

Landlord/Agency Attestation Form-TRRP 2024

Landlord/Tenant Information:

Does this tenant have a housing vou	cher? (please circle one)	Yes	No	
l,	, (Landlo	ord/Proper	ty Management Agency) agree/ha	ive
agreed to rent to:			(tenant/client) a unit loca	ited
at:			(unit address/city/sta	ate).
The total monthly rent is:	The security depo	osit amoun	t is:	
I have received, from the agency bel	low, the sum of:		toward the landlord	
incentive/security deposit/monthly	rent/rental arrears** for thi	s tenant (p	olease circle all that apply).	
If receiving funds towards ren past due charges	tal arrears, please include	e a tenant	t statement or invoice showing	all
Check made payable to:				
Address/City/State				
Phone:	En	nail:		
Signature of Landlord/Property Man	nagement Representative:			
		Da	ate:	
Signature of Tenant/Client:				
		Da	ate:	
Agency Information: We have authorized payment to the incentive/security deposit/monthly and request reimbursement for this duplicity of benefits has been identificental arrears). Agency Name/Address:	rent/rental arrears (<i>please o</i> expense under the Housing fied for any of the client exp	circle all the Problem S enses unde	at apply) for the above-named ter solving Grant. We further certify the er this reimbursement (except in t	nant/client hat no he case of
rigericy Hume/Humess.				
Agency Representative Signature:			Date:	
Email:	Phor	ie:		