RAMP ERA

Rental Assistance for Mississippians Program (RAMP)

Emergency Rental Assistance (ERA)

APPLICATION GUIDE

Mississippi Home Corporation

EQUAL HOUSING OPPORTUNITY

Table of Contents

RAMP ERA

Info & Call Center Numbers

The State of Mississippi received $200 million dollars from the U.S. Department of Treasury's Federal Emergency Rental Assistance Program (ERA) to aide individuals who have been monetarily impacted by COVID-19.

This funding can be used for rental assistance, rental arrears, as well as utilities and home energy costs including electricity, gas, water and sewer, trash removal, and energy costs, such as fuel oil. The funding CANNOT be used for telephone, cable, or internet expenses.

ELIGIBILITY

Eligible households may receive up to 15 months of assistance to make rent and utility payments current.

An application for rental assistance may be submitted by either an eligible tenant or by a landlord on behalf of that eligible tenant. Tenants and landlords must apply through the www.ms-ramp.com website. Funds will be paid directly to landlords and utility service providers.

As defined by The U.S. Department of Treasury an "eligible household" is a renter household in which at least one or more individuals meet the following criteria:

- Qualifies for unemployment or has experienced a reduction in household income, incurred significant costs, or experienced a financial hardship due to COVID-19;
- Demonstrates a risk of experiencing homelessness or housing instability; and
- Has a household income at or below 80 percent of the area median.

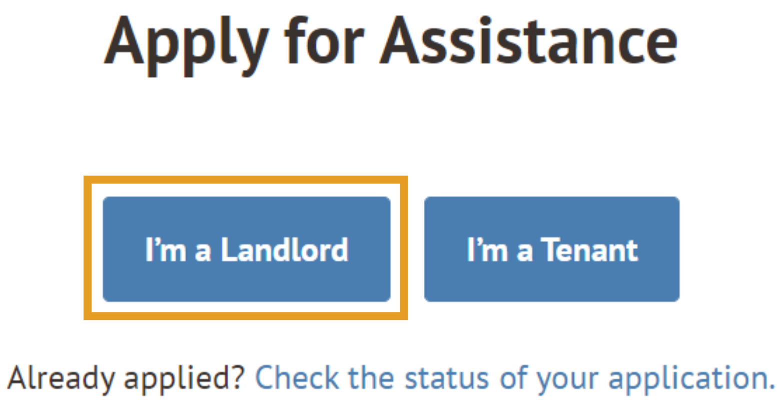
Documentation is required to prove eligibility requirements.

Eligible households that include an individual who has been unemployed for the 90 days prior to application for assistance and households with income at or below 50 percent of the area median will be prioritized for assistance.

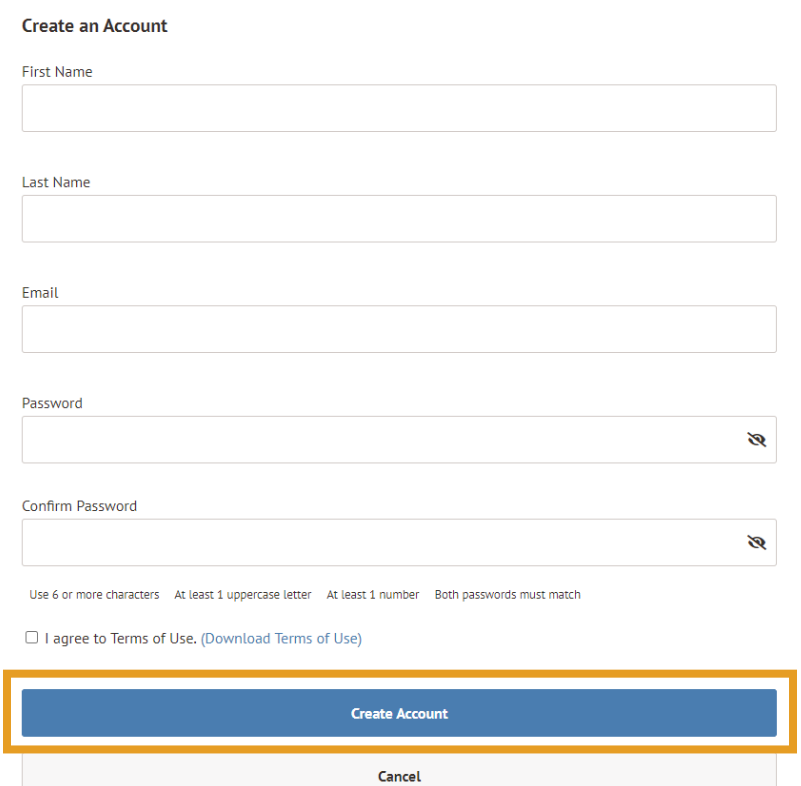
Eligible households who receive a monthly federal subsidy may be eligible to receive rental assistance for the tenant-owed portion of rent under the MS RAMP program.

If you would like to speak directly to a representative, call the ERA Call Center
Local: 601-533-8401
Toll Free: 1-888-725-0063

Selecting “I’m a Landlord”



1. Complete “Create an Account” Page

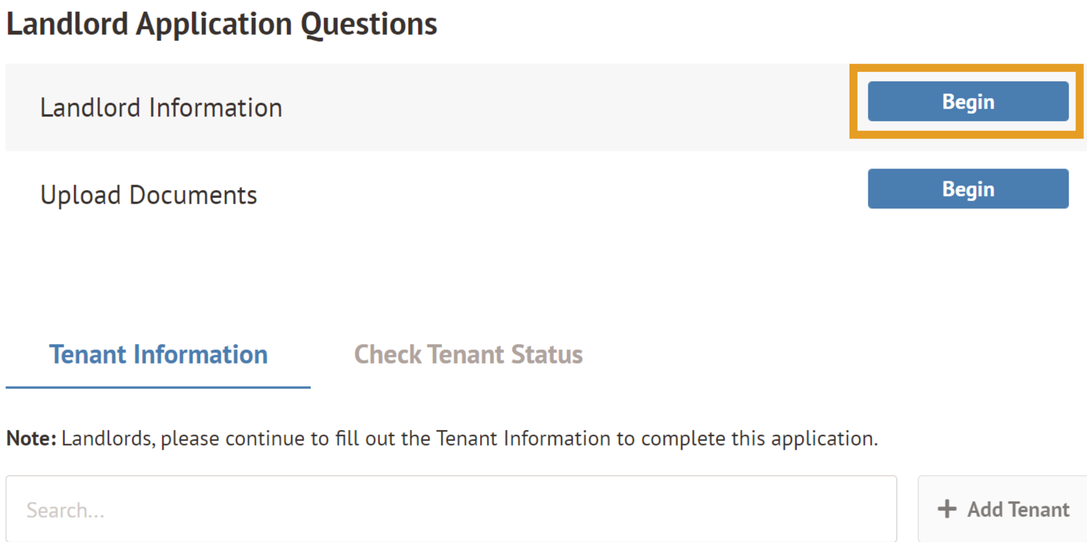


Create an Account

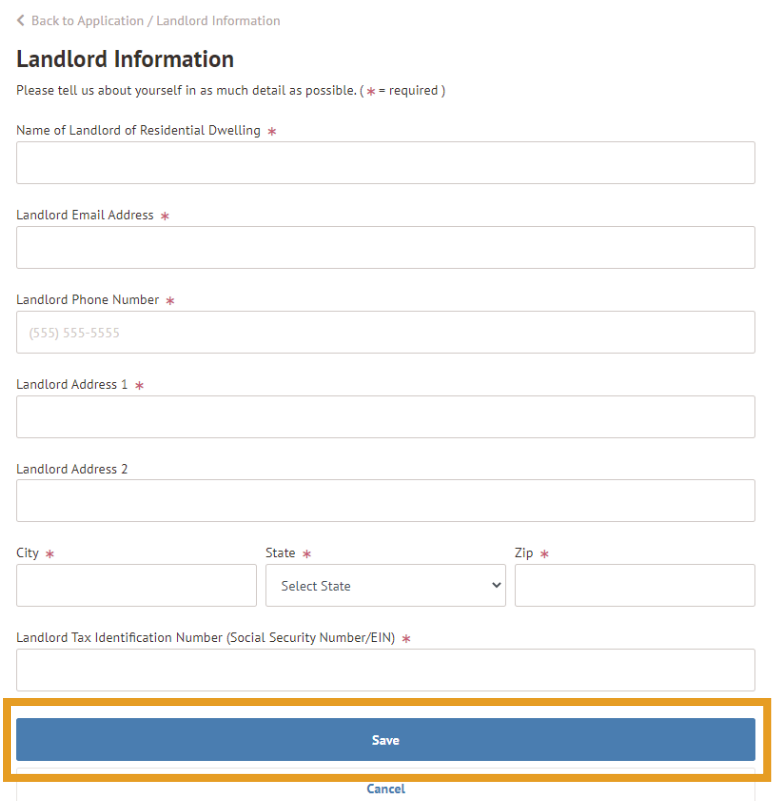
- First Name - can be either Owner or Managing Agent of Property
- Last Name – can be either Owner or Managing Agent of Property
- Email – should use email address regularly checked because application updates and program communications will primarily come via this email
- Password – must use 6 or more characters, at least 1 uppercase letter, & at least 1 number
- Confirm Password – self-explanatory

2. Click “Create Account”

3. Click "Begin" by Landlord Information under the Landlord Application Questions



4. Complete the Landlord Information Page

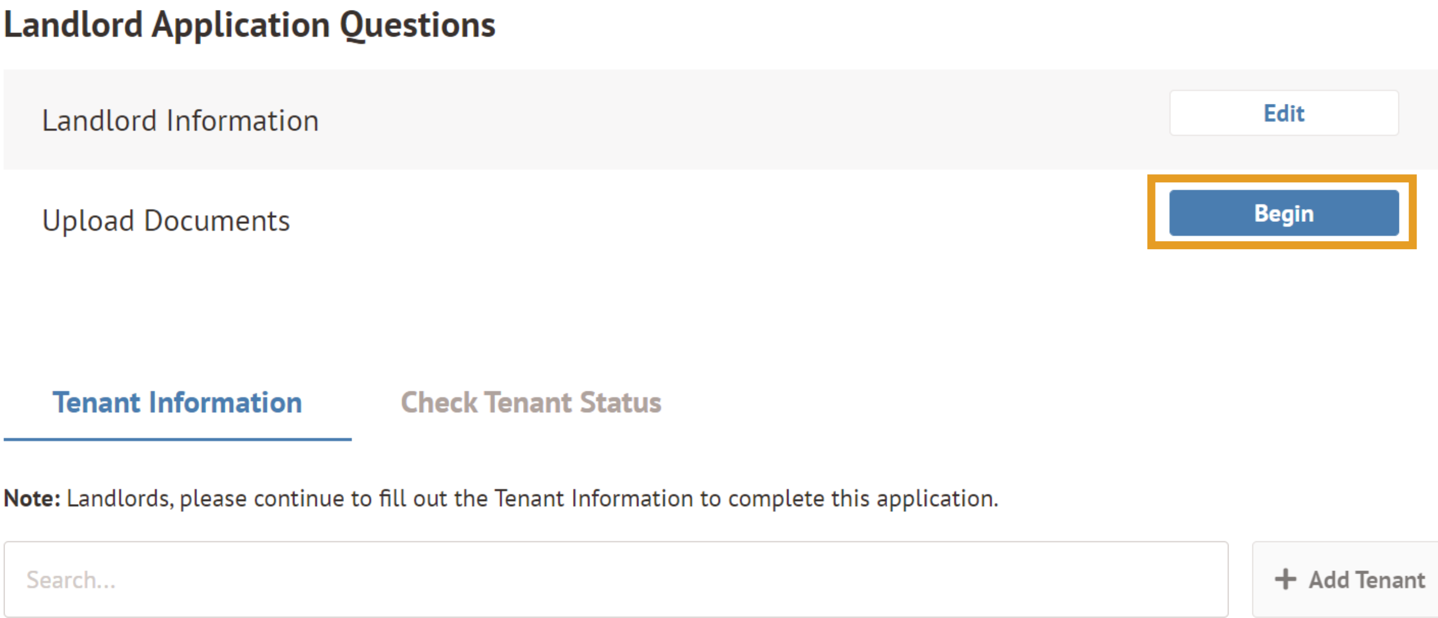


Landlord Information

- Name of Landlord of Landlord Residential Dwelling – can be either Owner or Managing agent of Property; should match name included in "Create an Account" section
- Landlord email address – should use email address used to create the ERA account in Step 1.
- Landlord Phone Number – self-explanatory
- Landlord Address 1 – should use personal address of landlord, not rental property address (unless the same)
- Landlord Address 2 – should use personal address of landlord, not rental property address (unless the same)
- City – should use personal address of landlord, not rental property address (unless the same)
- State – should use personal address of landlord, not rental property address (unless the same)
- Zip – should use personal address of landlord, not rental property address (unless the same)
- Landlord Tax Identification Number (Social Security Number/EIN) – must use number used to file taxes for the subject rental property; must be 9 digits

