



# THE CITY of EAST ORANGE

44 CITY HALL PLAZA  
EAST ORANGE, NEW JERSEY 07018  
WWW.EASTORANGE-NJ.GOV

## COVID-19 Rental Assistance Grant Program

**THIS GRANT IS TO ASSIST EAST ORANGE RESIDENTS WHO ARE NOT RECEIVING RENTAL ASSISTANCE OR SUBSIDY AND WHO ARE FINANCIALLY IMPACTED BY COVID-19 PANDEMIC.**

Our nation and the world have been hit with economic hardships and health-related issues caused by the coronavirus pandemic. Mayor Ted Green and City Council in cooperation will administer \$600,000 in funding for relief as we navigate to our new normal. It is our goal to alleviate some of the burdens COVID-19 has placed on our most vulnerable East Orange residents.

**APPLICATIONS WILL BE ACCEPTED ON A FIRST COME FIRST SERVE BASIS  
ONLY COMPLETE APPLICATIONS WILL BE REVIEWED FOR APPROVAL AND AWARD**

**Monday, August 24, 2020 at 11am until funding has been expended**

**EAST ORANGE COVID-19 RENTAL ASSISTANCE GRANT APPLICATION** - The COVID-19 Emergency Rental Assistance Grant Program provides assistance to eligible residents of the City of East Orange who have experienced loss of reduction in hours or unemployment as a result of COVID-19 pandemic. To help lessen the outbreak's economic impact on residents, the program will provide emergency assistance to renters affected by shutdowns, closures, layoffs, reduced work hours, or unpaid leave due to the COVID-19 health crisis. Eligible households will receive assistance of **up to \$3,500 or payment** for up to three months' rent in arrears in a one-time, lump-sum payment made directly to property owners or management companies that agree to not evict said tenant/household. Federally subsidized units are not eligible to receive East Orange Pandemic Rental Assistance.

**Instructions:** Before you begin, ensure that you have the following information and required documents ready to submit for all family members. Submitted applications must be clear, have legible document images and be fully completed at the time of to be considered for approval and award. You are not able to save or return to a partially completed application. Completed applications are processed in the order they are received.

The East Orange Pandemic Rental Assistance Program is being administered on behalf of the City of East Orange by three local nonprofit agencies: NJ SHARES, Isaiah House and the East Orange Community Development Corporation. Please only submit ONE application to ONE agency. Duplicate applications will be discovered and not considered eligible for award.

You are encouraged to carefully review the eligibility requirements in accordance with the instructions outlined below before beginning the application. Incomplete applications will not be considered. Only upon completion of application requirements and submittal of required documentation will received applications be deemed eligible and considered for award.

### Housing Initiative Income Guidelines

The applicable income limits for determining program eligibility are published by the Housing Finance Corporation and are updated annually. The applicant's gross monthly household income (for the purpose of determining program eligibility) shall be calculated according to the HUD regulations identified in the Code of Federal Regulations at 24 CFR, Part 5. Income includes gross wages, retirement, social security, disability, unemployment and any other resources or benefits received by household members age 18 and older.

Income Limits	Household Members					
	1	2	3	4	5	6
80% Area Median Income	\$54,950.00	\$ 62,800.00	\$70,650.00	\$78,500.00	\$84,800.00	\$ 91,100.00

## 1. Identification *(Submit ONE ID for every family member aged 18 years or over):*

Any unexpired government issued ID, valid student ID, valid driver's license, valid passport, etc. The ID must belong to the person whose names are on the application. If the address on the driver's license does not match the residential address listed, additional proof of residence is required. For example: utility/phone bill, credit card statement, paystub, bank statement, 1040 tax statement. If the ID provided does not contain an address (For example: valid passport, birth certificate) additional proof of residence is required.

## 2. Social Security Card for the Applicant

If Social Security card is unavailable, please provide a document with the applicant's name and Social Security number shown together on the same document. (For example: paystub with social security number, Social Security award letter or statement)

## 3. Verification of Income Loss *(Submit ONE of the following for each household earner):*

- Copy of application for Unemployment Insurance/Pandemic Unemployment Assistance
- Letter from employer regarding reduced hours or job loss specifying loss is not due to poor job performance while employed.
- Self-employed individuals must submit a 1040 tax form along with a signed statement indicating income has been affected by COVID-19 and year to date bank statement or profit loss statement.

