

## ADDITIONAL COVID RESOURCES

Clark County



It is our priority to process all applications in queue as quickly as possible. Applications for CARES Housing Assistance Program (CHAP) are now closed. Please visit our website: [eobcapsnv.org](http://eobcapsnv.org) for updates. In the meantime, we want to provide everyone in need with all the resources possible to ensure their safety and well being.

First  
**reach out to**



Call 2-1-1 or 1-866-535-5654  
Text your zip code to 898211  
Online [nevada211.org](http://nevada211.org)

Nevada 211, a program of the Nevada Department of Health and Human Services and administered by Money Management International (MMI), is committed to helping Nevadans connect with the services they need. Whether by phone or internet, their goal is to present accurate, well-organized and easy-to-find information from state and local health and human services programs.

They are your best one stop shop resource from housing, health and food.



Call: 702-386-1070

Email: [info@lacsnsn.org](mailto:info@lacsnsn.org)

Website: [www.lacsnsn.org](http://www.lacsnsn.org)

The CDC has issued a temporary national moratorium on most evictions for nonpayment of rent effective until December 31.

You cannot be evicted if:

- You have used your “best efforts” to obtain government rental assistance
- You do not expect to earn more than \$99,000 in 2020 or you did not need to report income to the federal government in 2019
- You have been experiencing a “substantial” loss of household income because of a layoff or reduced work hours
- You have been making your best effort to make partial rent payments as close to the full amount due as possible
- Being evicted would cause you to become homeless or you would have to move in with a friend or family member (live “doubled up”)

## WHAT STEPS MUST I TAKE TO BE PROTECTED BY THE EVICTION MORATORIUM?

If you meet all of these conditions listed above, you must send a signed declaration to your landlord.

NLIHC and NHLP also recommend tenants send their landlords the declaration via certified mail, which will provide you with an official receipt to prove the declaration was mailed and require a signature from the recipient to prove the declaration was delivered. Sending the declaration by email also provides evidence that you submitted the declaration. You should also make a copy of the declaration to keep for your records.

Below is the form, please fill out the forms below to ensure protection.

**DECLARATION UNDER PENALTY OF PERJURY  
FOR THE CDC'S TEMPORARY HALT IN EVICTIONS TO PREVENT  
FURTHER SPREAD OF COVID-19**

**INSTRUCTIONS TO TENANTS**

This declaration is for tenants, lessees, or residents of residential properties who are covered by the Centers for Disease Control and Prevention (CDC)'s Order temporarily halting residential evictions (not including foreclosures on home mortgages) to prevent the further spread of COVID-19. **Under the CDC's Order you must provide a copy of this declaration to your landlord, property manager, or other person who has a right to have you evicted. Each adult listed on the lease, rental agreement, or housing contract must complete this declaration.** Unless the CDC Order is extended, changed, or ended, the Order prevents you from being evicted or removed from where you are living through December 31, 2020. You are still required to pay rent and follow all the other terms of your lease and rules of the place where you live. You may still be evicted for other reasons (specifically, violating a lease provision unrelated to payment or causing a nuisance on the property). This declaration is sworn testimony, meaning that you can be prosecuted, go to jail, or pay a fine if you lie, mislead, or omit important information. **Keep a copy or picture of this declaration for your records.**

**INSTRUCTIONS TO LANDLORDS OR OTHER PERSONS WITH THE RIGHT TO EVICT**

**After receiving this declaration, it is a violation of the CDC's order to take "any action" to "remove or cause the removal of a covered person from a residential property" unless specifically permitted by the CDC order.** This would include issuing a notice to vacate to the tenant, filing a complaint for eviction with the court, or arranging for the tenant's removal from the unit or property. A landlord or other person who violates the CDC Order of which this Declaration is an attachment may be subject to a fine of no more than \$100,000 if the violation does not result in a death or one year in jail, or both, or a fine of no more than \$250,000 if the violation results in a death or one year in jail, or both, or as otherwise provided by law. An organization that violates this Order may be subject to a fine of no more than \$200,000 per event if the violation does not result in a death or \$500,000 per event if the violation results in a death or as otherwise provided by law. The U.S. Department of Justice may initiate court proceedings as appropriate seeking criminal penalties (18 U.S.C. 3559, 3571; 42 U.S.C. 271; 42 CFR 70.18).

