



CITY OF DUBLIN RESIDENTIAL RENT ASSISTANCE PROGRAM



DOCUMENTATION REQUIRED: Before you start your application, please refer to the [City's COVID-19 Residential Rent Assistance Program](http://www.dublin.ca.gov/RRAP) webpage (www.dublin.ca.gov/RRAP) for a list of documentation you are required to upload and submit with your application.

The Dublin COVID-19 Residential Rent Assistance Program (“Program”) is intended to reduce potential risk of homelessness and preserve housing stability for existing Dublin residents. The Program seeks to achieve this by assisting those who are suffering a temporary financial setback due to the COVID-19 public health emergency and need help with delinquent rent payments. Funding is provided by the American Rescue Plan Act (ARPA) and funding must benefit lower-income households. Please refer to the [Program Guidelines](#) for complete details.

This is an application to request funds from this Program. For more information or assistance completing this application, please contact City of Dublin staff at 925.833.6650 or email RentAssist@dublin.ca.gov.

PRIMARY LEASEHOLDER INFORMATION

First Name: _____ Last Name: _____

Property Address: _____

Contact Phone: _____ Email: _____

Current Government-Issued Type of Identification (Driver’s License, ID Card, Passport, etc.): _____

ID Number: _____ Expiration Date: _____

HOUSEHOLD INFORMATION

How many people are in your household (incl. yourself): _____

| Name | Age | Related to Property Owner (through blood/marriage) | Receives Federal Housing Assistance (e.g. Section 8 vouchers) |
|------|-----|---|--|
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LANDLORD/PROPERTY MANAGER INFORMATION

Representative Name: _____ Company: _____

Address: _____

Phone: _____ Email: _____

Property Name/Type: _____



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RENT INFORMATION

Contract Rent Amt.: \$ _____

Past Due Rent Amt. (since March 17, 2020): \$ _____

Have you/your Landlord (on your behalf) received other rental assistance since March 17, 2020 (including first round of City of Dublin Rental Assistance Program): Y _____ N _____

If you marked YES, please list all applicable information below.

| Source | Amount | Applicable Months & Year |
|--------|--------|--------------------------|
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Requested Assistance Amt. (max. \$6,000 per household or six-months' rent, whichever is less): \$ _____

Applicable Months: _____

EMPLOYMENT/INCOME INFORMATION

Did you receive rental assistance from the first round of the City of Dublin Rental Assistance Program? Y _____ N _____

Did you experience a loss/reduction of employment since March 17, 2020?: Y _____ N _____

Was your household income reduced as a result of COVID-19?: Y _____ N _____

Was your household income at or below 120% AMI* for 1/1/20 through today?: Y _____ N _____

***Alameda County Area Median Income (AMI) Limits 2022**



Source: California Department of Housing and Community Development, 2022
*Median Income is not an official income limit, for reference only.



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2020 Total Gross Household Income (all sources): \$ _____

2020 February Household Monthly Income (all sources): \$ _____

2021 Total Gross Household Income (all sources): \$ _____

2022 Current Household Monthly Income (all sources): \$ _____

CERTIFICATION

By submitting this application, I confirm and agree to the following:

- I certify that the information provided in this application is true and correct to the best of my knowledge, under penalty of law and verifiable by applicable government agencies.
- I certify that I am unable to afford to pay the stated past rent due.
- I certify that I have reviewed the [Program Guidelines](#) and my household meets the Program Eligibility requirements to participate in the Program, including that the loss of income was a direct result of the COVID-19 pandemic.
- I certify that I and the members of my household are not related by blood or marriage to the property owner.
- I understand that if members of my household or I provide any false information or misrepresentation during the application process that it will be grounds for denying this application to the Program and I am liable to return any funds provided by the Program.
- I understand in submitting this application I am not guaranteed financial assistance from the Program.
- I authorize the City of Dublin to release the information contained in this application to any funder of this Program to verify my eligibility. This may also include any other agency or property management company/property owner who could be helpful in clarifying my situation.
- I acknowledge that some of the information submitted through this application is a public record and may be subject to disclosure under the California Public Records Act.
- I understand that the City of Dublin may determine in its sole discretion whether information submitted through this application is subject to disclosure under the California Public Records Act or through another legal process.
- I understand that this information is subject to audit by the City of Dublin, or other entities as required by the Program funding sources including the American Rescue Plan Act (ARPA).

I agree with the above statements.

Signature: _____ Name: _____ Date: _____

NON-DISCRIMINATION POLICY: The City of Dublin does not discriminate against any person on the grounds of race, color, religion, national origin, ancestry, sex, gender, gender identity, gender expression, sexual orientation, marital status, familial status, source of income, genetic information, medical condition, physical disability, mental disability, or any other category protected by law.



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UPLOAD REQUIRED DOCUMENTATION

The following documents are required to be submitted with your application to participate in the Program. Applications will be processed as they are received, May 20 through June 20, 2022, with qualified applicants being chosen via lottery process if funding requests exceed available funding. **Missing or incomplete information may delay or disqualify the processing of your application.**

To upload documents, click on the attachment (paperclip) icon below, then click “upload a file” and select the file(s) from your computer. Accepted file formats include .doc, .pdf, .gif, .jpg, .png, and more. When finished adding attachments, click “DONE”.

CHECKLIST

- Valid photo identification** for applicant/primary leaseholder (i.e., valid driver’s license, State ID, passport, etc.).
- Current signed residential lease agreement** in the applicant’s name for property in Dublin.
- Letter signed by your landlord or property manager** noting your name, amount and applicable dates of delinquent rent occurring on or after March 17, 2020, amount of any funds received on the tenant’s behalf for rent that is past due since March 17, 2020, and confirmation that you are otherwise in good standing regarding the terms of the lease (including being current with the terms of any applicable payment plan for delinquent rent owed prior to that date). **Template included for convenient replication/reference.**
- Verification of 2020 & 2021 household income** for all wage-earners. Examples of such documentation include any of the following:
 - Federal Tax return, or
 - W-2 form(s) for all places of employment, or
 - Final December paystub(s) from all places of employment showing total annual compensation, or
 - Letter from government agency or printout of government benefits (i.e., Social Security, unemployment insurance, CalWorks, etc).
- Verification of 2022 household income** for all wage-earners. Examples of such documentation include any of the following:
 - Most recent paycheck stub(s) or letter from employer(s) stating current income.
 - Letter from government agency or printout of government benefits (i.e., Social Security, unemployment insurance, CalWorks, etc.).
- Verification of COVID-19 financial impact.** Examples of such documentation include any of the following:
 - Termination Notice from employer, or
 - Unemployment Award Letter demonstrating reduced income, etc.
 - Signed notice or letter from employer notifying of reduced hours/pay or
 - 2019 Federal Tax Return, or
 - Payroll check(s) or pay stub(s) demonstrating reduced income, or
 - Documentation of impact resulting from childcare needs or caring for family member with COVID-19, etc.