

ELIGIBILITY DETERMINATION FORM FOR ERAP HOUSING STABILITY SERVICES

Household Members	Relationship to Applicant
	<i>Self (Primary Applicant)</i>

Current Physical Address: _____

Town/City: _____ **Zip Code:** _____ **County:** _____

- At least one member of my household has experienced some financial hardship due, directly or indirectly, to the COVID-19 pandemic. This includes qualifying for unemployment or experiencing the loss of income, increased expenses, or an inability to find or keep a job due to the COVID-19 pandemic.
- My household is at risk of housing instability, is currently experiencing homelessness or may become homeless.
- In the past 30 days my household's income was: _____ OR my household's 2020 income was: _____. This includes income received by anyone in the household (including children). This also includes wages from jobs, child support, SSI/SSDI, Unemployment, Veteran's Benefits, Reach Up, Social Security, Pension or Retirement Income or other cash income.
- I understand that my information as provided on this form may be shared with other Vermont state agencies, and other Vermont agencies can share information with the entity administering my housing stability services for the purpose of verifying my household's eligibility for this or other services related to the COVID-19 pandemic. Information as provided on this form will be shared with the Agency of Human Services, Agency of Commerce and Community Development, and the Agency of Administration to be used for State of Vermont reporting to the U.S. Department of the Treasury.
- I understand that, if Federal guidance on the regulations of the Emergency Rental Assistance Program change, it may change the terms of this program.

I certify that the information in this application is complete and true to the best of my knowledge.

Applicant Signature*: _____ **Date:** _____

Staff Signature: _____ **Date:** _____

**If the applicant is unable to sign the application, they may provide verbal authorization for the Housing Stability Services provider to sign on their behalf. In these cases, staff shall print the Applicant's name in place of signature, make a notation below, and staff signature is still required.*

- On (date) _____ the Applicant and I reviewed the application and the Applicant authorized me to sign on their behalf.