## DECLARATION UNDER PENALTY OF PERJURY (Continued)

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

- I have used best efforts to obtain all available government assistance for rent or housing;<sup>1</sup>
- I either expect to earn no more than \$99,000 in annual income for Calendar Year 2020 (or no more than \$198,000 if filing a joint tax return), was not required to report any income in 2019 to the U.S. Internal Revenue Service, or received an Economic Impact Payment (stimulus check) pursuant to Section 2201 of the CARES Act;
- 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<sup>2</sup> out-of-pocket medical expenses;
- 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;
- 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.<sup>3</sup>
- 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.
- I further understand that at the end of this temporary halt on evictions on December 31, 2020, 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.

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Signature of Declarant

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Date

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Printed Name of Declarant

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<sup>1</sup> "Available government assistance" means any governmental rental or housing payment benefits available to the individual or any household member.

<sup>2</sup> An "extraordinary" medical expense is any unreimbursed medical expense likely to exceed 7.5% of one's adjusted gross income for the year.

<sup>3</sup> "Available housing" means any available, unoccupied residential property, or other space for occupancy in any seasonal or temporary housing, that would not violate federal, state, or local occupancy standards and that would not result in an overall increase of housing cost to you.

JUSTICE COURT, TOWNSHIP OF \_\_\_\_\_  
CLARK COUNTY, NEVADA

Landlord's  
Name: \_\_\_\_\_

vs. Landlord,

Case No.: \_\_\_\_\_  
Dept No.: \_\_\_\_\_

Tenant's  
Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Tenant.

**PROOF OF SERVICE  
OF DECLARATION UNDER PENALTY OF PERJURY FOR THE CDC'S  
TEMPORARY HALT IN EVICTIONS  
TO PREVENT FURTHER SPREAD OF COVID-19**

I certify under penalty of perjury that I provided a copy of the Declaration Under Penalty of Perjury for the CDC's Temporary Halt in Evictions to Prevent Further Spread of COVID-19 to my landlord and/or to the owner of the property where I live and/or to another person with the legal right to pursue eviction via the following method(s) (*check all that apply*):

☐ By **First Class Mail** addressed to (name) \_\_\_\_\_,  
at the following address: \_\_\_\_\_

on the following date: \_\_\_\_\_.

☐ By **Certified Mail** addressed to (name) \_\_\_\_\_,  
at the following address: \_\_\_\_\_

with tracking number \_\_\_\_\_,

on the following date: \_\_\_\_\_.

☐ By **E-Mail** directed to (name) \_\_\_\_\_,  
at the following e-mail address: \_\_\_\_\_,

on the following date: \_\_\_\_\_.

☐ By **Text Message** directed to (name) \_\_\_\_\_,  
at the following telephone number: \_\_\_\_\_,

on the following date: \_\_\_\_\_.

☐ By **Fax** directed to (name) \_\_\_\_\_,  
at the following telephone number: \_\_\_\_\_,

on the following date: \_\_\_\_\_.

1 ☐ By **Hand Delivery** to (name) \_\_\_\_\_,  
2 at the following address:

3 \_\_\_\_\_,  
4 on the following date: \_\_\_\_\_.

5 ☐ By **Other Method** to (name) \_\_\_\_\_,  
6 specifically (describe method of delivery in detail):

7 \_\_\_\_\_,  
8 on the following date: \_\_\_\_\_.

9 I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true  
10 and correct.

11 \_\_\_\_\_  
12 (Date)

13 \_\_\_\_\_  
14 (Type or Print Name)

15 \_\_\_\_\_  
16 (Signature)

# Q&A About evictions

## **DO I NEED TO PROVIDE PROOF OF FINANCIAL HARDSHIP, "BEST EFFORTS" TO OBTAIN ASSISTANCE, OR OTHER CRITERIA FOR COVERAGE?**

The CDC's order does not require you to provide any proof with the declaration. However, you may want to have documents on hand in case your landlord attempts to challenge the declaration.

