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Landlord Attestation

Effective July 1, 2024, IEHP will require a signed Landlord Attestation for all housing deposit requests. Landlord Attestation is subject to verification by IEHP.

SECTION 1: MEMBER
To be completed by Member

IEHP Member Name	Today's Date (mm/dd/yyyy)
Signature of IEHP Member	IEHP ID Number

SECTION 2: LANDLORD ATTESTATION
To be completed by Landlord

Landlord/Agent		Title:
Address for security deposit:		
City:	State:	Zip Code
Phone:	Fax:	Email:

I, _____(Landlord/Property Management Agency) agree/have agreed to rent to: _____ (IEHP Member) a unit located at:

(Address)

Monthly Rent Amount:	Security Deposit:	Application Fee:

I certify that this property is:

☐ Single-family home/mobile home/condominium/townhome
# of bedrooms: _____
# of bathrooms: _____

☐ Single-family apartment unit
# of bedrooms: _____
# of bathrooms: _____

☐ Single Room Occupancy (SRO)
☐ Room and Board
☐ Senior living

Disclaimer: *IEHP does not honor "Promise to Pay" requests. Housing Deposits will not be paid if Member moves in prior to the security deposit being approved and paid.*
By signing this attestation, the landlord agrees to adhere to Fair Housing and antidiscrimination practices. Section 504, HUD's Section 504, 24 C.F.R ss 8.33
(https://www.hud.gov/program_offices/fair_housing_equal_opp/reasonable_accommodations_and_modifications)

Today's Date (mm/dd/yyyy)	Signature of Landlord:	Name and Title

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SECTION 3: Housing Deposit Acknowledgement

To be completed by CS Provider and Landlord when deposit is paid

I, _____(Landlord/Property Management Agency) have received, from _____ (CS Provider), the sum of : $ _____ towards the security deposit for the tenant listed in Section 1.

Payable To (Name, Address):	Payment Form: ☐ Check ☐ Cashier's Check ☐ Money Order ☐ Other: _____	Date:
Landlord/Agent:	Title:	Date:
Landlord Signature:		
CS Provider:	Title:	Date
CS Provider Signature:		