Belle Plaine

COVID-19

Resident Relief Grant

Rental & Mortgage Assistance

GRANT AVAILABLE NOW

- Rent & mortgage assistance
- Final expenses for COVID related death
- Based on evidence of need
- **$3,000** maximum
- Must be a Belle Plaine resident
- Grant paid to landlord, mortgage company, or service provider
- Apply at https://www.bellepllainemn.com/resident-relief-grant

BELLE PLAINE RESIDENT RELIEF GRANT

PURPOSE

The City of Belle Plaine is providing CARES Act Relief Funds for financial assistance to individuals and families directly impacted by a loss of income due to the COVID-19 public health emergency. The Resident Relief Program assists residents with necessary assistance for payment of overdue rent or mortgage payments to avoid eviction or foreclosure. The Resident Relief Grant also assists residents with unforeseen financial costs for funerals.

PROGRAM JUSTIFICATION

In an effort to gauge resident's needs within the City of Belle Plaine staff has engaged the community though direct, personal outreach to the faith community, food resource providers, childcare providers, landlords, manufactured home park managers, financial institutions, other cities in Scott County, and Scott County Community Development Agency and First Stop Shop. Demographic analysis was also conducted, including: number of persons in poverty (550), number of SNAP recipients (154), number of persons filing for unemployment since March (1,100 - extrapolated from County data), median rent ($780.00), median mortgage plus expenses ($1,560.00), and percentage (45%) of total Belle Plaine households (2,537) at less than area median income ($80,000).

Community input and demographic analysis demonstrates a need for the Resident Relief Grant in Belle Plaine. The Resident Relief Grant is consistent with ***"Guidance for State, Territorial, Local, and Tribal Governments Updated June 30, 2020"*** **and** ***"U.S. Treasury's Coronavirus Relief Fund Guidance for State, Territorial, Local, and Tribal Governments FAQ's updated July 8, 2020***".

The City acknowledges the COVID 19 health emergency continues to evolve. As such the City reserves the right to amend, alter, or adjust the Resident Relief Grant Program in response to pandemic situation changes and CARES Act Fund federal guidance adjustments.

PROGAM SPECIFICS

1. Eligible expenses able to be reimbursed by a grant must be incurred between March 1, 2020 and November 15, 2020 and may include:
    a. Past due rent or mortgage, not to exceed two months
    b. Unforeseen financial costs for COVID related funerals

2. Grant maximum is $3,000.00 per individual, not exceeding $3,000.00 per family household.

PROGRAM ELIGIBILITY

1. Individuals or families that reside within the City limits are eligible to apply. The Applicant must be the primary lease or mortgage holder. Grants may only be issued for reimbursement of bills incurred between March 1, 2020 and November 15, 2020.

2. Individuals or families that reside outside of City limits are not eligible for the Resident Relief Program.

3. Businesses are not eligible for the Resident Relief Program.

APPLICATION & PROCESS

1. Application. Grant applications are to be on a form provided by the City. At a minimum the

application shall include:

A. A completed application including a signed acknowledgement by the applicant indicating the grant is necessary and a result of unforeseen financial hardship due to COVID-19.
B. A copy of one of the following:
    a. Unemployment letter
    b. Furloughed letter
    c. Employer letter reducing hours due to COVID-19
    d. Proof on inability to work due to COVID-19
    e. Proof of rent/mortgage payment in arrears
    f. Proof of funeral/mortuary expense or other approved expense from a service provider
C. Copy of lease from landlord or statements from mortgage company. If application is for unforeseen financial costs for funerals, copies of invoices, receipts, etc.
D. Name, contact phone number or email, and postal mailing address of service provider (e.g. landlord, mortgage company, or funeral home/mortuary).

2. Grant Review Process. The grant review process shall be as follows:

A. Grants shall be reviewed administratively upon receipt. Administrative staff shall review the application and make a determination on program eligibility and grant amount.
B. Applicant's receiving grants will be notified in writing.
C. Grant payments are made directly to the service provider i.e. landlord, mortgage company, or funeral home/mortuary.
D. Grants will not be issued when allocated program funds are depleted.

DATA PRIVACY

Applications shall be considered private, however, the names of those receiving grants and the grant amount shall be public information.

RESIDENT RELIEF GRANT PROGRAM

1. Applicant Name : _____
2. Applicant street address: _____
3. Applicant mailing address: _____
4. Applicant phone number: _____
5. Applicant e-mail: _____
6. Grant amount requested: _____
7. List individual items grant will cover. You must attach receipts/invoices for all reimbursable expenses.

	Description of item	**Name & mailing address of landlord (rental assistance), mortgage company (mortgage assistance) or service provider (burial expenses)**	**Amount**
1			$
2			$
3			$
4			$
5			$

8. I will attach the following evidence of income loss due to COVID 19 health emergency:

___ Unemployment letter ___ Pay stubs ___ Furlough letter

___ Letter from employer ___ Proof of inability to work due to COVID 19

___ Proof of rent or mortgage in arrears (delayed payment)

___ Proof of funeral/mortuary expense and COVID related reason for death

___ Other: _____

9. Required certifications. The Applicant must read and initial each of the following:

_____ As the Applicant, I certify this grant is necessary and a direct result of income loss due to the COVID 19 public health emergency.

_____ I acknowledge the City is relying on statements made by me as the Applicant when evaluating the application. If representations in the application are found to be inaccurate, I shall reimburse the City for the full amount of any grant received. I understand and acknowledge that I may be required to demonstrate the representations to city, state, or federal agencies at some point in time.

_____ I certify that I have read, understand, and agree to comply with the policy for the Belle Plaine Resident Relief Grant. I certify the information included and attached hereto is factual.

_____ I authorize the City of Belle Plaine to share any information or materials necessary to review my application for the Belle Plaine Resident Relief Grant with other City staff members. I also authorize the City of Belle Plaine to make inquiries as necessary to verify the accuracy of statements made on this application.

10. Please attach the following as proof of need for grant:

- ☐ If applying for rental assistance: rental agreement and evidence of past due amount
- ☐ If applying for mortgage assistance: evidence of mortgage and past due amount
- ☐ If applying for assistance with burial expenses, receipts/invoices from funeral home/mortuary

11. Please attach the following as proof of income loss due to COVID 19 health emergency:

- ☐ Unemployment letter, pay stubs showing loss, furlough letter, or letter from employer reducing hours
- ☐ Proof of inability to work due to COVID 19

12. Please attach one of the following as proof of residency:

- ☐ Copy of photo ID or driver's license showing current address in Belle Plaine
- ☐ Copy of current utility bill showing current address in Belle Plaine

Authorized Applicant Signature: _____

Applicant Name (printed): _____

Date: _____

DATA PRIVACY: Applications shall be considered private, however, the names of those receiving grants and the grant amount shall be public information.

FOR OFFICE USE ONLY:

Application reviewed by: _____ Date: _____

Application: _____ Approved _____ Denied due to _____

Grant amount approved: _____