Your name		
Address		
Address		
Phone number		
	Date	
Sent via emailcertified m	ailhand delivered	
Landlord Name	-	
Property Management Company (i	f applicable)	
Street address		
City, State, Zip		
Re: rental property located	ataddress	
Dearlandlord or managemen		

This declaration is hereby official notice according the CDC order dated March 29, 2021.

I certify under penalty of perjury, pursuant to 28 U.S.C. 1746, that the foregoing are true and correct:

- 1. I have used best efforts to obtain all available government assistance for rent or housing;
- 2. I either expect to earn no more than \$99,000 in annual income for Calendar Years 2020 or 2021 (or no more than \$198,000 if filing a joint tax return), was not required to report any income in 2020 to the U.S. Internal Revenue Service, or received an Economic Impact Payment (stimulus check) pursuant to Section 2201 of the CARES Act;
- 3. I am unable to pay my full rent or make a full housing payment due to substantial loss of household income, loss of compensable hours of work or wages, lay-offs, or extraordinary out-of-pocket medical expenses;
- 4. I am using best efforts to make timely partial payments that are as close to the full payment as the individual's circumstances may permit, taking into account other nondiscretionary expenses;

- 5. If evicted I would likely become homeless, need to move into a homeless shelter, or need to move into a new residence shared by other people who live in close quarters because I have no other available housing options.
- 6. I understand that I must still pay rent or make a housing payment, and comply with other obligations that I may have under my tenancy, lease agreement, or similar contract. I further understand that fees, penalties, or interest for not paying rent or making a housing payment on time as required by my tenancy, lease agreement, or similar contract may still be charged or collected.
- 7. I further understand that at the end of this temporary halt on evictions on June 30, 2021, my housing provider may require payment in full for all payments not made prior to and during the temporary halt and failure to pay may make me subject to eviction pursuant to state and local laws.

I understand that any false or misleading statements or omissions may result in criminal and civil actions for fines, penalties, damages, or imprisonment.

(NAME)	
(Phone Number)	