INCOME ELIGIBILITY DETERMINATION

Total Persons in Household _____ Total Annual Household Income _____

County	% Median Income	TOTAL HOUSEHOLD MEMBERS							
		1	2	3	4	5	6	7	8
Addison County	30%	\$17,600	\$20,100	\$22,600	\$25,100	\$27,150	\$29,150	\$31,150	\$33,150
	50%	\$29,333	\$33,500	\$37,667	\$41,833	\$45,250	\$48,583	\$51,917	\$55,250
	80%	\$46,900	\$53,600	\$60,300	\$66,950	\$72,350	\$77,700	\$83,050	\$88,400
Bennington County	30%	\$16,450	\$18,800	\$21,150	\$23,500	\$25,400	\$27,300	\$29,150	\$31,050
	50%	\$27,417	\$31,333	\$35,250	\$39,167	\$42,333	\$45,500	\$48,583	\$51,750
	80%	\$43,900	\$50,150	\$56,400	\$62,650	\$67,700	\$72,700	\$77,700	\$82,700
Caledonia County	30%	\$16,450	\$18,800	\$21,150	\$23,500	\$25,400	\$27,300	\$29,150	\$31,050
	50%	\$27,417	\$31,333	\$35,250	\$39,167	\$42,333	\$45,500	\$48,583	\$51,750
	80%	\$43,900	\$50,150	\$56,400	\$62,650	\$67,700	\$72,700	\$77,700	\$82,700
Chittenden County	30%	\$20,150	\$23,000	\$25,900	\$28,750	\$31,050	\$33,350	\$35,650	\$37,950
	50%	\$33,583	\$38,333	\$43,167	\$47,917	\$51,750	\$55,583	\$59,417	\$63,250
	80%	\$53,700	\$61,400	\$69,050	\$76,700	\$82,850	\$89,000	\$95,150	\$101,250
Essex County	30%	\$16,450	\$18,800	\$21,150	\$23,500	\$25,400	\$27,300	\$29,150	\$31,050
	50%	\$27,417	\$31,333	\$35,250	\$39,167	\$42,333	\$45,500	\$48,583	\$51,750
	80%	\$43,900	\$50,150	\$56,400	\$62,650	\$67,700	\$72,700	\$77,700	\$82,700
Franklin County	30%	\$20,150	\$23,000	\$25,900	\$28,750	\$31,050	\$33,350	\$35,650	\$37,950
	50%	\$33,583	\$38,333	\$43,167	\$47,917	\$51,750	\$55,583	\$59,417	\$63,250
	80%	\$53,700	\$61,400	\$69,050	\$76,700	\$82,850	\$89,000	\$95,150	\$101,250
Grand Isle County	30%	\$20,150	\$23,000	\$25,900	\$28,750	\$31,050	\$33,350	\$35,650	\$37,950
	50%	\$33,583	\$38,333	\$43,167	\$47,917	\$51,750	\$55,583	\$59,417	\$63,250
	80%	\$53,700	\$61,400	\$69,050	\$76,700	\$82,850	\$89,000	\$95,150	\$101,250
Lamoille County	30%	\$16,450	\$18,800	\$21,150	\$23,500	\$25,400	\$27,300	\$29,150	\$31,050
	50%	\$27,417	\$31,333	\$35,250	\$39,167	\$42,333	\$45,500	\$48,583	\$51,750
	80%	\$43,900	\$50,150	\$56,400	\$62,650	\$67,700	\$72,700	\$77,700	\$82,700
Orange County	30%	\$16,450	\$18,800	\$21,150	\$23,500	\$25,400	\$27,300	\$29,150	\$31,050
	50%	\$27,417	\$31,333	\$35,250	\$39,167	\$42,333	\$45,500	\$48,583	\$51,750
	80%	\$43,900	\$50,150	\$56,400	\$62,650	\$67,700	\$72,700	\$77,700	\$82,700
Orleans County	30%	\$16,450	\$18,800	\$21,150	\$23,500	\$25,400	\$27,300	\$29,150	\$31,050
	50%	\$27,417	\$31,333	\$35,250	\$39,167	\$42,333	\$45,500	\$48,583	\$51,750
	80%	\$43,900	\$50,150	\$56,400	\$62,650	\$67,700	\$72,700	\$77,700	\$82,700
Rutland County	30%	\$16,450	\$18,800	\$21,150	\$23,500	\$25,400	\$27,300	\$29,150	\$31,050
	50%	\$27,417	\$31,333	\$35,250	\$39,167	\$42,333	\$45,500	\$48,583	\$51,750
	80%	\$43,900	\$50,150	\$56,400	\$62,650	\$67,700	\$72,700	\$77,700	\$82,700
Washington County	30%	\$17,300	\$19,750	\$22,200	\$24,650	\$26,650	\$28,600	\$30,600	\$32,550
	50%	\$28,833	\$32,917	\$37,000	\$41,083	\$44,417	\$47,667	\$51,000	\$54,250
	80%	\$46,050	\$52,600	\$59,200	\$65,750	\$71,050	\$76,300	\$81,550	\$86,800
Windham County	30%	\$16,450	\$18,800	\$21,150	\$23,500	\$25,400	\$27,300	\$29,150	\$31,050
	50%	\$27,417	\$31,333	\$35,250	\$39,167	\$42,333	\$45,500	\$48,583	\$51,750
	80%	\$43,900	\$50,150	\$56,400	\$62,650	\$67,700	\$72,700	\$77,700	\$82,700
Windsor County	30%	\$16,600	\$18,950	\$21,300	\$23,650	\$25,550	\$27,450	\$29,350	\$31,250
	50%	\$27,667	\$31,583	\$35,500	\$39,417	\$42,583	\$45,750	\$48,917	\$52,083
	80%	\$44,150	\$50,450	\$56,750	\$63,050	\$68,100	\$73,150	\$78,200	\$83,250

All households must have income at or below 80% of area median income.

Income Category of Household (check one):

- < 30% of HUD AMI
 >=30% and <= 50% HUD AMI
 >50% and <= 80% HUD AMI