

PHILADELPHIA INTERFAITH HOSPITALITY NETWORK (PIHN)
AN AFFILIATE OF FAMILY PROMISE
7047 Germantown Avenue Philadelphia, PA 19119
Phone: 215-247-4663 Fax: 215-599-9948

Eviction Prevention Program
LANDLORD CERTIFICATION OF TENANT HOUSING STATUS

Date: _____

_____ (tenant name) has applied for assistance at Philadelphia Interfaith Hospitality Network, a non-profit organization that provides small grants to enable recipients to obtain/retain housing. To complete the application, process the following information is required (lease, rental license, certificate of suitability, and rent ledger if applicable). This form and supporting documents should be returned to the applicant, emailed to the PIHN staff, or faxed to PIHN at 215-599-9948. **Once approved, financial aid is paid directly to the landlord or property manager within 10 days. Acceptance of a PIHN rental grant must guarantee applicant residency.** Please respond to either **Eviction Prevention/rent assistance** or **Relocation Assistance/security deposit** questions below.

Address of the rental property:

1) EVICTION PREVENTION ASSISTANCE

Tenant Housing Status/Risk of Eviction:

Monthly rent amount: \$ _____ Monthly rent due date: _____

Last payment date: _____ Current rent arrearage total: \$ _____

- 1) What months have the tenant not paid rent? _____
- 2) What is the date last payment was made? (date) _____
- 3) ***To avoid possible eviction, by what date must the past due rent be paid?*** _____

2) RELOCATION ASSISTANCE (security/1st mo rent)

Move-in date: _____

Has the tenant moved into the new address? Yes No

Total security and move-in fees due: \$ _____ Does this include any rent? Yes No

If yes, which month(s)? First, last, etc. _____

Total balance due to move in: \$ _____

Form must be completed before financial aid can be processed.
Please print clearly and provide documentation requested.

Financial aid payable to: _____
(landlord or property mgt co name)

Payment mailing address: _____

I verify that the information provided is true and that I am authorized as an agent/owner to collect rent, fees for the above property, and have provided documentation to that fact (i.e. rental license, certificate of suitability). The landlord/owner agrees to inform our agency of any lease violations, pending eviction notice or complaint used to commence an eviction against the program participant (tenant). By accepting PIHN rent/security financial assistance, I understand that the tenant is guaranteed residency for the term of the lease/contract, contingent upon payment.

Print Name: _____

Telephone: _____

Landlord Signature: _____

Date: _____

Email: _____

Print Name: _____

Telephone: _____

Tenant Signature: _____

Date: _____

Email: _____