

## **HOUSING AUTHORITIES**

City of Eureka & County of Humboldt



735 WEST EVERDING STREET, EUREKA CA 95503
PHONE: (707) 443-4583 FAX: (707) 443-4762 TTY: (800) 651-5111
WWW. EUREKAHUMBOLDTHA.ORG

## EHV LANDLORD INCENTIVE APPLICATION

Attention Landlord: To qualify for the County of Humboldt Housing Authority's landlord incentive program, please fill out the requested information below and return with your Request for Tenancy Approval (RFTA) form. For any questions pertaining to this application, please contact Sam Cord at 707-443-4583 x229.

Date o	f Application:
Owner	Name:
Owner	Address:
Rental	Unit Address:
Tenant	Name:
Please	select the appropriate choice below:
	I am a new landlord to the Housing Authority (HA) or am a returning landlord that has not participated in a Housing Authority (HA) program in the last 12 months.
	I am an existing landlord to the Housing Authority (HA) that is leasing up a new unit with the Emergency Choice Voucher Program.
I certif	y, to the best of my knowledge and belief, that the statements provided here are true and correct.
Landlo	ord Signature:
	BELOW SECTION TO BE COMPLETED BY PHA ONLY
I certif	y that the above landlord qualifies for the following payment amount:
	\$2,000 – This is a new landlord or a returning landlord that has not participated in a Housing Authority (HA) program in the last 12 months.
	\$2,000 – This is an existing landlord to a Housing Authority (HA) program that is leasing a new unit with the Emergency Housing Voucher Program.
PHA S	signature:



