



NOTE: See [Program Guidance During COVID-19](#) to learn about allowable changes to intake, signature and habitability inspection requirements.

To Request Funds

1. Fill out this form and upload it to the participant’s [HMIS](#) record or [here](#) if you are not an HMIS user.
2. Upload the participant’s photo ID, homeless verification, and income verification.
3. Upload the required documents for each assistance category included in request.

All Problem-Solving conversations, case notes, and requests for assistance funds must be recorded and tracked through HMIS to ensure alignment with Problem-Solving Policy and Procedures and Los Angeles County Problem-Solving goals. Problem-Solving Assistance Funds Requests will only be approved when Problem-Solving Conversations are recorded in HMIS and when HMIS case notes indicate that other options have been fully explored. **Non-HMIS users should upload all relevant documents to link provided above.**

PARTICIPANT/HEAD OF HOUSEHOLD INFORMATION	
COVID-19 Vulnerability Assessment and Tier 1 Referral <input type="checkbox"/> Yes <input type="checkbox"/> No	Emergency Housing Voucher (EHV) Recipient <input type="checkbox"/> Yes <input type="checkbox"/> No

Participant Name: _____	Enrollment Date _____
HMIS ID: _____	Household Size: _____
Number of Adults: _____	Number of Minors: _____
Household Monthly Income: \$ _____	Source of Income: _____
Current Status: <input type="checkbox"/> Homeless <input type="checkbox"/> At Imminent Risk of Homelessness <input type="checkbox"/> Fleeing Domestic/Intimate Partner Violence	
Population: <input type="checkbox"/> Individual/Single Adult <input type="checkbox"/> Family with minor children <input type="checkbox"/> Transitional Age Youth (18-24)	

FINANCIAL ASSISTANCE REQUESTED

Click links to learn more about [Financial Assistance Categories and Required Documents](#).

Financial Assistance Category	Required Documents Checklist	Amount Requested
ALL REQUESTS MUST INCLUDE→	<p>NOTE: Documents are required at the time of submission of PSARF except where indicated that a document can be submitted prior to exiting the case in HMIS.</p> <p><input type="checkbox"/> Photo identification or Alternate Documentation</p> <p><input type="checkbox"/> Homeless verification, self-certification, or proof of homelessness. One of the following is required:</p> <ul style="list-style-type: none"> • Third Party Verification of Homeless Status form • Observation of Homeless Status form • Imminent Risk of Homelessness Certification form • Self-Certification of Homeless Status form • Proof of Homelessness <p><input type="checkbox"/> Income verification, self-certification, or proof of income. One of the following is required:</p> <ul style="list-style-type: none"> • 3rd Party Income Verification form • Self-Declaration of Income/No Income form • Proof of Income (pay stubs, verification of benefits) 	N/A



Housing Assistance

<p>Security Deposit <i>up to double monthly rent, once every 12 months</i></p>	<p><input type="checkbox"/> Unit Certification (when lease/rental agreement is not available) OR Lease/ Rental Agreement (signature not required) <input type="checkbox"/> Property Owner or Authorized Agent W-9 <input type="checkbox"/> Property Management Agreement (if applicable) <input type="checkbox"/> Proof of Property Ownership <input type="checkbox"/> Habitability Inspection Form Required Prior to Exiting Case in HMIS: <input type="checkbox"/> Lease/ Rental Agreement, signed</p>	<p>\$: _____</p>
<p>Rental Assistance, new unit <i>up to two months' rent, once every 12 months</i></p>	<p><input type="checkbox"/> Unit Certification (when lease/rental agreement is not available) OR Lease/ Rental Agreement (signature not required) <input type="checkbox"/> Property Owner or Authorized Agent W-9 <input type="checkbox"/> Property Management Agreement (if applicable) <input type="checkbox"/> Proof of Property Ownership <input type="checkbox"/> Habitability Inspection Form Required Prior to Exiting Case in HMIS: <input type="checkbox"/> Lease/ Rental Agreement, signed</p>	<p>\$: _____</p>
<p>Rental Assistance, existing unit <i>up to two months' rent, once every 12 months</i></p>	<p><input type="checkbox"/> Signed Lease/ Rental Agreement <input type="checkbox"/> Property Owner or Authorized Agent W-9 <input type="checkbox"/> Property Management Agreement (if applicable) <input type="checkbox"/> Proof of Property Ownership <input type="checkbox"/> Habitability Inspection Form</p>	<p>\$: _____</p>
<p>Rental Arrears <i>up to two months' rent, once every 12 months</i></p>	<p><input type="checkbox"/> Arrears Notice from Landlord indicating amount owed <input type="checkbox"/> Signed Lease/ Rental Agreement <input type="checkbox"/> Property Owner or Management W-9 <input type="checkbox"/> Property Management Agreement (if applicable) <input type="checkbox"/> Proof of Property Ownership</p>	<p>\$: _____</p>
<p>Host Household Assistance <i>up to two payments every 12 months (\$500/30 days, \$1000/60 days for individuals OR \$900/30 days, \$1800/60 days for families)</i></p>	<p><input type="checkbox"/> Host Family Commitment Form <input type="checkbox"/> Host W-9</p>	<p>\$: _____</p>
<p>Miscellaneous Housing Costs <i>reasonable costs, once every 12 months</i></p>	<p><input type="checkbox"/> Lease/Rental agreement or lease addendum indicating required items OR Host Family Commitment Form OR Unit Certification <input type="checkbox"/> Invoice/Estimate/Proof of Pricing (if not indicated in lease) Required Prior to Exiting Case in HMIS: <input type="checkbox"/> Receipt/Proof of Payment</p>	<p>\$: _____</p>

