

Imminent Risk of Homelessness Certification

This form is to be completed by the intake worker verifying homeless eligibility under Category 2 of HUD's homeless definition. An individual or family must be imminently at risk of losing their primary nighttime residence within 14 days **and** has no subsequent residence identified and lacks the resources or support networks to obtain other permanent housing.

Applicant Name:		HMIS ID:
<input type="checkbox"/> Individual without dependent children	<input type="checkbox"/> Household with dependent children	Number of persons in the household:

Current living situation as reported to intake worker (please select appropriate box)
<input type="checkbox"/> Condition 1a: Housing Loss within 14 days in which they rent or own the housing
<input type="checkbox"/> Condition 1b: Housing Loss within 14 days in which they stayed in a hotel/motel that was self-paid
<input type="checkbox"/> Condition 1c: Housing Loss within 14 days in which they share housing with others

Part I: Third-Party Documentation Obtained (check box for documentation attached)
<input type="checkbox"/> Condition 1a: An Unlawful Detainer ("Eviction") notice or equivalent notice (Ex: Foreclosure notice)
<input type="checkbox"/> Condition 1b: Hotel bill and record that the household paid the bill along with a record of savings demonstrating that they cannot afford a stay of 14 days or more.
<input type="checkbox"/> Condition 1c: Signed letter from leaseholder/property owner that indicates that the household must vacate within 14 days of the date of application for homeless assistance or
<input type="checkbox"/> Condition 1c: Third-Party Oral Verification (Form) documenting the individual's oral statement and oral verification from the relevant third-party (provided over the phone or in person). Intake staff must record the oral statement in writing and certify the recorded statement is true and complete.
<input type="checkbox"/> Other: Written or source documentation to support lack of financial resources (e.g. Not limited to: zero income affidavit, termination of employment letter, unemployment benefits, a letter from landlord of increase in rent, etc.

Part II & III: Must also obtain self-certification from the applicant (must attach)
<input type="checkbox"/> Self Certification of Homelessness Form- Signed by the applicant certifying housing loss is within 14 days of the date of application, no subsequent residence has been identified, and they lack the resources and support networks to obtain other permanent housing.

<i>I certify that, to the best of my knowledge and belief, all the information presented and attached to this form is true, accurate, and complete.</i>	
Staff Name:	Staff Title:
E-Mail:	Phone:
Staff Signature:	Date:
Agency Name:	