

Below are screenshots of the **tenant** portal. If you have any questions filling out the application, you can go to the **"?" icon** in the top right corner of the portal to view the help center.

RentRelief / Applicant : Martin Testtenant (Case#2444)

Preregistration ✓

Address ✓

Occupants ✓

Income ✓

Rental Info ✓

Landlord Info ✓

Utilities ✓

Documents ✓

Submit ✓

Case ✓

Eligibility Pre-check

100%

* Indicates required fields

① We need to determine if you qualify for UniteCT, a program providing Emergency Rental Relief (ERA). Answer all the questions on this page. If you initially qualify, we will ask for more details about your household, income, landlord, rent and utilities and supporting documentation. Initial qualification does not mean you will receive rental assistance. Once we have verified your income, rent and household information, we will determine your eligibility.

① Information you provide will be used for determining your eligibility for state assistance. We will not provide your information to third parties, except as needed to determine your eligibility for rent relief, comply with federal reporting and audit requirements, and evaluate or research the program.

① Do you have questions? Please visit our help center for immediate answers. This can be found at the top under the "?" icon. If you still have questions, you can call 1-844-UniteCT (1-844-864-8328) or email DOH-UniteCT@ct.gov. You can save and leave this application at any time. Later, when you return you can pick up where you left off.

Are you renting your primary residence? *

① You must have a valid signed lease, rental agreement, or alternative documentation demonstrating an obligation to make rental payments for your unit, to be eligible for rental relief.

☒ Yes ☐ No

Are you receiving Section-8 or Rural Development rental assistance? *

☐ Yes ☒ No

Are you currently living in public housing? *

☐ Yes ☒ No

Preferred Language *

English

Select your geographical area *

① Select your Town or other geographical area.

Hartford County - Granby

Number of People in Household *

① The number of people in your household includes all adults listed on your lease, all children living in the rental more than 50% of the time, and any foster children or adults. Do not include live-in aids. Do not include unborn children.

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Applicant Address

100%

* Indicates required fields

① Provide the address of the property you are renting. If you receive mail at an address different than your rental address, provide your mailing address. When you save this page, we will validate addresses with the United States Postal Service and may suggest changes for standardization purposes.

Current Address *

1248 Farmington Ave

Mailing Address (if different than Current Address)

Address Line 2

City * State * Zip *

West Hartford CT 06107-2609

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Occupants

100%

① We need to know about everyone living in the unit except live-in aids. This includes all adults listed on the lease or rental agreement, children living in the unit more than 50% of the time and any foster children or adults living in the rental. Do not include unborn children.

The primary applicant is listed first, and we have copied the information you supplied earlier to this page.

— Applicant: Martin Testtenant

* Indicates required fields

First Name *	Middle Name *	Last Name *	Ethnicity *
Martin		Testtenant	Hispanic or Latino
Date Of Birth *			Race *
XXXX/XXXX			Other
Phone Type *	Phone Number *		Social Security Number / ITIN *
Cell	(203) 587-1453		XXX-XX-XXXX
Email Address *			Alternate Contact Details
matrintest@yopmail.com			First Name Middle Name Last Name
Gender *			Phone Type Phone Number
Male			
Are you currently unemployed? *			Email Address
No			

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Income

100%

① Tell us about all sources of income for the household. All amounts should be monthly. If you do not have a type of income, check the "N/A" checkbox. If you have income that does not match the listed income types, enter it on the "Other Income" line.

Click the + sign next to the name of each adult to report their income and provide documentation.

① Current Total Monthly Gross Household Income \$2,000.00

① Select N/A wherever not applicable

① Allowed file types: pdf, jpg, jpeg, png, tiff, zip

— Complete Applicant: Martin Testtenant

Wages, Tips & Overtime	Monthly Amount
① Submit your last two months of paystubs or a letter from your employer detailing your earnings for the past two months.	\$0.00
Unemployment	Monthly Amount *
① Submit two months of payment information: a benefit letter, bank statements, or other supporting documentation.	\$1,000.00

testdo...

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Rental Info

100%

* Indicates required fields

Number of Bedrooms *

① For efficiencies, studios, or single room occupancy units, enter zero.

2

Lease Start Date * Monthly Rent *

① Enter the date your lease or rental agreement began even if you are now renting month-to-month.

\$2,100.00

07/01/2019

Past Due Rent

① Only enter past due amounts after March 13, 2020, if any.

\$3,000.00

Number of months past due *

① How many months is your rent now past due? Do not count months prior to March 13, 2020.

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Landlord Info

100%

* indicates required fields

① We need to contact your landlord to invite them to complete their portion of the application. Landlord information may be found on your lease, your rental agreement, or by contacting your leasing office or property management company directly.

Company Name

Landlord Mailing Address *

100 Town Rdg

Owner/Contact First Name * Owner/Contact Last Name *

Mildred Testanlord

Address Line 2

City * State * Zip *

Middletown CT 06457-1631

Email Address *

mildred34@yopmail.com

Phone Number * Ext.

(801) 789-4122

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Utilities

100%

① List all utilities you pay for. If you do not pay for utilities check the box labeled "I do not pay for utilities".

① Allowed file types: pdf, jpg, jpeg, png, tiff, zip

☐ I do not pay for utilities

— Complete Utility:

Utility Type *	Vendor Name
Total Amount *	Account#
① List the total amount you owe for this utility including any past due amounts, do not include amounts prior to March 13, 2020.	Address Line 1
\$1,125.00	Address Line 2
Past Due Amount	Address Line 3
① Enter only the amount past due. Do not include amounts prior to March 13, 2020.	City
\$1,000.00	State
Months Past Due	Zip
① Enter the number of months your utility bill is past due. Do not count months prior to March 12, 2020.	
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Current Amount Due	Invoice Date
\$125.00	02/26/2021

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Documents

100%

* Indicates required documents

① Allowed file types: pdf, jpg, jpeg, png, tiff, zip

① Enter only the amount past due. Do not include amounts prior to March 13, 2020.

— Complete Applicant: Martin Testtenant

Applicant Info *	testdocument.pdf
Provide a copy of a valid government photo ID. Expired documents are acceptable.	Uploaded by Martin Testtenant on Mar 10, 2021
Lease Document *	testdocument.pdf
Provide a copy of your lease, rental agreement, or other documentation demonstrating an obligation for you to pay rent for the unit. If you do not have a lease, rental agreement, or other alternative documentation upload a statement that says: "I do not have this document".	Uploaded by Martin Testtenant on Mar 10, 2021
Past Due Rent *	testdocument.pdf
If you have one, provide a copy of your most recent past-due rent statement. If you do not have a past due rent statement, upload a statement that says: "I do not have this document".	Uploaded by Martin Testtenant on Mar 10, 2021
Eviction Notice	testdocument.pdf

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Case Summary

① Your case has been submitted and will be reviewed by a case auditor to ensure it qualifies for Emergency Rental Relief Act. A case auditor may reach out to you with questions. Feel free to log back in to see the updated case status. Thank you.

Case: 2444

Applied

Submitted on Mar 10, 2021

Applicant: Martin Testtenant

Case Worker: Unassigned

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Review & Submit

100%

Terms and Conditions:

☒ I hereby declare that the information furnished with this application is true, complete and correct to the best of my knowledge and belief.

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