

Request for VHA Approved Financial Hardship Exemption

1. Purpose of Form

Use this form to request that your household be made exempt from a rent reform policy under the Moving to Work program or the minimum rent. You can add additional pages or documents to this request. You may be asked for additional information in order for the VHA to make a decision. The decision may take up to 30 days. Your exemption will not start until after the Hardship Panel has made a decision.

2. Household Information

Head of Household: _____

Mailing Address: _____

Telephone/email: _____

3. Description of Financial Hardship

A. Which policy is causing the financial hardship?

- The Minimum Earned Income
- The 35% Percent of Income
- The \$50 Minimum Rent
- The Simplified Utility Allowance
- The Replaced Medical Deduction
- I'm Not Sure

B. Monthly Household Expense and Income Worksheet – show us your typical monthly budget

Expense	Amount	Expense	Amount	Income	Amount
Rent		Personal Supplies		Wages	
Utilities		Clothing		SS/SSI	
Home/Cell Phone		Salon/Barber		TANF	
Cable/Internet		Loans/Credit Card		Child Support	
Car Payment		Medical Expenses		Food Stamps	
Car Insurance		Daycare		Other	
Gasoline		Pet Food/Vet		Total Income	_____
Bus/Taxi Fare		Entertainment		Total Expenses	- _____
Groceries		Other		Difference	= _____

C. Describe how the policy is causing you a hardship?

D. What other steps are you taking to resolve your situation?

E. How long do you want to be exempt from the policy? _____

F. Are you behind in your rent or utilities? No Yes...if yes, how much? _____

4. Optional Request

Do you want to meet in person with the Hardship Panel to discuss your request? No Yes

5. Certification

I certify that the information I have provided on this request form is true and correct:

Signature _____
Date