**Your Way Home- Rapid Rehousing File Checklist**

**Indicate each document that has been added to the file on the line provided.
The line should be blank next to any document that is missing.**

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| Client Name: | Clarity ID: |
| Assigned HSC:  | **Enrollment Date:** |

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| Intake Documents | Notes |
| Head of Household Identification | \_\_\_\_\_HOH ID (minimum requirement)\_\_\_\_\_HOH Birth Certificate\_\_\_\_\_HOH Social Security Card  |  |
| Household Member Identification | Total Household Members: \_\_\_\_\_\_\_\_\_\_\_\_ID (household members over 18)\_\_\_\_\_Birth Certificates for all \_\_\_\_\_Social Security Cards for all Note any missing documentation. |  |
| Clarity Consent Form | \_\_\_\_\_Completed and Signed  |  |
| Certification of Income Eligibility | \_\_\_\_\_Completed and Signed  |  |
| Housing Search Planner  | \_\_\_\_\_Completed and Signed  |  |

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| Move-In Documents | Notes |
| Cover Page | \_\_\_\_\_Completed and Signed  |  |
| Rent Reasonableness Form | \_\_\_\_\_Completed and Signed  |  |
| Landlord W-9 Form | \_\_\_\_\_Completed and Signed  |  |
| Tax Lien Search | \_\_\_\_\_Downloaded and printed from the Montgomery County website |  |
| Full Copy of Inspection Report or Signed PH Minimum Habitability Checklist | \_\_\_\_\_HQ Inspection Request\_\_\_\_\_ Inspection Summary\_\_\_\_\_Full Inspection Report from MCHA\_\_\_\_\_Signed Minimum Habitability Checklist (for COVID Waivers) |  |
| Fully Executed Lease | \_\_\_\_\_Signed by Client\_\_\_\_\_Signed by Landlord |  |
| Lead Paint brochure receipt | \_\_\_\_\_Completed and Signed  |  |
| Move-In Note in Clarity | \_\_\_\_\_Completed |  |

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| Recertification Documents- to be completed every 3 months | Notes |
| Rental Agreements | \_\_\_\_\_ Move In/Initial\_\_\_\_\_Recertification 1\_\_\_\_\_Recertification 2 \_\_\_\_\_Recertification 3\_\_\_\_\_Recertification 4\_\_\_\_\_Recertification 5\_\_\_\_\_Recertification 6 \_\_\_\_\_Recertification 7\_\_\_\_\_Recertification 8\_\_\_\_\_Recertification 9\_\_\_\_\_Recertification 10 |  |
| Proof of Income | \_\_\_\_\_Initial\_\_\_\_\_Recertification 1\_\_\_\_\_Recertification 2 \_\_\_\_\_Recertification 3\_\_\_\_\_Recertification 4\_\_\_\_\_Recertification 5\_\_\_\_\_Recertification 6 \_\_\_\_\_Recertification 7\_\_\_\_\_Recertification 8\_\_\_\_\_Recertification 9\_\_\_\_\_Recertification 10 |  |
| Proof of Benefits(Updated as changes occur) | \_\_\_\_\_TANF\_\_\_\_\_SNAP\_\_\_\_\_Medicare/Medicate\_\_\_\_\_SSI/SSDIOther Benefits: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |  |
| Budget | \_\_\_\_\_Intake \_\_\_\_\_Move-In \_\_\_\_\_Recertification 1\_\_\_\_\_Recertification 2 \_\_\_\_\_Recertification 3\_\_\_\_\_Recertification 4\_\_\_\_\_Recertification 5\_\_\_\_\_Recertification 6 \_\_\_\_\_Recertification 7\_\_\_\_\_Recertification 8\_\_\_\_\_Recertification 9\_\_\_\_\_Recertification 10 |  |
| Housing Stability Plan | \_\_\_\_\_Initial \_\_\_\_\_Recertification 1\_\_\_\_\_Recertification 2 \_\_\_\_\_Recertification 3\_\_\_\_\_Recertification 4\_\_\_\_\_Recertification 5\_\_\_\_\_Recertification 6 \_\_\_\_\_Recertification 7\_\_\_\_\_Recertification 8\_\_\_\_\_Recertification 9\_\_\_\_\_Recertification 10 |  |
| Case Notes | \_\_\_\_\_Recertification 1\_\_\_\_\_Recertification 2 \_\_\_\_\_Recertification 3\_\_\_\_\_Recertification 4\_\_\_\_\_Recertification 5\_\_\_\_\_Recertification 6 \_\_\_\_\_Recertification 7\_\_\_\_\_Recertification 8\_\_\_\_\_Recertification 9\_\_\_\_\_Recertification 10 |  |
| Case Note Contents | Document correspondence with landlords and clients Note any missing or inappropriate case notes.  |  |
| Client Payment Documentation | \_\_\_\_\_Recertification 1\_\_\_\_\_Recertification 2 \_\_\_\_\_Recertification 3\_\_\_\_\_Recertification 4\_\_\_\_\_Recertification 5\_\_\_\_\_Recertification 6 \_\_\_\_\_Recertification 7\_\_\_\_\_Recertification 8\_\_\_\_\_Recertification 9\_\_\_\_\_Recertification 10 |  |

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| Program Exit Documents- if applicable | Notes |
| Program Exit Plan | \_\_\_\_\_Completed and Signed |  |
| Exit Letter | \_\_\_\_\_ Provided to Landlord\_\_\_\_\_\_ Provided to Client |  |
| Final Budget | \_\_\_\_\_Completed |  |
| Proof of Receipt of Grievance Procedure | \_\_\_\_\_Completed and Signed |  |
| Program Exit Note in Clarity | \_\_\_\_\_Completed |  |

**Additional Comments/Notes**