



## Homeless Prevention Referral for Adults without Minor Children

### REFERRAL INFORMATION:

Date:

Referring Organization:

Referring Staff Name:

Phone Number:

Email Address:

### PARTICIPANT'S INFORMATION:

Participant Name:

Phone Number:

Household Size:

Email Address:

Veteran Status: ☐ Yes ☐ No

Permanent Housing Address:

Monthly Rent:

Income Source:

Monthly Income:

REQUIRED DOCUMENTS: ☐ Identification ☐ Social Security Card ☐ Proof of Income

### Must Fall Below the 50% Area Median Income (AMI)

Income Limit								
Area Median Income	1	2	3	4	5	6	7	8
Extremely Low 0-30% AMI	\$21,950	\$25,050	\$28,200	\$31,300	\$33,850	\$36,350	\$39,010	\$43,430
Very Low 31%-50 % AMI	\$36,550	\$41,800	\$47,000	\$52,200	\$56,400	\$60,600	\$64,750	\$68,950
Low 51%-80% AMI	\$54,450	\$66,800	\$75,150	\$83,500	\$90,200	\$96,900	\$103,550	\$110,250

### CURRENT HOUSING STATUS:

Please check one of the following boxes that apply to participant's living situation. **THIRD PARTY documentation MUST be provided if you have checked box 2, 3, or 4.**

☐ An **Unlawful Detainer ("Eviction") Notice**. An Unlawful Detainer is a formal eviction action that has been filed in the justice court.

☐ A **3-Day Pay or Quit Notice** provided by a property owner/property manager; **AND** Accompany documentation to include economic hardship to demonstrate the household lacks the financial resources. Documentation may include, but not limited to: letter of termination from employer, unemployment benefits letter, loss of wages or benefits garnishment notification letter, unexpected medical costs, unexpected loss of contributing household member (e.g. death, divorce, separation, etc.), letter from a property manager/owner indicating an increase in rent

☐ A **signed letter from motel or hotel**, not paid for by a charity organization or a federal, state, or government program stating that the household must vacate within 14 days; **AND** Accompany documentation to include economic hardship to demonstrate the household lacks the financial resources. Documentation may include, but not limited to: letter of termination from employer, unemployment benefits letter, loss of wages or benefits, garnishment notification letter, unexpected medical costs, unexpected loss of contributing household member (eg; death, divorce, separation, etc.)

☐ **If DOUBLED UP, (Temporarily with Family/Friends)** A **signed letter provided by the lease holder/property homeowner** indicating that the household must vacate within 14 days. Doubled up refers to a person/household living with another person in a home due to economic hardship; **AND** Accompany documentation to include economic hardship to demonstrate the household lacks the financial resources. Documentation may include, but not limited to: letter of termination from employer, unemployment benefits loss of wages or benefits, garnishment notification letter, unexpected medical costs, unexpected loss of contributing household member (e.g. death, divorce, separation etc.)

<b>COMMENTS:</b>	
<b>REFERRAL POINT OF CONTACT:</b>	
<b>Service Planning Area:</b> SPA 7 - South County	
<b>Associate Director:</b> Janeth Ventura	<b>Email Address:</b> janethv@epath.org
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<b>Service Planning Area:</b> SPA 8 - South County	
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<b>Phone Number:</b> (323) 369-5420	<b>Fax Number:</b> (562) 247-4958