



## **EMERGENCY RENT ASSISTANCE APPLICATION PROCESS**

**Effective November 2021**

Applications will continue to be accepted throughout 2022 until the funds are exhausted, however the RPC ERA program will only address **past due housing costs during the time period of April 2020 – December 2021.**

Additionally, the total number of months of assistance will not exceed 15 months of assistance.

- 1. Review Income Eligibility Guidelines.** If your total household gross income (amount before taxes) is at or below the identified threshold listed, then proceed with the application process. See the income chart on next page to determine your income eligibility.
- 2. Complete the “Application for Emergency Rental Assistance.”**
  - Answer every question. Applications with blank questions will be considered incomplete and will be discarded/rejected.
  - Complete and sign the Applicant Statement on the final page of the application.

- 3. Collect the “Required Documentation” to include with your application.**

**Hard/ paper copies of the following must be submitted with your completed application:**

- Photo identification (any form of ID with a picture and the applicant’s legal name)
- A copy of your lease (or a letter from your landlord confirming your status as a renter)
- A copy of rent ledger from January 2020 - present
- Copies of ALL your **most recent past-due utility** bills (power, water, sewer); bills over one month old will not be accepted. NOTE- hard/paper copies of utility bills are required.
- Proof of income for all household members; following is acceptable documentation:
  - Copy of Tax Year 2020 Form 1040 as filed with the IRS for the household, or
  - Copy of the last 60 days of income for all household members (Employment income, unemployment income, Social Security income, pension income, child support, etc.)

**Applications received without required documentation will be immediately discarded/rejected.**

- 4. Submit the completed application and all Required Documentation in a sealed envelope and label “ERA APPLICATION” using one of the following methods.**
  - SUBMIT THE APPLICATION IN PERSON AT THE RPC IN URBANA, or
  - PLACE IN THE DROP BOX AT THE RPC IN URBANA, or
  - MAIL to:           Regional Planning Commission  
                          1776 E. Washington Street  
                          Urbana, IL 61802  
                          Attn: ERA APPLICATION

### **Community Services**

**A division of the Champaign County Regional Planning Commission**

1776 E. Washington St, Urbana, IL 61802

**P 217.328.3313 F 217.328.2426 TTY 217.384.3862 CCRPC.ORG**

Community Services



**The following will occur after RPC receives your application.**

1. ERA staff will review application submissions.
  - a. If an application is complete, ERA staff will contact the applicant by phone to schedule an in-person intake appointment to complete the eligibility determination.
  - b. If an application is incomplete, ERA staff will attempt to contact the applicant by phone and advise them the application has been rejected. The applicant will also be sent an email. The incomplete application will be shredded. Applicants are welcome to resubmit a full and complete application for consideration.
2. ERA staff will contact the landlords of applicants who complete the in-person intake and are found to be eligible, to obtain the necessary paperwork to complete assistance payment (a Landlord Agreement and W-9).
3. Assistance payments will be processed upon receipt of all paperwork. It is anticipated that payments will be processed with 14-30 days of receipt of all paperwork.

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## EMERGENCY RENT ASSISTANCE PROGRAM

### INCOME ELIGIBILITY GUIDELINES

**Household Income Not to Exceed 80% Area Median Income (AMI)**

<b>Family Size</b>	<b>Annual Income Limit:</b>	<b>60-day Income Limit:</b>
1 person	\$48,400	\$8,066
2 persons	\$55,300	\$9,216
3 persons	\$62,200	\$10,366
4 persons	\$69,100	\$11,516
5 persons	\$74,650	\$12,441
6 persons	\$80,200	\$13,366
7 persons	\$85,700	\$14,283
8 persons	\$91,250	\$15,208



**Champaign County Regional Planning Commission**  
**Emergency Rental Assistance Frequently Asked Questions**  
**November 15, 2021**

The Champaign County Regional Planning Commission (RPC) is providing these Frequently Asked Questions (FAQ) as guidance regarding the requirements RPC's Department of Treasury Emergency Rental Assistance (ERA) program).

**1. How can I determine the status of my ERA application?**

Because of the high volume of phone calls to the RPC for assistance, it is often difficult to reach the customer services representative. ERA program staff attempt to contact applicants by phone and then follow up the phone discussion/ attempt to contact with **email communication**. Emails from RPC Staff (ending with @ccrpc.org) often go to applicant's **junk/spam email folders**, so please check those folders also.

After an applicant submits an application, the application is reviewed for completeness. If an application is incomplete, the applicant will be contacted and advised on how to resubmit a complete application. This communication will include a phone call and email communication. If an application is complete, the applicant will be contacted to schedule their in-person intake appointment. The communication will include a phone call and email communication. Applicants can determine the status of their application by reviewing the email communication.

**2. How do I know if I have been approved for assistance and the amounts of assistance?**

Because of the high volume of phone calls to the RPC for assistance, it is often difficult to reach the customer services representative. ERA program staff attempt to contact applicants by phone and then follow up the phone discussion/ attempt to contact with **email communication**. Emails from RPC staff (ending with @ccrpc.org) often go to applicant's **junk/spam email folders**, so please check those folders also.

