

Stepped Rent Hardship Request Form

Hardship requests must be made by completing this form and submitting it to Housing Connect, along with supporting documentation. Documentation instructions can be found on page two of this form.

Date: Contact Phone Number:				
Head of Household Name:				
Address:				
□ New Hardship Request □ Hardship Extension Request				
Please check the box indicating the type of hardship you are experiencing and provide a short explanation of how this circumstance creates a financial hardship. Please see the Documentation Requirements portion of this form for information about required documentation.				
Reduction in Income				
Financial Hardship Due to Annual Stepped Rent Increase (Stepped rent greater than 40% of monthly <i>income</i>)				
□ Removal of a Family Member, (example: death of a family member)				
□ Significant Out-of-Pocket Expenses (examples: unreimbursed childcare expenses)				
□ Household Facing Eviction due to Inability to Pay Rent				
□ Employed Adult (not the Head of Household, Co-Head, or Spouse) Becomes a Full-Time Student and Remains Employed				
□ Increase in Dependents				
□ Other				
Please explain how this circumstance creates a financial hardship:				
What is your total current monthly family income? \$				
Under penalties of perjury, I certify that the information presented in this Request is true and accurate to the best of my/our knowledge and belief. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading, or incomplete information may result in the termination of the lease agreement.				

Head of Household Signature

Date

Please contact your Housing Connect representative if you, or a member of your household, require accommodations in order to fully utilize our programs and services.





Documentation Required for Hardship Requests

Provide documentation of all of your household's current income and applicable expenses:

Income/Expense	Documentation Required
Wages	 For wages other than tips, the family must provide originals of one month's worth of current, consecutive (in a row) pay stubs or payroll summary reports: 4 for weekly pay 2 for bi-weekly pay 1 for monthly pay Unless tip income is included in a family member's W-2 by the employer, persons who work in industries where tips are standard will be required to sign a certified estimate of tips received for the prior year and tips anticipated to be received in the coming year.
Seasonal Income	• W- forms and tax returns.
Business and Self- Employment Income	• Audited financial statement from the previous fiscal year if an audit was conducted. If an audit was not conducted a statement of income and expenses must be submitted and the business owner or self-employed person must certify to it accuracy.
	• All schedules completed for filing federal and local taxes in the preceding year.
	• If accelerated depreciation was used on the tax return or financial statement, an accountants calculation of depreciation expense, computed using straight-line depreciation rules.
	• HC will provide a format for any person who is unable to provide such a statement to record income and expenses for the coming year.
	• If a family member has been self-employed less than three (3) months, provide the family member's certified estimate of income. If the family member has been self-employed for three (3) to twelve (12) months, provide documentation of income and expenses for this period.
Social Security or Supplemental Security Income (SSI)	• Benefit letter from the Social Security Administration (SSA) dated within the last 60 days.
Public Assistance (TANF/TAFDC or Welfare)	• Benefit letter from the Department of Workforce Services.
Unemployment or Worker's Compensation	• Unemployment benefit letter, unemployment benefits pay stubs, workers' compensation benefit letter from the Utah Department of Workforce Services (DWS).
Veterans' Benefits	• Benefit letter from the U.S. Department of Veterans Affairs (VA) stating benefits.





