

## Wisconsin Emergency Rental Assistance (WERA) Program Request for Assistance / Renter's Verification

**Please return this form to: Racine – 2113 N. Wisconsin Street, Racine, WI 53402  
Kenosha – 2000 – 63rd St. Kenosha, WI 53143**

This document provides a way for the landlord/rental agent to verify the terms of tenancy of the applicant. This document does not replace a written lease between the tenant and landlord. This form must be completed and signed by the landlord/rental agent.

\_\_\_\_\_ (*tenant initials if there is no lease document available*) I am using this form in lieu of an official lease. I certify that I am unable to obtain a signed lease or that the landlord does not provide a written lease for this property. I have also submitted evidence of rental payments in the form of bank statements, check stubs, or other documentation that proves a pattern of paying rent. I understand that this documentation can be verified by contacting the landlord.

Applicant Name			
Unit Address			
City, State, Zip			
Phone		Email	
Total Assistance Requested	\$	Description of Assistance Requested	
For recertification only	_____ ( <i>tenant initials</i> ) I certify that my income and circumstances have not changed. I am requesting _____ ( <i>up to 3</i> ) additional months of rental assistance.		

**Tenancy Information:**

Property Owner			
Manager/Rental Agent			
Address			
City, State, Zip			
Phone		Fax	
Email			
For recertification only	_____ ( <i>landlord initials</i> ) I certify that the tenancy information has not changed.		

**Rental Agreement Information:**

Rent Amount ( <b><i>only amount paid by tenant if in subsidized rent program</i></b> )	\$		
Total Past Due Rent	\$		
Rent Due	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> other, explain		
Type of Tenancy	<input type="checkbox"/> one year, term: <input type="checkbox"/> _____ months, term: <input type="checkbox"/> month-to-month, start date: <input type="checkbox"/> week-to-week, start date:		
Payment Method for Heat and Electric	<b>Heat</b> <input type="checkbox"/> Included in the rent <input type="checkbox"/> Separate Payment is made to the Landlord <input type="checkbox"/> Tenant pays directly to utility vendor	<b>Electric</b> <input type="checkbox"/> Included in the rent <input type="checkbox"/> Separate Payment is made to the Landlord <input type="checkbox"/> Tenant pays directly to utility vendor	

For Recertification Only	_____ ( <i>landlord initials</i> ) I agree to accept ____ (up to 3) additional months of rent payments for the above named tenant. I understand that I may not evict the tenant for <i>non-payment of rent</i> during the time rent assistance is provided.
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By typing my name in the appropriate signature field below, I indicate that I am the person named, and this entry is the legal equivalent of a manual/handwritten signature. I further understand that I may print out the document and sign by hand. I understand that all information and supplemental documentation may be subject to verification. I understand that by providing tenancy information I am authorizing the Wisconsin Department of Administration and its authorized agents to verify the data utilizing federal, state, county, energy provider, water utility, employer and landlord databases and records.

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Signature of owner, landlord or rental agent	Date
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Signature of applicant	Date
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**Emergency Rental Assistance: Completed by WERA Staff Only:**

Crisis	Months Covered	Total Amount
Rent Assistance Arrears		\$
Rental Assistance Needed		\$
Lot Assistance Arrears		\$
Lot Assistance Needed		\$
Late Fees		\$
Internet		\$
Water		\$
Security Deposit	Count as one month	\$
Other Housing Costs (list each, count as one month)		\$
		\$
		\$
		\$
Housing Stability Services	Count as one month	\$
Other Information	<b>Please describe any other information about crisis(s) and case.</b>	
Total WERA Assistance		\$