

Please STOP and read this in its entirety:

All forms and documents must be submitted in a single email or fax or printed and/or dropped off at our office. We will not accept screenshots (even if printed), JPEG images, or images included in the body of the email. If you are emailing, all documents must be clear PDF's and not pictures saved as PDF's.

Thank you for your interest in the CARES Housing Assistance Program (CHAP). Please read this message carefully as it contains all the information you will need for a successful application. Please save all fillable forms before sending. If you don't save the forms, they may come through blank. **Due to the high demand for these funds, an incomplete application will result in your application being immediately rejected with no further consideration for assistance with our agency.**

In your email, please use the following in the subject line, making it easier for us to access your application.

Last Name, First Name - Address

Required information includes:

- The attached CARES CHAP application; which must be filled out **completely** and signed and dated.
- The attached Impact and Attestation form needs to be filled out **completely**, including a **written explanation** of your financial impact of COVID-19. The form must be signed and dated.

- The attached CHAP Client Info and HMIS Release must be signed and dated
- The attached Landlord Verification form and W9 need to be **completed by your landlord/property manager**. The W9 needs to be the 2018 form (attached) and signed in 2020.
- Most recent mortgage statement, if applicable
 - Please note, if you have an FHA mortgage, you are not eligible
 - If you are in active forbearance, you are not eligible
 - If your forbearance has ended, you may be eligible
- **Clear** copy of state-issued ID and SS cards for all household occupants over the age of 18.
- **Complete** lease agreement, including all pages and addendums, showing all occupants.
- SSI/SSDI/Pension benefit statement, if applicable.
- Proof of alimony/child support, if applicable.
- Year to date profit/loss, if self-employed.
- In addition to the above, documentation is required to show your financial impact due to COVID-19. **Information is required for all household members over the age of 18.** please send the following documentation:

For job loss

- Employer furlough/layoff notice
- DETR determination letter (all pages, even if denial)

For a reduction in income

- documentation includes pre-COVID paystubs (Feb/March) and most recent 30 days paystubs showing the reduction in income.

If self-employed and claiming a reduction in income

(including Uber, Lyft, and other types of gig work),

- documentation includes a year-to-date profit and loss,
- PUA letter (all pages, even if denial).

If a household member over the age of 18

- does not work, please include a signed and dated statement stating that. If a household member,
- over 18, is working and has not been affected financially by COVID-19, please include their two (2) most recent paystubs.

All emails must be sent to CHAP1@nwsn.org. If you are faxing documents, our fax number is 702-640-0702. If you are delivering copies to our office, you may drop them off Monday – Thursday, from 7:00 am – 5:00 pm at 1849 Civic Center Dr., North Las Vegas, NV 89030.

All information and required documentation must be submitted within three days from the date of this email. **Incomplete applications will be returned as rejected.**

For additional questions, please email them to Chap1@nwsn.org.

Thank you!