as a result of the pandemic. You must also show that you have applied for Unemployment Benefits and been denied.

- Payment is in arrears or due within 10 calendar days. The Weber Housing Authority can provide assistance for up to 3 months of rental assistance OR a total of $1,500 per household.

The undersigned hereby releases Weber Housing Authority, its agents and employees from all liability or obligation arising from or in connection with services or goods received from Weber Housing Authority. I understand that Weber Housing Authority reserves the right to consult with other community agencies, landlords and the utility companies regarding my case. This includes the right to release or receive names and addresses. Some of the information on this application will be used to obtain statistical reports to be submitted to grantors and/or for program outreach purposes.

In the event that your application is not approved for any reason, there is a grievance process in place, which can be utilized by requesting the program manager to review your application and the reasons for denial. If there is still dissatisfaction, the decision may be heard by the Executive Director of the Weber Housing Authority. If the decision is still unsatisfactory, you may submit a written description of the grievance decision to the Weber Housing Authority Board of Directors at 237 26th Street, #E220, Ogden Utah 84401.

________________________________________  ______________________________
Signature of Applicant                  Date
Checklist of Information

Applicant must provide the following required documents/information before application will be accepted
(No exceptions will be made).

Documentation:

☐ Social Security Cards for all household members
☐ Income information (consecutive and most recent 60 days of pay stubs) AND letter from employer explaining your current employment situation (if applicable)
☐ Tax information for 2019
☐ Denial letter from DWS regarding Unemployment Benefits
☐ Current lease
☐ Current rent ledger

Rental Assistance Packet:

☐ Completed Emergency Rental Assistance Packet
☐ Landlord signature on last page of Packet (please ask about this before having your landlord sign)

-All documentation must be complete before turning in the housing packet-
AUTHORIZATION FOR THE RELEASE OF INFORMATION

Organization requesting release of information:

Weber Housing Authority
237 26th Street, Suite #E220
Ogden, Utah 84401

Purpose:
The U.S. Department of Housing and Urban Development (HUD) and the above named organization may use the authorization and the information obtained with it, to administer and enforce program rules and policies.

Authorization:
I authorize the release of any information (including documentation and other materials) pertinent to eligibility for participation for the following program:

Emergency Rental Assistance
I authorize the above named organization to obtain information on wages or unemployment compensation from State Employment Securities Agencies. I understand any Criminal History Record or police incident report(s) can be released to any adult regarding individuals receiving Housing Assistance who may be directly affected. I hereby release the Weber Housing Authority from any liability that may result from the receipt or use of any Criminal History Record or police incident report(s).

Information Covered Inquiries may be made about:

<table>
<thead>
<tr>
<th>Family Composition</th>
<th>Residences and Rental History</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment, Income, Pension and Assets</td>
<td>Social Security number and information</td>
</tr>
<tr>
<td>Federal, State, Tribal or Local Benefits</td>
<td>Identity and Marital Status</td>
</tr>
</tbody>
</table>

Individuals or Organization That May Release Information:
Any individual or organization including any governmental organization may be asked to release information. For example, information may be requested from:

<table>
<thead>
<tr>
<th>Banks and other Financial Institutions and Present)</th>
<th>Landlords</th>
<th>Law Enforcement Agencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Providers of:</td>
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<tr>
<td>Alimony or Child Care</td>
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<td>Child Support or Credit issuing agencies</td>
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<tr>
<td>Handicapped Assistance</td>
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<tr>
<td>Medical Care</td>
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<tr>
<td>Pensions/Annuities</td>
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<tr>
<td>Local Supportive Services</td>
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<tr>
<td>Conditions:</td>
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</table>

I agree that photocopies of this information may be used for the purposes stated above. If I do not sign this authorization, I also understand that my application may be denied or terminated.

Head of Household (Print) | Signature | Date
Other Adult (Print) | Signature | Date
Weber Housing Authority Applicant Statement

Please state the reasons you are experiencing a housing crisis and how this DIRECTLY relates to Covid-19:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Are you currently receiving Unemployment Benefits? Please explain why/why not:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Landlord Contact Information:

Name: ____________________________________________________________

Address: _________________________________________________________

Phone Number: _____________________________________________________

Email Address: _____________________________________________________

________________________________________________________________________

Applicant Signature ___________________________ Date ____________

______________________________________________________________

Weber Housing Authority Representative _______________ Date ___
**Weber Housing Authority**  
**Rental Assistance Application**

<table>
<thead>
<tr>
<th></th>
<th>Last Name</th>
<th>First Name</th>
<th>Relationship (Spouse, daughter, etc.)</th>
<th>Sex</th>
<th>Disabling Condition (Y/N)</th>
<th>Race</th>
<th>Ethnicity (Hispanic/Non-Hispanic)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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</tbody>
</table>

