TEMPLE CITY
COVID-19 EMERGENCY RENTAL ASSISTANCE
PROGRAM GUIDELINES

The COVID-19 Emergency Rental Assistance (COVID-19-ERA) program provides emergency rental assistance grants to income-eligible households economically impacted during the COVID-19 pandemic through job loss, furlough or reduction in hours or pay, residing in the city limits of Temple City.

Emergency Rental Assistance grants are rental payments made on behalf of an income-eligible household, up to $1,000 per month, for a maximum period of 3 months to maintain housing and/or to reduce rental payment delinquency in arrears as a result of the economic downturn during the COVID-19 pandemic.

COVID-19-ERA ELIGIBILITY

Eligible households must meet all of the following criteria:

1. Renters residing in a single-family or multi-family unit located in Temple City

2. Annual household income does not exceed the U.S. Department of Housing and Urban Development (HUD) established “Moderate-Income” limits. Household income eligibility is based on the following two (2) factors:
   a. The total number of persons residing in the household; and
   b. The total amount of the annual household income.

3. Economically impacted during the COVID-19 pandemic period beginning March 27, 2020 to present.


5. Household does not receive any other forms of rental subsidies.

6. Completed W-9 form from bona fide landlord/property management agent or company.

7. Signed Program Participation-Payment Acceptance form from bona fide landlord/property management agent or company.


9. Parties renting a portion of a dwelling unit are not eligible. The tenant must rent an entire permitted, dwelling unit. Instances where a tenant and landlord/property owner share a dwelling unit are not eligible.
USE OF COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) FUNDS

CDBG funds will be used for emergency rental payments on behalf of income-eligible households economically impacted by the COVID-19 pandemic. Monthly rental assistance is provided for a period of up to 3 months through direct payment to a bona fide landlord, property management agent or company for current rent and/or to pay down rentals in arrears. CDBG funds are also used for program administration such as direct personnel and non-personnel costs and indirect costs.

RENTAL ASSISTANCE

Rental assistance includes:

a. Monthly Rental Payment made on behalf of eligible household to landlord/property management agent or company of up to $1,000 per month for a maximum of 3 months; or

b. Monthly Rental Arrears Payment made on behalf of eligible household to landlord/property management agent or company of up to $1,000 per month for a maximum of 3 months; or

c. Monthly payment combination of items a. and b. made on behalf of eligible household to landlord/property management agent or company.

APPLICANT INTAKE AND ASSESSMENT PROCESS

Applicant household’s eligibility for emergency rental assistance will be determined upon submission of a completed application with all required information and documents. Program staff will review application information and provide an eligibility determination within 7 days. All applicant household’s information and supporting documentation will be recorded accurately in an applicant file to demonstrate eligibility/ineligibility for this program.

A denied applicant file shall contain all submitted information and documentation, as well as the reason for denial (ex: over income limits, incomplete information, reside outside service area).

An approved applicant file shall contain all submitted information and documentation necessary to meet all required eligibility criteria and contain completed forms, documentation, and necessary information for all members of an applicant household such as the following:

Residency in Eligible Area

An applicant household must reside in a rental property located in the city limits of Temple City. The LACDA CDBG Online Map Locator or another tool can be used to verify residency.

Definition of a Household and Income of Household Members

A Household is defined as all the persons who occupy a housing unit. The occupants may be a single family, one person living alone, two or more families living together, or any other group of related persons who share living arrangements. Therefore, household member information must include, at a minimum, the following:
1) Full names and ages of all family members as well as any unrelated persons living in the residence; and

2) Signature of the primary applicant(s), certifying that the information provided related to the annual household income and members is correct.

**Annual income** is defined as the total gross amount of income received from all sources by adult individuals of the household who have earned or received income during a 12-month period prior to the March 27, 2020 authorization of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) to address the COVID-19 pandemic. Additional information on household income is provided in TYPES OF HOUSEHOLD INCOME section below.

To determine program eligibility, all sources of annual income for each household member over the age of 18 and the exact amounts earned from each income source must be accurately documented. The primary applicant(s) are also required to certify by signature that the information provided regarding household members is correct.