## 4. Verification of Income *(Submit gross monthly income for each household earner):*

The East Orange Pandemic Rental Assistance Program requires proof of the last four consecutive weeks of income from the date of the application for all contributing household members. This includes paystubs, current unemployment determination letter along with proof of receipt of the past 30 days of unemployment benefits, Social Security statement or award letter for the current year, rental income, pension statement, alimony, child support, current bank statements showing identified direct deposits with name and address. If there are weeks entered with zero income, an explanation is required. Zero Income Affirmation is to be completed, signed, and dated by the applicant when there are adult household members without income. Please note that applications submitted without proof of income for the four consecutive weeks prior to application will be rejected.

- Unemployment: Current unemployment determination letter along with proof of receipt of last 30 days of unemployment benefit.
- If paid in cash by employer: Employer must submit an official written certification with the following information:
  - Company Name
  - Employer Tin #
  - Company Address
  - Phone Number
  - Employee's Name on document
  - Hours worked
  - Hourly Rate
  - Total Pay

## 4. Verification of Income Cont. *(Submit gross monthly income for each household earner):*

- **Rental Income:** If the client is a landlord, the current lease and a recent rental receipt within 30 days of application date.
- **Social Security Income:** Award letter for the current year.
- **Pension Income:** Copy of most recent check or letter verifying lifetime receipt of benefits.
- **Alimony and /or Child Support:** Proof of Alimony and/or Child Support and payment frequency must be supplied.

## 5. Proof of Tenancy and Rent *(All of the below is required to prove tenancy and rent)*

- Tenancy Agreement / Notice of Rent Increase (Signed by both parties)
- Copy of Late Rent Notice or most recent account ledger showing arrears
- Letter/Affidavit from Landlord confirming tenancy and monthly rent and the LL's agreement to not evict if arrears are paid.

## 6. Required Landlord Contact Information

- Name (First Name, Last Name, Company Name):
- Address:
- Phone Number:
- Fax:
- Email:

## 7. Other Required Forms *(Both the tenant and landlord's documents are required for the rental supplement to be paid):*

- **East Orange Pandemic Rental Assistance Program Tenant Information Release Form:** Signed and dated tenant information release form to be provided to the applicant's landlord.
- **East Orange Pandemic Rental Assistance Program Co-Tenant Consent Form (if applicable):** Signed and dated consent form acknowledging the East Orange Pandemic Rental Assistance Program application submission and program parameters.
- **Landlord Information Verification Form:** Completed and returned to agency by landlord.
- **Agreement Not to Evict:** Agreement signed by landlord agreeing to accept payment in arrears and not to evict tenant providing said arrears are paid by the East Orange Pandemic Rental Assistance Program.
- **W-9:** Completed and returned to agency by landlord with Agreement Not to Evict.

## Apply Now

If you are eligible for the rental supplement, your landlord will receive an email advising them to complete the landlord affidavit. The information below is collected to determine program eligibility and for demographic purposes only. East Orange Pandemic Rental Assistance does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities and operations.

### APPLICANT INFORMATION

Full Name: \_\_\_\_\_

Full Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

**Have you received help for your rent before?** Yes No

**If yes, who helped you and when?** \_\_\_\_\_

**Status of Residence:** US Citizen Permanent Resident Other: \_\_\_\_\_

**Race:** Asian-Pacific Black Hispanic Native American White Other: \_\_\_\_\_

**Gender:** Female Male Other: \_\_\_\_\_

**Are you a U.S. Veteran?** Yes No **Are you on active duty now?** Yes No

---

---

**HOUSEHOLD INCOME (Proof of all income is required.)**

Total number of persons living in household: Adults (Include yourself): \_\_\_\_\_  
Number of Minor Children and their ages: \_\_\_\_\_

**Monthly Gross Income** (before deductions / include income for all adults in household): \_\_\_\_\_

**Income Source(s):** Work Unemployment Worker's Compensation Veterans Benefits

Pension SSI Public Assistance Social Security Trust Interest Dividends

Alimony Child Support Other \_\_\_\_\_

---

---

**TELL US ABOUT YOUR SITUATION**

Please describe your temporary financial crisis and the nature of your housing problem.

