

Multnomah County Intellectual & Developmental Disabilities
ARPA - Emergency Rent Assistance Application

2023-2024
INTAKE FORM

Person in Services with Mult. Co. IDD:

Application Date:

Case Manager Name:

Case Management Agency: Mult. Co. IDD CPI Inclusion INW UCP-C UCP-M

1. Eligibility Criteria (all criteria must be met for eligibility)(Refer to ARPA Prog. Guidelines for all criteria)

- | | |
|--|--|
| <input type="checkbox"/> Multnomah County Resident | Homeless or Eviction Pending |
| <input type="checkbox"/> Income at or below 65% Area Median Income (AMI) | No housing assistance from Mult. Co. IDD in last 6 mo. |

2. Verification of Income Eligibility

Check the box below for the number of individuals in the household:

Area Median Income Guidelines

Household Size	65% AMI
<input type="checkbox"/> 1	\$53,690
<input type="checkbox"/> 2	\$61,360
<input type="checkbox"/> 3	\$69,030
<input type="checkbox"/> 4	\$76,700
<input type="checkbox"/> 5	\$82,875
<input type="checkbox"/> 6	\$88,985
<input type="checkbox"/> 7	\$95,160
<input type="checkbox"/> 8	\$101,270
<input type="checkbox"/> > 8	See link below

Source: [2024 AMI Rents PHB](#)

Steps to Verify Income:

Household income eligibility is based on determining a household's annual income at the time of application, either using current monthly income to calculate the annual income (monthly income x12); or using the most recent year W-2 or tax return. To be eligible, annual household income must be below 65% AMI as outlined in the table above.

Step 1: List all income sources. If you are using income from the last 30 days (current monthly income), multiply the monthly income by 12 to calculate annual income. Collect documentation verifying income amounts.

If a person (or the entire household) has no income, please write "No Income" for that person(s). Declaration of Personal Income form is required for each zero income adult.

Acceptable documentation includes 30-day paystubs, most recent year W2, 1040, UI verification, SSI documentation, self-employment verification form, self-attestation income form.

Income Source	Income Earner	Monthly Gross Income
Total Monthly Income:		

Annual Income = (monthly income x 12)

Step 2: Compare annual income to eligibility table on page 1 to determine eligibility.

Documentation of Income

Applicants must submit documentation to verify income for all household members (except SNAP/food stamps).

Yes No - Written Verification for all household income will be submitted with this Intake Form

If any income documents are not readily available, applicant may be eligible to provide self-attestation below.

Self-Attestation of Income Eligibility - Declaration of Personal Income form required for each adult self-attesting income.

Household is unable to provide documentation due to:

- ☐ Accommodation for disability ☐ Lack of Technological Access ☐ COVID-19 Extenuating Circumstance

***If the household is unable to provide income documentation and does not meet one of the criteria listed above, the household may be able to self certify income if they live in a census tract with average incomes in the eligibility range. Mult. Co. IDD staff will screen for census tract eligibility.

3. Rental Verification

Is a lease or rental agreement available?

- ☐ Yes (Submit signed lease or rental agreement showing address, rental unit and monthly rent amount)
- ☐ No (must provide alternative documentation verifying address and monthly rent – i.e. past due notice, cancelled rent check showing correct address and unit)

If requesting for rent arrears: Is a documentation of rent arrears or rent owed available?

- ☐ Yes (submit documentation or alternative documentation showing name of renter, rental unit address, and the amount of rent arrears/rent owed breakdown)
- ☐ No (must provide explanation about why documentation is not available)

4. Eviction Notice for Non-payment of Rent – (required to receive assistance, if not homeless)

Has the household received an eviction/termination notice for non-payment of rent?

- ☐ Yes (if yes, must submit a copy of the eviction/termination notice with the application) ☐ No

5. Head of Household Information

Name (First and Last)

Current Address

New Address if Moving

Email

Phone Number

Landlord Information (to send payment)

Business Name

Property Manager if Different

Mailing Address for Payment

Email

Phone Number

6. Assistance Requested

Do you receive Section 8 or any other housing subsidy payments? ☐ Yes If ☐ No

yes, what is your portion of the rent at time of the ARPA application? \$ _____

Type of Assistance and Months being Requested: (Refer to ARPA Program Guidelines for list of eligible expenses)

7. Signature and Self-Attestation

"I certify that the information on this intake form is true and accurate to the best of my knowledge. In addition, I consent to the release of information in this application to the United States Department of the Treasury for any reporting or compliance purposes."

Client Signature _____

Date _____

Case Worker/Agency Staff Signature _____

Date _____

Case Worker/Agency Staff Contact Info: Email _____

Phone _____

***Note to Case Managers: Client Signature can be obtained following approval of assistance.**

Housing Specialist Use Only:

Paystubs: Pay stub 1:
Pay stub 2:
Pay stub 3:
Pay stub 4:

Other Income:

Total Gross Annual:

Fact specific proxy: Census tract code _____ with tract median income _____ %
•<https://geomap.ffiec.gov/FFIECGeocMap/GeocodeMap1.aspx>

Percent of Median Area Income (if known) ☐ 0-65% ☐ Over 65%