



EPRENTHELP.ORG
City of El Paso - Rental Assistance Program

Joint Landlord and Tenant Application

PART 1 - TO BE COMPLETED BY LANDLORD

Rental Property Information

-- INFORMATION AUTOMATICALLY GENERATED BY SYSTEM --

Tenant and Unit Information

First Name of Tenant Applicant:	Middle Initial:	Last Name of Tenant Applicant:
Apartment or Unit Number (if applicable):	Account/Lease Number (if applicable):	

Amount of PAST Due Rent – Confirmation from Landlord
(Rental period must be monthly and for the months of April, May, June and/or July)

Rent Period 1 (Month)	Monthly Rent Amount:	Balance of Rent DUE:	10% Discount:	Rental Assistance Amount*:
Rent Period 2 (Month)	Monthly Rent Amount:	Balance of Rent DUE:	10% Discount:	Rental Assistance Amount*:
Rent Period 3 (Month)	Monthly Rent Amount:	Balance of Rent DUE:	10% Discount:	Rental Assistance Amount*:

*Rental Assistance amount cannot exceed \$1,000 per month.



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PART 2 - TO BE COMPLETED BY TENANT

Tenant Applicant Information		
First Name of Tenant Applicant:	Middle Initial:	Last Name of Tenant Applicant:
Primary Phone Number of Tenant Applicant:	Secondary Phone Number of Tenant Applicant:	
Phone Type: <input type="checkbox"/> Mobile <input type="checkbox"/> Home	Phone Type: <input type="checkbox"/> Mobile <input type="checkbox"/> Home	
May we text you at this number? <input type="checkbox"/> Yes <input type="checkbox"/> No	May we text you at this number? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Primary Email of Tenant Applicant:	Secondary Email of Tenant Applicant:	
Tenant Applicant Race/Ethnicity: A response is required for both of the questions below. 1) Are you Hispanic or Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No 2) What is your race? Select only one option. <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> American Indian Alaskan Native and White <input type="checkbox"/> Asian and White <input type="checkbox"/> Black/African American and White <input type="checkbox"/> American Indian/Alaskan Native and Black <input type="checkbox"/> Asian and Black/African American <input type="checkbox"/> Other Multi-racial	Additional Tenant Applicant Information: What is your preferred language? <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other: _____ Which option best describes your gender? <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male <input type="checkbox"/> Transgender Female <input type="checkbox"/> Transgender Male <input type="checkbox"/> Non-Binary <input type="checkbox"/> Non-Conforming <input type="checkbox"/> Other <input type="checkbox"/> Prefer Not to Answer Do you identify as a person with a disability? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Note: The tenant applicant information collected above on ethnicity, race, gender and disability will **only** be used for reporting purposes.



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Tenant Eligibility Information

Total Number of Members Living in the Household*: _____

*Please include all children and adults living at the rental property in the total number.

Household Income Instructions: Please provide the total current monthly **gross income** (before taxes and other deductions) for all adult (ages 18+) household members. Current income refers to income for the months of either April, May, June or July. Total income must include all forms of income such as wages, salary, Unemployment Compensation, net income from business and self-employment, Social Security, disability, retirement/pension, alimony, child support, Worker’s Compensation, and Welfare Assistance Payments (Temporary Assistance to Needy Families).

Total Monthly Household Income: \$

Have you received an Eviction Notice or Notice to Vacate?
 Yes No

Did any adult household member have to quarantine due to health reasons related to COVID-19?
 Yes No

Is anyone in the household eligible for unemployment benefits?
 Yes No

Did the household receive a 2020 COVID-19 CARES Act stimulus check?
 Yes No

Please indicate the financial hardship the household is experiencing as a result of the economic impact of COVID-19. Select the option which best describes your situation (select only one option).

- One or more household members experienced a loss of a job (was laid off or furloughed).
- One or more household members experienced reduction in wages (because my hours were reduced).
- One or more household members experienced a reduction in business income (self-employed).
- One or more household members experienced a loss of wages/income because of health reasons related to COVID-19.
- My household has not experienced financial hardship as a result of the COVID-19 pandemic.

Tenant Applicant Supporting Documentation

All of the documents listed below are required for the application submission and should be provided to your landlord.

- Photo identification for the tenant applicant (driver’s license or state ID; passport; school ID; nonprofit membership ID; U.S. visa; work permit; green card; a current or expired foreign government issued ID or passport; matricula consular; work ID; Office of Refugee Resettlement ID; other forms of photo ID may be considered)
- Proof of address for the tenant applicant (valid photo identification with address of rental property; OR current utility bill such as water, gas, cell phone, internet, other utilities with name of applicant and address of rental property; OR lease with name of tenant applicant and address of rental property)
- Proof of income for all adult household members (current pay stub(s) from work or letter from employer indicating current monthly wages/salary; if self-employed, current monthly financial statement or self-attestation of self-employment; if unemployed, current TWC unemployment check or statement OR letter from employer of termination from employment; proof of alimony, pension, retirement, and child support; proof of other income)
- Eviction letter or notice to vacate (if applicable)



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Tenant Applicant Certification

On _____ [date], I, the TENANT of the described rental property, provided my LANDLORD with the above information (noted on page 2 and 3 of the application) in order to complete and submit an application to BAKERRIPLEY for the EPRENTHELP.ORG RENTAL ASSISTANCE PROGRAM funded by the City of El Paso. I agreed to provide the required information and authorized my LANDLORD to input the information online and complete and submit the rental assistance application. The LANDLORD has agreed to input the information correctly on the online application as provided by me, the TENANT, and to complete and submit the application.

I certify that I am currently living at the rental property/unit listed above, that I owe the amount of rent noted above, and that I am at this property for residential purposes (assistance is not available for commercial rents).

I certify that I am not currently receiving tenant-based voucher assistance, project-based voucher assistance, or any other government-based rental assistance.

I certify that I have provided my landlord the required support documentation.

I certify that I qualify for this program because my inability to pay rent is directly related to a financial hardship resulting from the economic impact of COVID-19.

I certify under penalty of perjury that the above information is complete and accurate to the best of my knowledge. I understand that Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony and assistance can be terminated for knowingly and willingly making a false or fraudulent statement to a department of the United States Government. I agree to provide any additional documentation required by the program administrator to document my/our household income.

Print Name – Tenant

Signature & Date



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Landlord Certification

On _____ [date], the TENANT provided me with the above information in order to complete and submit an application to BAKERRIPLEY for the EPRENTHelp.ORG RENTAL ASSISTANCE PROGRAM funded by the City of El Paso. The TENANT agreed to provide me with the required information and authorized me (LANDLORD) to input the information online and complete and submit the rental assistance application. The LANDLORD has agreed to input the information correctly on the online application (as provided by TENANT) and to complete and submit the application.

I certify under penalty of perjury that the above information is complete and accurate to the best of my knowledge. I understand that Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony and assistance can be terminated for knowingly and willingly making a false or fraudulent statement to a department of the United States Government.

Print Name – Landlord Authorized Representative

Signature & Date

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