



TEXAS RENT RELIEF PROGRAM

TENANT CERTIFICATION

REV. 06/08/2021

I/We, above named Tenant(s), hereby certify that:

1. I/We are currently occupying the unit for which I/we am seeking assistance as my/our principal residence and have occupied the unit during the period of time for which the rental or utility arrears assistance, if any, is requested and will occupy the unit as my/our principal residence throughout the remaining months for which the assistance is provided.
2. I/We understand that if the Landlord and/or Utility Provider does not elect to participate, assistance payment may be made directly to me/us as the legally responsible party(ies) for the unpaid bill or future payment, and the payment must only be used for eligible costs as identified in this application. Use of payment received for any purpose other than the rent or utility assistance requested is subject to criminal penalty.
3. That if I/We qualified for the program by confirming having qualified for unemployment benefits after March 13, 2020, I confirm the information to be true and authorize the Texas Rent Relief Program to provide my information if needed, to the Texas Workforce Commission to verify my qualification..
4. To my/our knowledge, if the Unit for which I am receiving assistance is receiving Housing Choice Voucher or Project-Based Rental Assistance or is public housing, I/we are not receiving any other form of government or charitable assistance for the same expenses for the same month or months for which this assistance is requested. If I/we am receiving this kind of assistance, I/we have only requested assistance from the Texas Rent Relief program for the tenant-paid portion of rent and/or utilities.
5. I/We will not seek to obtain rental or utility assistance in the future for the same months of rental arrears, rent, utility arrears, or utilities covered by this assistance, and if I/we do receive such assistance I will report it to Landlord and/or Utility Provider using the contact information in my/our lease or utility bill statement, and to the Texas Rent Relief Program. If I receive an assistance payment directly, I/we will repay any duplicate assistance that I/we receive to the Texas Department of Housing and Community Affairs within 10 calendar days.
6. I/We will inform the Texas Rent Relief Program within ten calendar days if evicted from the Unit, if disconnected from Utility services, or if I/we no longer occupy the Unit as my/our principal residence during the period of assistance by calling the 1-833-989-7368.
7. I/We have provided a current written lease as part of the application, or if I/we have not provided a current written lease, I/we have provided proof of payment for the three most recent full months that a rent payment was made, and that the information I have provided in the Tenant Application regarding the terms of my/our lease, rent amount and/or utility arrears are true and accurate.



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8. If I/We have requested assistance for any late fees, and I/we certify that those late fees were incurred due to the impact of the COVID-19 pandemic on my/our household and were not accrued prior to March 13, 2021.
9. I/We understand that if determined to be ineligible, I/We can appeal the decision by following the appeal instructions at TXRentRelief.com
10. I/We understand and attest that if I/we qualified for this program by providing evidence that we qualify under another eligible program such as Head Start, SNAP, LIHEAP, TANF, VA benefits, or SSI that my/our household size is comprised of 6 or fewer members and that my/our household income does not exceed the applicable limit.

I/We understand and attest that if I/we qualified for this program by providing evidence that we qualify under WIC that my/our household size is comprised of 3 or fewer members and that my/our household income does not exceed the applicable limit.

I/We understand and attest that if I/we qualified for this program by providing a Tenant Income Certification, my/our household income does not exceed the applicable limit.

I/we confirm that our household income does not exceed the applicable limit.

11. Tenant acknowledges that all information collected, assembled, or maintained by the Texas Rent Relief Program pertaining to their application, except records made confidential by law or court order, are subject to the Texas Public Information Act (Chapter 552 of Texas Government Code) and the Texas Rent Relief Program must provide citizens, public agencies, and other interested parties with reasonable access to all records pertaining to this application subject to and in accordance with the Texas Public Information Act. Tenant acknowledges that a copy of this certification will be provided to the Landlord for their records.
12. I/We shall provide the U.S. Department of the Treasury, the U.S. Inspector General, the U.S. General Accounting Office, the Texas Comptroller, the Texas State Auditor's Office, the Office of Court Administration and the Texas Department of Housing and Community Affairs, or any of their duly authorized representatives, access to and the right to examine and copy records related to a payment made as a result of this application. If provided funds directly, I/we agree to keep records of payment to the Landlord for the later of seven years, or such records will be kept for the longer of seven years, after notice of a monitoring, audit, or litigation, has been provided, the matter has had a final disposition.
13. I/We have been provided a copy of this certification.
14. I/We may remain responsible for charges presented with my utility bill, such as district assessments, internet, or cooperative fees, that are presented separately from the charges for utility service.
15. I/We may remain responsible for charges authorized under the lease other than rent going forward, including but not limited to pet rent or trash pickup fees.



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16. The information I/We have provided is true, accurate, and complete, and if requested, I am able to provide documentation to prove my household's loss of income or additional expenses or proof of rent assistance past due. I/We understand that providing false, incomplete, or inaccurate information on application forms or seeking assistance for months in which assistance has been or will be provided, may result in termination of participation in the Program, up to 5 years of imprisonment and for each occurrence a fine of up to \$10,000.

My name is _____ (first, middle, and last name of the Tenant); my date of birth is _____, and my street address is _____, in the City of _____, the State of _____, with the Zip Code _____. I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____ (month), _____ (year).

Declarant (Named Tenant)

Date

My name is _____ (first, middle, and last name of the Tenant); my date of birth is _____, and my street address is _____, in the City of _____, the State of _____, with the Zip Code _____. I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____ (month), _____ (year).

Declarant (Named Tenant)

Date



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My name is _____ (first, middle, and last name of the Tenant); my date of birth is _____, and my street address is _____, in the City of _____, the State of _____, with the Zip Code _____. I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____ (month), _____ (year).

Declarant (Named Tenant)

Date

Reasonable accommodations will be made for persons with disabilities and language assistance will be made available for persons with limited English proficiency.

TEXAS DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS

Street Address: 221 East 11th Street, Austin, TX 78701 Mailing Address: PO Box 13941,
Austin, TX 78711

Main Number: 512-475-3800 Toll Free: 1-800-525-0657 Email: info@tdhca.state.tx.us
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