



CITY OF PERRIS TBRA PROGRAM

Preliminary Eligibility Verification - Please Read, Sign, and Initial

Complete the section below to determine applicant & household preliminary eligibility.

Note: This Preliminary Eligibility Verification section must be submitted and Approved by the Administrator before you can fill out an application. Prior to submitting your preliminary eligibility verification form, please review, initial, and sign. An incomplete form will not be accepted. Must be current in rent.

Name: _____ Contact No. _____ Email: _____

1. Do you live in the incorporated City of Perris limits? Yes: _____ No: _____

Please see attached map:

Current Address:

2. Does the income from ALL ADULTS in your household exceed the maximum amounts below? (please circle one)

2023 HCD HOME 60% Income Limits-Riverside County Effective June 15, 2023

Household Size	1	2	3	4	5	6	7	8
Income	\$39,180	\$44,760	\$50,340	\$55,920	\$60,420	\$64,920	\$69,360	\$73,860

3. Are you receiving Section 8 (Choice Voucher Program), or any other federal funding for rental subsidies, or is your rent currently subsidized? Yes: _____ No: _____

4. Disabled: Anyone in Household: Yes: _____ or No: _____

5. Please provide Household Size: _____

6. Occupancy Standards must be met; how many bedrooms are in the unit: _____

7. What is your current rent amount: _____

Please Read and Initial the below

8. I understand that this is a Preliminary Verification and will need to be reviewed and approved for residency requirements by staff. If approved, I will be prompted to complete the full application and submit the required supporting documentation. Initial: _____ Initial: _____

9. W-9 must be filled out and at the end of the year, a 1099 will be mailed to you for tax reporting purposes. For more information on the W-9, please contact your tax preparer.



Yes, I understand that at the end of the year, 1099 will be mailed to my household. **Initial:** _____
Initial: _____

10. I understand that an inspection and contracts are required. Initial: _____ **Initial:** _____

11. I understand that assistance under the HOME Tenant-Based Rental Assistance Program is not guaranteed. Assistance may be terminated if: 1) At any re-examination the Tenant's income is greater than the published income limit for the program; 2) The Tenant is evicted from the assisted unit; 3) The Tenant provides false information or commits any fraud in connection with the program or fails to cooperative with required reexaminations; or 4) Funding for the City of Perris HOME Tenant-Based Rental Assistance Program is terminated. Initial: _____ **Initial:** _____

Signature: _____ Date: _____

Preliminary Eligibility Verification SUBMITTAL INFORMATION (PLEASE READ)

The preliminary Eligibility Verification form can be emailed to the Housing Authority Department at perrishousing@cityofperris.org or Applications can be dropped off in person at:

City of Perris
Housing Authority
135 North D Street
Perris, CA 92570

For more information about this program or if you have any questions about the preliminary Eligibility Verification Form, please contact Rebecca Rivera at 951-943-5003 ext.496 or Carla Lopez at 951-943-5003 ext. 235 or

Your Contact for your Preliminary Eligibility: _____

OFFICE USE ONLY:

Proceed With TBRA Application Yes: _____ No: _____

Comments: _____

Staff: _____ Date: _____



MAP

Any property outside the red outline is considered in the unincorporated area of Riverside County and not within the City of Perris limits. For information on any current Housing Assistance for the unincorporated area, please get in touch with Riverside County Housing Authority at 951-351-0700.