5. **Click "Save"**

6. **Click "Begin" by Upload Documents**

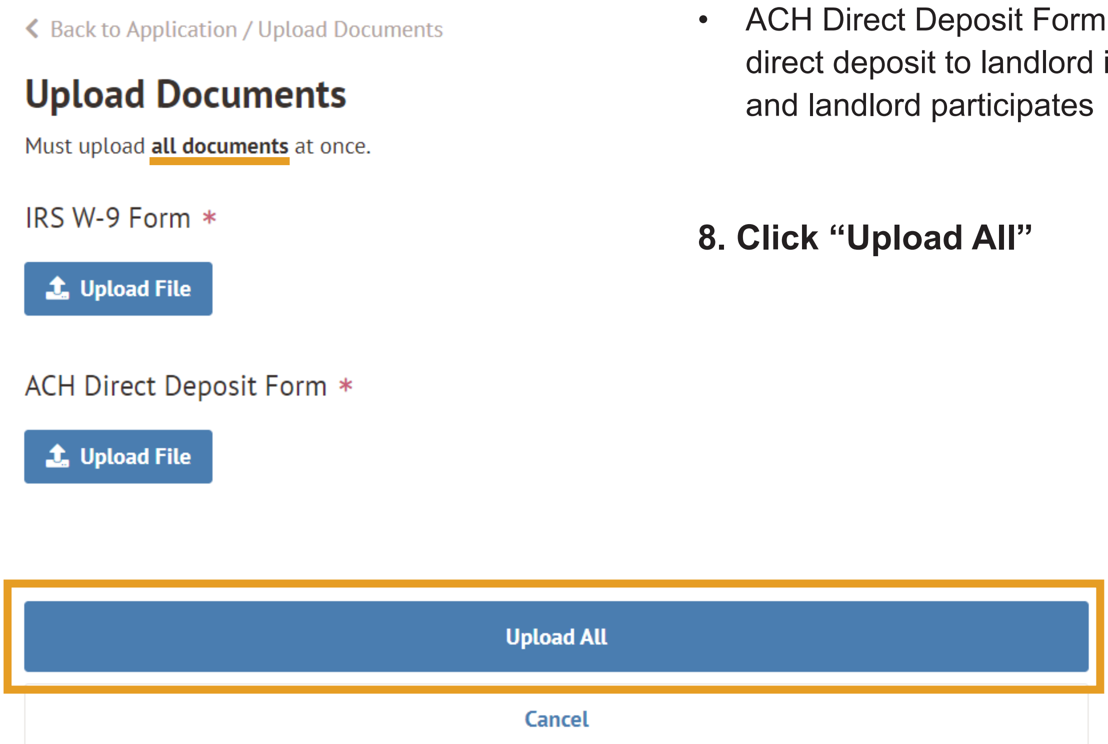


7. **Complete Uploaded Documents Page**

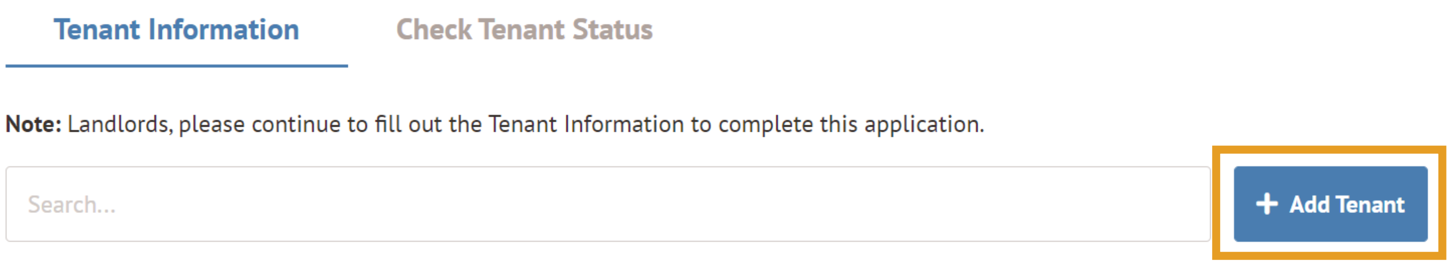
Upload Documents

- IRS W-9 Form – must use form related to rental business
- ACH Direct Deposit Form – will be used to make direct deposit to landlord if tenant is approved and landlord participates

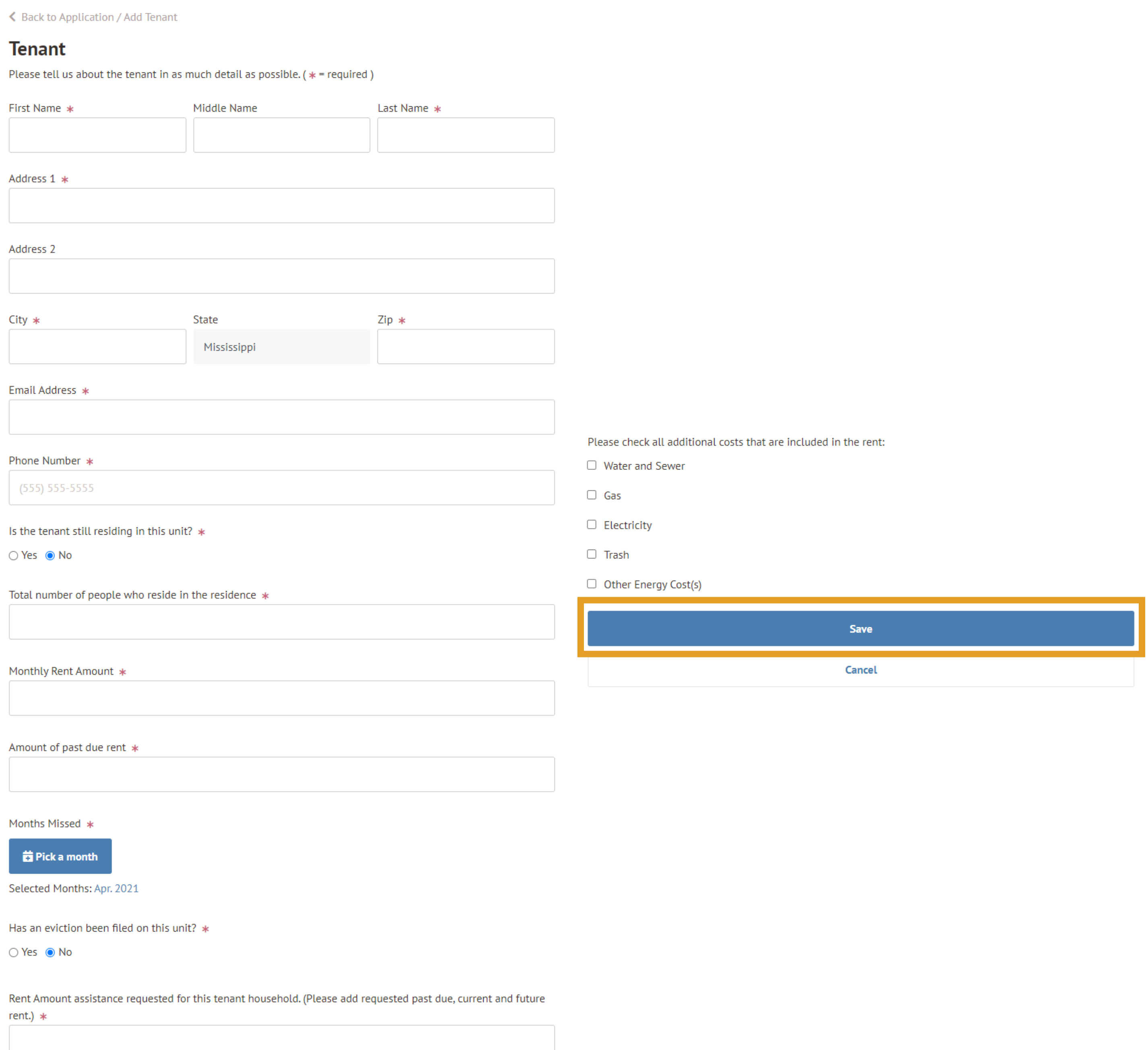
8. **Click "Upload All"**



9. Click “Add Tenant”



10. Complete Tenant Information



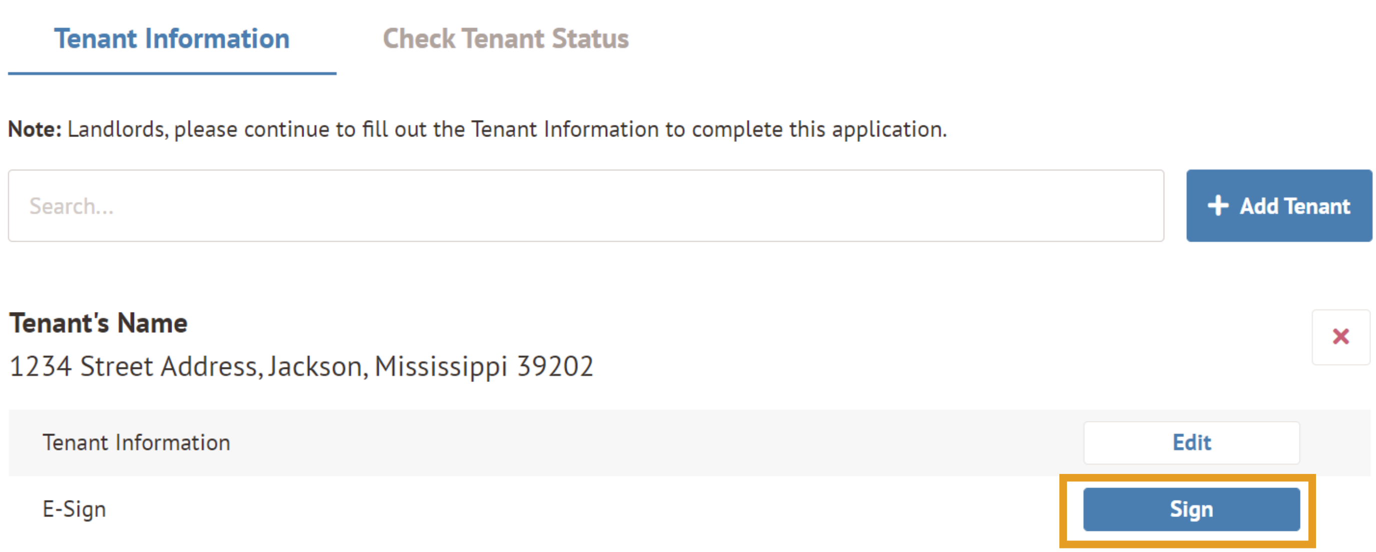
Tenant Information

(Complete this for each tenant in which you expect to or will encourage to apply. This should be the person on the lease agreement.)

