

Attachment 1

Tenant Consent Form for Landlord-Initiated RAFT Applications

Dear Tenant _____ (name),

Your landlord has started a RAFT/ERMA application for you. RAFT and ERMA are Massachusetts programs that provide financial assistance to eligible households facing a housing crisis, and can be used for things like paying rent in the future, paying rent owed (overdue rent or “arrears”), or for some other housing-related costs. If you would like more information about the RAFT and ERMA programs, as well as other programs to help you stay in your home, visit www.mass.gov/COVIDHousingHelp or call 211.

If you accept assistance from RAFT or ERMA now, it will affect whether you can receive RAFT or ERMA in the next 12 months. It will also affect whether you can receive HomeBASE, a similar benefit for families experiencing homelessness.

You do not have to apply for or accept assistance from RAFT or ERMA; however, if you do not pay rent that is overdue, you may face eviction. Additionally, not paying past rent (“arrears”) can harm your credit and ability to get housing in the future. You can also apply for RAFT/ERMA yourself. If you’re interested in knowing more about these programs, call 211.

If you would like to permit your landlord to proceed to file an application on your behalf, please answer the following questions and sign this form.

1. COVID-19 certification

Being affected by COVID is not a requirement for benefits, but does affect which program(s) you may be eligible for. Please check off the box below if you, the tenant’s, situation was caused or made worse by COVID-19.

- I certify that I am applying for emergency housing assistance because of a housing situation that was caused or made worse by the COVID-19 pandemic and economic crisis.
- My housing crisis was not caused by COVID-19. Please consider me for the appropriate program.

If applicable, please explain how COVID-19 caused a financial hardship for your household and/or caused or worsened your current housing situation.

2. Past RAFT/ERMA Payments Received

Please choose one:

- I have applied for RAFT or ERMA and am waiting for my application to be processed, but I consent to the landlord filing an updated application on my behalf. (Note: you may decline to sign this consent form and instead wait for review of your existing RAFT/ERMA application).

I have not applied for RAFT or ERMA, or I have received RAFT/ERMA before but I need it again.

3. **Tenancy, Rent, Arrears, and Benefits**

Your landlord has said you live at _____ [Address], your monthly rent is \$_____, you owe \$____ total in rent (arrears), and you would like to continue living in this house/apartment.

This is correct

This is not correct. Please explain:

By signing this document, you give your permission to allow your landlord to submit a RAFT/ERMA application on your behalf. S/he will include the following information in the application and submit it to the nearest Regional Administering Agency (RAA):

- The names of your household members, and your address
- Household income and eligible deductions
- The **social security number** of every member of your household over the age of 18, if they have one. This number will be used to verify income.
- The amount of **rent you owe** and your monthly rent
- Information about people in your household, including dates of birth and demographics, and any **challenges** they may be facing paying rent
- Copies of your identification, lease, verification of housing emergency, and other documents such as proof of income, as requested

To receive RAFT/ERMA, you must meet certain income requirements, and your income must be verified. The RAFT/ERMA Agency may be able to call MassHealth or DTA to verify your income (they will not ask about your health or benefits). Please check the box or boxes that apply to your situation.

I am on MassHealth insurance.

I receive DTA benefits (i.e., SNAP, TAFDC, EAEDC).

I do not receive MassHealth or DTA benefits, or do not wish that those sources be used to verify my income.

4. **MassHire Career Centers can help you get a new job or advance your career**

Your local MassHire Career Center can help you with job search and connect you to other services to improve skills, land a job or develop a long-term career path. MassHire Centers are open for virtual services, so please call the one closest to you to enroll in a *Career Center Seminar*. The list of MassHire Centers across the state can be accessed at <https://www.mass.gov/how-to/find-a-masshire-career-center>.

You can also search and match to more than 150,000 open jobs online, utilize online tools to assess your skills, explore careers, sign up for scheduled virtual events, and manage your job search in JobQuest. You do not need to call a MassHire Career Center to register in the system. Go to www.mass.gov/jobquest to get started.

