

Mortgage/Rent/Utility Assistance Program

APPLICATION PROCESSING CHECKLIST

Applicant Name: _____

Applicant Address: _____

Application for: Mortgage Rent Utilities

Date of Eligibility Determination: _____

Date of Approval: _____

FINAL	
ELIGIBILITY DETERMINATION	
<input type="checkbox"/>	Ineligible
<input type="checkbox"/>	Forwarded for Approval

This Checklist and the SOP shall be used to complete the Application Process

I. INTAKE. Date: _____

Document contact on the “Waiting List Spreadsheet” Date: _____

Collect Prequalification Survey Responses (MRU-100)

Is the applicant potentially qualified/eligible based on survey responses?

- No.**
- a. Notify applicant of reason
 - b. If not qualified for our program, refer them to the Texas Rent Relief Program at (833) 989-7368 or www.texasrentrelief.com
 - c. Annotate Contact Log and Document the contact and file

Yes. Mail/Provide Application Packet to Applicant. Date: _____

Application Packet consists of the documents below:

MRU-104: APPLICATION LETTER
MRU-102: MORTGAGE APPLICATION OR MRU-103: RENTAL APPLICATION
MRU-101: COVID IMPACT
MRU-111: RELEASE OF INFORMATION
MRU-105: VERIFICATION OF EMPLOYMENT AND/OR MRU-106: SELF EMPLOYMENT AFFIDAVIT
MRU-108: APPLICANT AFFIDAVIT
MRU-110: DUPLICATION OF BENEFITS AFFIDAVIT

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II. COMPLETED APPLICATION RETURNED AND SUPPORTING DOCUMENTATION REVIEW & VERIFICATIONS

Yes No N/A Date

Yes	No	N/A	Date	
				MRU-101: COVID IMPACT
				MRU-102: MORTGAGE APPLICATION
				MRU-103: RENTAL APPLICATION
				COPIES OF ID'S – ALL HOUSEHOLD MEMBERS
				SOCIAL SECURITY CARDS – ALL HOUSEHOLD MEMBERS
				PROOF OF CITIZENSHIP – ALL HOUSEHOLD MEMBERS
				MRU-105: VERIFICATION OF EMPLOYMENT WITH CHECK STUBS FOR PREVIOUS 3 MONTHS
				PUBLIC ASSISTANCE VERIFICATION
				VETERANS INCOME
				RETIREMENT INCOME
				CHILD SUPPORT – 12 MONTH HISTORY
				SOCIAL SECURITY/DISABILITY INCOME LETTER
				UNEMPLOYMENT INCOME
				WORKER'S COMPENSATION
				VERIFICATION OF RETIREMENT INCOME
				MRU-106: SELF EMPLOYMENT AFFIDAVIT
				TAX RETURNS – 2 YEARS
				BANK STATEMENTS – 3 MONTHS
				NO BANK ACCOUNT AFFIDAVIT
				LEASE AGREEMENT (IN APPLICANT'S NAME)
				MORTGAGE STATEMENT
				ELECTRIC BILL (IN APPLICANT'S NAME)
				GAS BILL (IN APPLICANT'S NAME)
				MRU-108: APPLICANT AFFIDAVIT
				MRU-110: DUPLICATION OF BENEFITS AFFIDAVIT
				MRU-111: RELEASE OF INFORMATION

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APPLICATION PROCESSING CHECKLIST

Application Complete?

- Not Complete.** Notify applicant of denial (MRU-116), document and file. Date: _____
- Complete.** Review application documents.

Application & Documentation Review – Refer to SOP for detailed guidance.

Yes	No		Date
		COVID Impact on employment Verified and Qualifies	
		Household Members & Identities Verified and Qualifies	
		Residency/Citizenship Status Verified and Qualifies	
		Financial Situation Verified and Qualifies	
		Household Income Calculated and Qualifies	
		Employment Situation Verified and Qualifies	

A **No** on any one of the above listed items disqualifies the applicant. Notify applicant of denial (MRU-116). Date: _____

III. APPROVAL RECOMMENDATION

- a. If determined to be not qualified/eligible, notify applicant of denial (MRU-116)
- b. If determined qualified/eligible, provide recommendation to the Director using form MRU-113.

IV. DIRECTOR APPROVAL ACTION

- Denied** – Notify applicant by applicant by letter (MRU-116), update the waiting list, document, and close the file.
- Approved** – Proceed to Final Actions

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APPLICATION PROCESSING CHECKLIST

V. FINAL ACTIONS

- a. Prepare approval (MRU -115) and provide a signed copy to the landlord
- b. Prepare Non-Discrimination Certification and have applicant sign
- c. Prepare Landlord Agreement (MRU-114) and send through applicant to landlord for signatures.
Provide signed copies to both the applicant and landlord.
- d. Obtain W-9 from Landlord/Lender

Refer to SOP for Assistance Payment Actions

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COMMENT LOG

Name of Applicant: _____