

COVID-19 RENT FORBEARANCE REQUEST

DATE: _____ COMMUNITY: _____ UNIT#: _____

RESIDENT NAME(S): _____

CELL #: _____ EMAIL: _____

Management and owners recognize that the COVID-19 health crisis is severely straining many of our residents' finances. Our goal is to keep residents safely in their homes. Thank you for providing the following information so we may help you through this difficult period. We appreciate your residency.

REQUEST

I/We the Resident(s) below are requesting a rent forbearance due to a substantial loss of income resulting from COVID-19 as demonstrated below. Requests are reviewed based upon financial changes to all Residents (collectively Household) only.

Household income has been reduced by \$_____ per month.

I understand that rent remains due and payable and my requesting forbearance does not eliminate the monies I owe to my apartment community.

CAUSE

The difference between the Household's prior and current income is a direct result of COVID-19. Specifically, the substantial loss of income was caused by the following COVID-19 related events (check all that apply):

- Missing work to care for child/dependent due to:
 - School closure
 - Childcare closure
 - Other:
- Job loss
- Reduction of hours
- State or local emergency action prevents me from working
- Other:

DOCUMENTATION

I have provided the following documentation (check all that apply):

- Letter from employer citing COVID-19 as reason for reduced hours or termination
- Paycheck stubs before and after COVID-19 outbreak
- Bank account statements before and after COVID-19 outbreak
- Other proof of substantial loss of income:
- I currently have no documentation supporting this request, but I certify that the statements set forth above are true.

Owner/Agent reserves the right to require an updated forbearance request periodically.

Head of Household Signature

Date