



Port Gamble S'Klallam Housing Authority
32000 Little Boston RD NE, Kingston, WA. 98346

OFFICE USE ONLY
Date Submitted: _____
Staff Initial: _____

PGSHA Hardship Relief Request Form

Head of Household:	
Address:	
Phone Number:	Email:

I am requesting a Hardship Review for the following reasons: *(Please check the box that best describes your reason for request)*

- Loss of eligibility for or awaiting an eligibility determination for a government assistance program
- Household income has decreased because of changed circumstances, including loss of employment
- When a death has occurred in the household's immediate family, as defined in the PGSHA Eligibility, Admissions, and Occupancy Policy
- Increase in additional housing expenses, including mortgage payments due before the household can occupy the purchased home
- An increase in qualified deductions, including childcare expenses or medical and attendant expenses
- Other circumstances

Please describe why you need this hardship consideration and attach supporting documentation to this form:

By signing below, I am verifying that all information on this form and attached documents are true and accurate to the best of my knowledge. I am acknowledging that I have received a copy of the PGSHA Hardship Relief Policy.

Signature: _____

Date: _____

OFFICE USE ONLY:	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Notes: _____	

Executive Director Signature: _____	Date: _____

PORT GAMBLE S'KLALLAM HOUSING AUTHORITY

HARDSHIP RELIEF PROGRAM POLICY

This Policy Covers All Port Gamble S'Klallam Housing Authority (PGSHA) Low-Rent Program and Tax-Credit Program Participants Who Can Demonstrate a Financial Hardship Due To an Increase in Their Qualified Expenses or Because of a Change That Would Not Otherwise Trigger an Interim Recertification.

- 1. The Executive Director and Assistant Director are Authorized to Create and Adopt All Necessary Procedures Under the Conditions of this Policy.**
- 2. Port Gamble S'Klallam Tribal Low-Rent Program and Tax-Credit Program Participants, Ages 18 and Older (Participants), are Eligible to Apply for Relief Under the Conditions of this Policy.**
- 3. When Applying for Relief, Participants Must Demonstrate a Qualifying Financial Hardship, According to Adopted Procedures, Which Meets PGSHA's Hardship Criteria Including, But Not Limited To:**
 - a) Loss of eligibility for or awaiting an eligibility determination for a government assistance program
 - b) Household income has decreased because of changed circumstances, including loss of employment
 - c) When a death has occurred in the household's immediate family, as defined in the PGSHA Eligibility, Admissions, and Occupancy Policy
 - d) Increase in additional housing expenses, including mortgage payments due before the household can occupy the purchased home
 - e) An increase in qualified deductions, including childcare expenses or medical and attendant expenses
 - f) Other circumstances determined by PGSHA
- 4. The Participant Must Submit a Completed Hardship Relief Application to Port Gamble S'Klallam Housing Authority.**
 - a) A completed Hardship Relief Application includes, at least:
 - i. Completed Hardship Review Request form
 - ii. Documentation of need for relief assistance
 - iii. Any additional documentation requested by PGSHA to prove eligibility for this program (e.g. documentation of budget).
- 5. Completed Hardship Relief Applications Will be Reviewed, Verified, and Approved by PGSHA Staff Under the Conditions of this Policy. The Participant Must be Notified of PGSHA's Approval or Non-Approval Within Fifteen (15) Business Days.**
- 6. A Non-Approved Participant May Submit an Appeal to PGSHA's Executive Director or Assistant Director Within Ten (10) Business Days of the Date of**

Notification of Non-Approval in Coordination with the PGSHA Participant Grievance Policy.

- 7. An Approved Participant Will Enter a Relief Period Not to Exceed 90 Calendar Days.**
 - a) The types of Relief granted during this Relief Period include:
 - i. Deferral of rent, to be repaid within a period based on the household's budget, but not to exceed six (6) months. This will require a signed Payback Agreement between PGSHA and Participant.
 - ii. Waiver of rental payment(s).
 - iii. Recalculation of adjusted annual income to include deductions of payments related to hardship, such as mortgage payments.
 - b) The Relief Period may be extended, at PGSHA's discretion, for additional 30-day periods, not to exceed a total of six (6) months of Relief.
- 8. Upon Conclusion of the Relief Period, the Participant's Full Rent Payment Will Resume as Determined by the Most Recent Annual or Interim Recertification,**
- 9. A Participant May Apply for and Receive Relief Under the Conditions of this Policy Once per 12-Month Period.**
- 10. Record of Relief Granted Will Be Tracked and Subject to Audit According to Adopted Procedures.**
- 11. This Program is Discretionary and Subject to PGSHA Approval.**