Eligible households must be below the “Moderate Income” limits for confirmed household size.

### Emergency Rental Assistance Household Income Limits

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<tr>
<th>Number of Persons</th>
<th>Extremely Low-Income</th>
<th>Low-Income</th>
<th>Moderate-Income</th>
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<tr>
<td>8</td>
<td>$44,650</td>
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**Documenting Economic Impact during COVID-19 pandemic period**

Applicant households must submit documentation confirming negative economic impact during the COVID-19 pandemic period. Acceptable documentation sources include:

1. Workplace closure or reduced hours due to COVID-19, including lay-off, termination, loss of working hours, income reduction resulting from business closure or other employer economic impacts of COVID-19:
   - A copy of household member(s) notification of job loss/termination from employer during the eligible pandemic period (March 27, 2020 to present); or
• A copy of household member(s) notification of furlough from employer during the eligible pandemic period (March 27, 2020 to present); or
• A copy of household member(s) notification confirming reduction in hours and/or pay during the eligible pandemic period (March 27, 2020 to present); or
• A copy of household member(s) application during the eligible pandemic period (March 27, 2020 to present) and/or approval for Unemployment Insurance benefits; or
• A signed self-certification that includes the name of the household member who is self-employed, the name and nature of the business, and narrative confirming economic impact on self-employment during eligible pandemic period (March 27, 2020 to present).

2. Sickness with COVID-19 or caring for a household or family member who is sick with COVID-19;

3. Extraordinary out-of-pocket childcare expenses due to school closures, medical expenses, or health care expenditures stemming from COVID-19 infection of the tenant or a member of the tenant’s household who is ill with COVID-19;

4. Compliance with a recommendation from a government health authority to stay home, self-quarantine, or avoid congregating with others during the state of emergency;

5. Reasonable expenditures stemming from government ordered emergency measures;

6. Any additional factors relevant to the tenant’s reduction in income as a result of the COVID-19 emergency.

PROVIDING EMERGENCY RENTAL ASSISTANCE

Emergency rental assistance will be provided for monthly rent payments and/or rental arrearages. Program administrators shall determine the duration and amount of rental assistance provided to eligible households based on application information, monthly rent due, and amount in arrears. This duration and assistance amount will be designed to ensure households are provided with the maximum benefit possible under program limits up to a maximum of 3 months.

Emergency rental assistance will not be paid directly to households. Policies and procedures must establish how financial assistance is paid to the bona fide landlord/property management agent or company.

Emergency rental assistance shall be paid by the date specified on the current lease agreement and program staff will verify proper on-time partial or full rental payment has been made. The emergency rental assistance program will log all payments made on behalf of eligible households.

Confirming Current Lease Agreement

An applicant household must submit a copy of its current residential lease agreement for the address they reside in as a part of the emergency rental assistance application.
**W-9 Form**

A completed W-9 form (enclosed below) from the bona fide landlord/property management agent or company must be submitted as a part of the emergency rental assistance application.

**Program Participation-Payment Acceptance Form**

A signed Program Participation-Payment Acceptance Agreement from the bona fide landlord/property management agent or company must be submitted as a part of an applicant household’s emergency rental assistance application.

**Current Rental Balance**

An applicant household must submit a confirmed copy of its current rental balance from the bona fide landlord/property management agent or company.

**Landlord, Property Management Agent or Company**

A bona fide landlord/property management agent or company is defined as the legal owner and/or representative of a single-family, multi-unit, or mobile home residential property leased for the purposes of permanent housing, entitled to collect rent as prescribed in a valid lease agreement.

In order to process and disburse emergency rental assistance payments to a bona fide landlord/property management agent or company, signed and completed W-9 and Program Participation-Payment Acceptance Agreement forms are required. The landlord/property management agent or company will abide by COVID-19-ERA program requirements and will be provided with a clear summary and schedule of payments to be made on behalf of eligible households.

Under no circumstances will the COVID-19-ERA program agency or staff be a party to any lease for which assistance is provided. Program administration contact numbers and information must be provided in case of questions or concerns.

