

Emergency Housing Relief Certification

I, _____, social security #: _____ as head of household,
head of household full name *SS#*
am applying for temporary housing assistance at _____ on _____
name of development *date of*
_____ due to the California Wildfires (the Major Disaster), which affected my residence at
application
_____ hereby certify that:
previous address, city, state, zip code

1. My household was displaced as a result of the Major Disaster listed above.
2. The following are members of my household (use back of form for additional household members):

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
<i>Name</i>	<i>SS#</i>	<i>Relationship to head of house</i>
3. The affected address listed above is/was my primary place of residence.
4. The affected address is located in a city, county, or local jurisdiction that is covered by the President's declaration of the Major Disaster and that is designated as eligible for Individual Assistance from FEMA because of the Major Disaster.
5. I understand that the housing assistance being offered to me is temporary and will end no later than 11/30/19 (12 months from 11/12/18) when the President declared the Major Disaster.
6. I understand that if my household chooses to remain in the unit after the end of temporary housing assistance period, all household members will be expected to be certified as eligible under the Housing Tax Credit program and that if my household is not eligible, I will promptly vacate the unit.

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. I understand that providing false representations herein constitutes an act of fraud, and that false, misleading or incomplete information may result in the termination of a lease agreement.

Applicant/Tenant Signature

Date

For management use:

Unit # to be occupied: _____

Date occupancy began: _____ Date occupancy expected to end: _____

Warning: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense, punishable by a fine or 5 years imprisonment or both, to knowingly or willingly make materially false, fictitious, or fraudulent statements or representations in any matter within the jurisdiction of a federal agency.

(2. CONTINUED) The following are additional members of my household:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
<i>Name</i>	<i>SS#</i>	<i>Relationship to head of house</i>