- First Name – insert name of Head of Household or primary contact for rental unit
- Middle Name – insert name of Head of Household or primary contact for rental unit
- Last Name – insert name of Head of Household or primary contract for rental unit
- Address 1 – insert address of rental unit occupied by name above
- Address 2 - insert address of rental unit occupied by name above
- City - insert address of rental unit occupied by name above
- State - insert address of rental unit occupied by name above
- Zip - insert address of rental unit occupied by name above
- Email Address – insert email address primarily used by tenant to communicate with you
- Phone Number – insert phone number primarily used by tenant to communicate with you
- Is the Tenant still residing in this unit? – respond appropriately – tenant must still be residing in this unit
- Total number of people who reside in this residence – this should include children and adults.
- Monthly Rent Amount – self-explanatory
- Amount of Past Due Rent – only include past due rent accrued after March 13, 2020. (Please note that late fees are not included in the past due rent amount. The program will not pay late fees.)
- Months Missed – mark each month this tenant did not pay the full rental amount owed
- Has an eviction been filed on this unit? – respond appropriately – landlord must cease eviction proceedings if eviction has been filed
- Rent Amount assistance requested for this tenant household. (Please add requested past due, current and future rent.) – must be capped at 15 months total; 3 months prospective per application submission.
- Please check all additional costs that are included in the rent – mark each utility that is included in the monthly rent amount and not paid separately by the tenant

11. Click "Save"

12. Click "Sign" by E-Sign



13. Checkmark each declaration, sign and date, then click “Finish”

‹ Back to Application / E-Sign

E-Sign

State of Mississippi Emergency Rental Assistance Program: Landlord Declarations

I declare under penalty of perjury that the following is true and correct:

Checkmark Items

- ☐ The tenant(s) listed in this application lease the unit or home which is the subject of this application.
- ☐ The application does not seek assistance for any month prior to March 13, 2020, or, if the landlord has received rental assistance for this tenant under MRAP, prior to January 1, 2021.
- ☐ The tenant and unit listed in the application have not and are not receiving any other form of government or private assistance for the same months and amount of rent for which this assistance is requested, including, without limitation, the MRAP, Community Block Grant, Emergency Solutions Grant, and Housing Opportunities for Persons with AIDS programs, and the Landlord will not seek any other such assistance for the same months and amount of rent. If Landlord receives any such assistance, Landlord will repay RAMP funds to MHC within ten (10 calendar days of receipt of such assistance.)
- ☐ If the written lease or oral agreement is expired or will expire during the period covered by this assistance, Landlord will enter into a new written lease or extend the current lease with Tenant for a monthly payment amount no greater than the monthly amount for the expired or expiring lease or agreement, for a time period at least equal to the period covered by the RAMP assistance. The new lease may not increase or impose other fees or charges not provided for under the current lease.
- ☐ Late fees and penalties for nonpayment of rent incurred prior to the date of this application, and for each month thereafter for which an Emergency Rental Assistance Program payment is accepted by Landlord, shall be discharged.
- ☐ Landlord is not the relative of any member of a tenant’s household. (“Relative” means a child, parent, sister, brother, grandparent, aunt, uncle, step- and in-laws).
- ☐ Landlord hereby releases the tenant and the tenant’s household for payment liability, and will not evict the tenant for any reason that predates the acceptance of the Emergency Rental Assistance Program funds for any reason related to rent or fees or nonmonetary defaults, except for actions or breaches of the lease related to criminal activity, property damage or physical harm to others, from the date of this Agreement until the date that is ninety (90) days after Landlord receives the last Emergency Rental Assistance Program payment from MHC (the “Restrictive Period”). If a tenant has a month-to-month lease, Landlord shall continue the lease during the Restrictive Period.
- ☐ Landlord acknowledges that all information collection, assembled or maintained by MHC or RAMP pertaining to this application are subject to the Mississippi Public Records Act (subject to the exceptions set forth therein).
- ☐ Landlord will provide the U.S. Department of Treasury, the U.S. Inspector General, the U.S. General Accounting Office, the Mississippi State Auditor’s Office, MHC or any of their duly authorized representatives access to and the right to examine and copy records.

I certify that (1) the information provided on this form is true and complete to the best of my knowledge and belief and (2) if not the Landlord, I am authorized to file this application on the Landlord’s behalf. I understand that I can be fined and required to return to Mississippi Home Corporation any financial assistance received fraudulently.

By signing this application, I certify that I understand that (a) rental assistance is not guaranteed; (b) information may be verified before any rental assistance is given; and (c) if the tenant has not signed or does not sign (including electronically) the application, my application will be deemed incomplete. Further, I understand that any person knowingly submitting false information herein shall be guilty of criminal offenses under federal and state law, and upon conviction, shall be punished by imprisonment and/or fines under the laws and regulations of the United States of America and the State of Mississippi, in addition to the requirement to return any funds received to MHC.

By entering your name below, you are acknowledging your understanding of the foregoing sentence.

I understand if the tenant has applied for and been approved for other housing assistance, at any time during this lease period, as landlord, I am responsible for returning funds received. Rental assistance cannot be made on behalf of eligible individuals or families for the same period of time and for the same cost types that are being provided through another federal, state or local subsidy program.

Landlord/Property Owner/Authorized Representative Signature *

Sign Here

Date *

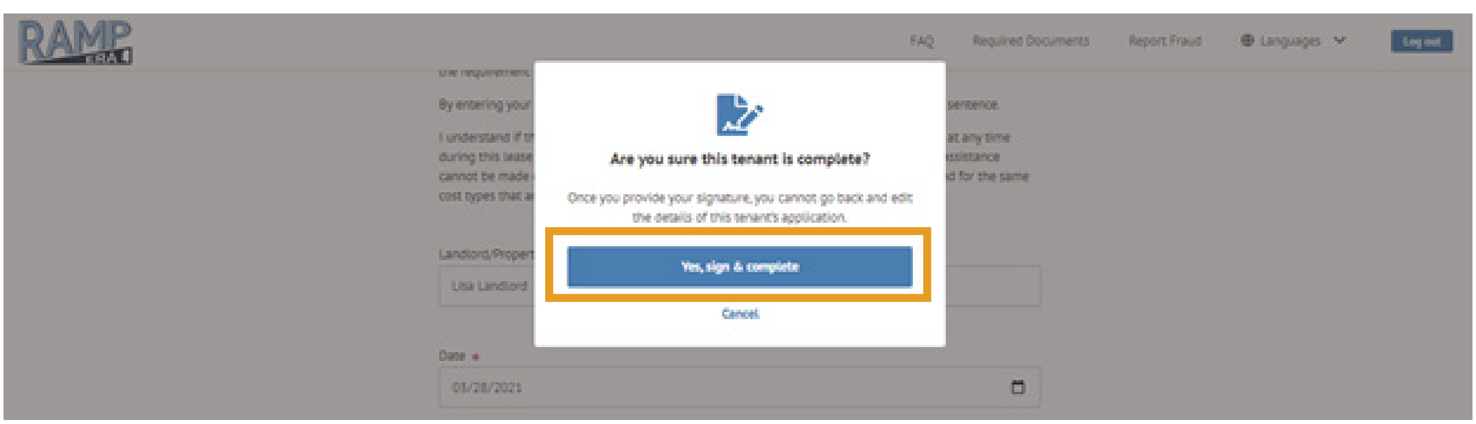
mm/dd/yyyy **Select Date**

Finish

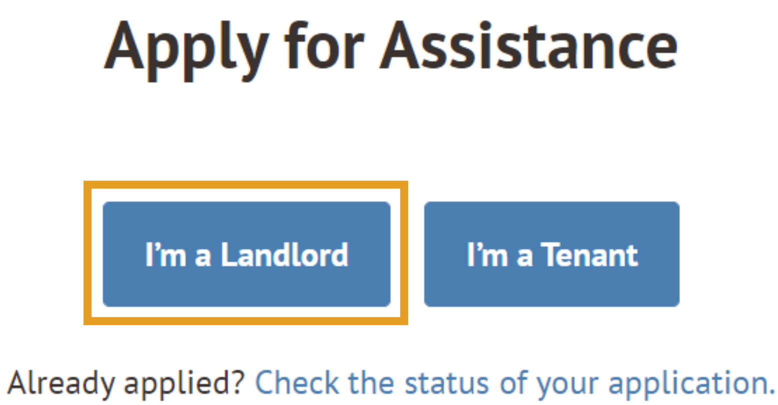
Cancel

False Claim Statement. Warning: U.S. Code, Title 31, Section 3729, False Claims, provides a civil penalty of not less than $5,000 and not more than $10,000, plus 3 times the amount of damages for any person who knowingly presents, or causes to be presented, a false or fraudulent claim; or who knowingly makes, or caused to be used, a false record or statement; or conspires to defraud the Government by getting a false or fraudulent claim allowed or paid.

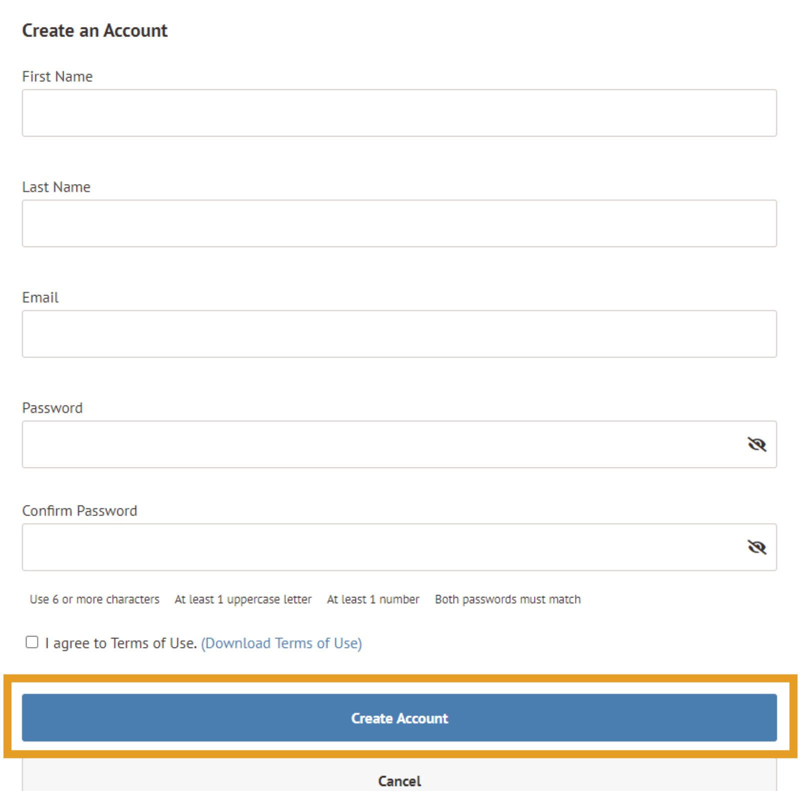
14. Click “Yes, sign & complete”



Selecting "I'm a Tenant"



1. Complete "Create an Account" Page

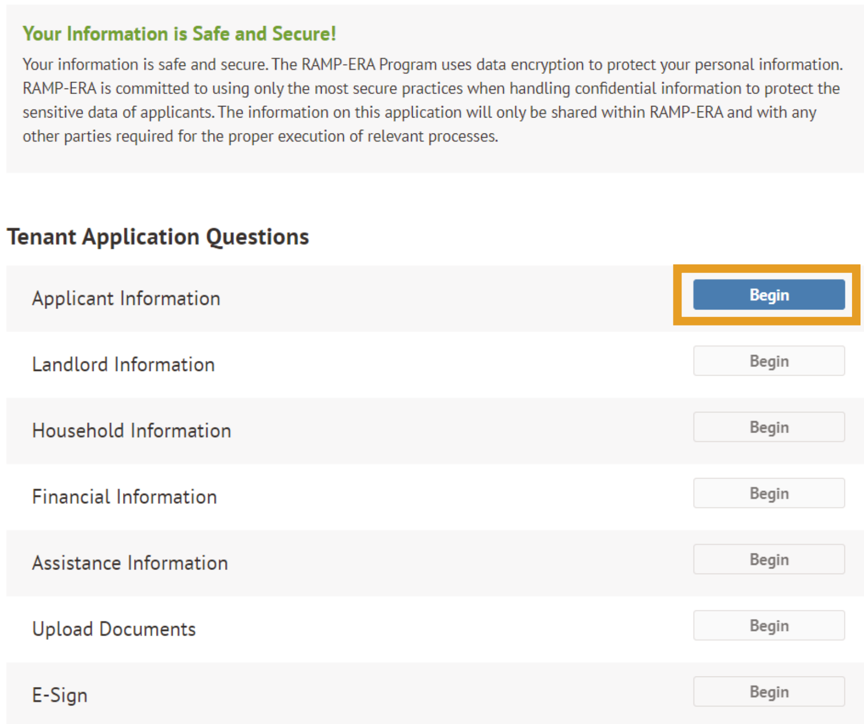


Create an Account

- First Name - insert name of tenant/ applicant completing application
- Last Name – insert name of tenant/ applicant completing application
- Email – should use email address regularly checked because application updates and program communications will primarily come via this email
- Password – must use 6 or more characters, at least 1 uppercase letter, & at least 1 number
- Confirm Password – self-explanatory