Income/Expense	Documentation Required
Child	If your family <i>receives regular payments</i> :
Support/Alimony	• If payments are made through a state or local entity, provide a record of payments for the past 12 months.
	• Copies of the receipts and/or payment stubs for the prior 60 days.
	• Third-party verification from the person paying the support.
	• Copy of a separation or settlement agreement or a divorce decree stating amount and type of support and payment schedules.
	 If your family <i>receives irregular or no payments</i>, in addition to the verification process listed above, you must provide evidence that you have taken all reasonable efforts to collect amounts due. This may include: A statement from any agency responsible for enforcing payment that shows that your family has requested enforcement and is cooperating with all enforcement efforts. If your family has made independent efforts at collection, a written statement from the attorney or other collection entity that has assisted your family in these efforts.
Retirement	Benefit letter or statement indicating amount and frequency of payments.
Benefits, Annuities,	• <i>Before</i> retirement, provide an original document from the entity
or Pensions	holding the account with a date that shows it is the most recently
	scheduled statement for the account but in no case earlier than 6
	months from the effective date of the examination.
	• <i>Upon</i> retirement, provide an original document from the entity holding
	the account that reflects any distributions of the account balance, any
	lump sums taken and any regular payments.
	• <i>After</i> retirement, provide an original document from the entity holding the account dated no earlier than 12 months before that reflects any
	distributions of the account balance, any lump sums taken and any
	regular payments.
Regular	 Copies of checks or evidence of payment, such as a signed and dated letter
Contributions,	from the person who is providing the contributions, support or gifts.
Support, Gifts, or	
Payments on Behalf	
of a Family	
Member	
Checking and/or	• Original bank statement or online bank statement.
Savings Accounts	
Investment	Most recent investment report.
Accounts Such as	
Stocks, Bonds,	
Saving Certificates,	
and Money Market Funds	
Trust Funds	• A account statements on financial statements completed by a financial
I FUSL F UNUS	• Account statements or financial statements completed by a financial institution or broker.
Net Income from	
Rental Property	• A current executed lease for the property that shows the rental amount or certification from the current tenant
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Income/Expense	Documentation Required
	• A self-certification from the family members engaged in the rental of property providing an estimate of expenses for the coming year and the most recent IRS Form 1040 with Schedule E (Rental Income)
	• If schedule E was not prepared, the family members involved in the rental of property must provide a self- certification of income and expenses for the previous year.
Unreimbursed Childcare Expenses	Contracts with provider
	• Receipts showing payments
	• Cancelled checks/money orders (4 weekly, 2 bi-weekly, or 1 monthly)
	• Childcare assistance payments from the Utah Department of Workforce Services
	• For child care that enables a family member to work, provide verification of employment during the time the child care is being provided.
	• For child care that enables a family member to seek work, provide verification that the family member is seeking work, such as a job search log with name and contact information.
	• For child care that enables a family member to pursue education, provide verification that the family member is enrolled in school (academic or vocational) or participating in a formal training program

In addition to the required documentation above, please submit the following to document the type of hardship selected on page one.		
Reduction in Income	Wages: Letter from the employer documenting reduction in hours/pay or termination.	
Financial Hardship Due to Annual Stepped Rent Increase (Stepped rent greater than 40% of monthly income)	Verification of current income (see above). For example, provide one month of current, consecutive pay stubs for family members that are working.	
Removal of a Family Member	 Death certificate Driver's license with the new address Lease or utility bill with the new address Letter from a government agency attesting to the new address Statement attesting to the new address Verification from the household member's new landlord A certification from the family member who has moved or a certification from the head of household that the family member no longer resides in the unit 	



In addition to the required documentation above, please submit the following to document the type of hardship selected on page one.		
Significant Out-of-	Unreimbursed Childcare Expenses: Verification of expenses (see above).	
Pocket Expenses		
Household Facing	Court documents showing eviction action	
Eviction due to		
Inability to Pay Rent		
Employed Adult (not	• Letter from the school administration verifying current attendance as a	
the Head of	full-time student	
Household, Co-Head,		
or Spouse) Becomes a		
Full-Time Student		
and Remains		
Employed		
Increase in	Family member other than the head, spouse, or co-head who is under 18	
Dependents	years of age: A birth certificate or other official record of birth, adoption	
	papers, custody agreement, Health & Human Services ID, certified school records	
	Family member who is 18 or older with disabilities: Copy of the Social Security Administration benefit letter showing receipt of SSI Disability or SSDI benefits.	
	Adult Family member who is a full-time student: Letter from the school administration verifying current attendance as a full-time student	
Other	Other documentation to support the need for a hardship. A Housing Connect Specialist will contact you to discuss additional required documentation, if needed.	