

Homeless Housing Operations and Services Certification of Payment Obligation/Potential Eviction from Friend or Family

Applicant already lives with friend/family and is being evicted Complete all sections below. Applicant is moving in with friend/family Complete sections 1-5 below. Move In Date:	
1. Client Information	
Name	
Phone	Email
Address where applicant is staying or will stay	
Street	
City	State/ZIP Code
2. Friend/Family Information	
Name	
Phone	Email
Address where rent p	ayment should be sent
Street	
City	State/Zip Code
3. Rental and Payment Information	
Agreement End Date	(enter date) OR Month-to-Month Agreement
Amount of Payment Required	
Past Due	
Rent	Total amount past due
	Months for which payment is past due
Utilities	Total amount past due
	Months for which payment is past due
Current or Anticipate	
Rent	Monthly Amount
Utilities	Monthly Amount
Complete the following for utility payments	
Utility provider	
Account number	
4. Client Certification	
I certify that the above information is true and accurate to the best of my knowledge.	
Client Signature	Date
5. Friend/Family Certification	
I certify that I will accept the above payment(s) to provide housing for the applicant. I am not in the business of rental	
real estate as defined in the Landlord Tenant Act, however I do provide safe and habitable housing.	
Friend/Family Signati	ıre Date
6. Friend/Family Certification of Eviction (<i>Required only for clients being evicted</i>)	
I certify that I will evict the applicant within 14 days if I do not receive the above payment(s).	
Friend/Family Signature Date	