2. Click "Create Account"

3. Click “Begin” by Applicant Information



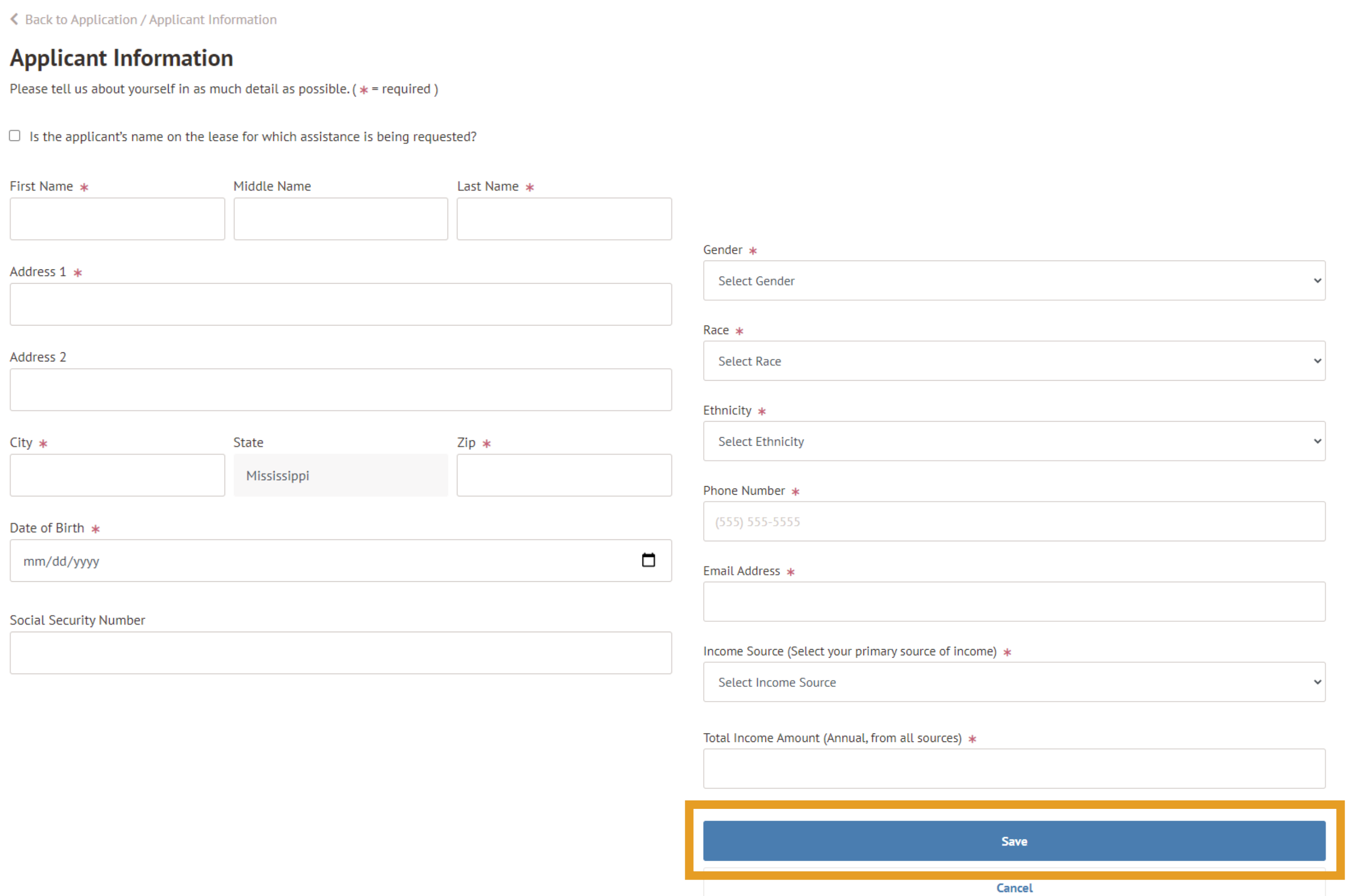
Your Information is Safe and Secure!

Your information is safe and secure. The RAMP-ERA Program uses data encryption to protect your personal information. RAMP-ERA is committed to using only the most secure practices when handling confidential information to protect the sensitive data of applicants. The information on this application will only be shared within RAMP-ERA and with any other parties required for the proper execution of relevant processes.

Tenant Application Questions

Applicant Information	Begin
Landlord Information	Begin
Household Information	Begin
Financial Information	Begin
Assistance Information	Begin
Upload Documents	Begin
E-Sign	Begin

4. Complete Applicant Information Page



Back to Application / Applicant Information

Applicant Information

Please tell us about yourself in as much detail as possible. (* = required)

☐ Is the applicant's name on the lease for which assistance is being requested?

First Name *

Middle Name

Last Name *

Address 1 *

Address 2

City *

State: Mississippi

Zip *

Date of Birth *: mm/dd/yyyy

Social Security Number

Gender *: Select Gender

Race *: Select Race

Ethnicity *: Select Ethnicity

Phone Number *: (555) 555-5555

Email Address *

Income Source (Select your primary source of income) *: Select Income Source

Total Income Amount (Annual, from all sources) *

Save

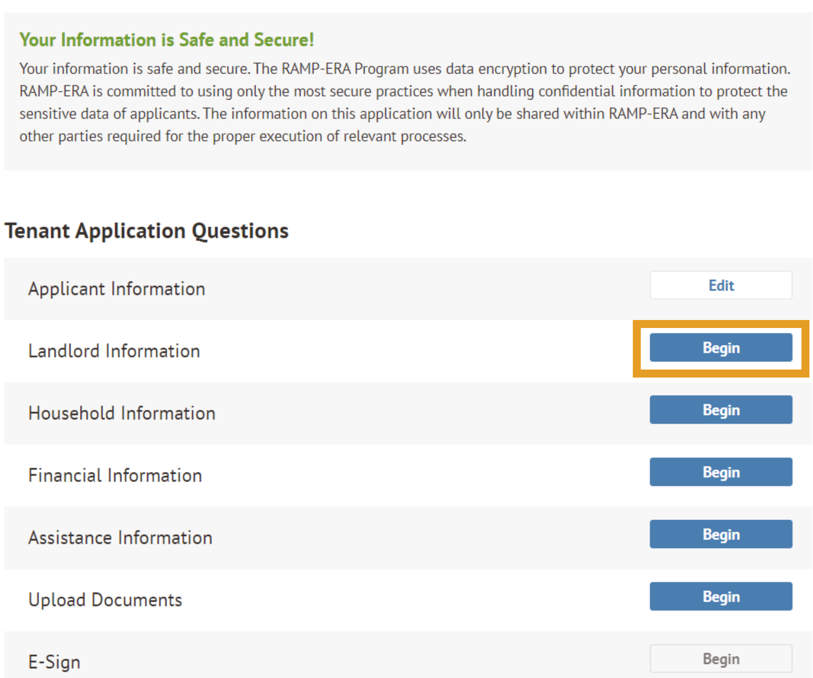
Cancel

Applicant Information

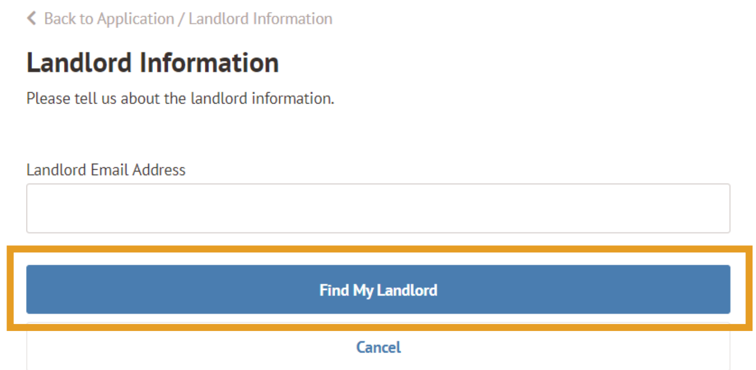
- Is the applicant's name on the lease in which assistance is being requested? – Checkmark means yes; blank means no
- First Name – insert name of tenant/person identified on the lease agreement
- Middle Name - insert name of tenant/person identified on the lease agreement
- Last Name - insert name of tenant/person identified on the lease agreement
- Address 1 – insert address of rental unit occupied by the applicant's household
- Address 2 - insert address of rental unit occupied by the applicant's household
- City - insert address of rental unit occupied by the applicant's household
- State – Mississippi is required and already inserted
- Zip - insert address of rental unit occupied by the applicant's household
- Date of Birth – self-explanatory
- Social Security Number – self-explanatory
- Gender – self-explanatory
- Race – self-explanatory; must collect due to reporting requirements
- Ethnicity – self-explanatory; must collect due to reporting requirements
- Phone Number – self-explanatory
- Email Address – self-explanatory
- Income Source – select primary source of income
- Income Amount – include annual income amount from all sources, not just primary source (This is the applicant income only.)

4. Click "Save"

5. Click "Begin" by Landlord Information



6. Complete Landlord Information Page

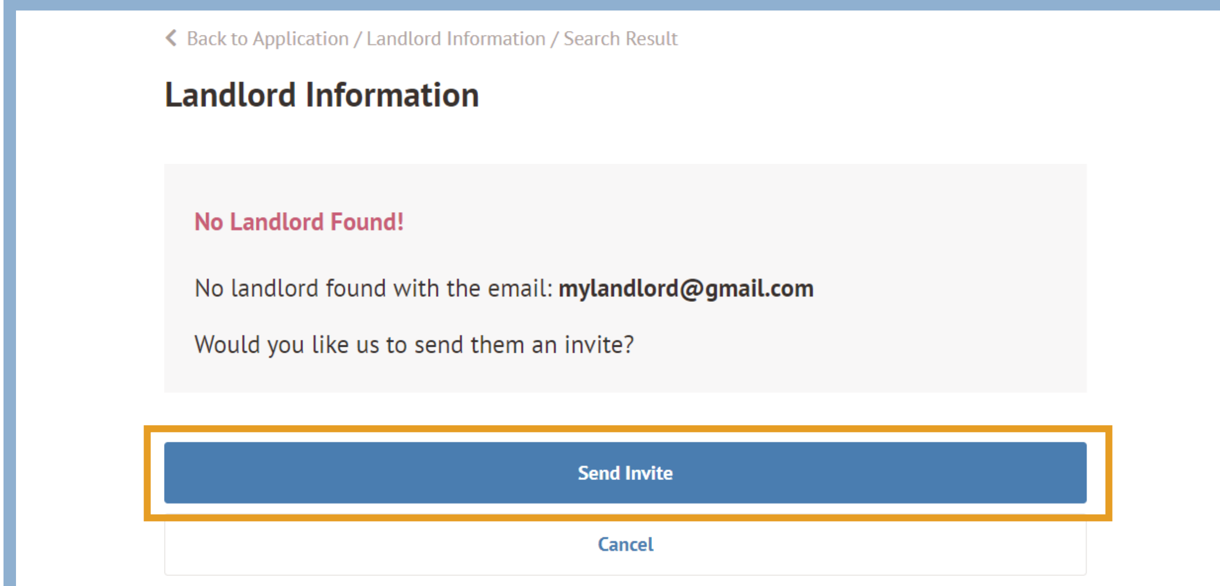


Landlord Information

- Landlord Email Address – insert email address regularly used by your landlord to communicate.

