

ERAP Landlord Certification Form

As the landlord for this rental unit and household, I: Agree to participate in the program
 Decline to participate in the program

Landlords who agree to participate in the program and receive payment directly from ERAP are required to meet the following terms and conditions. Please initial next to each statement:

_____ **ACCURACY**

I certify that all the information provided in the application regarding my ownership of the rental property, the tenant's rental obligation, and total amount of rent owed provided in the application are correct and complete to the best of my knowledge. I understand that providing false statements or information is grounds for termination of assistance and is punishable under federal law.

_____ **EXISTING EVICTION FILINGS**

I agree to cancel/rescind all eviction filings currently pending against this tenant.

_____ **NEW EVICTION FILINGS**

I agree not to file any new eviction cases for the duration of prospective rental assistance being provided through ERAP, or a minimum period of 30 days, whichever is longer.

_____ **LEASE RENEWAL**

I agree to extend the tenant's lease or renew the lease if it has or is scheduled to expire prior to the end of the rental assistance being provided, but for a period no less than 90 days.

_____ **DEBT COLLECTION**

I agree to immediately stop all debt collection efforts against the tenant for arrears that will be paid off by the Emergency Rental Assistance Program, and not pursue debt collection in the future for the debt covered by the Emergency Rental Assistance Program.

_____ **USE OF PAYMENT**

I certify that any payment of ERAP funds made directly to me for the purpose of paying rent on the household's behalf will only be used for the intended purpose.

Landlord Certification

Landlord Name _____ Signature _____ Date _____

Note: Landlords must attach a completed W-9 form to application in order to process payment.