Utility Assistance

<p>Utility Assistance (deposit, assistance, or arrears) <i>reasonable costs, once every 12 months</i></p>	<p><input type="checkbox"/> Utility bill or bills <input type="checkbox"/> Lease/ Rental Agreement, signed</p>	<p>\$: _____</p>
<p>Utility Assistance for Host Household (assistance, or arrears) <i>reasonable costs, once every 12 months</i></p>	<p><input type="checkbox"/> Host Family Commitment Form <input type="checkbox"/> Utility bill or bills</p>	<p>\$: _____</p>



Additional Assistance Categories		
Automobile Repair/Registration <i>reasonable costs up to \$3,000, once every 12 months</i>	<input type="checkbox"/> Invoice/Estimate/Proof of Pricing <input type="checkbox"/> Proof of vehicle ownership (registration/title/bill of sale/other) <input type="checkbox"/> Loaner vehicle commitment letter from vehicle owner (if not participant) Required Prior to Exiting Case in HMIS: <input type="checkbox"/> Receipt/Proof of Payment	\$: _____
Reunification Services <i>reasonable costs, one time</i>	<input type="checkbox"/> Invoice/Estimate/Proof of Pricing <input type="checkbox"/> Reunification Services Request Form <input type="checkbox"/> Proof of Parenthood (<i>if</i> reunifying out of LA County with minors): <ul style="list-style-type: none"> • Birth Certificate • Adoption records • Other court records Required Prior to Exiting Case in HMIS: <input type="checkbox"/> Receipt/Proof of Payment	\$: _____
Gas Cards <i>up to six (6) \$50 cards for employment OR 1.5x amount required to reach Reunification destination, once every 12 months</i>	<input type="checkbox"/> Employment acceptance letter OR Employment work schedule (when gas cards are to support travel to work) <input type="checkbox"/> Printout of gas cost estimate from www.gasbuddy.com website (when gas cards are to support travel for reunification) Required Prior to Exiting Case in HMIS: <input type="checkbox"/> Signed Gas/Grocery Card Acceptance form	\$: _____
Motel/Hotel (can only be used with reunification services) <i>up to 3 nights prior to departure</i>	<input type="checkbox"/> Invoice/Estimate/Proof of Pricing <input type="checkbox"/> Reunification Services Request Form Required Prior to Exiting Case in HMIS: <input type="checkbox"/> Receipt/Proof of Payment	\$: _____
Debt Resolution <i>up to \$3,000 for individuals \$5,000 for families, one time</i>	<input type="checkbox"/> Loan document/invoice <input type="checkbox"/> W-9 if being paid by check (not required for online payments) Required Prior to Exiting Case in HMIS: <input type="checkbox"/> Receipt/Proof of Payment	\$: _____
Employment Support <i>reasonable costs, once every 12 months</i>	<input type="checkbox"/> Invoice/Estimate/Proof of Pricing <input type="checkbox"/> Employment acceptance letter OR Employment work schedule Required Prior to Exiting Case in HMIS: <input type="checkbox"/> Receipt/Proof of Payment	\$: _____
Grocery Cards <i>up to \$400 for individuals, \$800 for families, twice every 12 months</i>	Required Prior to Exiting Case in HMIS: <input type="checkbox"/> Signed Gas/Grocery Card Acceptance form	\$: _____
Furniture/Household Supplies <i>Essential items up to \$1000 for individuals, \$1800 for families, one time</i>	<input type="checkbox"/> Unit Certification OR Lease/Rental Agreement OR Host Household Commitment form <input type="checkbox"/> Invoice/Estimate/Proof of Pricing <input type="checkbox"/> W-9 if being paid by check (not required for online payments) Required Prior to Exiting Case in HMIS: <input type="checkbox"/> Receipt/Proof of Payment	\$: _____
*Additional documentation may be requested on a case-by-case basis.		
REQUEST TOTAL		\$: _____



REQUEST JUSTIFICATION (DO NOT LEAVE BLANK)

Please explain how the financial assistance requested will help resolve the participant/household's housing crisis:

How will the participant/household continue to financially sustain their housing situation after all financial assistance funds are used?

AGENCY INFORMATION

Agency Name:

Is your agency located in the City of Los Angeles? Yes No

Client Name:

Client Signature:

Staff Name:

Staff Title:

E-Mail:

Phone:

I certify that the information contained in this form is accurate to the best of my knowledge.

Staff Signature:

Date Completed:

LAHSA AUTHORIZATION (FOR LAHSA PS UNIT USE ONLY)

Approved? Yes No

Notes:

LAHSA Staff Name

LAHSA Staff Signature

Date