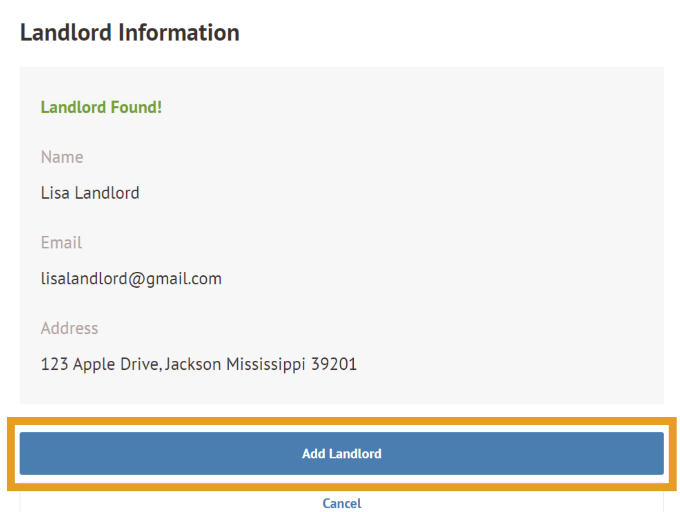
(Please make sure you enter the landlord's email address and not to use your own email address.)

***** If landlord has not created an account, the following will show.**

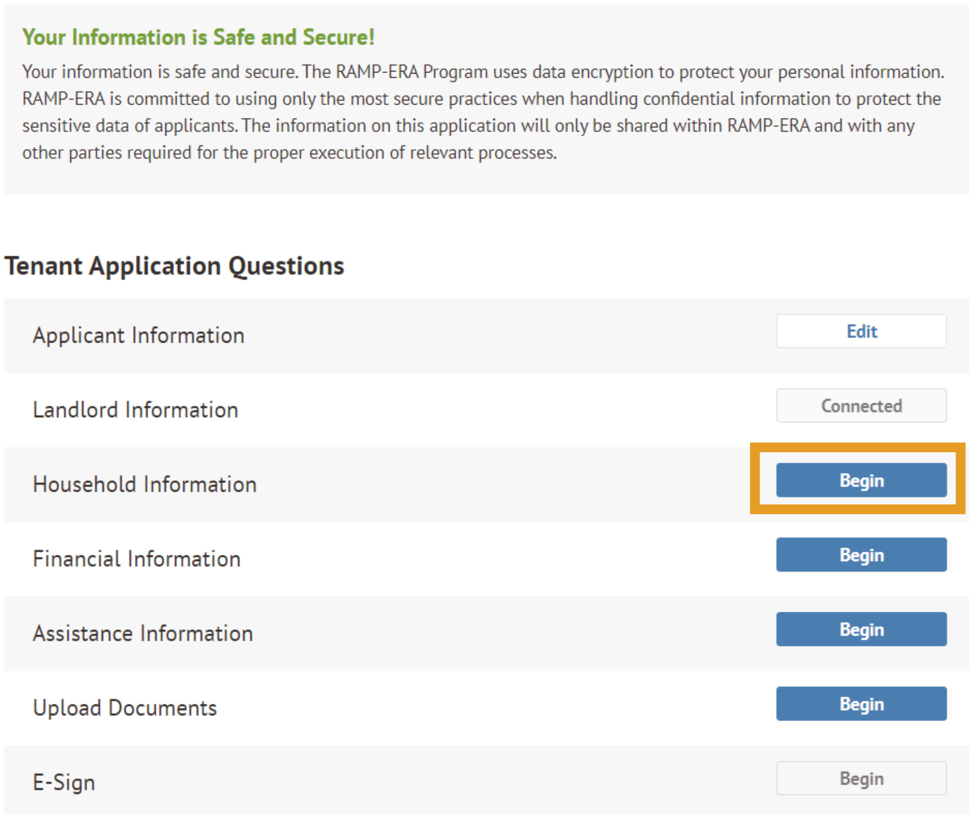


***** Click "Send Invite"**

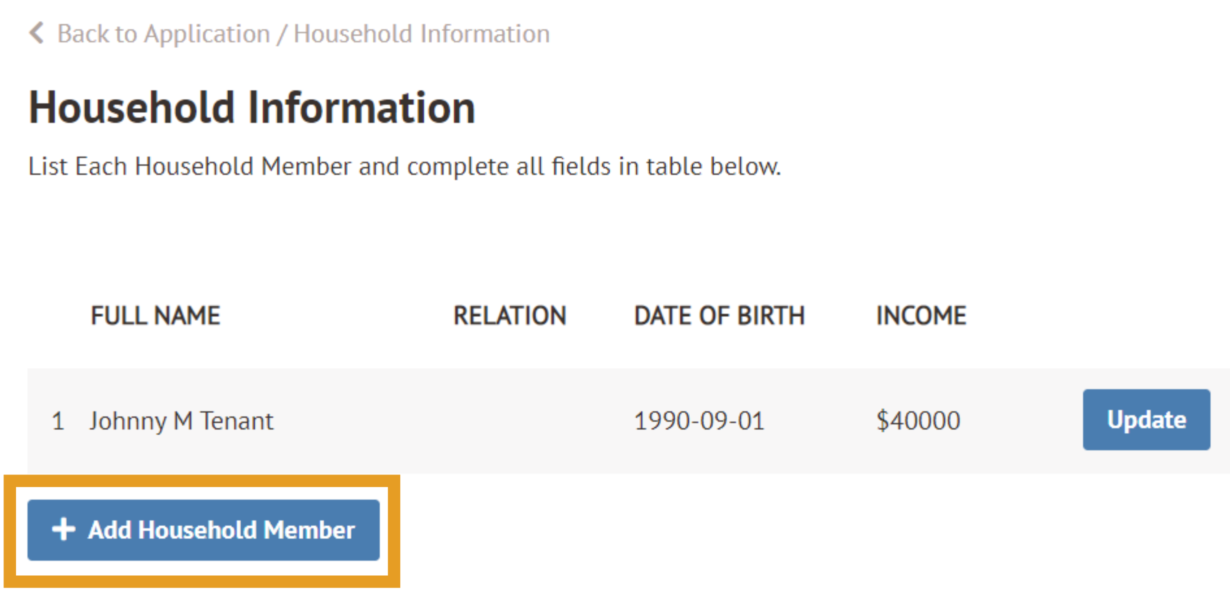
7. Click "Add Landlord"



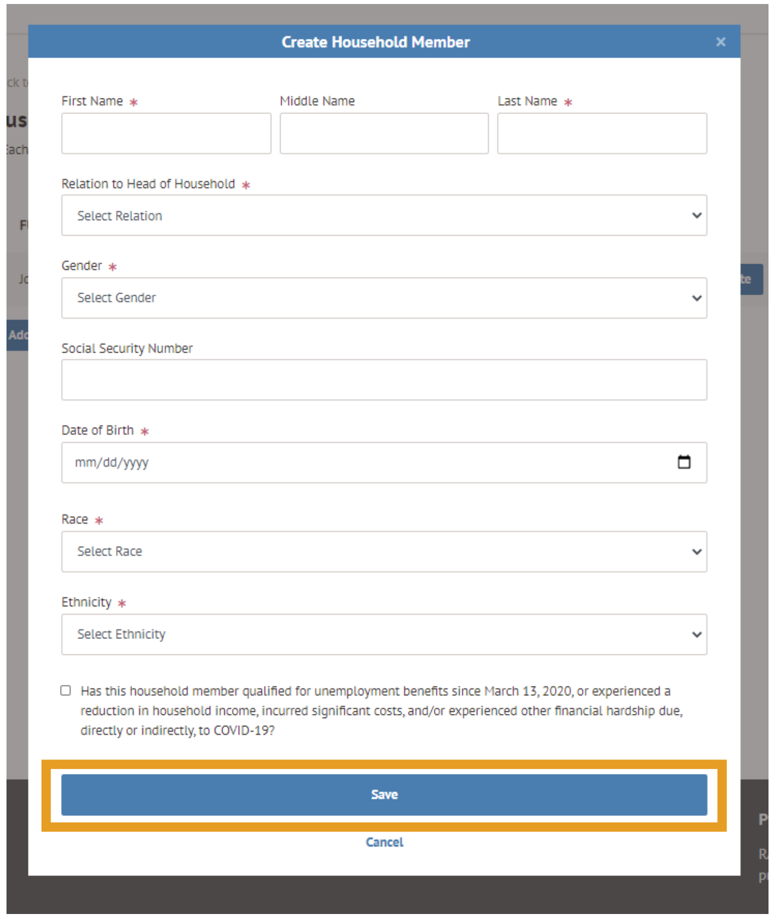
8. Click “Begin” by Household Information



9. (IF APPLICABLE) Click “Add Household Member”



10. Complete Create Household Member Page for each household member including minors. (The applicant must complete the Income Certification form for each household member.)

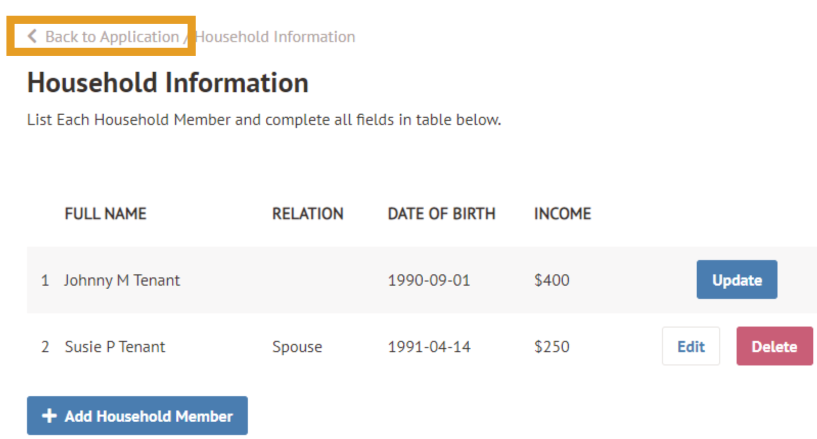


Create Household Member

- First Name – self-explanatory
- Middle Name – self-explanatory
- Last Name – self-explanatory
- Relation to Head of Household – Head of Household is an adult and typically the primary tenant responsible for payment of expenses; in most cases, the head of household will be the applicant actually completing the application
- Gender – self-explanatory
- Social Security Number – self-explanatory
- Date of Birth – self-explanatory
- Race – self-explanatory; must collect due to reporting requirements
- Ethnicity - self-explanatory; must collect due to reporting requirements
- Has this household member qualified for unemployment benefits since March 13, 2020, or experienced a reduction in household income, incurred significant costs, and/or experienced other financial hardship due, directly or indirectly, to COVID-19? – only one situation must apply; checkmark if yes, leave blank if no; if none apply, applicant is ineligible.
- Income Source – insert all sources of income; may insert “minor child” or “no income” if applicable
- Income of household member (Annual) – insert total income from all sources for this household member

11. Click “Save”

12. Click “Back to Application”



13. Click “Begin” by Financial Information

Your Information is Safe and Secure!

Your information is safe and secure. The RAMP-ERA Program uses data encryption to protect your personal information. RAMP-ERA is committed to using only the most secure practices when handling confidential information to protect the sensitive data of applicants. The information on this application will only be shared within RAMP-ERA and with any other parties required for the proper execution of relevant processes.

Tenant Application Questions

Applicant Information	Edit
Landlord Information	Connected
Household Information	Edit
Financial Information	Begin
Assistance Information	Begin
Upload Documents	Begin
E-Sign	Begin

14. Complete Financial Information page

< Back to Application / Financial Information

Financial Information

Please tell us about yourself in as much detail as possible. (* = required)

Amount of 2020 total annual income for applicant and all other household members at least eighteen (18) years old? *

- [ ] Has your household received a determination/benefits letter, dated January 1, 2020 or after, from any one of the following programs: TANF, WIC, SSI, SNAP, Medicaid, or Head Start?
- [ ] Are one or more individuals within the household unemployed as of the date of application for assistance, and have not been employed for at least the past 90 days (based on date application)?
- [ ] Has any person or program assisted in paying rent or utilities for your household for the period assistance is requested?

