

EMERGENCY COVID-19 RENT FORBEARANCE REQUEST

DATE _____ PROPERTY NAME/NUMBER _____

TENANT NAME(S) _____

UNIT NUMBER _____ STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

We recognize that the COVID-19 health crisis is severely straining many of our tenant's finances. Our goal is to keep tenants safety in their homes. Thank you for providing the following information so we may help you through this difficult period.

REQUEST

I/We the Tenant(s) below are requesting a rent forbearance due to a substantial loss of income resulting from COVID-19 as demonstrated below. Requests are reviewed based upon financial changes to all Tenants (collectively Household) only.

Household income has been reduced by \$_____ per month.

CAUSE

The difference between the Household's prior and current income is a direct result of COVID-19. Specifically, the substantial loss of income was caused by the following COVID-19 related events (check all that apply):

- Missing work to care for child/dependent due to:
 - School closure
 - Childcare closure
 - Other: _____
- Job loss
- Reduction of hours
- State or local emergency action prevents me from working
- Other: _____

DOCUMENTATION

I have provided the following documentation (check all that apply):

- Letter from employer citing COVID-19 as reason for reduced hours or termination
- Paycheck stubs before and after COVID-19 outbreak
- Bank account statements before and after COVID-19 outbreak
- Other proof of substantial loss of income: _____
- I currently have no documentation supporting this request, but I certify that the statements set forth above are true.

Owner/Agent reserves the right to require an updated forbearance request periodically.

X

TENANT

DATE

X

TENANT

DATE