## **DO I NEED TO PROVE MY FINANCIAL HARDSHIP IS RELATED TO COVID-19?**

No. The CDC's order does not require that a renter's financial hardship be COVID-related.

## **IF I HAVE ROOMMATES, DO WE EACH NEED TO FILL OUT A DECLARATION?**

Yes. The CDC's order specifies that every adult on the lease should sign and send their own declaration.

## **WHAT IF I AM IN THE PROCESS OF BEING EVICTED?**

Because the order blocks all phases of the eviction process, eligible tenants going through an eviction should quickly provide their landlord a signed declaration to halt the eviction.

## **WHAT IF MY LANDLORD IGNORES THE DECLARATION AND MOVES FORWARD WITH EVICTION?**

Call your local legal aid office, tenant association, or local bar association for assistance.

Legal Aid Center of Southern Nevada

Call (702) 386-1070

Website: <https://www.lacsn.org>

Fax: (702) 366-0569

Nevada Legal Services, Inc.

Call (866) 432-0404

Website: <https://nlslaw.net>

Fax: (702) 388-1641

# About Rental/Mortgage & Utility Assistance



## **If you own a home:**

The Nevada Affordable Housing Assistance Corporation (NAHAC) was specifically chosen by the U.S. Treasury's Hardest Hit Fund® to help Nevada homeowners in their time of need.

Call: (888) 320-6526 between 9 AM to 4:30 PM, Monday through Thursday and leave a message with your name and phone number.  
Website: [nahac.org](http://nahac.org)

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## **Clark County CARES Housing Assistance Program**

The CARES Housing Assistance Program (CHAP) assists residents of Clark County who have suffered substantial financial hardship and now lack sufficient income or resources to pay their housing costs and utilities because of the COVID-19 emergency or the response to that emergency.

## **Important Information about CHAP:**

Level of assistance is based on the availability of CARES Act grant funding and each individual household assessment.  
Applications will be accepted until all funds are exhausted.

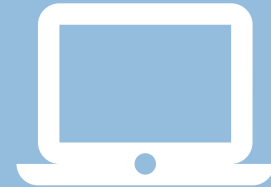
## **Who is qualified to apply for CHAP funds?**

In order to qualify for assistance, applicants must be current residents of Clark County, NV and demonstrate how they have been impacted by COVID-19. Anyone currently receiving a subsidy from another rental assistance program or living in public housing is ineligible.

**To apply:**

**Go to:**

**[chap.clarkcountynv.gov](http://chap.clarkcountynv.gov)**





# About Rental/Mortgage & Utility Assistance

## North Las Vegas CARES Housing Assistance Program

### Must have the following:

#### Proof of Identity:

- Photo ID
- HMIS Waiver

#### Proof of COVID Impact (One of the following):

1. At least 2 paystubs showing a reduction of income
2. Unemployment benefits confirmation (copy of check or confirmation letter)
3. Employer statement

#### Proof of Need:

- Landlord Verification Form
- Landlord W-9
- Lease agreement/Mortgage statement
- Default Letter
- Utility bill (NLV water bills cannot be paid with this assistance)

**This online application is only open to those with residences located within the City of North Las Vegas.**

To apply:

Call 702-633-1003

apply online at:

[www.cityofnorthlasvegas.com/newsdetail\\_T6\\_R555.php](http://www.cityofnorthlasvegas.com/newsdetail_T6_R555.php)

## Henderson CARES Housing Assistance Program

### Who is qualified to receive Henderson CHAP funds?

Applicants must be current residents of Henderson, NV and demonstrate how they have been impacted by COVID-19. Anyone currently receiving a subsidy from another rental assistance program or living in public housing is ineligible. Households must be residents of Henderson, NV, demonstrate a financial impact due to COVID-19, and the household income cannot exceed 120% Area Median Income.

For rental/mortgage/utility assistance, contact [HopeLink of Southern Nevada](http://link2hope.org) to see if you qualify and begin the application process. Email [info@link2hope.org](mailto:info@link2hope.org) or contact via phone Monday through Thursday 8:00 AM to 5:30 PM at 702-566-0576.