



Doña Ana County The Emergency Rental Assistance Program Application

Please complete the information in this application package and submit along with the applicable supporting documents in accordance with the Emergency Rental Assistance Program Guidelines.

Documentation Required:

- Driver's license or Government issued picture ID.
- Verification of income loss, employment, or reduction in wages as a result of the COVID-19 Pandemic.
- Other supporting documents that will be helpful such as, copies of unemployment filings, layoff notification or reduction in hours' notification.
- Most recent filed Tax Return (2020 if filed) or proof of all declared income or last (2) pays stubs.

Documentation for requesting Rent Assistance:

- Current lease or rental agreement
- Past due notice for lease or rental payment(s) or eviction notice
- **Landlord Verification letter or form completed by landlord (see separate form).**

Documentation for requesting Utility Payment Assistance:

- Past due Utility Bill
- Disconnect Notice (if applicable)

QUESTIONS FOR ELIGIBILITY:

1. Briefly describe your loss of income as a direct result of the COVID-19 pandemic:

2. What was the date of separation if you became unemployed or experience reduction in income, as result of the COVID-19 pandemic? _____.
3. Are you receiving unemployment benefits? Yes No Amount received _____
4. Have you already received funding for these expenses from the Community Development Block Grant (CDBG)/Housing and Urban Development (HUD)? Yes No
Amount received _____

A staff member will contact you by phone or email should additional information or documentation be needed.

Application Information

Applicant First Name _____

Applicant Last Name _____
 Social Security Number or TAX ID _____
 Primary Phone Number _____
 Applicant Email Address _____
 Address (must be the location you are renting) _____
 City State Zip _____
 Household income _____
 Number of individuals in the household _____
 Gender, race, and ethnicity for the **primary applicant** for assistance _____

Current Rental Information

Current Monthly Rent _____
 Name of Landlord _____
 Landlord's Phone and/or Email _____
 Amount of outstanding rental arrears for household _____

Utilities Assistance

Utility Company	Current Monthly Bill	Amount Past Due
TOTAL AMOUNTS		

Applicant Certification

The application, including attachments, is subject to disclosure under New Mexico's public records law, subject to limited applicable exemptions. Social Security numbers are collected, maintained and reported by Doña Ana County in compliance with IRS 1099 reporting requirements and are not considered public records pursuant to N.M. Stat. Ann. §14-3-7.1. Applicant acknowledges, understands, and agrees that, except as noted below, all information in its application and attachments will be disclosed without notice to applicant if a public records request is made for such information. Doña Ana County will not be liable to applicant for such disclosure.

I certify that the information provided in this application is true and accurate to the best of my ability, and no false or misleading statements have been made in order to secure approval of this application. Doña Ana County is authorized to verify the accuracy of the information contained herein. Doña Ana County shall be entitled to access and audit such records as may be necessary to prevent fraud and ensure compliance with federal requirements. Under penalty of perjury, I declare that I have read the foregoing application and that the facts stated in the application are true and correct. I understand that knowingly making a false written declaration is a **felony**.

Applicant Name: _____

Applicant Signature: _____

Date: _____

- **All questions must be answered. Incomplete applications and failure to provided required information and/or documents could result in denial.**
- **Doña Ana County will notify successful applicants of total amount of assistance covered by the Emergency Rental Assistance Program.**