**RESIDENCE AND SUBSIDY**

Do you have a written lease? Yes No

Date you moved into your housing: \_\_\_\_\_

Are you a tenant of a federally subsidized landlord? Yes No

Do you receive rental assistance for your housing? Yes No

If yes, what kind of rental assistance do you receive? (Please check all that apply)

Section 8 voucher

SRAP voucher

Section 8 project-based assistance

Public housing (pay rent to housing authority)

TRA (Temporary Rental Assistance)     Other \_\_\_\_\_

What entity administers your rental assistance? \_\_\_\_\_

If you currently owe rent, how much rent do you owe? \_\_\_\_\_

What was the last month for which you paid the rent? \_\_\_\_\_

**Eviction Action (if applicable)**

Did you receive an eviction Complaint from the court?             Yes     No

What is the docket number on the Summons or Complaint?    LT - \_\_\_\_\_

Has your landlord contacted you about being evicted? If so, how?  
\_\_\_\_\_

Is there any other pertinent information we should know? \_\_\_\_\_  
\_\_\_\_\_

**APPLICANT CONTRIBUTION**

---

---

Are you able to contribute/pay a portion of the rent that is owed?    Yes     No

If yes, how much can you contribute/pay? \_\_\_\_\_

If no, why not?

**Certification:** *I certify that the foregoing statements made by me are true. I am aware that if an East Orange Pandemic Rental Assistance program provider discovers that any of the foregoing statements made by me are willfully false, then the East Orange Pandemic Rental Assistance Program may immediately terminate all assistance and may deny any future application(s) made by me. At this time, I release information regarding my current employment status to the East Orange Pandemic Rental Assistance Program and the agency providers. I also understand that the East Orange Pandemic Rental Assistance Program may contact my landlord, lender, or tax collector at this time.*

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



# THE CITY *of* EAST ORANGE

44 CITY HALL PLAZA  
EAST ORANGE, NEW JERSEY 07018  
WWW.EASTORANGE-NJ.GOV

---

## Tenant Information Release Form

I authorize the release of information concerning my stay at properties managed by \_\_\_\_\_. This information can include but is not limited to the duration of stay, rent amounts, payment history, and issues concerning compliance with or infringement on the policies and provision in the Housing Agreement. This information may be provided to the East Orange Pandemic Rental Assistance Program provider with whom I am seeking rental assistance.

\_\_\_\_\_  
**Tenant Name**

\_\_\_\_\_  
**Tenant Signature**

\_\_\_\_\_  
**Date**



# THE CITY *of* EAST ORANGE

44 CITY HALL PLAZA  
EAST ORANGE, NEW JERSEY 07018  
WWW.EASTORANGE-NJ.GOV

## Zero Income Affirmation

This page is to be completed and signed by the applicant when there are adult household members without income.

I \_\_\_\_\_, affirm that the following adult household members  
have zero income and do not contribute to my household expenses:

---

---

---

---

---

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



# THE CITY *of* EAST ORANGE

44 CITY HALL PLAZA  
EAST ORANGE, NEW JERSEY 07018  
WWW.EASTORANGE-NJ.GOV

## Co-Tenant Consent Form

This form is to be completed and signed by a co-tenant/co-borrower of a residence that has applied for East Orange Pandemic Rental Assistance who is not the applicant but is a co-tenant on the lease.

By signing this consent form, I acknowledge an application has been submitted for East Orange Pandemic Rental Assistance for a residence at which I reside. I further certify that I will not and have not made a duplicate application for pandemic rental assistance or relief for the rental arrears associated with this application and the lease for the below stated property address in which I reside with the applicant.

**Applicant:** \_\_\_\_\_

**Name of Co-tenant:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Co-tenant's Name:** \_\_\_\_\_

**Co-tenant's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



**Please email the completed, signed application along with all required documents and forms to [eastorange@njshares.org](mailto:eastorange@njshares.org)**