

**AGENCY NAME**  
**Participant Agreement for RRH**

Name: \_\_\_\_\_ Phone : \_\_\_\_\_

Address: \_\_\_\_\_

**HOUSEHOLD RESPONSIBILITIES:**

1. Residents of home will meet together with staff \_\_\_\_\_ times per week.
2. Household is responsible to pay \$\_\_\_\_\_ to the landlord by the 1<sup>st</sup> of each month and provide proof of payment to case manager.
3. Household will pay all utility bills by the due date each month and provide proof of payment to case manager.
4. Household is responsible for water\$\_\_\_\_\_, sewer\$\_\_\_\_\_, garbage \$\_\_\_\_\_
5. Household is responsible for Renters Insurance:\$\_\_\_\_\_/ waived / declined
6. Household will develop a budget and/or demonstrate budgeting skills and understating of their financial situation.
7. **Household will provide proof of income and bank statements to case manager each month. Failure to do so could result in late rental payments and/or program termination. If payment is late due to not providing required documents, you will be responsible for any late charges accrued.**

**NOTES:** \_\_\_\_\_

**PROGRAM RESPONSIBILITIES:**

1. To provide \$\_\_\_\_\_ rent subsidy directly to the landlord for **3 months**\_\_\_\_\_.
2. To provide case management to assist household in accomplishing their goals.

**TERMINATION OF THE HOUSING PROGRAM MAY OCCUR FOR THE FOLLOWING REASONS:**

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| 1. Falsification of financial documentation.         | 5. Failure to meet with staff as scheduled.        |
| 2. Misinformation provided at intake.                | 6. Failure to accept affordable housing options.   |
| 3. Failure to pay your portion of rent (if required) | 7. Failure to provide monthly financial documents. |
| 4. Repeated violations of lease.                     |  |

**AGREEMENTS:**

\_\_\_\_\_ I agree to be a responsible tenant. I understand my obligations as a tenant under landlord tenant law.

\_\_\_\_\_ I agree to be responsible for any damages I or any of my guests may cause to the property while I am a tenant.

\_\_\_\_\_ I agree to not physically or verbally assault or threaten violence of any kind to any individual, neighbor, landlord or staff.

\_\_\_\_\_ I agree to actively job search and provide documentation to my case manager.

**No payments will be provided directly to staff. All payments, in any form, will be given directly to landlord/property manager. If at any time this occurs, please contact **ENTER AGENCY CONTACT HERE.****

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**Print Full Legal Client's Name**

**Client Signature**

**Date**

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**Print Full Legal Staff Name**

**Staff Signature**

**Date**