

Request for MTW Hardship

I, _____, as head of household hereby request a Hardship for the following:

- ☐ A second interim decrease in a 12 month period
- ☐ A interim decrease in my initial 6 month occupancy with the RHA after a new admission, move or port-in.
- ☐ Deduction for my dependents
- ☐ Allowance for child-care
- ☐ Rent calculated at 30% of adjusted income (old way)

I'm requesting the hardship for the following reason(s):

- ☐ Involuntary loss or reduction in earnings or other assistance Please explain:

- ☐ Death in the Family. Please explain:

- ☐ Increase in expenses because of a changed circumstance. Please explain:

- I understand that I must **provide documentation with the Hardship Request**. Failure to do so will result in the request being denied.
- I understand if the a TEMPORARY or LONG-TERM hardship is approved, **I must pay the RHA the amount of back rent owed for as long as the hardship is in effect** through a repayment agreement.
- Only **1 hardship** is granted per year for any MTW Waiver
- I understand that I have the right to an informal hearing under grievance or hearing procedures of a Housing Authority determination of no hardship.

Head of Household

Date