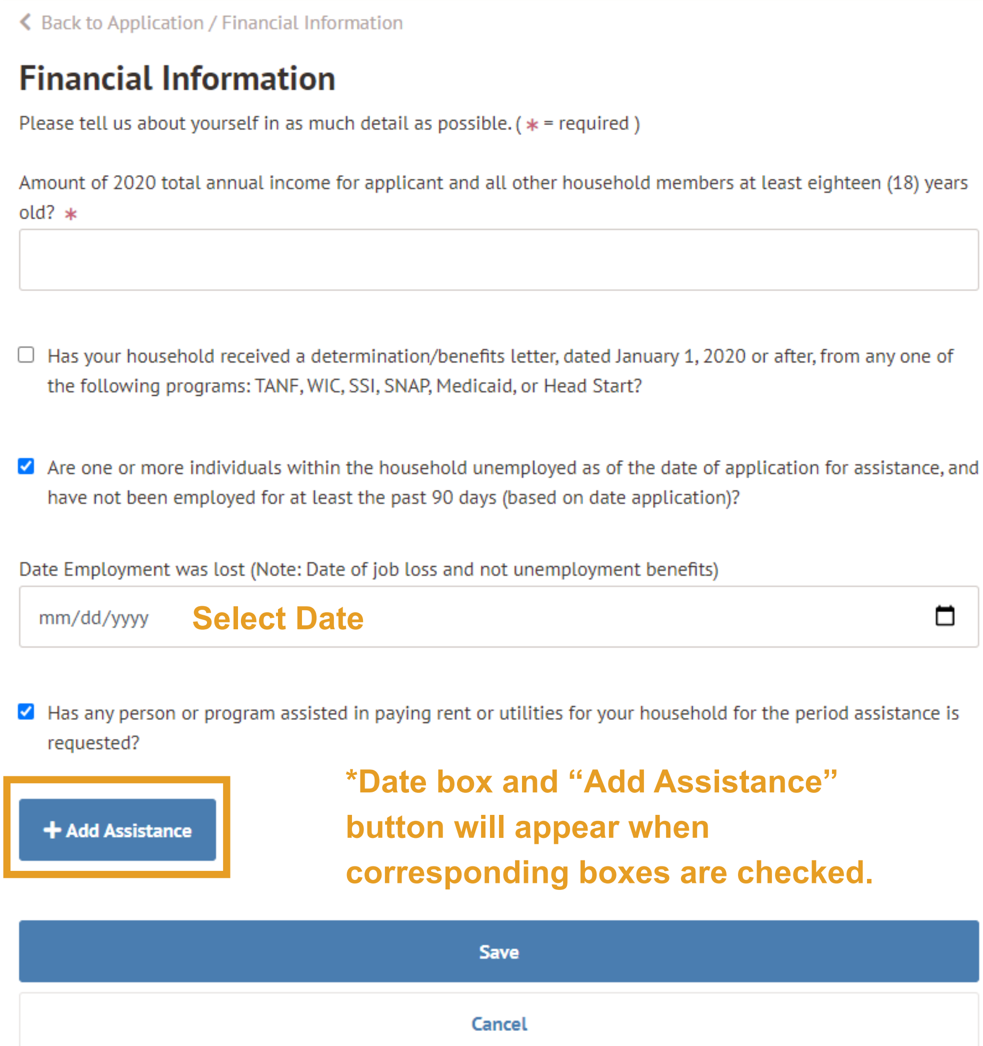
Save

Cancel

Financial Information

- Amount of 2020 total annual income for applicant and all other household members at least eighteen (18) years old? – insert combined total annual income from all sources for all household members; a monthly option will appear if total annual income is above threshold
- Has your household received a determination/benefits letter, dated January 1, 2020 or after, from any one of the following programs: TANF, WIC, SSI, SNAP, Medicaid, or Head Start? – checkmark if yes, leave blank if no; this letter will have to be uploaded later in the application.
- Are one or more individuals within the household unemployed as of the date of application for assistance and have not been employed for at least the past 90 days (based on date application)? – checkmark if yes, leave blank if no; if marked yes, this application will be prioritized for review.

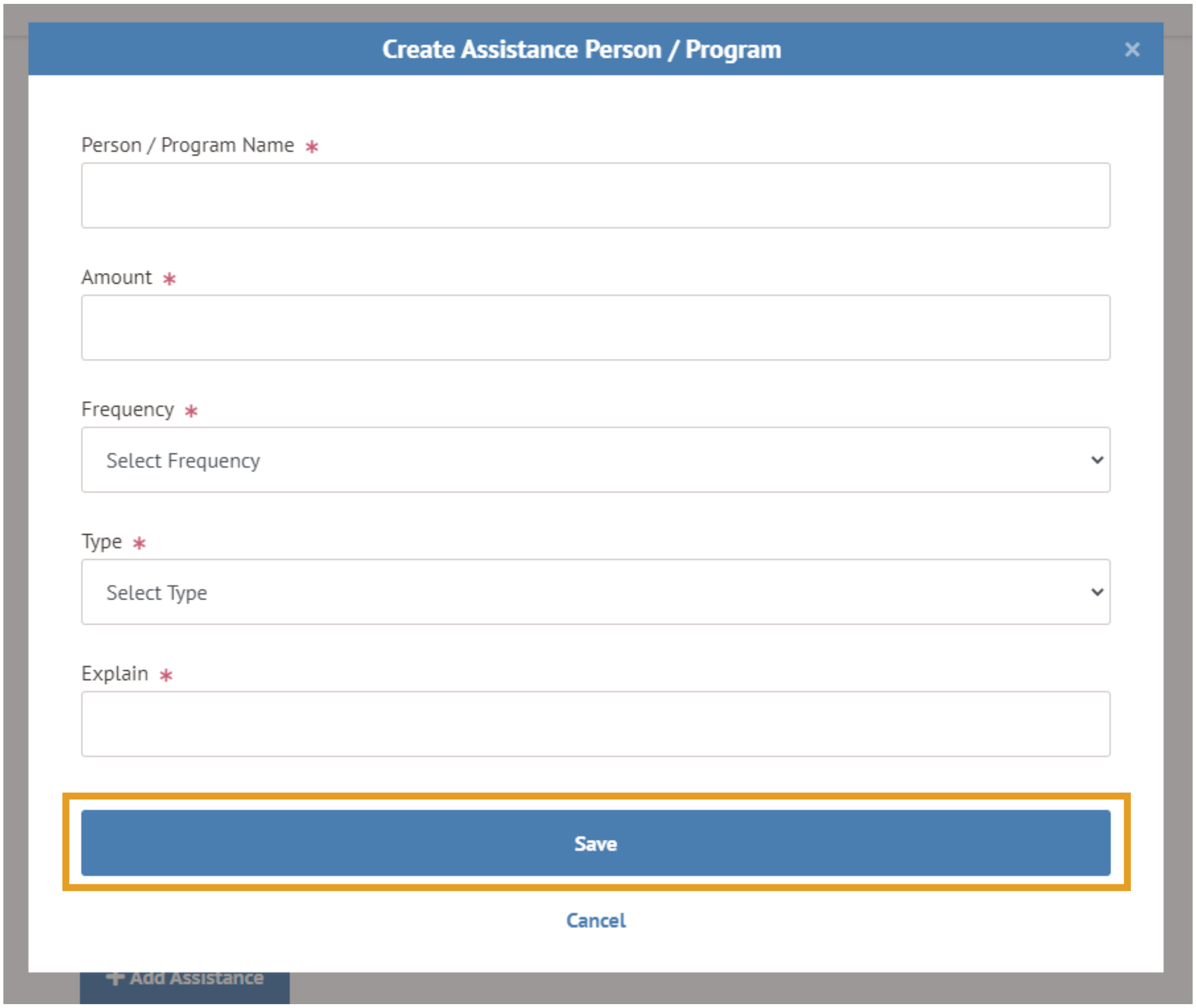
  * If yes, insert Date Employment was lost (Note: Date of job loss and not unemployment benefits):



- Has any person or program assisted in paying rent or utilities for your household for the period assistance is requested? - checkmark if yes, leave blank if no; the purpose of this question is to ensure applicants avoid a duplication of benefits – an applicant cannot receive funds from this program for the same expense the household previously received funds.

  * If yes, click Add Assistance:

15. Complete Create Assistance Person/Program

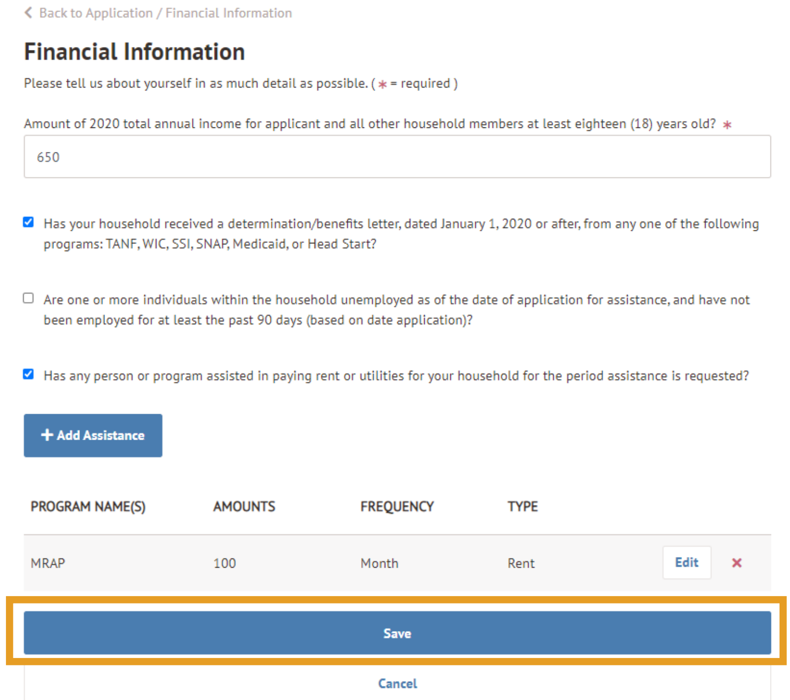


Create Assistance Person/Program

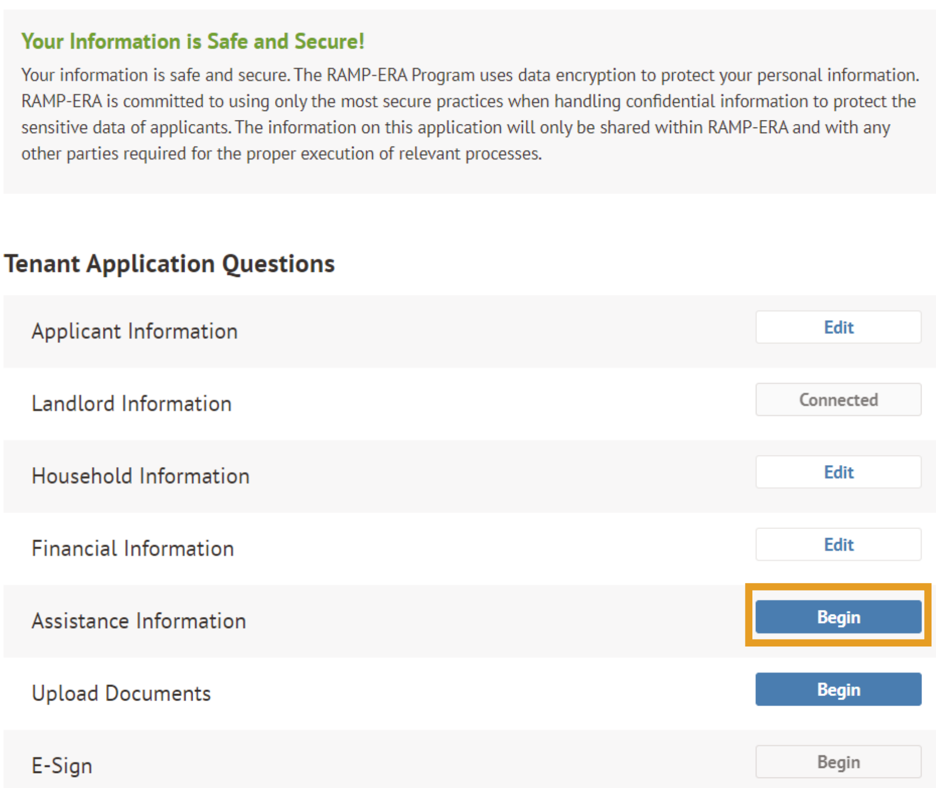
- Person/Program Name – insert name; the most common response here is likely Mississippi Renter Assistance Program.
- Amount – insert total amount received from person or program above
- Frequency – select how frequently you receive this payment
- Type – select whether rent or utilities
- Explain – provide specific details explaining the payments received

