

## STATEMENT OF FACTS - HOMELESS ASSISTANCE

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### IMPORTANT INFORMATION

- You can get Homeless Assistance (HA) payments if you (1) do not have a fixed and regular nighttime residence, live in a temporary shelter, or live in a place not ordinarily used for sleeping or (2) have received any notice that could lead to eviction. Homeless Assistance payments are limited to once every 12 months unless you meet one of the exceptions below. If you meet an exception, then you can get assistance more than once every 12 months.
- **Exceptions to the 12-month limit** are when you are homeless because of (1) domestic abuse, (2) physical or mental illness, (3) uninhabitability, or (4) a State or Federally declared disaster, which you can get once per disaster. These exceptions are also limited to once every 12 months, except for homelessness due to a disaster.
- To get Temporary Shelter Assistance, you must be eligible for CalWORKs or appear to be eligible for CalWORKs.
- If you are pregnant and have no CalWORKs eligible children, you can get HA. Within 30 working days, after giving the sworn statement, you must get medical proof of your pregnancy or make good efforts to get it .
- To get Temporary Shelter Assistance, you must be looking for permanent housing.
- You can get Temporary Shelter payments for up to 16 days in a 12-month period. Once you have received the 16 days, Temporary Shelter payments will stop.
- You will have to prove that your Temporary Shelter payments were spent on temporary shelter. If you can't, restricted payments will be made directly to a shelter, landlord, or others for you.
- If you are a CalWORKs applicant fleeing domestic abuse, you may be eligible for up to 32 days of expanded Temporary Shelter Assistance payments once in a lifetime. You can still use them if you become a CalWORKs recipient. This is different than the domestic abuse exception to the 12-month limit.
- To get Permanent Housing Assistance, you must already be getting CalWORKs.
- If you have no place to stay or have received a notice that could lead to eviction, you can get Permanent Housing payments, either (1) up to two months of back rent or (2) a security deposit and last month's rent for a new housing placement if you have found new housing. The household's share of rent cannot be more than 80% of the total household monthly income.

**Instructions:** *Print all answers in ink. If you need help, ask the county worker.*

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1. Name of Caretaker Relative (first, middle, last):

|                |          |                         |          |   |
|----------------|----------|-------------------------|----------|---|
| Message Phone: | <b>A</b> | Social Security Number: | <b>B</b> | Date of Birth:<br>Mo. ___ Day ___ Yr. _____ |
|----------------|----------|-------------------------|----------|---|

2. What is your current or last address?

|                 |       |        |           |
|-----------------|-------|--------|-----------|
| Street Address: | City: | State: | Zip Code: |
|-----------------|-------|--------|-----------|

3. Do you get Cash Aid?  YES  NO  
If "YES," in which county: \_\_\_\_\_

4. Are you pregnant?  YES  NO  
If "YES,"

Do you have medical proof of your pregnancy?  YES  NO  
(If you do not have it, you must give medical proof to the county within 30 working days after giving the sworn statement or telling the county that you are pregnant or show that you are making good efforts to get it .)

5. Are you asking for temporary shelter assistance?  YES  NO

6. Are you asking for permanent housing assistance?  YES  NO

7. Did you get CalWORKs Homeless Assistance from any county during the last 12 months?  YES  NO  I DON'T KNOW

If "YES," complete:  
Which county: \_\_\_\_\_ When: \_\_\_\_\_

8. Is your homelessness due to one of the following? (Check (✓) if applicable).

- Domestic abuse  Federally or State Declared disaster
- Physical or mental illness  Uninhabitability

9. If you get Homeless Assistance, you can ask that the payment be made out to you, or you can ask that the payment be given directly to a shelter, landlord, hotel/motel, or other on your behalf.

Check (✓) below to tell us how you want the payment made:  
 To Yourself  To a Landlord  To a Shelter  To a Hotel/Motel  
 Other (explain): \_\_\_\_\_

10. Have you found new permanent housing?  YES  NO

Explain:  
If YES, how much is the security deposit and/or last month's rent if you are asking for help with either? \$ \_\_\_\_\_

11. Did you receive a notice that could lead to eviction?  YES  NO

If YES:  
How many months of back rent do you owe if you are asking for help to pay some of the back rent? \_\_\_\_\_ months  
How much back rent do you owe? \$ \_\_\_\_\_  
What day did you get this notice that could lead to eviction?  
Mo. \_\_\_ Day \_\_\_ Yr. \_\_\_

12. If you pay rent, how much is your monthly rent? (if you share your housing cost, how much is your family's cost of the monthly rent)? \$ \_\_\_\_\_

**COUNTY USE ONLY**

**C**  
CO: \_\_\_\_\_  
Aid Code: \_\_\_\_\_  
Case Number: \_\_\_\_\_  
AU: \_\_\_\_\_

**D**  
Type of HA (check)  
 Temporary  
 T-DV  
 T-Verified Medical  
 T-Verified Uninhabitable  
 T-Disaster  
 T-app. expanded DV

Start Date: \_\_\_\_\_  
 Permanent  
 P-DV  
 P-Medical  
 P-Uninhabitable  
 P-Disaster

Start Date: \_\_\_\_\_

**Disposition:**  
 Shelter arranged prior to TS  
 Vendor payment issued  
 HA denied

Worker: \_\_\_\_\_

If you are fleeing domestic abuse and not currently on cash aid, you may be eligible for once in a lifetime expanded Temporary Shelter Assistance benefits for up to 32 days. Please fill out question 13 below.

13. Are you fleeing a domestic abuse situation?  YES  NO

**CERTIFICATION**

**I understand that:**

- Homeless Assistance Temporary Shelter and Permanent Housing payments are limited to once every 12 months, unless I have a verified exception. Exceptions are available once every 12 months except for exceptions due to a state or federally declared disaster, which is once per disaster.
- There is a limit on how many days and how much Homeless Assistance I can get.
- If I have a Social Security number, I am required to give it, which will be used to check identity and verify that I am not getting aid in more than one case, one county, or one state.
- I must use the Temporary Shelter payment for housing, and that if I cannot, I must have my Homeless Assistance payments made out or given to a shelter, landlord, or to others for me.

**I declare that to the best of my knowledge and belief** (Check applicable box unless responded "YES" in question 12):

- I am experiencing homelessness, in which I do not have a fixed and regular nighttime residence, live in a temporary shelter, or live in a place not ordinarily used for sleeping;
- I have received a notice that could lead to eviction.

I declare under penalty of perjury under the laws of the United States of America and the State of California that the information contained on this Statement of Facts - Homeless Assistance and Certification are true and correct to the best of my knowledge.

|                                 |      |
|---------------------------------|------|
| Signature of Caretaker Relative | Date |
|---------------------------------|------|