**Landlord Mitigation Program Application**

**INSTRUCTIONS**: Completed applications should be sent via email to Sean Harrington, Landlord Mitigation Program Manager, at the Department of Commerce. A scanned copy of the application including the signed and dated signature page, along with scanned copies of all required documents, must be attached to the submittal email. If the total file sizes exceed your ability to attach to an email, Department of Commerce will work with you to arrange for an alternate submittal. For these and other questions, contact Sean Harrington at 360.725.2995, or via email at [sean.harrington@commerce.wa.gov](mailto:sean.harrington@commerce.wa.gov).

**Please note**: Applications are for reimbursement only. Claims are limited to amounts in excess of $500 but no more than $5,000 per tenancy. The damages to the residence must exceed normal wear and tear. The rented unit/property must be located in a jurisdiction that prohibits denying tenancy based solely on the tenant’s source of income. A court judgment is required for all claimed amounts and must be attached to this application. For complete eligibility criteria and program information please visit the [Landlord Mitigation Program page](http://www.commerce.wa.gov/building-infrastructure/housing/landlord-mitigation-program/) on our website.

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| **Landlord/Payee** | | | | | | | | | | |
|  | | | | | | | | | | |
|  | Landlord’s Name as Listed on Court Judgement: | | | | |  | | | | |
|  | | | | | | | | | | |
|  | Mailing or Contact Address: | | |  | | | | | | |
|  | | | | | | | | | | |
|  | City: |  | | | | | State: | WA | ZIP Code: |  |
|  | | | | | | | | | | |
|  | Phone: |  | | Email: |  | | | | | |
|  | | | | | | | | | | |
|  | Statewide Vendor Number\*: | |  | | | | | | | |

\*Payment of Program reimbursement funds requires a Statewide Vendor Number (SWV). If you do not currently have an SWV, you must first [register](http://des.wa.gov/services/ContractingPurchasing/Business/VendorPay/Pages/default.aspx) with the Department of Enterprise Services to obtain a SWV number.

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| **Court Judgement Information** | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
|  | Name of Court: | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | |
|  | Entered Date (mm/dd/yyyy): | | | | |  | | | County: |  | | | |
|  | | | | | | | | | | | | | |
|  | Case Number: |  | | | | | | | | | Amount: |  | |
|  | | | | | | | | | | | | | |
|  | Small Claims Court | | |  | Yes | |  | No | | | | |  |
|  | | | | | | | | | | | | | |
|  | Default Judgement | | |  | Yes | |  | No | | | | |  |
|  | | | | | | | | | | | | | |

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|  | Has the debt been assigned to a collection agency? |  | Yes |  | No |

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| **Reimbursement Request** |
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| --- | --- |
| Property damages | $ |
| Unpaid rent | $ |
| Other Damages\* | $ |
| Less deposits retained, if any | $ |
| Less payments to landlord after judgement, if any | $ |
| Total Reimbursement Request (min. $500 and max. $5,000) | $ |

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| --- | --- |
| \*Any damages included as “other” must be specified in the court order and listed in the space provided below: | |
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| **Damaged Property Information** | | | | |
|  | | | | |
|  | Address where damages occurred: |  | | |
|  | | | | |
|  | Date of tenant’s move-in (mm/dd/yyyy): | |  |  |
|  | | | | |
|  | Date of tenant’s move-out (mm/dd/yyyy): | |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Jurisdiction Property Is Located in** | | | |
|  |  |  | |
|  |  | Unincorporated King County | |
|  |  |  | |
|  |  | Bellevue | |
|  |  |  | |
|  |  | Redmond | |
|  |  |  | |
|  |  | Kirkland | |
|  |  |  | |
|  |  | Seattle | |
|  |  |  | |
|  |  | Olympia | |
|  |  |  | |
|  |  | Tumwater | |
|  |  |  | |
|  |  | Vancouver | |
|  |  |  | |
|  |  | Other: |  |

If other, documentation of the jurisdiction’s prohibition (e.g., a copy of the statute or local ordinance) must be attached.