16. Click "Save"

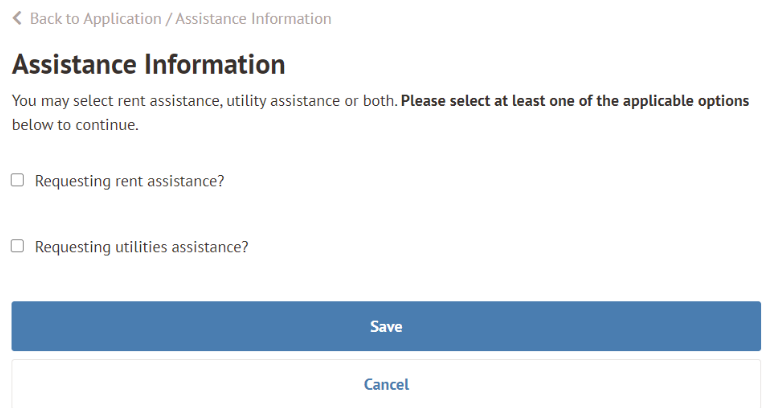
17. Click "Save"



18. Click "Begin" by Assistance Information



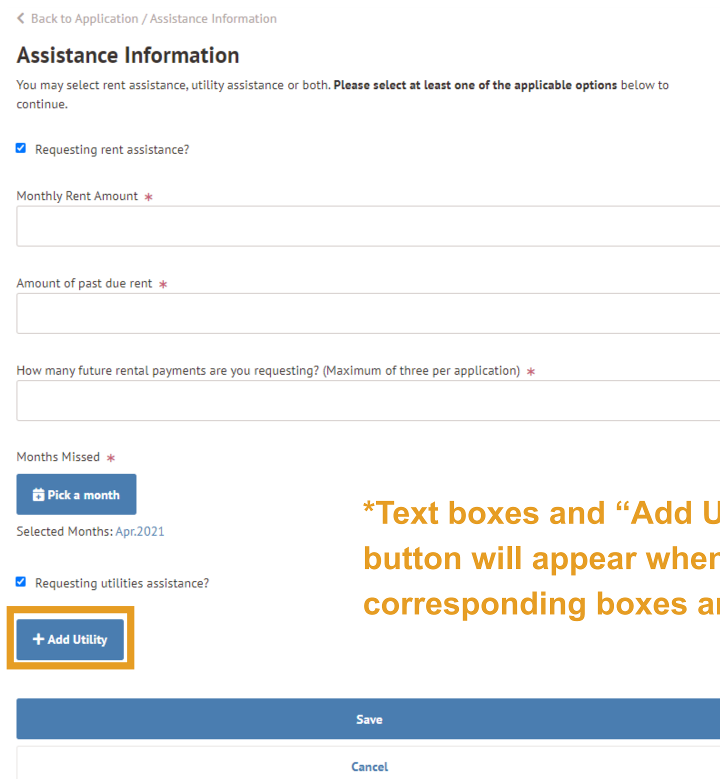
19. Complete Assitance Information



Assistance Information

Requesting rent assistance – checkmark if seeking rent assistance; leave blank if not.

* If yes:



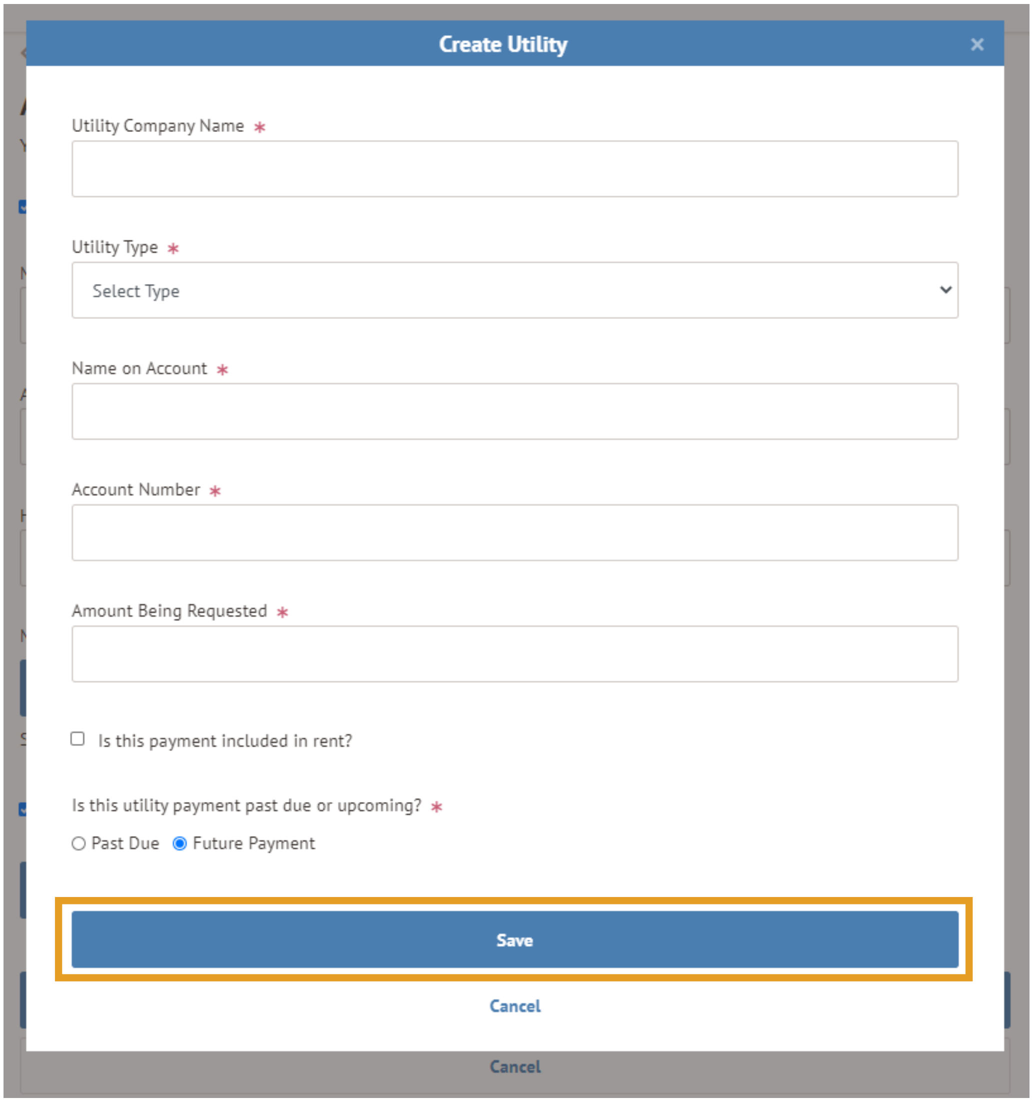
***Text boxes and "Add Utility" button will appear when corresponding boxes are checked.**

- Monthly Rent Amount – insert the amount you are obligated to pay per month (Do not include late fees.)
- Amount of past due rent – insert total amount of past due rent accrued after March 13, 2020
- How many future rental payments are you requesting? (maximum of three per application) – self-explanatory
- Months Missed – mark the months you, as the tenant, have not been able to pay the total amount of rent owed

Requesting Utility Assistance – checkmark to indicate seeking utility assistance, leave blank if not.

*If yes, Click Add Utility for each utility you intend to request

20. Complete Create Utility

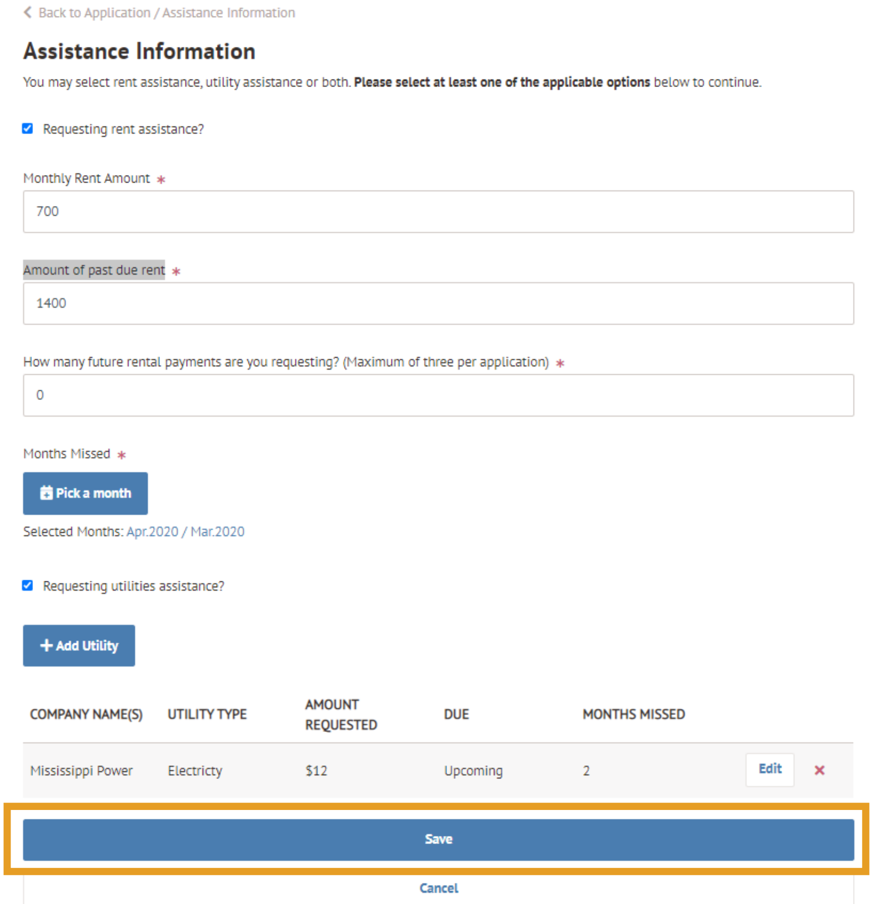


Create Utility

- Utility Company Name ¬– insert name of utility provider; applicant will create a utility page for each utility provider for which assistance is sought
- Utility Type – self-explanatory
- Name on Account – self-explanatory; it is expected that the name on the utility account matches a name listed in household
- Account Number – self-explanatory
- Amount Being Requested – insert amount requested, which can only include amounts accrued after March 13, 2020.
- Is this payment included in rent? – checkmark if utility is paid by landlord because it is included in rent payment made by tenant
- Is this utility payment past due or upcoming? – self-explanatory

21. Click “Save”

22. Click “Save”


< Back to Application / Assistance Information

Assistance Information

You may select rent assistance, utility assistance or both. **Please select at least one of the applicable options** below to continue.

- [x] Requesting rent assistance?

Monthly Rent Amount *

700

Amount of past due rent *

1400

How many future rental payments are you requesting? (Maximum of three per application) *

0

Months Missed *

Pick a month

Selected Months: Apr.2020 / Mar.2020

- [x] Requesting utilities assistance?

