

LANDLORD ASSISTANCE APPLICATION

Please note that Federal law permits Landlords to complete the Tenant Application as well as the Landlord Application, so long as the tenant signs the completed application (electronic signature permitted) and documentation of the application is provided to the tenant by the landlord.

PREVIOUS APPLICATION

Have you previously applied for the TLAC Program?

- Yes
 No

LANDLORD INFORMATION

1. What is the landlord's name? _____
2. What is the landlord's phone number? _____
3. What is the landlord's e-mail address? _____

4. What is the landlord's address? (Street, Unit #, City, County, and Zip)? _____

5. Please provide the landlord's social security number, tax identification number or DUNS number. _____
6. What is the address of the rental property? _____

7. Is the rental property located in DeKalb County?
 Yes
 No
8. Is there a current lease?
 Yes
If yes, what is the expiration date of the current lease?
Please submit a copy of the lease and any documentation of payments received (including bank statements, declared taxable income or personal ledgers) pursuant to the lease when you submit your application. Documentation is required.
- No
9. What is the monthly rent? _____
10. What is the amount of past due rent owed by the tenant accrued since March 31, 2020? _____

Please sign the document by typing your name and date.

Please submit a copy of any notice of past due rent owed by the tenant.

11. If applicable, what is your Court Case number? _____

Please submit a copy of the Magistrate Court Notice if applicable.

12. Is the rent for this property subsidized in any way to the best of your knowledge? If so, please describe the source of said subsidy and the amount of the subsidy, with a designation of any known federal government sources of a subsidy. This includes any subsidy that has been received or is pending related to COVID-19 relief efforts. _____

Please submit a copy of any documentation of said rental assistance subsidy.

TENANT INFORMATION

13. What is the name of the tenant? _____

14. What is the tenant's date of birth? _____

15. What is the tenant's race? _____

Mark only one.

- American Indian or Alaska Native
- Asian
- Black or African-American
- Native Hawaiian or Other Pacific Islander
- White
- Other

16. What is the tenant's ethnicity? _____

Mark only one.

- Hispanic/Latino
- Non-Hispanic/Latino

17. What gender does the tenant identify as? _____

Mark only one.

- Male
- Female
- Transgender Female to Male
- Transgender Male to Female
- Non-Conforming

18. What is the tenant's annual household income? _____

Please submit a copy of wage statement(s), unemployment benefit statement(s), or tax return(s) when you submit your application. Documentation is required.

19. How many total people live in the household? _____

20. How many adults live in the household? _____

21. How many children live in the household? _____

Please sign the document by typing your name and date.

22. Has one or more individual within the household experienced any of the following conditions since March 31, 2020? Please check all that apply:

- Been Unemployed for more than 90 days.
- Qualified for unemployment benefits.
- Experienced a reduction in income directly or indirectly due to COVID-19.
- Incurred significant costs directly or indirectly due to COVID-19
- Experienced other financial hardships directly or indirectly due to COVID-19.
- None of the above apply.

Please attach documentation of the unemployment (including date of termination and name of prior employer), approval for unemployment benefits, reduced income, and costs or other financial hardship if you have such documentation when you submit your application.

23. Does the tenant have past due utilities?

- Yes
- No

24. If yes, list the name and contact phone number of the utility company and how much you have accrued in arrearage since March 31, 2020 on all that apply. *(If tenant pays utilities to Landlord, put Landlord as the company name)*

a. Water: Amount \$ _____ Company _____ Phone _____
Account number: _____

b. Electricity: Amount \$ _____ Company _____ Phone _____
Account number: _____

c. Gas: Amount \$ _____ Company _____ Phone _____
Account number: _____

d. Sanitation: Amount \$ _____ Company _____ Phone _____
Account number: _____

Please submit a copy of any past due and pending utility bills noted above when you submit your application.

25. If the tenant is leaving the current property, does the tenant have a new rental agreement?

- Yes
- No

If yes, what is the name, and contact information of the new landlord? _____

What is the monthly rent? _____

Please submit a copy of any documentation of said prospective rental agreement.



PARTNERS
DeKalb County Government
DeKalb County Magistrate Court
DeKalb County Clerk of State & Magistrate Courts
DeKalb County Marshal's Office
Atlanta Legal Aid
Goodwill of North Georgia
DeKalb Stroke Resolution Center
Housing Authority of DeKalb County

- 26. What is the Tenant's email address? _____
- 27. What is the Tenant's phone number? _____
- 28. If the Landlord or Tenant are represented by an attorney, please provide their contact information below. _____

DECLARATION

Under the penalty of perjury, I declare the information provided in this application is true and correct to the best of my knowledge.

All payments received from DeKalb County pursuant to this application shall be used to satisfy their rent and utility obligations.

WAIVER

I hereby acknowledge that this application for rent assistance in no way guarantees a resulting grant of assistance. I further acknowledge and agree that I voluntarily and freely submit this application recognizing that DeKalb County is not liable for the security of any personal information provided with this application and I waive any and all claims against DeKalb County, it's officials and employees, known or unknown, resulting from or related in any way to this application and any of the personal information included with this application. To the extent I have provided personal information for others in my household, I indemnify and hold harmless DeKalb County and its officials and employees for any actions or claims resulting from my submission of that information.

Tenant Signature

Date

Landlord Signature

Date

Please sign the document by typing your name and date.