

T-RAP Rent Payment Agreement Form - Version 5

Instructions for T-RAP service provider if tenant is applying: Complete Sections 1 and 2 with head of household. T-RAP staff calculates Section 3 and determines Section 4. T-RAP staff calculates sections 3 and 4. Contact landlord to complete Section 5.

Instructions for landlord if landlord is initiating on behalf of tenant: "Landlord" includes property manager/owner or other person authorized to seek rent payment, including friends/family. Landlords complete only Sections 1, 2, and 5. (T-RAP service provider completes 3 and 4). The T-RAP service provider will contact the tenant to determine eligibility. Household must complete Section 6 if application initiated by Landlord or if payment is made directly to household*. Submitting this form does not guarantee payment.

1. Household/Tenant and Rental Information								
Household ID (completed by T-RAP service provider):						Date:		
Name:								
Rental Address (street, city, state, zip code):								
Number of bedrooms in rental unit: <i>If a shared living situation with friend/family, how many bedrooms is the household/tenant paying for? If only paying for a "sleeping space," indicate "1."</i>								
2. Rent Request								
a. What is the tenant's monthly rent/lease amount? <i>Utility costs embedded in the total rent amount and separately stated utility amounts in the lease will be included in the rental payment.</i>						Rent: \$		
b. Indicate below the months the household/tenant rent is past due and the future rent to be paid. <i>Assistance cannot be provided for arrears that were accrued before March 13, 2020. March arrears must be prorated from March 13 to the end of the month. Up to three months future rent is allowable. See guidelines for more information on future rent.</i>								
<input type="checkbox"/> Mar '20 \$	<input type="checkbox"/> Apr '20 \$	<input type="checkbox"/> May '20 \$	<input type="checkbox"/> June '20 \$	<input type="checkbox"/> July '20 \$	<input type="checkbox"/> Aug '20 \$	<input type="checkbox"/> Sept '20 \$	<input type="checkbox"/> Oct '20 \$	<input type="checkbox"/> Nov '20 \$
<input type="checkbox"/> Dec '20 \$	<input type="checkbox"/> Jan '21 \$	<input type="checkbox"/> Feb '21 \$	<input type="checkbox"/> Mar '21 \$	<input type="checkbox"/> Apr '21 \$	<input type="checkbox"/> May '21 \$	<input type="checkbox"/> Jun '21 \$	<input type="checkbox"/> Jul '21 \$	<input type="checkbox"/> Aug '21 \$
<input type="checkbox"/> Sept '21 \$	<input type="checkbox"/> Oct '21 \$	<input type="checkbox"/> Nov '21 \$	<input type="checkbox"/> Dec '21 \$	<input type="checkbox"/> Jan '22 \$	<input type="checkbox"/> Feb '22 \$	<input type="checkbox"/> Mar '22 \$	<input type="checkbox"/> Apr '22 \$	<input type="checkbox"/> May '22 \$
<input type="checkbox"/> Jun '22 \$	<input type="checkbox"/> Jul '22 \$	<input type="checkbox"/> Aug '22 \$	<input type="checkbox"/> Sept '22 \$	<input type="checkbox"/> Oct '22 \$	<input type="checkbox"/> Nov '22 \$	<input type="checkbox"/> Dec '22 \$		
c. What is the total rent due? (total of 2.b.)						\$		
3. Maximum Rent Payment (completed by T-RAP service provider)						2020 FMR (Mar-Sept 20)	2021 FMR (Oct 20-Sept 21)	2022 FMR (Oct 21 & on)
a. What is 150% or 100% Fair Market Rent on this Unit? <i>Up to 100% if self-dec used to determine rental payment amount. FMR is based on the number of rooms the tenant is renting if in a shared living situation with friend/family.</i>						\$	\$	\$
b. Fair Market Rent x # months of rent requested (show calculations)						\$		
4. Total Rent Payment (completed by T-RAP service provider) up to total in 3.b, but no more than total rent due in 2.c.) <i>Reminder: Documentation of payments made to a landlord on behalf of the household must be provided to the household.</i>						\$		

5. Landlord, property manager/owner, or person authorized to accept payment

Name:		Name check should be made out to:
Payment Address:		
City/State:	Zip Code:	Phone number:
DUNS Number or Tax ID Number:		

As the Landlord, property manager/owner, or person authorized to accept payment, I certify the above information is true and will abide by the agreements below from the signing of this agreement and all applicable provisions of WA State landlord-tenant law.

1. Accept \$ _____ as full satisfaction of any rent and late fee* balance owed for the months paid by the program. *(See section 2b. for months covered)*
2. Agree that no new late fees* or additional charges will be made for the months covered.
3. Agree rent will not increase for the household described above for at least six months.
4. Agree not to invoke RCW 59.18.410(3)(d) to prohibit a tenant ability to seek relief provided by that section if any of the notices to pay or vacate were served prior to the signing of this agreement.
5. Agree to not terminate or refuse to renew the above household's tenancy until after six months unless: (a) a household member materially violates the terms of the lease; (b) a household member is creating a significant and immediate risk to the health, safety, or property of others; or (c) at least 90 days' written termination notice is provided to the household based on the Landlords intent to (i) personally occupy the premises as a primary residence, or (ii) sell the property.
6. Agree to submit lease agreement upon request, **if available**.
7. Agree to repayment of these funds if I do not fulfill the terms of this agreement.

* RCW 59.18.620(1) prohibits landlords from charging late fees for rent that was due "between March 1, 2020, and six months following the expiration of the eviction moratorium." The "eviction moratorium" that SB 5160 refers to is Proclamation 20-19.6, which expired on June 30, 2021. Six months from that date is December 31, 2021.

Landlord Print Name/Signature:	Date:
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6. Household Signature* *(Required when landlord initiates assistance or when payment is made directly to the household. This can be obtained by the landlord or service provider. Electronic signatures, or verbal/electronic verifications are allowable. Not required for other housing costs only applications.)*

****If payment is made directly to household, household agrees to use payment to satisfy rental obligation listed in Section 4 above.***

Household Signature:	Verbal/Electronic Verification (check box): <input type="checkbox"/>
Date:	Date: