EMERGENCY SOLUTIONS GRANT
RENT REASONABLENESS CHECKLIST AND CERTIFICATION

	Proposed Unit	Unit #1	Unit #2	Unit #3
Address				
Number of Bedrooms				
Square Feet				
Type of Unit/Construction				
Housing Condition				
Location/Accessibility				
Amenities Unit: Site: Neighborhood:				
Age in Years				
Utilities (type)				
Unit Rent Utility Allowance Gross Rent				
Handicap Accessible?				

COMPLETE THIS SECTION FOR THE UNIT THE CLIENT WANTS TO MOVE INTO

COMPLETE THE SAME INFORMATION FOR AT LEAST 2 OTHER UNITS OF THE SAME SIZE, AGE, TYPE, ETC. AS COMPARISON.

CERTIFICATION:

A. Compliance with Payment Standard

Contact your local housing authority to get a listing of the utility allowances for the county. Include the allowance for any utilities the tenant is responsible for.

_____ _____ _____

Proposed Contract Rent + **Utility Allowance** = **Proposed Gross Rent**

(*including fees, dues,& background checks required by a lease – excludes pet or late fees.)*

Approved rent does not exceed applicable Payment Standard of

$_____:

Here should be the FMR (published by HUD) for the proposed unit. If the Gross Rent (above) is equal to/less than the FMR the unit meets the FMR requirement.

B. Rent Reasonableness

Based upon a comparison with rents for comparable units, I have determined that the proposed rent for the unit [ ]is [ ]is not reasonable.

Comparing the information above in the chart determines if the proposed unit is reasonable compared to other units

_____ _____ _____

Print Name Signature Date