

Valued Resident -

You have informed us that your employment has been impacted by COVID-19. The information requested below will be used to identify and verify households who may have lost income as a result of job shutdown or are off work due to the specific virus. This information will be kept confidential and will allow us to determine whether you <u>may</u> be eligible for certain payment arrangements and waivers of late rent charges for the month of _______, 2020.

This form is being completed because (check which applies):

- Job shutdown or layoff due to COVID-19 and I request to delay rent payment for the month of 2020
- □ I am not able to work due to the specific virus which has affected one or more members of my household and I request to delay rent payment for the month of _____, 2020

Name:	
Address:	
Phone:	
Email:	

Employers contact number where we can verify your job impact:

Last date worked: ______

Anticipated return date: _____

Are you applying for unemployment benefits: ______

Check One:

- □ I have a RD rental assistance and have reported this change to my community manager.
- □ I have a RD rental assistance and have not reported this change to my community manager.
- □ I have a Section 8 voucher or other rental assistance and have reported this change to my community manager.
- □ I have a Section 8 voucher or other rental assistance and have NOT reported this change to my community manager.
- □ I do NOT have any rental assistance and pay own rent.

Considerations will be given to those residents whose rental accounts are current and have been paid in full.



Check One:

 $\hfill\square$ I am current and my rental account is paid in full. I do not have a balance.

□ I am not current on my rent

Management Agent (signature)

Date

Resident signature

Date