



2640 Fountain View Drive ■ Houston, Texas 77057 ■ 713.260.0500 P ■ 711 TTY ■ www.housingforhouston.com

Tiered Rent Hardship Request Form

Hardship requests must be made by completing this form and submitting it, along with supporting documentation. **You must be assigned to the Tiered Rent Cohort to be eligible.**

Date: _____ Contact Phone Number: _____

Head of Household Name: _____

Address: _____

New Hardship Request

Hardship Extension Request

Please check the box indicating the type of hardship you are experiencing and provide a short explanation of how this circumstance creates a financial hardship. Please see page two of this form for information about required documentation.

<p><input type="checkbox"/> Reduction in Income or Full Time Student</p> <p><input type="checkbox"/> Elimination of Rent Deductions</p> <p style="padding-left: 40px;"><input type="checkbox"/> At least \$2,000 in Monthly Child Care Expenses Monthly Expenses: \$ _____</p> <p><input type="checkbox"/> Death of a Family Member</p> <p><input type="checkbox"/> Significant Out-of-Pocket Expenses (example: large medical bill)</p> <p><input type="checkbox"/> Household Facing Eviction due to Inability to Pay Rent</p> <p><input type="checkbox"/> Other</p> <p>Please explain how this circumstance creates a financial hardship:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>What is your total current monthly family income? \$ _____</p>

Under penalties of perjury, I certify that the information presented in this Request is true and accurate to the best of my/our knowledge and belief. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading, or incomplete information may result in the termination of the lease agreement.

Head of Household Signature

Date

Social Security Number: _____

Entity ID: _____



HOUSTON
HOUSING AUTHORITY

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*** A HHA MTW Housing Specialist will contact you, as to what documentation will be needed for your Hardship request.**

Submit your Hardship request, to the MTW Team, via Email or Fax, using the contact information listed below. You may also, drop off at HHA Office at 2640 Fountain View Dr, Houston, TX 77057.

MTW Team

Email: MTW_HCVP@housingforhouston.com

FAX: 713-260-0697

Please contact MTW Team at 713-260-4873 or MTW_HCVP@housingforhouston.com , if you, or a member of your household, require accommodations in order to fully utilize our programs and services.

*****If you are a Public Housing Resident, please contact Ricardo Harris at Rharris@housingforhouston.com**