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| **Housing Choice Voucher Program Information** | | | | | | | | | | | | | | | |
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|  | | Housing Authority Name: | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | Address: | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | City: | | | |  | | | | | | State: |  | ZIP Code: |  |
|  | | | | | | | | | | | | | | | |
|  | | Contact Name: | | | | |  | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | Phone: | | | |  | | | | Email: |  | | | | |
|  | | Type of Voucher used by Tenant whose tenancy resulted in the damages: | | | | | | | | | | | | | |
|  |  | |  | | Tenant-Based Housing Choice (Section 8) | | | | | | | | | | |
|  | |  | |  | | | | | | | | | | | |
|  |  | |  | | Veterans Affairs Supportive Housing (VASH) | | | | | | | | | | |
|  |  | |  | | Other: | | |  | | | | | | | |

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| **Required Attachments** | |
|  | Court certified copy of the judgment and money award. This court document identifies the “Plaintiff” (Landlord) presenting the claim, the “Defendant” (Tenant), and the total amount awarded by the judgment. It is signed by the judge. (Note: This is not the same as a Federal Entry Detainer (FED) or eviction judgment.) |
|  |  |
|  | Final accounting for the tenant’s security/damage deposit containing an itemization of damages, unpaid rent, and other damages as described above and included in the court order. This should include:   1. Itemized list of work done in a unit occupied by a Housing Choice Voucher holder in the form of the itemized accounting document provided to tenant per their lease agreement. 2. Invoices (with unit number included, if applicable) for work done in unit/property. 3. Proof of payment for work done in unit/property. |
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|  | Housing Choice Voucher Contract Part A and Housing Authority termination notice or alternative proof of Housing Choice participation that identifies lease term, the landlord, tenant, and the participating housing authority |
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|  | If applicable, documentation of the jurisdiction’s prohibition (e.g., a copy of the statute or local ordinance) if the jurisdiction was not listed above. |
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| **Landlord Mitigation Program Application**  **Legal Certification** | | | | | |
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| Yes No Is this application for a private market unit (i.e., non-subsidized, non-publicly owned unit)?  Yes No Is the tenant a tenant-based housing choice voucher holder (see HUD’s [Housing Choice Voucher Program](http://portal.hud.gov/hudportal/HUD?src=/program_offices/public_indian_housing/programs/hcv/about))?  Yes No Did the landlord obtain a judgement against the tenant from the county in which the property is located?  Yes No Is the property located in a jurisdiction that prohibits denying tenancy based solely on an applicant’s source of income?  Yes No Is the landlord’s request between $500 and $5,000? (No more than $5,000 can be reimbursed per tenancy.)  Yes No Does the judgement list property damages, unpaid rent, or other damages, exceeding normal wear and tear, caused as a result of the tenancy?  Yes No Has the judgment claim been initiated on or after April 18, 2016?  Yes No Is the landlord submitting this application to Department of Commerce within 1 year of obtaining the judgement? | | | | | |
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|  | | | | | |
| The landlord (or landlord’s authorized person) attests by signing this document that all entries, including all attachment entries, are true and correct to the best of her/his knowledge, under penalty of perjury. Landlord will report within ten (10) days any payment on the judgment received after submission of this application for reimbursement and/or after reimbursement is received. The landlord also attests that no appeal of judgment has been filed or received related to this application for payment. | | | | | |
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| Landlord agrees to file a full or partial (as the case may be) satisfaction of judgment in the amount of the reimbursement with the court which issued the judgment within thirty (30) days of payment from the Landlord Mitigation Program or any other source. Landlord also agrees to send a copy of the filed satisfaction of judgment, within ten (10) days of filing, to the Department of Commerce, c/o the Landlord Mitigation Program. | | | | | |
|  | | | | | |
| ***I declare under penalty of perjury that the above statements are true and correct.*** | | | | | |
|  | **Signature** |  | **Date** |  |  |
|  | **Printed Name** |  |  |  |  |
|  | **Title** |  |  |  |  |
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