

**CITY OF LOS ANGELES**  
**2021 COVID-19 EMERGENCY RENTERS ASSISTANCE PROGRAM (ERAP)**  
**Tenant Participation Agreement**

Applicant Tenant:	
Tenant Current Rental Unit Address:	
Tenant Mailing Address (If different than the physical address of the rental unit):	
Tenant Email Address:	Tenant Phone Number:

<b>TO BE COMPLETED BY THE TENANT</b>	
<b>Please complete the below information regarding your landlord. Your landlord is the person that you pay your monthly rent to and/or is in charge of managing the property and aware of your tenancy.</b>	
LANDLORD NAME (PLEASE PRINT):	
PROPERTY MANAGEMENT COMPANY (if applicable):	
LANDLORD MAILING ADDRESS:	
EMAIL ADDRESS:	
PHONE NUMBER:	
<p>I am applying for the City of Los Angeles Emergency Renters Assistance Program (ERAP). This Program can provide eligible tenants up to 12 months of financial assistance towards back rent owed from April 1, 2020, to March 31, 2021. If the landlord does not wish to participate in the program, eligible tenants may receive 25% towards unpaid and/or future rent. These rules are in alignment with regulations established by California Senate Bill 91. The City of Los Angeles and its partner agency will not pay for any rent not described in this agreement, late fees, return check fees, or any other related fees or cost. This assistance may be terminated if either I or my Landlord are found to be ineligible, or for failure to submit all required documents within the required period which include the following:</p> <p>An applicant must provide:</p> <p><b><u>Proof of Identification</u></b></p> <p>A current or within two years of expiration government-issued photo identification.</p> <ul style="list-style-type: none"> <li>• State-issued Driver’s License or ID, Passport; or</li> <li>• Government/Consulate Card, Permanent Resident Card or Visa; or</li> <li>• Military or other Government Identification.</li> </ul> <p><b><u>Proof of Residential Tenancy</u></b></p> <ul style="list-style-type: none"> <li>• Rental Agreement/Lease with applicant’s and landlord’s name and address; or</li> <li>• A notice provided by the current landlord addressed to the tenant with the landlord’s name and the landlord’s address, phone number, or email address; or</li> <li>• A Bank statement with the applicant’s name and address; or</li> <li>• A USPS postmarked letter from a government or official agency; or</li> <li>• Receipt of previously paid rent provided by your landlord with applicant’s and landlord’s name and address.</li> </ul>	

**Proof of Current Rent Amount (only provide if the current rent amount is not included in the above documents)**

- Lease/Rental Agreement or an addendum to the lease agreement including a Notice of Rent Increase that was signed on or after January 1, 2020; or
- Rent ledger, rent receipts from no earlier than March 1, 2020, or a Notice to Pay Rent or Quit that lists the current monthly rent and the amount owed; or
- Any document that states current monthly rent.

**Proof of Annual 2020 Household Income for All Household Members**

- 2020 household tax returns (AGI), Form 8879, Interest income on 1099, or Net Profit on the Schedule C; or if a household is not required to complete a tax return, a Form W-2 for all wage earners: Wages, tips, and other compensation or other tax statements; or
- Unemployment statements or benefits letters (with name, amount of benefit, and dates of coverage); or
- Social Security and Social Security Disability Insurance statements or benefits letters (with name, amount of benefit, and dates of coverage); or
- Documentation of current participation in any one of the below (with name, amount of benefit, and dates of coverage):
  - Medicaid, known as Medi-Cal in California; or
  - Women, Infants, and Children (WIC) benefits; or
  - Free and Reduced Lunch participation; or
  - Supplemental Nutrition Assistance Program (SNAP), known as CalFresh in California; or
  - Food Distribution Program on Indian Reservations (FDPIR); or
  - Temporary Assistance for Needy Families (TANF), known as CalWORKs in California; or
  - School Nutrition Programs (SNP), such as the Free and Reduced Lunch program for California families; or
  - General Relief; or
  - Veterans Benefits; or
  - Any household income-based state or federally funded assistance program for low-income persons or households; or
  - Any locally operated assistance program for low-income persons or households that requires household income verification and uses federal income limits
- I do not have any documentation to prove my annual 2020 household income. I will complete a self-attestation form under penalty of perjury.

**Proof of Monthly 2021 Household Income for All Household Members**

- Employer statement with employee name, dates of employment, income earned, and the employer's name and the employer's address, phone number, or email address; or
- Two recent consecutive pay stubs for all wage earners (use gross pay) (Non-consecutive pay stubs is acceptable for entertainment, construction, or other like industries).
- I do not have any documentation to prove my monthly 2021 household income. I will complete a self-attestation form under penalty of perjury.

**Proof of Unemployment and/or Financial Hardship Due to COVID-19**

- Unemployment benefits/insurance statement/letter showing household member's name and benefit amount; or
- Layoff, Work Furlough, or Reduction letter from employer (with employer name and at least employer's address, phone number, or email address) with employee name; or
- Letters of termination; or
- Two consecutive pay stubs (use gross pay) (Non-consecutive is acceptable for entertainment, construction, rideshare, or other industries alike) or recent bank statements which must have two itemized statements (no summaries or screenshots); or
- Last-received pay stub with employer's information; or
- Evidence of application for unemployment benefits; or

- Evidence of expired unemployment benefits, including unemployment benefits provided through the CARES Act; or
- Medical expenses related to COVID-19; or
- A letter addressed to a household member from childcare or adult services provider if service was discontinued; or
- Employer statement with employee name, dates of employment, income earned, and with the employer's name and the employer's address, phone number, or email; or
- For self-employed persons, tax records, statements, or other documentation of loss of income; or
- I do not have any documentation to prove my financial hardship due to COVID-19. I will complete a self-attestation form under penalty of perjury.

**Evidence of Household at Risk of Experiencing Homelessness or Housing Instability**

- 3 or 15-Day Notice to Pay Rent or Quit; or
- Change in Terms of Tenancy regarding a rent increase effective on or after April 1, 2020; or
- Change in Terms of Tenancy to Terminate Tenancy effective on or after April 1, 2020, or an eviction notice; or
- A statement or rental ledger from the Landlord including rent in arrears by month (to include applicant name and address of the rental unit, landlord name, and landlord contact information). Landlord statements need to specify the amount of rent in arrears and break out rent and other rent-related expenses paid for by the tenant; or
- Other tenancy related notice dated on or after April 1, 2020; or
- None, I have not received any notice.

**LA City ERAP Tenant Participation Agreement**

- Required: LA City Tenant Participation Agreement.

**TENANT CERTIFICATION**

I UNDERSTAND AND CERTIFY THAT: All of the information and supporting documentation that I have provided with this application is accurate and correct to the best of my knowledge. I understand that neither the City of Los Angeles, the Housing Rights Center, nor its affiliates are providing me with legal representation, counsel, or advice and will not represent me in any legal action that might arise from this agreement or concerning my tenancy. I understand that by applying for this program I am not guaranteed financial assistance as this program has limited funding. I may be held liable, prosecuted to the fullest extent of the law, and have to repay this assistance and face legal penalties if I commit fraud or knowingly assist a Landlord to commit fraud to receive this assistance.

**THE TENANT MUST SIGN AND DATE:**

I certify or declare under the penalty of perjury under the laws of the state of California that the foregoing is correct and true.

TENANT NAME (PLEASE PRINT):

TENANT SIGNATURE:

DATE: