



Proposal Form

Applicant Name (as it appears on the application):

Name of all other adults on lease/rental agreement:

Does this household meet the income requirement of 50% AMI or lower per HUD guidelines?
Current limits are listed below by household size for your reference.

1 person \$33,100	5 people \$51,050
2 people \$37,800	6 people \$54,850
3 people \$42,550	7 people \$58,600
4 people \$47,250	8 people \$62,400

Yes No

Note: If a household does not meet the income requirement, please ensure that documentation is sent to Douglas County Human Services to support this exception.

Deposit Funding Amount: _____

Rental Assistance Month	Amount of Assistance
_____	_____
_____	_____
_____	_____
_____	_____

Total Rental Assistance: _____

Total Deposit Funding: _____

Total Funding Request: _____

Application Processor Name

Application Processor Agency

Human Services Program Manager Signature



Housing Stabilization Collaborative – Landlord/HSC Agreement

The Housing Stabilization Collaborative (HSC) rental assistance agreement is a two-way agreement between the HSC and the landlord to assist the landlord and tenant specified below. The agreement is designed to provide direct assistance to the landlord on behalf of the tenant for a designated period of time.

Tenant Information		
Tenant(s) Name(s):		
Street Address of Unit:		
City:	State:	ZIP:
Landlord Contact Information		
Landlord/Manager's Name:		
Phone Number:	E-mail Address:	
Landlord Payment Information		
Check Payee:		
Payment Mailing Address:		
City:	State:	ZIP:
Agreement Information		
Period of Agreement:		
Rent/month during period for tenant:	Program agrees to pay:	



Upon signing this agreement and continuing for the period of agreement, Douglas County Human Services, as the administrator of Housing Stabilization Collaborative, shall:

- Pay the landlord a total of \$ _____ subject to the terms outlined in this agreement.
- Instruct HSC Partner Agency to provide tenant with appropriate referrals and resources to assist with financial and housing stability.
- Refer landlord to appropriate landlord incentive programs, mediation programs, and other resources as needed.

Upon signing this agreement and continuing for the period of agreement, the landlord shall:

- Waive late fees in the amount of \$ _____ .

Explanatory note: If \$0 is listed above the landlord has not agreed to waive late fees and tenant retains responsibility for payment of any late fees above and beyond assistance payment.

- Notify Douglas County Human Services via the email address below if any concerns or disputes arise with the applicant household, including but not limited to, lease violations. Such notification shall occur prior to issuance of a 14/30 notice, although landlords retain their full right to issue and enforce a 14/30 notice and issuance does not require approval of Douglas County Human Services.
- Rescind any existing legal motions to evict the tenant for nonpayment of rent.
- Not propose any legal motions to evict the tenant for nonpayment of rent.
- Contact Douglas County Human Services via the email address below if they have any concerns or disputes with the tenant household.
- Not continue to charge or accrue late fees if the amount program agrees to pay is greater than or equal to the amount owed by tenant to date.

Contact Douglas County Human Services: hsc@douglascountyks.org

We require that deposit and rental assistance does not duplicate any other assistance. Your electronic signature below indicates you understand and agree to repay any assistance that is duplicated by another source.

Landlord Signature

Job Title

Date

Human Services Program Manager,
Douglas County Kansas

Date