

EMERGENCY RENTAL ASSISTANCE REQUEST FORM

1. Name of Landlord/Manager _____

2. Address: _____

3. City/State/Zip: _____

4. I rented the property at : _____

To: _____
[Name of Tenant]

On: _____
[Date Tenant Moved In]

5. The monthly rent amount is: \$ _____ and is due on the _____ day of each month.

6. The amount of overdue rent is: \$ _____.

7. A written eviction notice has been given to the tenant. Yes No

If yes, please attached notice to this statement.

If no, please explain: _____

I certify under penalty of perjury under the laws of the State of Washington that the foregoing statements are true and correct.

Landlord/Manager Signature

Telephone Number

Date