

Emergency Rental Assistance Program Information

Thank you for contacting Community Action Partnership of Hennepin County (CAP-HC) about the **Emergency Rental Assistance Program**. This packet includes information about the program, eligibility, required application materials, and instructions for submitting your application. It also includes forms that must be completed as part of your application.

Please review the information in this packet carefully to ensure that you are eligible for the program and your application materials are submitted correctly.

ABOUT THE PROGRAM

CAP-HC has limited funding to provide a one-time payment for eligible households for either:

- Emergency rental assistance up to \$1,000 per household,
or
- By paying up to \$1,000 for the security deposit and/or first month of rent per household.

PROGRAM ELIGIBILITY

To be eligible for the program:

- Applicants must:
 - Live in Hennepin County.
 - Not receive a rental subsidy, such as an MPHA or Section 8 subsidy.
 - Have household income at or below Federal Poverty Income Guidelines—see chart below.
 - **If seeking security deposit assistance:** Have a denial letter from Hennepin County Emergency Assistance or other rental assistance provider.
- Applicants may only apply to CAP-HC’s Emergency Rental Assistance program every 24 months.

Eligibility at or below 200% of Federal Poverty Income Guidelines		
Household Size	Household Income	
	Monthly	Annual
1	\$2,510	\$30,120
2	\$3,407	\$40,880
3	\$4,303	\$51,640
4	\$5,200	\$62,400
5	\$6,097	\$73,160
6	\$6,993	\$83,920
7	\$7,890	\$94,680
8	\$8,787	\$105,440

REQUIRED APPLICATION MATERIALS

To Apply for Emergency Rental Assistance Program:

- Complete an Intake Form, which can be downloaded at caphennepin.org/applications.
- Complete a Rental Assistance Authorization to Release Information form (page 3 of this packet).
- Provide proof of the last 30 days of income for all adults in the household.
 - This includes all sources of income, such as wages, public benefits, social security, child support, etc.
 - If you have not received any income for the last 30 days, complete the Verification of Zero Income form (page 4 of the Intake Form).
- Provide proof of the household size. Examples include a lease listing all household members, a current tax return, or a benefits statement
- Provide proof of the Hennepin County address. Examples include a utility bill, benefits statement, or current tax return.
- Provide a copy of your most recent lease or notice of approval for tenancy.
- **If seeking security deposit assistance:** Provide a copy of a denial letter from Hennepin County Emergency Assistance or other rental assistance provider.

HOW TO SUBMIT YOUR APPLICATION MATERIALS

Please Note:

- Your application is not complete until we receive all required application forms and documentation as specified in the “Required Application Materials” section of this packet. **If your application is submitted without all required materials, it will not be processed.**
- Allow up to 30 days to process your application.
- Submitting an application does not guarantee approval.

You may submit your application forms and documentation as specified above in one of the following ways:

- **Email** your materials to: rentalassistance@caphennepin.org
- **Mail** your materials to: CAP-HC Emergency Rental Assistance
7101 Northland Circle N, Suite 123
Brooklyn Park, MN 55428
- **In person:** Drop off your materials at one of CAP-HC's offices (Brooklyn Park, Bloomington, Minneapolis). Addresses and hours can be found at caphennepin.org/locations.



Rental Assistance Authorization to Release Information

This form gives Community Action Partnership of Hennepin County (CAP-HC) staff permission to contact your landlord and/or property manager to gather the information specified below in order to 1) complete your Emergency Rental Assistance program application, 2) verify your eligibility for the program, and 3) provide rental assistance if it is determined you are eligible for the program. Though you may refuse to provide this authorization, without it, CAP-HC will not be able to process your application or provide assistance.

Name of Landlord and/or Property Manager: _____

Return information to: ATTN: Rental Assistance
7101 Northland Circle N, Suite 123
Brooklyn Park, MN 55428

Address: _____

Phone Number: _____

Counselor: _____

Direct Phone: _____

Email Address: _____

Main Office Phone: 952-933-9639

Email: rentalassistance@caphennepin.org

I authorize the property contact above to provide the information initialed and checked below with CAP-HC staff. *Each item must be initialed and checked by client prior to signing.*

Initial Check

- _____ My name, address, and phone number
_____ The names, dates of birth, and social security number of my children
_____ Information on resources, benefits, and services I receive from YOU or YOUR programs
_____ Information about my housing payments and history (rented or owned)
_____ Property Address (please provide your address): _____

- I understand that information CAP-HC has about me may be given to or shared with people or organizations according to CAP-HC's privacy policy.
- I understand that I am not required to authorize release of information. I also understand that without my authorization for release of this information, CAP-HC will not have the information needed to provide assistance.
- I understand **this release will expire one (1) year after I have signed it.** I also understand that I can cancel this release at any time, but cancellation will not affect information released before I cancelled my consent.
- I am providing my signature electronically by typing my first and last name below.

Signature of Participant(s): _____ / _____ Date: _____

Printed Name(s): _____ / _____

Name of person signing for participant: _____ Reason Unable to Sign: _____

Signature of person who explained this form and your rights: _____