In addition, the landlord/property management agent or company will be provided with an IRS 1099 form at the end of the calendar year for tax reporting purposes.

**TYPES OF HOUSEHOLD INCOME**

The following is a list of the types of household income most commonly encountered, as well as the kinds of documentation required for verification. This is not intended to provide an exhaustive list of possible income sources, but only those sources most commonly encountered. However, all applicant income sources must be clearly identified and documented. The Agency *Income Documentation Worksheet* is provided (Page 10 below) as reference and may be adopted to assist in calculating annual household income. If it is not possible for the household to provide this information, the *COVID-19 Emergency Rental Assistance Household Income Self-Certification Form* and *Individual Annual Income Self-Certification forms* (Pages 12-13 below) may be used to document annual income.
A. **Salary Income:** The documentation of salary income must be obtained from at least one (1) source. The documentation may not be older than six (6) months, except for Federal and State income tax returns which may not be older than one (1) year. The documentation must be properly labeled and compiled in the applicant’s case file in a readable format. Acceptable sources of income documentation include the following:

- Federal or State income tax returns or W2 forms; or
- Copies of the applicant’s three (3) most recent paycheck stubs, establishing the applicant’s monthly income; or

B. **Self-Employment:** Any income from an adult household member who is self-employed must be documented and verified from at least one (1) of the following sources:

- A copy of IRS Form 1040/1040A (tax return), if filed with the IRS for the last year; or
- A notarized affidavit signed by the applicant that includes the name of the household member who is self-employed, the name of the business, and the prior year’s estimated annual income.

C. **Social Security/Supplementary Security Income/ Social Security Disability:** Income from Federal or State retirement programs and disability must be verified from at least one (1) source that may not be older than six (6) months, unless noted below. Acceptable documentation sources include:

- A copy of the applicant’s monthly award check; or
- A copy of a benefit verification letter (also referred to as an “award letter” or “income letter” and can be requested from local Social Security office by applicant); or
- Copy of a bank statement showing direct deposits of applicant’s award check; or
- Copy of Social Security Form SSA-2458 which verifies benefits (can be requested from local Social Security office by applicant); or
- Copy of Social Security form SSA-1099 (tax form mailed each year stating total amount of benefits received from the previous year.) May not be older than one (1) year.
- Written certification from the awarding agency verifying the applicant’s eligibility and the amount of the monthly benefits.

D. **Welfare/General Relief:** Income from social aid programs [e.g., California Work Opportunity and Responsibility for Kids (CalWORKs), Temporary Assistance for Needy Families (TANF)] must be verified from at least one (1) of the following sources:

- Copies of the applicant’s most recent bi-monthly award checks.
- Copy of most recent Notice of Action or award letter stating the amount of applicant’s benefit; or
- Written statement from caseworker stating the applicant’s benefit amount; or
Written certification from the awarding agency verifying the applicant's eligibility and the amount of the monthly benefits.

E. **Pension Income:** Pension Income must be verified from at least one (1) of the following sources:

- A copy of the pension award letter; or
- Copies of the applicant's three (3) most recent payment stubs verifying benefit amount; or
- A copy of the applicant's bank statement demonstrating that the award check was directly deposited into the applicant's account.

F. **Personal Interest:** Personal interest from savings accounts or dividends from financial investments must be identified and documented as earned income. Adequate verification may include:

- Federal income tax return; or
- Copies of bank statements; or

  **All pages** of investment statements indicating the amount of dividends earned.

G. **Alimony/Child Support:** Income received from alimony and/or child support payments must be documented and verified from at least one (1) of the following sources:

- A copy of applicant's weekly or monthly check; or
- A copy of a separation or settlement agreement or a divorce decree from a court establishing payments; or
- A notarized affidavit, signed by the applicant, certifying to the amount of child support received.

H. **In-Home Supportive Services:** Income earned by a caregiver/caretaker providing in-home supportive services for a different household must be documented through copies of the three (3) most recent paycheck stubs, to establish the monthly income.