5. Authorization and Release for Tenant

Certain Personal Information (name, address, income, age, etc) about you and your household is provided on a RAFT/ERMA application. It will be used to determine eligibility and the need for financial assistance for the Residential Assistance for Families in Transition (RAFT) and Emergency Rental and Mortgage Assistance (ERMA) programs, and to comply with federal and state reporting and record keeping requirements. The information is also used to manage the housing program, to protect the public financial interest and to verify the accuracy of information submitted. When permitted by law, it may be released to government agencies, local public housing authorities, regional non-profit housing agencies, service providers and civil or criminal investigators and prosecutors. It may also be used for research and program evaluation purposes. Otherwise, the information will be kept confidential and only used by the Regional Agency staff in the course of their duties.

To verify program eligibility, the Regional Agency will provide information about you to others (agencies, including the Executive Office of Labor and Workforce Development, the Department of Unemployment Assistance [for unemployment insurance and other income information], the Department of Revenue, the Department of Transitional Assistance, MassHealth, and other state agencies, organizations, employers, your landlord, your mortgage holder or individuals) and receive information from those entities about you. Further, it may be necessary to discuss or correspond with others regarding this information. By signing below, you are giving permission to DHCD, Regional Agency and other entities as described herein to exchange information about you.

You or your authorized representative has a right to inspect and copy any information collected about you. You may object to the collection, maintenance, dissemination, use, accuracy, completeness or type of information the Regional Agency holds about you. If you object, we will investigate your objection and will either correct the problem or make your objection part of the file.

Under state privacy laws¹, applicants and program participants may give or withhold their permission to share this Personal Information. However, failure to permit the Regional Agency to share the required information may result in delay, ineligibility for programs, or termination.

Participant obligations

If Participant is found eligible and receives assistance, Participant agrees to:

- Provide the Regional Agency with all requested information from all sources for all household members, as requested.
- Remain in contact with the Regional Agency, as needed by the Regional Agency, in order to assist the Regional Agency with tracking and reporting on program performance.
- Not purposely do anything that would jeopardize the Participant's current housing or employment status.
- Not commit fraud or make any false statements in connection with the RAFT and/or ERMA programs.

¹ Massachusetts Fair Information Practices Act (FIPA), M.G.L. c. 66A; and the Massachusetts Data Privacy Act (DPA), M.G.L. c. 93H.

Other obligations of the Participant:

- The Participant agrees that he/she does not have any financial interest in the rental unit for which program funds are being used.
- The Participant agrees if he/she is approved for the same funding need by a different funder or source, he/she will immediately notify the Regional Agency and use best efforts to ensure that the funds are returned to the Regional Agency or to the other funder.
- The Participant agrees that all terms, conditions, and provisions of this contract apply to all members of the Participant's household.
- The Participant agrees to continue to make housing payments not covered by RAFT and/or ERMA assistance. Failure to comply with rent, mortgage, utility, or other payment obligations without a compelling justifiable cause may disqualify the Participant from any additional RAFT and/or ERMA financial assistance.

By signing below, you acknowledge that you understand that applying for RAFT/ERMA is not a commitment of monetary assistance, but if you are determined eligible, financial assistance between the RAFT and ERMA programs cannot exceed \$10,000 in any 12-month period, regardless of how many times you apply or are determined eligible.

By signing below, you certify, to the best of your knowledge, you have not received or been approved for funds from any other source to pay for the same expenses that have been requested in the RAFT/ERMA application .

This authorization is valid for a period of 10 years from the date of signing.

Important: All adults (18+) in the household must sign this document. Electronic signatures for the tenant are not permitted on this tenant consent form.

Tenant signature: _____ Date: _____

Other adult 18+ signature: _____ Date: _____

Other adult 18+ signature: _____ Date: _____

Other adult 18+ signature: _____ Date: _____

Other adult 18+ signature: _____ Date: _____

What happens next? The Regional Agency will work with you and your landlord to determine how much RAFT/ERMA funding you can receive. You can expect to hear back in several weeks.