

Person in Services with Mult. Co. IDD: \_\_\_\_\_

Application Date: \_\_\_\_\_

Case Manager Name: \_\_\_\_\_

Case Management Agency:      **Mult. Co. IDD**      CPI      Inclusion      INW      UCP-C      UCP-M

**1. Eligibility Criteria** (all criteria must be met for eligibility)

- Multnomah County Resident
- Income at or below 65% Area Median Income (AMI)
- Negative Economic Covid-19 Impact\*

**\*Covid-19  
 Impact** (select  
 all that apply)

- Unemployment/Reduction in Household Income/Financial Hardship.
- Increased food/housing insecurity
- Enrolled in a Qualified Program (*see list of programs below*)\*\*

\*\*Qualified Programs:

- Children's Health Insurance (CHIP)
- Child Care and Development Fund (CCDF)
- Medicaid
- National Housing Trust Fund (HTF), affordable housing programs only
- Home Investment Partnerships Program (HOME), affordable housing programs only
- Temporary Assistance for Needy Families (TANF)
- Supplemental Nutrition Assistance Program (SNAP)
- Free & Reduced Price Lunch (NSLP) and/or School Breakfast (SBF)
- Medicare Part D
- Supplemental Security Income (SSI)
- Head Start and/or Early Head Start
- Special Supplemental Nutrition Program for Women, Infants and Children (WIC)
- Section 8 Vouchers
- Low-Income Home Energy Assistance Program (LIHEAP)
- Pell Grants
- Title I schools, for educational programs only

**2. Verification of Income Eligibility - Use the table on page 2 to calculate your annual gross income.**

Total # of household members  
 occupying the unit = \_\_\_\_\_

Based on current income:

- 41% to 65%
- 40% or below

**Area Median Income Guidelines**

Household Size	40%	65%
1	\$29,840	\$48,490
2	\$34,080	\$55,380
3	\$38,360	\$62,335
4	\$42,600	\$69,225
5	\$46,040	\$74,815
6	\$49,440	\$80,340
7	\$52,840	\$85,865
8	\$56,240	\$91,390
9	\$59,640	\$99,226

Source: [2022 AMI Rents PHB](#)

**Steps to Verify Income:**

Household income eligibility is based on determining a household’s 2022 annual income, **or**, current monthly income and using that monthly income to calculate annual income (monthly income x12). To be eligible, annual household income must be below 65% AMI as outlined in the tables above.

**Step 1:** List each adult in the household under Income Earner below. List the source of the income and the gross monthly amount for each income source. Write "Zero Income" under source for adults that do not have income.

Acceptable documentation includes 30-day paystubs, W4, 1040, UI verification, SSI documentation, self-employment verification form, self-attestation income form. See complete list under Addendum 1 at the bottom of the intake form.

\*\*\*SNAP/food stamp income is not counted at income and does not need to be reported.

Income Source	Income Earner	Monthly Gross Income
<b>Total Monthly Income:</b>		

**Annual Income** = (monthly income x 12)

**Step 2:** Compare annual income to eligibility table on page 1 to determine eligibility.

**Documentation of Income:** *Reassessment Must Occur Every 3 Months*

**Applicants must submit documentation to verify income for adult household members (except SNAP/food stamps).** Refer to Addendum 1 at the end of the document for a list of acceptable documentation.

**Yes    No - Written Verification for all household income will be submitted with this Intake Form**

**If any income documents are not readily available, applicant may be eligible to provide self-attestation below.**

**Self-Attestation of Income Eligibility**

- Accommodation for disability     Lack of Technological Access     COVID-19 Extenuating Circumstance

**Describe reason why documentation is not available:** Explanation is required.

\*\*\*If the household is unable to provide documentation due to one of the reasons listed above, the household may be able to self certify income if they live in a census tract with average incomes in the eligibility range.

**3. Rental Verification**

Is a rental agreement available?

- Yes (Submit signed rental agreement and arrears verification if arrears are requested)
- No (provide alternative documentation from the property manager verifying: tenant names, unit address and payment amounts being requested (past due notice is required if requesting past due rent))

**4. Eviction Notice for Non-payment of Rent**

Has the household received an eviction notice for non-payment of rent?

- Yes (if yes, submit a copy of the eviction notice with the application)     No

**5. Head of Household Information**

<b>Name</b> (First and Last)	
<b>Current Address</b>	
<b>New Address if moving</b>	
<b>Email</b>	<b>Phone Number</b>
<b>Landlord Information</b> (to send payment)	
<b>Business Name</b>	
<b>Contact Person</b> (if different)	
<b>Mailing Address for Payment</b>	
<b>Email</b>	<b>Phone Number</b>

**6. Assistance Requested**

Do you receive Section 8 or any other Housing Assistance payments?    Yes    No

If yes, what is your portion of the rent? \$ \_\_\_\_\_

Payment Type <small>(rent, deposit)</small>	Month/Year	Amount Due	Amount Approved
<b>Total:</b>			

**Comments:**

**7. Signature and Self-Attestation**

*"I certify that the information on this intake form is true and accurate to the best of my knowledge. In addition, I consent to the release of information in this application to the United States Department of the Treasury for any reporting or compliance purposes.*

*I also authorize Multnomah County Intellectual and Developmental Disabilities to share information with my payee about my financial information; my landlord regarding payment information; and partnering agencies/service providers as necessary to arrange for the assistance being requested. I hereby authorize the release of the above information for the purpose of evaluating my request for assistance."*

Client Signature \_\_\_\_\_

Date \_\_\_\_\_

Case Worker/Agency Staff Signature \_\_\_\_\_

Date \_\_\_\_\_

Case Worker/Agency Staff Contact Info: Email \_\_\_\_\_

Phone \_\_\_\_\_

**Addendum 1:  
COVID-19 Emergency Rent Assistance Program: ARPA  
Tenant Checklist of Documents**

Once a household is determined eligible for assistance, the following materials are required to be submitted as part of the application. There is no citizenship requirement to be assisted with these funds.

**1. VERIFICATION OF INCOME**

(All household members over the age of 18 must provide ONE of the following)

- 2021 tax return forms (such as a 1099, 1040/1040A or Schedule C of 1040)
- 2021 W-2 form
- Paycheck stubs for the 30 days prior to application submission
- A letter of termination from your job
- Proof of application for unemployment benefits
- Proof that unemployment benefits have expired
- Self Employed - tax records, statements, or other documentation of loss of employment
- Benefits eligibility letter from a government program, including award letter (TANF, SSI, other benefits)

Self-attestation is acceptable in the following circumstances:

- Household member has zero income,
- Household member is receiving unreported income
- Necessary as reasonable accommodation for a person with disabilities
- Necessary due to extenuating circumstances related to pandemic or lack of technological access

**2. LEASE / RENTAL AGREEMENT OR OTHER PROOF OF RENT DUE**

The Agreement to Assign Rent Assistance Form, a signed copy of the lease showing rent amount & address (or allowable substitute – see Intake Form), & a W9.