I. **Rental Income:** Income received from rental property must be documented as earned income and must be verified from at least two (2) of the following sources:

- A copy of the property rental agreement signed by current tenant stating monthly rent;
- A copy of recent rent check; and/or
- A copy of the applicant's income tax return declaring earned rental income. May not be older than one (1) year.

Rent receipt book.

J. **No Income:** Should an adult member of the household (18 years and older) have no income to report, documentation to be submitted may include:
A self-certification (Page 13) signed by the household member declaring he/she does not earn income that can be contributed to the household.

The calculation of annual income shall not include the following:

A. **Income from Children**, which is income from the employment of children (including foster children) under the age of 18 years.

B. **Payments Received for the Care of Foster Children**, including foster adults (usually persons with disabilities, unrelated to the family, who are unable to live alone).

C. **Lump-Sum Payments**, including additions to family assets, such as inheritances, insurance payments (e.g., health and accident insurance, and worker’s compensation), capital gains and settlement for personal or property losses [except as provided].

D. **Reimbursement for Medical Costs**, including all payments received by the family that are specifically for, or in reimbursement of, medical expenses for any family member.

E. **Live-in Aide**, including the income of a live-in aide employed because of a medical condition or disability of a family member. A live-in aide is determined to be essential to the care and well-being of the person, not obligated for the support of the person, and would not be living in the unit except to provide the necessary supportive services.

F. **Education Assistance**, including the full amount of educational scholarships paid directly to the student or to the educational institution, and Government funds paid to a veteran for tuition fees, books, equipment, materials, supplies, transportation and miscellaneous personal expenses of the student. Any amount of such scholarship or payment to a veteran not used for the above purposes that is available for subsistence is to be included in income.

G. **Armed Forces (Special Pay)**, specifically special pay to a family member serving in the Armed Forces who is exposed to hostile fire.

H. **Government Programs**, including the following:

   Amounts received under training programs funded by HUD and earnings and benefits from participation in qualifying State or local employment training programs (including training programs not affiliated with a local government.)

   Amounts received by a disabled person that are disregarded for a limited time for purposes of Supplemental Security Income (SSI) eligibility and benefits, because they are set aside for use under a Plan to Attain Self-Sufficiency (PASS).

   Amounts received by a participant in other publicly-assisted programs, which are specifically for or in reimbursement of out-of-pocket expenses incurred (special equipment, clothing, transportation, child care, etc.) and made solely to allow participation in a specific program.

   Amounts specifically excluded by any other Federal statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under the U.S. Housing Act of 1937.
Amounts paid by a State agency to a family with a member who has developmental
disability and is living at home to offset the cost of services and equipment needed to
keep the developmentally disabled family member living at home.

I. **Temporary Income**, considered temporary, nonrecurring or sporadic in nature
   (including gifts).

J. **Income of Full-Time Students**, earnings in excess of $480 for each full-time student
   18 years old or older attending school or vocational training (excluding the head of
   household and spouse).

K. **Property Tax Refunds**, including amounts received by the family in the form of
   refunds or rebates under State or local law for property taxes paid on the dwelling of
   the unit.

L. **Adoption Assistance Payments**, in excess of $480 per adopted child.

**EMERGENCY RENTAL ASSISTANCE PROGRAM ADMINISTRATION COSTS**

The operating agency for the Emergency Rental Assistance program may charge direct program
administration costs such as personnel and non-personnel, and indirect costs (upon approval of
LACDA).

The operating agency will minimize excessive program administration costs (at or below 20%) to
maximize the total number of households assisted with Emergency Rental Assistance.

The operating agency may be provided an advance of CDBG funds to begin program activities
and then reimburse for actual expenditures going forward.

**RECORD RETENTION, PROGRAM REPORTING, AND MONITORING**

The operating agency for the ERA program shall maintain applicant files, landlord/property
management agent or company information, and all program administration (programmatic and
financial) records, written and digital, for no less than a period of 5 years from the end of the
program in accordance with Los Angeles County Auditor-Controller Handbook 3.1.

The operating agency for the ERA program shall report, approved and assisted households, and
their corresponding assistance information, weekly as directed by the funder.

