## STATEMENT OF FACTS - HOMELESS ASSISTANCE

## IMPORTANT INFORMATION

- If you have no place to stay or have received a pay rent or quit notice from your landlord, you
  may be able to get Homeless Assistance payments limited to once every 12 months, unless your
  homelessness is due to an exception. To get Homeless Assistance, you cannot have more than
  \$100 in resources and you must either be eligible for CalWORKs or appear to be eligible for
  CalWORKs.
- Exceptions to the 12 month limit are homelessness due to: domestic abuse, physical or mental illness, or uninhabitability of the home. These exceptions are also limited to once every 12 months. Homelessness that is directly caused by a State or Federal declared natural disaster is also an exception.
- If you received a pay rent or quit notice you may be able to get Homeless Assistance payments for up to two months of back rent.
- If you have no place to stay, you must be looking for permanent housing to get Homeless Assistance for Temporary Shelter. If you find someplace to live, you may get money for permanent housing.
- You may get Temporary Shelter payments for up to 16 days.
- Once you have used the 16 days, Temporary Shelter will stop. You will not be eligible to receive Temporary Shelter again for another 12 months, unless you have an exception.
- You will be asked to prove that your payments were spent on shelter. If you can't, future payments will be made by voucher directly to a shelter, landlord or others for you.
- If you are fleeing domestic abuse and not currently receiving cash aid, you may be eligible for up to 32 days of expanded temporary Homeless Assistance payments.

Instructions: Print all answe	ers in ir	nk. If you nee	d help, ask you	ır worker.		
1. Name of Caretaker Relative	(first, n	niddle, last)				
Message Phone	Α	Social Security Number		В	Date of Birth Mo Day Yr	
2. What is your current or last a	address	s?				
Street Address			City		State	Zip Code

3.	Do you get Cash Aid?	□YES	□NO	COUNTY USE ONLY	
	If "YES," in which county:			Date Received	
4.	Did you get Homeless Assistance from any of YES □ NO  If "YES," complete: Which county:	, ,		C CO: Aid Code: Case Number: AU:	
5.	Does anyone in your home get income from or any other source?  If "YES", list all income and who gets it below	□YES		D Case Name (Last, First)	
6.	List all liquid resources you own (include case checking accounts, credit union accounts, expressive its control of the contro	-		E Date HA Authorized: Mo Day Yr  F Type of HA (check)	
7.	give its value.  If you get Homeless Assistance, you may hat to you or given directly to a shelter, landlord Check (✓) below to tell us how you want the ☐ To Yourself ☐ To a Landlord ☐ To a She	or other for you. payment made:			
12 If y	you do not have a permanent home, fill ou . If you are asking for back rent, skip to qu you are fleeing domestic abuse and want to imporary Homeless Assistance benefits, sl Explain where you are staying now.	Start Date:  Permanent P-DV P-Medical P-Uninhabitable P-Disaster			
9.	How long have you been there?			Start Date:  Disposition:	
10	Do you pay for staying there? If "YES," how much?	□YES	□NO	<ul><li>☐ Shelter arranged prior to TS</li><li>☐ Vendor payment issued</li><li>☐ HA denied</li></ul>	
11	Explain why you have no place to live.			Worker:	
12	Are you seeking permanent housing? Explain:	□YES	□NO	Total resource value:	

State of California – Health and Human Services Agend	y California Department of Social Services				
13. What day did you get a pay rent or quit notice?					
14. How many months of back rent do you owe?					
15. How much is your monthly rent?					
16. Why didn't you pay your rent?					
17. Is your Landlord evicting you? Why?					
If you are fleeing domestic abuse and not curre in a lifetime expanded temporary Homeless Assout questions 18 and 19 below.					
18. Are you fleeing a domestic abuse situation?	□YES □NO				
CERTIF	CATION				
<ul> <li>I understand that:</li> <li>Homeless Assistance Temporary Shelter and Permanent Housing payments are limited</li> </ul>	<ul> <li>I understand that I must provide proof that:</li> <li>I am homeless; or I have received a notice to pay rent or quit.</li> </ul>				
to once every 12 months, unless I have a verified exception.	<ul> <li>I am homeless due to an exception, if I have already gotten Homeless Assistance.</li> </ul>				
<ul> <li>There is a limit on how much Homeless Assistance I can get.</li> </ul>	<ul> <li>I used the Temporary Shelter payment for housing, and that if I cannot, I must have my</li> </ul>				
<ul> <li>I am required to give my Social Security Number, which will be used to check identity and verify that I am not getting aid in more than one case, one county, or one state.</li> </ul>	Homeless Assistance payments made out or given to a shelter, landlord or to others for me.				
I declare under penalty of perjury under the laws of California that the information contained on this Stacorrect.	the United States of America and the State of attement of Facts - Homeless Assistance is true and				
Signature of Caretaker Relative	Date				