ESG/ HOME ARP Rapid Rehousing and Homeless Prevention CLIENT FILE CHECKLIST

Inside Cover: E	SG/ HOME ARP Client File Checklist – Initia	l as received and placed in file (if not applicable, put N/A)					
	Documentation that client has been screened via centralized or coordinated intake system – all rapid rehousing clients						
	Summary of steps taken to verify client does not receive other subsidies for rent, utilities, etc.						
	Documentation of search in HMIS for duplicate services AND prior rental/utility assistance to ensure maximum						
	number of payments allowed are not exceed						
	Calendar has been marked for follow-up recertification (not less than at least once every 3 months for						
	homeless prevention clients and not less than once annually for rapid re-housing clients)						
Tab 1: Case Ma	nnagement Documentation						
Initial p	Initial pre-screening documentation (includes agency application, executed release of information forms, etc.)						
Identifi	Identification: Copy of government issued proof of citizenship (birth certificate, social security card, driver's						
license	license, passport). Valid ID required for units of government and for recipients of financial assistance						
Housing	Housing Assessment and Housing Plan (must be completed at least once every 3 months for homeless						
preven	prevention assistance and at least annually for rapid re-housing)						
Docum	Documentation that case manager has meet with household monthly						
Evidend	Evidence of non-housing referrals to mainstream resources and other agencies						
Evidend	Evidence of referrals to permanent housing programs						
Copy of	Copy of household budget and budget goals						
HMIS Ir	ntake Form						
HMIS C	lient Consent to Release Information form s	igned by both client and staff					
Program	Program Rules, Privacy Policy, Termination Policy and Grievance Policy signed by client as documentation of						
receipt							
Case no	otes (may be copies from case management	system or hand-written notes)					
•	y – Documentation of Need						
	ention – Imminent Risk or At-Risk ation that right to occupy housing may	Rapid Re-housing – Literally Homeless					
		Shelter referral documentation					
	ninated with 21 days; OR						
	ordered eviction notice – housing will ninated within 14 days;	Verification that there are no other resources					
be term	illiated Within 14 days,	such as family, friends, churches, etc.					
Doniel	natical from: anargy assistance	If unaccompanied youth under 25, or families with children and youth and defined as homeless					
	notices from: energy assistance,	·					
criurch,	social services, friends, family, etc.	under other programs, must document:					

No lease or occupancy agreement within last Documentation of utility account 60 days immediately preceding; AND Documentation of late payment notices from Is expected to continue status for extended utilities period Documentation showing that lack of utilities

Documentation of landlord mediation

could cause client to become homeless

Domestic violence documentation – fleeing or attempting to flee dangerous situations

2 or more moves during a 60-day period

immediately preceding; AND

	Self-declaration of Housing Status • Self-declaration of Homeless Housing Status
Tab 3:	Income
	Copy of HUD's Income Limit Worksheet or MFA's FMR/Income Limit Worksheet Income Verifications (third-party documentation preferred) for all household members age 18 and over (Homeless Prevention clients at entry and every 3 months at recertification, Rapid Re-housing clients at annual recertification) Income/Rent Calculation Worksheet showing household income below 30% AMI upon entry into program (Homeless Prevention at entry and every 3 months at recertification, Rapid Re-housing at annual recertification) Income limit is 50% AMI for HOME ARP if qualifying under "Other Populations" Part 2, Section(ii) Zero Income Certifications (if applicable) Executed Self-Declaration of Income (Homeless Prevention at entry and every 3 months at recertification, Rapid Re-housing at annual recertification) Copies of bank statements, evidence of assets Expenses documentation (if applicable – disabled households only for medical and attendant care deduction) Recertification documentation showing client is below 30% AMI for HP and at or below 30% AMI for RR and still qualifies for assistance
	Other income correspondence
Tab 4:	Financial Assistance Information
	Habitability Inspection – completed, signed (required for all types of ESG assistance) Annual re-inspection (if rent assistance exceeds 12 months) Rent Reasonableness Checklist that includes 3 comparable units Copy of most recent utility allowance obtained from local housing authority Copy of assessor's website documenting construction date of unit Lead-free paint disclosure – required for all clients in units build prior to 1978 Lead-based Paint Worksheet – required for all clients Lead-based Paint inspection form (based on worksheet results) Rental Assistance Agreement between service provider and landlord Landlord correspondence
Tab 5:	Fiscal Documentation and Close-out
	Copy of canceled checks payable to landlord, utility companies, etc. (if cancelled check unavailable, must provide evidence of how received payment from agency Documentation supporting that ESG assistance has ended, that the household is no longer in need of services, and household has been exited out of HMIS Termination documentation if participant has been terminated from program
File Pro	epared By:
Print N	Jame Date
Signau	ture