

STATE OF CONNECTICUT DEPARTMENT OF HOUSING



UniteCT Eviction Prevention Fund Voluntary / Court-Stipulated Checklist

| Tenant Name: | UniteCT Case Number: | |
|--------------------------------|----------------------|--|
| Landlord Name: | | |
| Landlord Email / Phone Number: | | |
| Address of Rental Unit: | | |
| | | |

The above parties have reached a Voluntary / Court-Stipulated Agreement with the intention of either:

- 1) Re-instating tenancy through repayment of rental arrearage OR
- 2) Vacating the unit as determined by the agreed upon move-out date

A tenant may not receive both rental arrearage and security deposit/first month's rent through the Program. If a stipulated agreement between the parties provides for a move-out date and not a re-establishment of tenancy, rental arrears will not be paid to the existing landlord.

This agreement must be submitted to <u>DOH.Eviction@ct.gov</u> (please denote the UniteCT Case Number in the subject line of the email) within 30 days of application date. If you are in need of a 30 day extension, please submit the request to <u>DOH.Eviction@ct.gov</u>.

Per EPF guidelines, required provisions, outlined below, must be included in the landlord/tenant Agreement. Prior approval of financial funding, these requirements will be reviewed by UniteCT EPF staff. To assist in the review of the Voluntary / Court-Stipulated Agreement, please identify the Page and Section of the Agreement in which the required programmatic provisions are denoted.

| Required Provision | Reference in Agreement Page / Section |
|---|--|
| Funding Availability / Tenant Eligibility | Page #: |
| "All EPF program payments are based on the availability of funding. If funding becomes | |
| unavailable and/or is deemed not payable to the Plaintiff/Landlord, the Defendant/Tenant is | Section/Paragraph #: |
| responsible for paying the amount that is owed, and for making payment arrangements with | |
| the Plaintiff/Landlord. The Defendant/Tenant is attesting to the accuracy of the household | |
| income, and if the program determines that household income is above 80% AMI OR that the | |
| household has received the maximum allowable UniteCT assistance OR that they do not meet | |
| any other eligibility criteria, they will be determined ineligible for EFP funds." | |
| Completion & Submission of Paperwork | Page #: |
| "The Plaintiff/Landlord and the Defendant/Tenant must submit all the required and requested | |
| paperwork to the Connecticut Department of Housing before any committed funds are | |
| approved and released to the Plaintiff/Landlord on behalf of the Defendant/Tenant." | Section/Paragraph #: |
| | |
| Arrearage / Repayment Amount | Page #: |
| A statement of the amount of arrearage owed, and the amount to be paid by Eviction | |
| Prevention Funds. In addition, please specify the months that the arrearage covers. For | Section/Paragraph #: |

| example, December 2022 – February 2023. Ensure that the Rental Arrearage for Eviction Prevention Fund (EPF) is attached. | ☐ Attach Rental Arrearage for |
|--|-------------------------------------|
| Note: The Verification of Rental Arrearage Form – HAF must accompany the agreement. | Eviction Prevention Fund (EPI form. |
| a. A tenant cannot receive more than 12 months of rental arrearage assistance in a lifetime. The 12 months do not need to be consecutive. b. UniteCT Eviction Prevention Funds can only pay arrearage toward rent/use and occupancy. The funds cannot be used to pay fines/fees that may have been accrued on a tenant ledger. If a rental arrearage is greater than maximum available assistance, the balance may to be written into a payment plan. c. UniteCT EFP cannot pay for rental arrearage prior to April 1, 2020. | |
| Fees The Plaintiff/Landlord agrees to waive all late fees accrued prior to the date of the Agreement. | Page #: |
| <u>Note</u> : All other fees may be negotiated with the tenant; however, neither UniteCT EPF nor Rent Bank funds can be used to pay such fees. | Section/Paragraph #: |
| Reinstatement of Tenancy vs. Move-Out Date Upon satisfaction of the terms of this Agreement, the landlord-tenant relationship shall be reestablished, whether by the signing of a lease, the fulfillment of a court-ordered reinstatement, or other agreement between the parties OR The Defendant/Tenant agrees to vacate the unit by [DATE]. | Page #: Section/Paragraph #: |
| Document Availability "A copy of this Agreement and the information contained in it shall be made available to the Connecticut Department of Housing's Eviction Prevention Fund and/or its affiliating agencies for purposes of the administration of its programs." | Page #: Section/Paragraph #: |
| Please confirm the following by checking each box: | I |
| \Box The landlord's name on the agreement <u>must</u> match the W9. | |
| ☐ The CT Department of Housing maintains a list of landlords whom have acted fraudu the UniteCT program. If a landlord is identified on this list, the landlord is ineligible to a Funds. If tenant is renting from landlord identified as having past fraudulent participation for up to \$3,000 for security deposit and first month rent to move to a new apartment. | receive Eviction Prevention |
| Name / Agency (if applicable) of Entity Submitting the Agreement: | |
| Email / Phone Number: | |

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