

Application for Financial Assistance—Before submitting an application, go to www.houseofamos.org

Click on WHAT WE OFFER, then FINANCIAL ASSISTANCE to learn about the qualifications.

IF you meet the qualifications, PRINT the form and write a response on all lines

To qualify, you must have experienced a sudden and significant loss of income AND are a parent with a child/children age 15 or under living with you AND you live in 77036, 77042, 77072, 77082 or 77099

Your Name: _____

Address: _____ Apt _____ Zip _____ How Many Residents? _____

Phone number: _____ Email: _____

1. What is your request for? We help with rent and utilities _____
If your request is for rent, attach a copy of page 1 of your signed lease agreement showing names of all residents. Your children's names must be shown on the lease. Provide documentation showing the age of your children. If the lease contract is with multiple adults, you must provide employment and income information for all adults.

2. How much do you owe? _____ **The amount owed must match the amount on the ledger or utility bill.** If request is for rent, you must submit a copy of your rental account ledger from the landlord that shows dates and details of activity for at least the past 6 months, including the date of your request. If request is for utilities, include a copy of your most current utility bill. **The amount owed must match the documentation.**
Our assistance is limited to \$1,000. We do not make partial payments. If you owe more than \$1,000, do not submit an application. Contact 211 and ask for other resources that may be able to assist you.

3. Explain why you are unable to pay your rent or utility bill. _____

4. Are you currently employed? _____ If yes, provide a copy of your last 2 paycheck stubs.
If not employed, when did you last work? _____
Provide documentation regarding your loss of employment, along with your most recent income. To qualify for our financial assistance, you must have experienced a sudden loss of income.

5. What is your source of income? Provide proof of income.

6. Have you received any financial assistance for rent or utilities in the past 12 months? _____
If yes, **who** was the assistance from? _____

When did you receive it? _____ **How much** did you receive? _____

7. If requesting rental assistance, provide contact information for your landlord. We must be able to communicate with your landlord. Give your authorization to your landlord authorizing them to communicate with House of Amos regarding your situation. Your landlord will not communicate with House of Amos without your authorization.

Landlord's name: _____

Landlord's phone number: _____

Landlord's email address: _____

8. Please provide any other information you think is relevant for our consideration of your request.

Include a copy of a picture ID with your application. Do Not Sent a Copy of Your Social Card, tax return, bank statement or any other document that contains your SS number

By signing below, you certify that all information contained on this application is accurate, current and true at the time of submission. You give House of Amos your authorization to contact your landlord or utility company. Falsifying information on your application or supporting documentation will result in denial of your request for assistance. Electronic signature is not accepted. You must sign the application in your handwriting.

Signature

Date

It is important for you to make every effort to find available options for assistance. Try to work with the management at your apartment office. Contact city services (211) or visit their website at 211texas.org to learn about options available to you. Call your utility provider to work out a payment plan.

Requests are handled through email only. Complete all line items on the application, sign it in your handwriting. Email the completed form, and attach all required supporting documentation, to:

assistance@houseofamos.org

It is **YOUR** responsibility to ensure you have responded to all line items on the application and you have attached **ALL** of the required documentation. We will respond to your request only if it meets our guidelines for assistance and we have funds available. **We are unable to process ineligible or incomplete applications or requests submitted without ALL of the required documentation. Read the application thoroughly.**

Assistance is limited to one time in a 12 month period. We do not make partial payments.

Check List for Application:

1. Have you experienced a sudden loss of income that affected your ability to pay your rent or utilities? If no, do not apply. If yes, provide documentation that proves you have experienced a sudden loss of income.
2. Are you a parent with a child/children age 15 or younger? If no, do not apply
3. Do you owe more than \$1,000? If you owe more than \$1,000, do not apply.
4. Has House of Amos provided financial assistance to you in the past 12 months? If yes, you are not eligible for assistance again within 12 months.
5. Did you write a response for every line item on the application? If there is no information to provide for a line item, write NA.
6. If applying for rental assistance, did you include a copy of the lease agreement?
7. If applying for rental assistance, did you include a copy of the current rental account ledger? If you do not know what a rental account ledger is, contact your leasing office and ask them to provide the rental account ledger that contains at least 6 months of activity (charges, payments and dates) up to and including the date of your request.
8. If applying for utility assistance, did you include a copy of the current utility bill?
9. Did you provide employment information for **all adults** on the lease contract?
10. Did you include copies of your last 2 paycheck stubs, if employed?
11. Did you include documentation to support job loss, if applicable?

Be sure to SIGN and date the application. No electronic signatures accepted.

Incomplete applications and/or missing documentation will not be considered.