



**CERTIFICATION OF RENTAL ASSISTANCE ELIGIBILITY FOR THE
MARYLAND ASSISTED HOUSING RELIEF PROGRAM**

_____ Property Name	_____ Building Address	_____ City	_____ Zip
_____ Primary Tenant (the "Tenant")	_____ Unit # (the "Unit")		

This form confirms the above-referenced tenant's eligibility for the Maryland Assisted Housing Relief Program.

PART 1: Assisted Household Information and Eligibility

The undersigned hereby certifies that the above listed Tenant resided at the Unit and fully met the following eligibility criteria for the Maryland Assisted Housing Relief Program:

- The Tenant was identified as a leaseholder or lessee in the written Lease for the Unit;
- The Tenant, or someone within their household, has experienced a COVID-19 Related Financial Hardship. Financial hardships include qualifying for unemployment, a reduction in household income, or incurring significant costs;
- The Tenant, or someone within their household, can demonstrate a risk of experiencing homelessness or housing instability; and
- The Tenant's household has a total household income at or below the following incomes based on family size:

Statewide Income Limits								
Household Size	1 Person	2 People	3 People	4 People	5 People	6 People	7 People	8+ People
80% of AMI	\$55,950	\$63,900	\$71,900	\$79,900	\$86,300	\$92,700	\$99,100	\$105,450

Note: Households that are unable to provide documentation to verify household income for the full calendar year 2020 must complete this certification every 3 months. Documentation includes paystubs, W-2s or other wage statements, tax filings, bank statements demonstrating regular income, or an attestation from an employer. If the household income has been verified to be at or below 80% of the area median income through a local, state, or federal government assistance program, you may submit a determination letter from the government agency that verified the household income if the determination was made on or after January 1, 2020.

PART 2: Household Certification

I understand that completing this certification is required to maintain compliance with the Maryland Assisted Housing Relief Program and to obtain assistance under the Maryland Assisted Housing Relief Program. I certify that the information presented in Part 1 of this form is true and complete. I consent to the disclosure of such information to the Maryland Department of Housing and Community Development. I affirm that the foregoing certifications, representations and warranties are true, correct, and made by affidavit under penalties of perjury. I understand that making false representations to the Department, or aiding another person in making false representations to the Department, may result in civil penalties and treble damages pursuant to Md. Code Ann., Gen. Prov § 8-102 and/or criminal penalties pursuant to Md. Code Ann., Crim. Law §§ 8-503 and/or 9-101.

_____ (Signature Tenant)	_____ (Date)
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