After an applicant completes an in-person appointment, a housing assistance calculation is completed and the landlord is contacted to complete landlord agreements. Upon receipt of the landlord agreements, housing assistance calculations are finalized, and payment vouchers are approved. ERA program staff attempt to contact applicants by phone to advise them of the assistance determinations and then follow up the phone discussion/ attempt with **email communication**. Emails from [rpccares@ccrpc.org](mailto:rpccares@ccrpc.org) often go to applicant's **junk/spam email folders**, so please check those folders also.

**3. How do I obtain a rent ledger or what is a rent ledger?**

You must contact your landlord to obtain a rent ledger. This is the perfect opportunity to inform your landlord that you are seeking assistance and working on paying overdue rent/ housing fees. To provide you the greatest level of assistance, we need a detailed rent ledger. At minimum, this should include all monthly charges for rent/ housing and also reflect all payments that have been applied to the account (tenant payments, rent subsidies, write offs, other assistance payments). Ideally, the ledger will reflect the account details from January 2020 – current.

**4. When will my landlord receive the assistance payment?**

In most cases, your landlord will receive the assistance payment 14-30 days from the date that you received the email communicating the assistance determination.

**5. Can I have something to provide my landlord to document that I have applied for assistance?**

Effective 11/15/2021, at the end of the in-person intake appointments, applicants are provided a form that details the application determination timeline. The form is signed by the applicant and the ERA staff person. The applicant is provided a copy of the form. This form should be used to provide documentation of an applicant's completion of the application process.

**6. Does the RPC ERA program provide future rent payments?**

No. RPC's ERA program provides assistance for past due housing costs.

**7. What are the financial limits or maximum amounts of assistance provided by the RPC ERA program?**

The RPC ERA program will provide up to a total of \$20,000 to address past due housing costs during the time period of April 2020 – Dec 2021. Additionally, the total number of months of assistance will not exceed 15 months of assistance.

**8. How is household income defined for purposes of the RPC ERA program? How will income be documented and verified?**

Applicants can provide annual income documentation with a copy of Federal Tax Form 1040 as filed with the IRS for the household.

Alternatively, applicants shall provide source documentation of each adult household members income for at least the two months prior to the submission of the application for assistance (pay stubs, wage statements, social security determination letters, etc.).

**9. May a grantee provide ERA assistance to homeowners to cover their mortgage payment, utilities, or energy costs?**

No. The statute requires that ERA assistance be provided only to eligible households, which is defined to include only households that are obligated to pay rent on a residential dwelling.

# APPLICATION FOR EMERGENCY RENTAL ASSISTANCE

DATE OF APPLICATION: \_\_\_\_\_

## APPLICANT INFORMATION

Applicant Name (First, Middle, Last): \_\_\_\_\_

Address: \_\_\_\_\_ Apt#: \_\_\_\_\_

City: \_\_\_\_\_, Illinois Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Social Security Number (SSN): \_ \_ - \_ - \_ \_ \_ \_  SSN Not Applicable

Date of Birth: \_\_\_\_\_

What is your gender?  Male  Female  Other

What is your race?  White  Black/African American  
 Asian  Native Hawaii/Other Pacific Islander  
 American Indian/Alaskan Native  
 Multi-Racial  
 Other

What is your ethnicity?  Hispanic  Non-Hispanic  Unknown/Not Reported

What is your relationship to the Head of Household?  
 Self  Spouse  Domestic Partner  Other Relative

## **HOUSING INFORMATION**

Landlord Name: \_\_\_\_\_ Landlord Telephone #: \_\_\_\_\_

Landlord Email Address: \_\_\_\_\_

## **FOOD ASSISTANCE**

Do you receive SNAP benefits (food stamps)?  Yes  No

## **LIHEAP**

Have you received LIHEAP benefits between July 2020 and today?  Yes  No

## **HOUSEHOLD COMPOSITION**

How many persons are in your household? \_\_\_\_\_

## **HOUSEHOLD COMPOSITION**

List all person(s) who are living in your household. You must use the legal name for each member of your household as it appears on their Social Security Card or Birth Certificate. **PLEASE PRINT**

Relationship to Head of Household Options: Self, Spouse, Domestic Partner, Child, Parent, Grandchild, Other Relative

Name	Is this household member age 18 or over? YES NO
Relationship to Head of Household	Did this household member have income in the last 30 days? YES NO Not Applicable

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Relationship to Head of Household	Did this household member have income in the last 30 days? YES NO Not Applicable

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# CHAMPAIGN COUNTY REGIONAL PLANNING COMMISSION COMMUNITY SERVICES DIVISION

## CLIENT RIGHTS

**Clients participating in the programs of the Champaign County Regional Planning Commission (RPC) Community Services Division have the following rights:**

- The right to be treated with dignity and respect.
- The right to accept or refuse services offered.
- The right to referral, as appropriate, to other service providers.
- The right to receive services regardless of your sex, race, age, sexual orientation, national origin, ancestry or marital status.
- The right to services in a safe and caring environment.
- The right to participate in the development and maintenance of your service plan.
- The right to review and obtain a copy of your record. If you disagree with any part of the record, you may enter a written statement of your objections into the record.
- You have a limited right to confidentiality. Personal information about you and the services you receive is private and may be shared with someone else only if allowed by you in a signed release with the exception of mandated reporting or if ordered by the court.
- You have the right to have disabilities accommodated as required by the Americans with Disabilities Act, section 504 of the Rehabilitation Act and the Illinois Human Rights Act [775 ILCS 5].
- You have a right to use RPC's grievance procedure regarding decisions about your services. Any individual served through a CCRPC program may express dissatisfaction with the services received by initiating a complaint. If you wish to initiate the grievance process, you should contact the Program Manager.

