



EMERGENCY HOUSING PAYMENT PROGRAM

Emergency Housing Payment Program grants are now available to assist low-income Clovis residents who have suffered a COVID-19-related financial loss by providing a maximum of 3 months' worth of rent or mortgage payments. Assistance is paid on the applicant's behalf directly to the applicant's landlord or mortgage lender. The assistance is provided as a grant.

ELIGIBILITY REQUIREMENTS

1. Must have an annual gross household income at or below 80% of Area Median Income as published by the U.S. Department of Housing and Urban Development (income maximum is adjusted for household size):

1 Person	2 Persons	3 Persons	4 Persons	5 Persons	6 Persons	7 Persons
\$39,150	\$44,750	\$50,350	\$55,900	\$60,400	\$64,850	\$69,350

2. Must live within the City of Clovis.
3. Must be at risk of losing your home due to eviction or foreclosure.
4. Must have suffered a COVID-19-related financial loss (such as job loss, reduction in work hours, medical expenses, etc.)
5. Must have been current on rent or mortgage payments as of March 31, 2020 (or current on any agreed upon payment plan).

Applications will be accepted and processed on a first-come, first-served basis. Only complete applications will be processed. Incomplete applications will be returned to the applicant. Complete applications will include the following:

1. All individuals living in the home must be listed on the application; and
2. All applicable items identified on the attached application checklist must be submitted with the application.

Submit completed applications and supporting documentation by mail, email or in person to:

Heidi Crabtree, Housing Program Coordinator
Clovis Administration Office
1033 Fifth Street
Clovis, CA 93612
heidicr@cityofclovis.com

NOTICE OF NON-DISCRIMINATION: It is the policy of the City of Clovis to not discriminate on the basis of race, color, national origin, religion, sex, and sexual preference. If you have a complaint or concern, please contact the City of Clovis 504 Coordinator at 559-324-2060.

Need Assistance Contacting the City of Clovis?
California Relay Service provides specially-trained Communication Assistants to relay conversations between deaf, hard of hearing, or speech-loss individuals and people who use a standard telephone. You can use this service to contact the City of Clovis by dialing 711.



CITY OF CLOVIS
EMERGENCY HOUSING PAYMENT PROGRAM APPLICATION

HOUSEHOLD INFORMATION:

Applicant Name: _____ Co-Applicant Name: _____

Address of Primary Residence: _____

Mailing Address (if different): _____

Applicant Phone: _____ Co-Applicant Phone: _____

Applicant Email: _____ Co-Applicant Email: _____

Source of Income: _____ Source of Income: _____

Gross Monthly Income: _____ Gross Monthly Income: _____

Ethnicity of Applicant:
Hispanic Yes No

Ethnicity of Co-Applicant:
Hispanic Yes No

Race of Applicant (please check all that apply):
American Indian or Alaska Native
Asian
Black or African American
Native Hawaiian or Other Pacific Islander
White
Other: _____

Race of Applicant (please check all that apply):
American Indian or Alaska Native
Asian
Black or African American
Native Hawaiian or Other Pacific Islander
White
Other: _____

Household Size (please list the applicant/owner first, then all other people living in the home, including age):

Name _____ Age: _____
Name _____ Age: _____
Name _____ Age: _____
Name _____ Age: _____
Name _____ Age: _____
Name _____ Age: _____
Name _____ Age: _____
Name _____ Age: _____

(continued on next page)

RENT/MORTGAGE INFORMATION:

I am applying for assistance to pay my (circle one): RENT MORTGAGE

Landlord Name/Mortgage Lender: _____

Mailing Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

Monthly Rent/Mortgage Payment: _____

I have been unable to pay my rent/mortgage payment for the following months:

Have you notified your landlord/mortgage lender in writing that you have been unable to pay your rent/mortgage payment due to COVID-19-related income loss (circle one)? YES NO

Applicant Certifications/Acknowledgements

1. I certify that my housing costs are not subsidized through federal or state resources and my household is responsible for the full monthly housing payment.
2. I certify that no other person in my household has applied for this Emergency Housing Payment Program.
3. I certify that my household has suffered a COVID-19-related financial loss.
4. I acknowledge that the City of Clovis will not pay more than three (3) months' of my delinquent housing payments, and that I will be responsible for paying any additional amount required to bring my account current.
5. I understand that if I am determined to be eligible for this Emergency Housing Payment Program my application will be referred to the Community Housing Council of Fresno where I will be assigned to a HUD-certified housing counselor who will contact me for an appointment and will contact my landlord/mortgage lender on my behalf.
6. I understand that any assistance paid on my behalf will be paid directly to my landlord/mortgage lender.
7. I understand that submission of this application does not guarantee that financial assistance will be provided through the Emergency Housing Payment Program.

I hereby swear and affirm that the information I have provided in this application is true and correct to the best of my knowledge and belief. I authorize the City of Clovis and the Community Housing Council of Fresno to verify such information with my full cooperation at any time. I understand that providing false information on this application is punishable under penalty of perjury under the laws of the State of California and the United States of America.

Applicant Signature

Date

Co-Applicant Signature

Date

APPLICATION CHECKLIST

Please use the checklist below to ensure your application is complete.

1. **TENANTS ONLY:** Copy of current and valid lease signed by landlord, or documentation of a month-to-month tenancy agreement; and
2. **HOMEOWNERS ONLY:** Copy of most recent mortgage statement; and
3. **ALL APPLICANTS:** Completed and signed application; and
4. **ALL APPLICANTS:** Verification of income for all adults (18 years and older) residing in the home, **including those with no income (attached Statement of No Income)**. The following chart will indicate what type of documentation will be accepted for each type of income:

TYPE OF INCOME	REQUIRED DOCUMENTATION
Wages	Two months of most recent pay stubs.
Self-Employment	Two years of self-employment income (Schedule C) or 1040 tax form.
Social Security or Supplemental Security Income	Most recent benefit statement from the Social Security Administration.
Unemployment Compensation** or Worker's Compensation	Copy of most recent benefit statement.
Retirement Account (401K, 403B, 457, CD or IRA)	Most recent retirement account statement.
Child Support or Alimony	Court order showing monthly payment, or most recent statement from enforcement agency.
No Income	Signed statement of no income (included in application packet).

**The \$600 unemployment benefit and \$1200 stimulus payment authorized by the Federal CARES Act will not be counted as household income.

BANK STATEMENTS SHOWING DIRECT DEPOSITS WILL NOT BE ACCEPTED AS VERIFICATION OF INCOME

For application questions, contact:

Heidi Crabtree, Housing Program Coordinator
(559) 324-2094
heidicr@cityof clovis.com

STATEMENT OF NO INCOME

I, _____ (print name), residing at _____
_____ (print address), affirm to the City of Clovis, that I currently have
no income. The last date on which I received any type of income was _____.

SIGNATURE: _____ DATE: _____

Zero Income Status

Adult household members without income are required to sign a statement, under penalty of perjury, that they have no income or had no income during the submittal and processing of an Emergency Housing Payment Program application with the City of Clovis. If income is received by a household member, please be advised that reportable income must be submitted to the City of Clovis within 10 days of receipt of this notice.

If you have any questions or require additional information specific to this notice, please feel free to contact me at (559) 324-2094.

Sincerely,

Heidi Crabtree

Heidi Crabtree
Housing Program Coordinator
City of Clovis