

I am requesting Tenant Disaster Rental Relief for the month(s) of _____.

The total monthly amount for rent and recurring charges is \$_____.

- I cannot afford to pay any part of my monthly rent; I am requesting to defer all of my monthly rent for the current month.

- I cannot afford to pay all of the monthly rent that is due but I agree to repay any monies deferred and can pay as follows:
 - Amount I owe: \$_____
 - Amount I am able to pay: \$_____
 - Amount I wish to defer: \$_____

Have you already applied for assistance with the State of Washington? Yes No

Upon request, I will provide proof of financial hardship related to COVID-19 Yes No

REQUESTED PAYMENT PLAN

Subject to re-negotiation due to any further governmental order.

Date	Amount

Please remit completed resident statement and requested payment plan within two business days by:

MAIL EMAIL FAX _____

Name _____

Address _____

City, State, Zip _____

Phone _____ Email _____

I, the undersigned, declare under penalty of perjury, under the laws of the State of Washington, that the information and documents provided are true and correct to the best of my knowledge. I understand that I still owe the monies above, and I agree to work with my landlord on a payment plan unless the State of Washington issues direct rental reimbursement payment for the total amount owed.

Resident Signature

City and State

Date