

# Landlord Monthly Rent and Subsidy Confirmation Form

## NYS Emergency Rental Assistance Program (ERAP)

**Instructions:** Fill in Tenant Name/Address and Monthly Table below for all months of ERAP assistance being requested. Fill in the form with the contracted monthly rent amount, the tenant portion of the contract rent, the subsidy amount received, and the tenant rent amount past due for each month. Do not provide cumulative amounts.

**IMPORTANT NOTE:** Subsidized housing means public housing, section 8, FHEPS and other housing situations where the household's share of the rent is limited to a set percentage of the household's income.

<b>Tenant Name</b>					
<b>Address</b>					
Year	Month	Regular Contracted Monthly Rent	Tenant Portion of the Contract Rent	Subsidy Amount Received	Tenant Rent Amount Past Due
2020	March	\$	\$	\$	\$
	April	\$	\$	\$	\$
	May	\$	\$	\$	\$
	June	\$	\$	\$	\$
	July	\$	\$	\$	\$
	August	\$	\$	\$	\$
	September	\$	\$	\$	\$
	October	\$	\$	\$	\$
	November	\$	\$	\$	\$
	December	\$	\$	\$	\$
2021	January	\$	\$	\$	\$
	February	\$	\$	\$	\$
	March	\$	\$	\$	\$
	April	\$	\$	\$	\$
	May	\$	\$	\$	\$
	June	\$	\$	\$	\$
	July	\$	\$	\$	\$
	August	\$	\$	\$	\$
	September	\$	\$	\$	\$
	October	\$	\$	\$	\$
	November	\$	\$	\$	\$
	December	\$	\$	\$	\$
2022	January	\$	\$	\$	\$

	February	\$	\$	\$	\$
	March	\$	\$	\$	\$
	April	\$	\$	\$	\$
	May	\$	\$	\$	\$
	June	\$	\$	\$	\$
	July	\$	\$	\$	\$
	August	\$	\$	\$	\$
	September	\$	\$	\$	\$
	October	\$	\$	\$	\$
	November	\$	\$	\$	\$
	December	\$	\$	\$	\$
	2023	January	\$	\$	\$
February		\$	\$	\$	\$
March		\$	\$	\$	\$
April		\$	\$	\$	\$
May		\$	\$	\$	\$
June		\$	\$	\$	\$
July		\$	\$	\$	\$
August		\$	\$	\$	\$
September		\$	\$	\$	\$
October		\$	\$	\$	\$
November		\$	\$	\$	\$
December		\$	\$	\$	\$
2024	January	\$	\$	\$	\$
	February	\$	\$	\$	\$
	March	\$	\$	\$	\$
	April	\$	\$	\$	\$
	May	\$	\$	\$	\$
	June	\$	\$	\$	\$
	July	\$	\$	\$	\$
	August	\$	\$	\$	\$
	September	\$	\$	\$	\$

October	\$	\$	\$	\$
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\*Late fees are not covered by ERAP. To accept ERAP funds, late fees must be waived and will not be paid.

**By signing this form, I, the Landlord/Property Manager, attest that all of the information provided, including the Regular Contracted Rent, Tenant Portion of Contract Rent, Subsidy Amount Received, and Tenant Rent Amount Past Due amounts listed above are true and accurate for the Tenant, Address, and Months designated above. I also attest that I have not received another payment from another source for any tenant amount past due requested above.**

\_\_\_\_\_  
**Name, Printed: Landlord/ Property Manager**

\_\_\_\_\_  
**Signature: Landlord/Property Manager**

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