Champaign County Regional Planning Commission (CCRPC) Community Services Division staff, interns and volunteers are Mandated Reporters under the Illinois Abused and Neglected Child Reporting Act (325 ILCS 5), Illinois Abused and Neglected Long Term Care Facility Residents Reporting Act (210 ILCS 30), and Illinois Adult Protective Services Act (320 ILCS 20).

## CLIENT RESPONSIBILITIES

**As a client of Champaign County Regional Planning Commission (RPC) Community Services Division, you have the responsibility to:**

- Conduct yourself in a manner appropriate to a community setting.
- Respect personal, physical, and property rights of other RPC clients and staff.
- Participate in all aspects of your services. Services may be discontinued for failure to do so.
- Keep scheduled appointments or cancel them at least 24 hours in advance.
- Notify staff of changes that may affect your services (contact information, employment status, family size, etc.).

**ACKNOWLEDGEMENT OF  
CHAMPAIGN COUNTY REGIONAL PLANNING COMMISSION  
COMMUNITY SERVICES DIVISION  
CLIENT RIGHTS AND RESPONSIBILITIES**

**Client Name:** \_\_\_\_\_

**D.O.B.:** \_\_\_\_\_

**I have read my Rights and my Responsibilities, staff have also explained them to me, and I understand and agree to the content.**

**Client Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



**Cunningham Township**  
 Danielle Chynoweth, Supervisor  
 205 WEST GREEN ST • URBANA, IL 61801  
 (217) 384-4144 • FAX: (217) 367-7063  
 WWW.CUNNINGHAMTOWNSHIP.ORG



CHAMPAIGN COUNTY  
 REGIONAL PLANNING  
 COMMISSION



## Consent to Release Information

Date: \_\_\_\_\_ Name: \_\_\_\_\_ DOB: \_\_\_\_\_

I, the above named, give permission for staff members at the Cunningham Township, City of Champaign Township, and Champaign County Regional Planning Commission to contact, obtain, and share information with the following organizations:

(Please strike through any organization you do not want contacted).

Regional Planning Commission	Daily Bread Soup Kitchen
Housing Authority of Champaign County	Salt and Light
Champaign-Urbana Tenant Union	Phoenix House/CU at Home
Rosecrance	Habitat for Humanity
PACE: Center for Independent Living	Austin's Place
First Followers	Courage Connection
Salvation Army	Restoration Urban Ministries
Cunningham Children's Home	Crisis Nursery
City of Champaign Township	Empty Tomb
Cunningham Township	Urbana School District
Champaign County Health Care Consumers	Champaign School District
Land of Lincoln Legal Aid	
Landlord Name:	
Illinois Housing Development Authority (IHDA)	
Bridge Water Sullivan Community Life Center	

*By signing this release form, you allow Cunningham Township, City of Champaign Township, and/or Champaign County Regional Planning Commission to assist you with advocacy, obtaining information, and/or communicating with others involved in your case. We will work closely with you to ensure that you approve of our actions on your behalf. You can also withdraw this agreement at any time by contacting us. Thank you!*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

## UNIVERSAL SIGNATURE PAGE

**IMPORTANT NOTICE:** This state of Illinois grantee agency, Champaign County Regional Planning Commission, is requesting disclosure of information that is necessary to accomplish a complete application for:

<input checked="" type="checkbox"/>	Community Service Block Grant (CSBG)
<input type="checkbox"/>	Illinois Home Weatherization Assistance Program (IHWAP or Weatherization)
<input checked="" type="checkbox"/>	Low Income Home Energy Assistance Program (LIHEAP or Energy Assistance), including the Percentage of Income Payment Plan (PIPP) Program.

**APPLICANT STATEMENT:**

I certify that the information I have provided is an accurate and complete disclosure of the requested information. I also certify that every household member in the application is a resident of Illinois.

I authorize this agency to verify the information and contact my utility/fuel supplier, landlord, employer and/or other sources for verification and additional information and to exchange information contained in or otherwise used regarding my application and participation in CSBG/LIHEAP/IHWAP.

For LIHEAP and IHWAP, I also authorize the Department of Commerce & Economic Opportunity and my utility/fuel supplier to share my usage and bill information during the twenty-four (24) month period prior to and twelve (12) month period after the date of my application submittal and/or completion of LIHEAP and IHWAP services for the purpose of program evaluation and analysis.

I have received information outlining my appeal rights. I understand that filling out this application does not guarantee that my household will receive assistance. I understand I will be provided a copy of this application for my future reference.

Applicant Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_