Phone number where you may be reached: ____________________________

Email Address: ____________________________

**Residency: Current Address**

<table>
<thead>
<tr>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>Landlord's Name</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current</td>
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</tr>
</tbody>
</table>

Landlord’s Address: ____________________________

All income must be reported. For each family member on page 1, list any income received by or in behalf of that family member:

<table>
<thead>
<tr>
<th>Mem #</th>
<th>Type of Income: (Wages, SSI, SSA, Alimony/Child Support, Interest, Dividends, Retirement, Self Employment Income, Tips, Commissions, Welfare, etc.)</th>
<th>Amount of Income from this source:</th>
<th>Frequency: (Daily, weekly, monthly, annually, etc.)</th>
<th>Office use only:</th>
</tr>
</thead>
<tbody>
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</table>

Total Estimated Annual Income: ____________________________
Dear Landlord:

The Weber Housing Authority will not approve emergency rental assistance if the owner of the proposed dwelling is related in any way to the client. This includes but is not limited to: the spouse, the parent, step-parent, child, grandparent, grandchild, sister, or brother of the applicant currently applying for rental or deposit assistance. The property owner or manager may not reside in the specific unit under consideration.

Are you related to the client who is applying to rent your unit?

Yes_________ No_________

Do you live in the unit with our client?

Yes_________ No_________

By signing this form, you are acknowledging you have read and understand the information provided. You are indicating you have honestly answered the above questions to the best of your knowledge.

_________________________ ______________________________
Landlord/Property Manager’s Signature          Date signed

_________________________
Address, City, State and Zip

_________________________
Phone Number
Weber Housing Authority
237 26th Street #E220, Ogden, Utah 84401

This form must be completed in its entirety by the Local Recipient Organization (LRO) providing service, as all information is required, for each rent/mortgage payment made with Emergency Food and Shelter Program funds. Failure to provide complete, required information will result in a compliance exception.

<table>
<thead>
<tr>
<th>Client Information:</th>
<th>Date (month/day/year):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client Name:</td>
<td></td>
</tr>
<tr>
<td>Client Address:</td>
<td></td>
</tr>
<tr>
<td>(complete street address)</td>
<td></td>
</tr>
<tr>
<td>(city/state/zip)</td>
<td></td>
</tr>
</tbody>
</table>

**Type of Assistance:**

- [ ] Rent (check one)
- [ ] Mortgage (check one)

<table>
<thead>
<tr>
<th>Past due rent</th>
<th>Past due mortgage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current month's rent</td>
<td>Current month's mortgage</td>
</tr>
<tr>
<td>First month's rent (effective/move in date)</td>
<td>(month/day/year)</td>
</tr>
</tbody>
</table>

The monthly rent/mortgage payment is $__________________________

The total owed (including the amount above) is $__________________________

The one month amount being paid by this agency is $__________________________

The amount being paid is for the month of (month/year)__________________________

The one month amount being paid is due on (month/day/year)__________________________

The one month amount being paid is past due in its entirety at time of payment (check one): [ ] Yes [ ] No

EFSP guidelines allow for the payment of mortgage principal and interest only. Current rent/mortgage payments may be made up to 10 calendar days before the due date. First month's rent may be paid up to 30 days prior to move-in date. No deposits, escrow fees, late fees, etc. are eligible when providing assistance to individuals/households. First month's mortgages are not allowed.

**LRO Verification (To be completed by the LRO staff):**

<table>
<thead>
<tr>
<th>LRO Staff Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>LRO Staff Signature:</td>
<td></td>
</tr>
<tr>
<td>Date (month/day/year):</td>
<td></td>
</tr>
</tbody>
</table>

**Landlord/Mortgage Holder Verification (To be completed by the landlord/mortgage holder):**

This is to confirm that rent/mortgage for ______________________ (name of individual or family) for the property

<table>
<thead>
<tr>
<th>(complete address, street number and name, city, state, zip code)</th>
<th>with</th>
</tr>
</thead>
</table>

a monthly rent amount of $__________________________ (rent only: includes no deposits, late fees, or other charges) or with a mortgage

with a monthly payment of $__________________________ (principal and interest only; no escrow payments or other fees) is/was due on ______________________ (month/day/year). The total amount currently owed is $__________________________.

The individual/family now has rent/mortgage due/past due for the month(s) of ______________________ (month/year).

<table>
<thead>
<tr>
<th>Landlord/Mortgage Holder Name:</th>
<th>Phone:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>(street/city/state)</td>
</tr>
<tr>
<td>_________</td>
<td>_____________</td>
</tr>
</tbody>
</table>

Landlord/Mortgage Holder Signature: ______________________

Important: Payment will guarantee residency for an additional 30 days!