The operating agency for the ERA program shall periodically report to-date households assisted
in a numeric and narrative format as directed by the funder.

Financial and programmatic monitoring of the operating agency will be conducted by LACDA
staff.

**CONFLICT OF INTEREST**

No COVID-19 ERA funding will be provided to any member of the governing body of the City of
Temple City, County of Los Angeles, nor any designee of LACDA or the operating agency who is
in a decision making capacity in connection with the administration of this program; no member
of the above organizations shall have any interest, direct or indirect, in the proceeds from a grant from this program.
<table>
<thead>
<tr>
<th>Source of Income</th>
<th>Gross Monthly Income in Dollars</th>
<th>Documentation</th>
</tr>
</thead>
</table>
| Salary                                   |                                 | • Copies of last 3 paychecks (not older than 6 months); or  
  • Federal or State income tax returns or W-2 forms (not older than one year); or  
  • Employment and salary documentation form.                                          |
| Self-Employed Profits                    |                                 | • Copy of IRS Form 1040/1040A (tax return) for the last year; or  
  • Notarized affidavit stating prior year’s estimated annual income.                 |
| Social Security (SS)                     |                                 | The following must not be older than six (6) months unless noted:  
  • Copy of applicant’s monthly award check; or  
  • Copy of applicant’s benefit verification letter *(applicant can request from local Social Security office)*; or  
  • Form SSA-2458 *(applicant can request from local Social Security office)*; or  
  • Form SSA-1099 *(yearly benefit statement that may not be older than one (1) year)*; or  
  • Written certification from awarding agency verifying monthly benefits; or  
  • Copy of bank statement showing direct deposit of applicant’s award check.         |
| Supplemental Security Income (SSI)       |                                 | • Copy of applicant’s monthly award check; or  
  • Copy of applicant’s benefit verification letter *(applicant can request from local Social Security office)*; or  
  • Form SSA-2458 *(applicant can request from local Social Security office)*; or  
  • Form SSA-1099 *(yearly benefit statement that may not be older than one (1) year)*; or  
  • Written certification from awarding agency verifying monthly benefits; or  
  • Copy of bank statement showing direct deposit of applicant’s award check.         |
| Social Security Disability (SSD)         |                                 | • Award letter stating the amount of applicant’s benefit; or  
  • Copy of applicant’s most recent bi-monthly award check(s); or  
  • Written statement from Caseworker stating the applicant’s benefit amount; or  
  • Written certification from awarding agency verifying monthly benefits; or          |
| California Work Opportunity and Responsibility for Kids (CalWORKs) |                                 | • Copy of applicant’s most recent pension check/payment stubs; or  
  • Copy of pension award letter showing monthly benefits; or  
  • Bank statement showing direct deposit of applicant’s award check.                 |
| Temporary Assistance for Needy Families (TANF) |                                 | • Copy of applicant’s weekly or monthly check; or  
  • Court decree establishing payments, (divorce papers); or  
  • Notarized affidavit of child support certifying amount received.                   |
| Pension                                  |                                 | • Copy of applicant’s weekly or monthly check; or  
  • Court decree establishing payments, (divorce papers); or  
  • Notarized affidavit of child support certifying amount received.                   |
### Unemployment Insurance
- Copy of award notice stating applicant's benefit; or
- Payment booklet; or
- Unemployment notarized affidavit signed by applicant.

### Interest from Bank Accounts and Cash Funds
- Letter from bank manager stating interest earned; or
- Bank statements showing last twelve (12) months of interest; or
- Most recent Federal income tax return showing interest earned; or
- Investment statements indicating the amount of dividends earned.

### Rental Property Income
**At least two (2) from the following:**
- Copy of property rental agreement signed by current tenant showing monthly rent; or
- Copy of recent rent check; or
- Copy of applicant's income tax return declaring earned rental income (not older than one year); or
- Rent receipt book.

### Other Income not shown above - List Sources
- Attach documentation to support declaration.

### AGENCY STAFF USE ONLY BELOW:

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<tr>
<th>Total Gross Monthly Income:</th>
<th>Comments:</th>
</tr>
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<tbody>
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<table>
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<table>
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