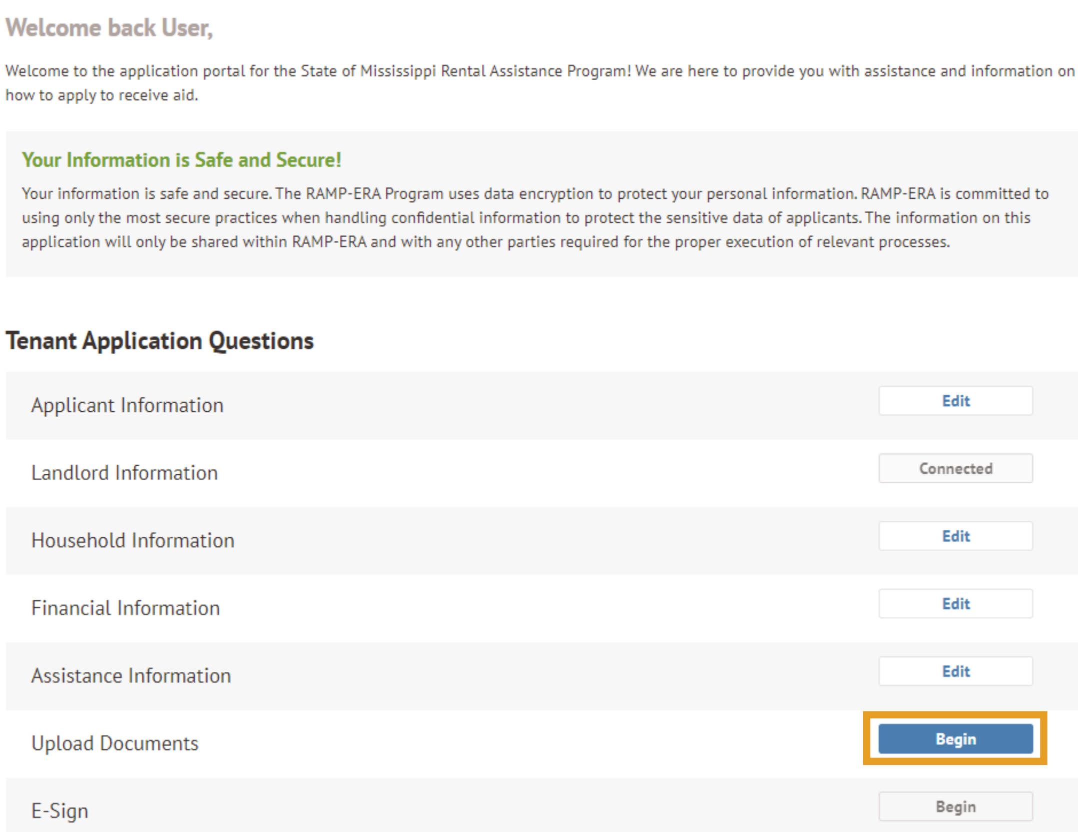
+ Add Utility

COMPANY NAME(S)	UTILITY TYPE	AMOUNT REQUESTED	DUE	MONTHS MISSED		
Mississippi Power	Electricty	$12	Upcoming	2	Edit	×

Save

Cancel

23. Click “Begin” by Upload Documents


Welcome back User,

Welcome to the application portal for the State of Mississippi Rental Assistance Program! We are here to provide you with assistance and information on how to apply to receive aid.

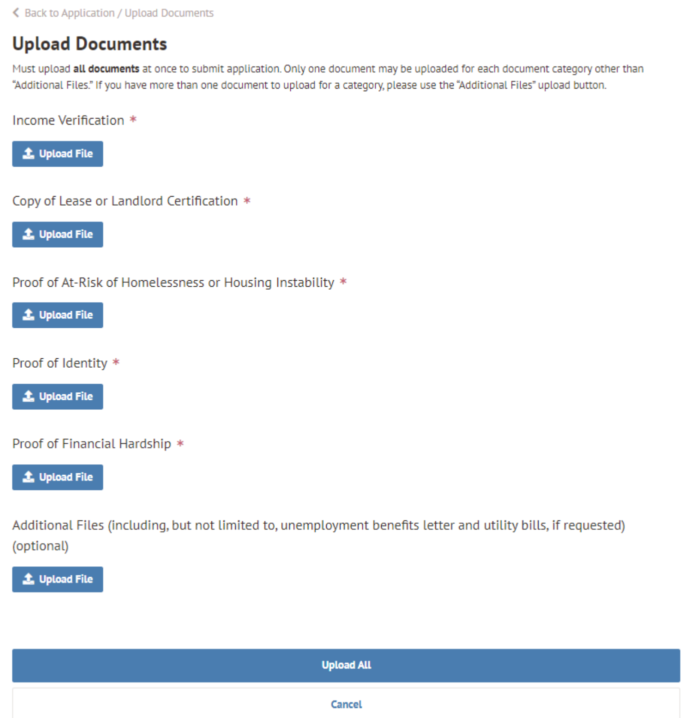
Your Information is Safe and Secure!

Your information is safe and secure. The RAMP-ERA Program uses data encryption to protect your personal information. RAMP-ERA is committed to using only the most secure practices when handling confidential information to protect the sensitive data of applicants. The information on this application will only be shared within RAMP-ERA and with any other parties required for the proper execution of relevant processes.

Tenant Application Questions

Applicant Information	Edit
Landlord Information	Connected
Household Information	Edit
Financial Information	Edit
Assistance Information	Edit
Upload Documents	Begin
E-Sign	Begin

24. Complete Upload Documents Page by uploading all files at once

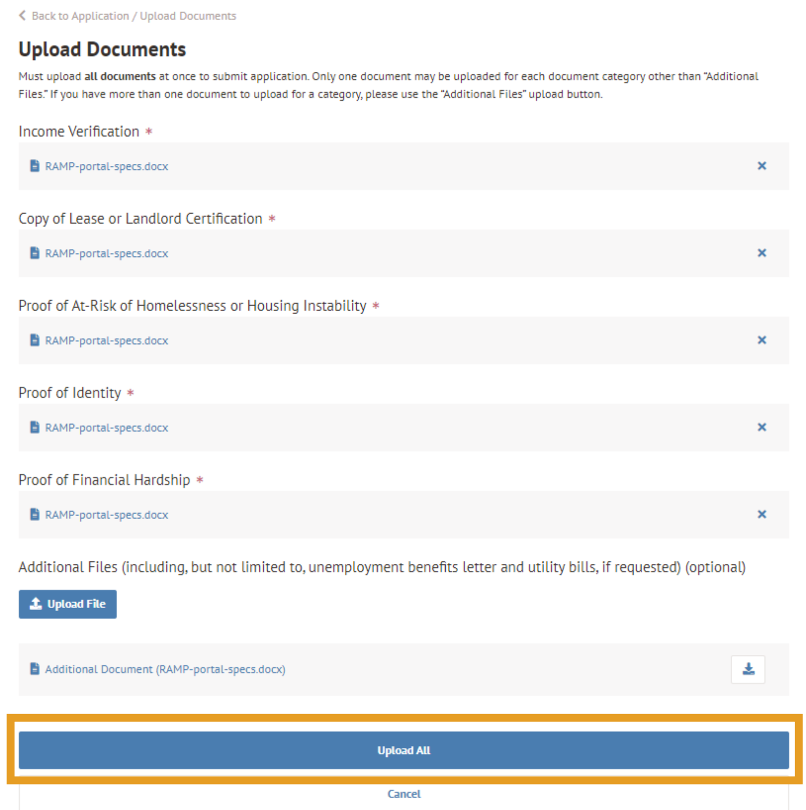


Upload Documents

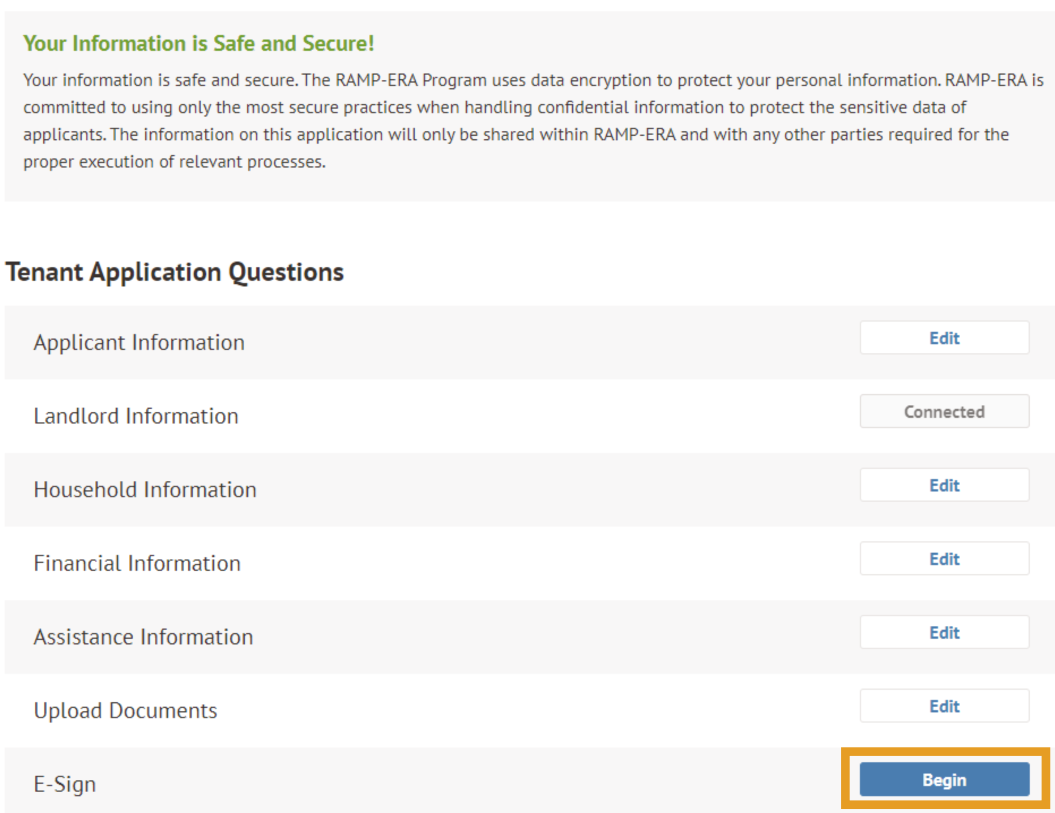
- Income Verification – examples of items to upload:
  - determination letter
  - 2020 IRS tax return
  - paystubs
  - self-employment documents
  - bank statements
  - documentation of unemployment benefits
  - letter from employer
  - documentation of periodic receipts
  - documentation of public assistance benefits
  - documentation of child support
  - alimony, or foster care payments
  - income certification form
  - self-employment form

- Copy of Lease or Landlord Certification – upload current, duly executed lease that contains months requested or landlord certification
- Proof of At-Risk of Homelessness or Housing Instability – upload past due notice, eviction notices, past due or disconnect notices from utility provider, proof of medical bills preventing proof of payment of rent or utilities, proof of reliance on credit cards or payday lenders for household necessities, or Risk of Experiencing Homelessness or Housing Instability Form
- Proof of Identify – upload current, valid identification
- Additional Files (including, but not limited to, unemployment benefits letter and utility bills, if requested) (optional) – insert any additional documents; this could include additional pages, if above documents are uploaded one page at the time (i.e. jpeg)

25. Click “Upload All”



26. Click “Begin” by E-Sign



27. Checkmark each declaration, sign and date, then click “Finish”

< Back to Application / E-Sign

E-Sign

State of Mississippi Emergency Rental Assistance Program: Tenant Declarations and Certifications

I declare, under penalties of perjury, as follows:

Checkmark Items

- [ ] I lease the unit or home which is the subject of the application as my principal residence during the time period for which assistance is requested.
- [ ] No other person in my household has or will apply for assistance through the Rental Assistance for Mississippians Program (RAMP).
- [ ] My household rent or utilities has not or will not be paid by another source for the time period that I am seeking assistance. I agree to repay any assistance that has been paid by another source.
- [ ] I have reported all income earned by persons over 18 years old who live in the house.
- [ ] No persons in my household are related to the Landlord/Owner of the rental unit. (Relatives include child, parent, sister, brother, grandparent, aunt, uncle, step- and in-laws).
- [ ] I understand that if the Landlord and/or utility provider does not elect to participate, assistance may be made directly to me as the responsible party for the unpaid bill or future payment, and the payment must be used only for eligible costs for which application for assistance was made in this application. I understand that use of payment received for any purpose other than rent or utility assistance could subject me to criminal penalties.
- [ ] I will not seek to obtain rental or utility assistance in the future for the same months of assistance provide pursuant to this application, and if I, or anyone in my household, receives such assistance I will report it to MHC.
- [ ] I will inform MHC within ten (10) calendar days if evicted from the unit, if disconnected from utility services or if I no longer occupy the unit as my principal residence during the period of assistance.
- [ ] I will provide the U.S. Department of the Treasury, the U.S. Inspector General, the U.S. General Accounting Office, the Mississippi State Auditor’s Office, MHC or any of their duly authorized representatives access to and the right to examine and copy records.

Applicant’s Signature *

Sign Here

Date *

mm/dd/yyyy Select Date

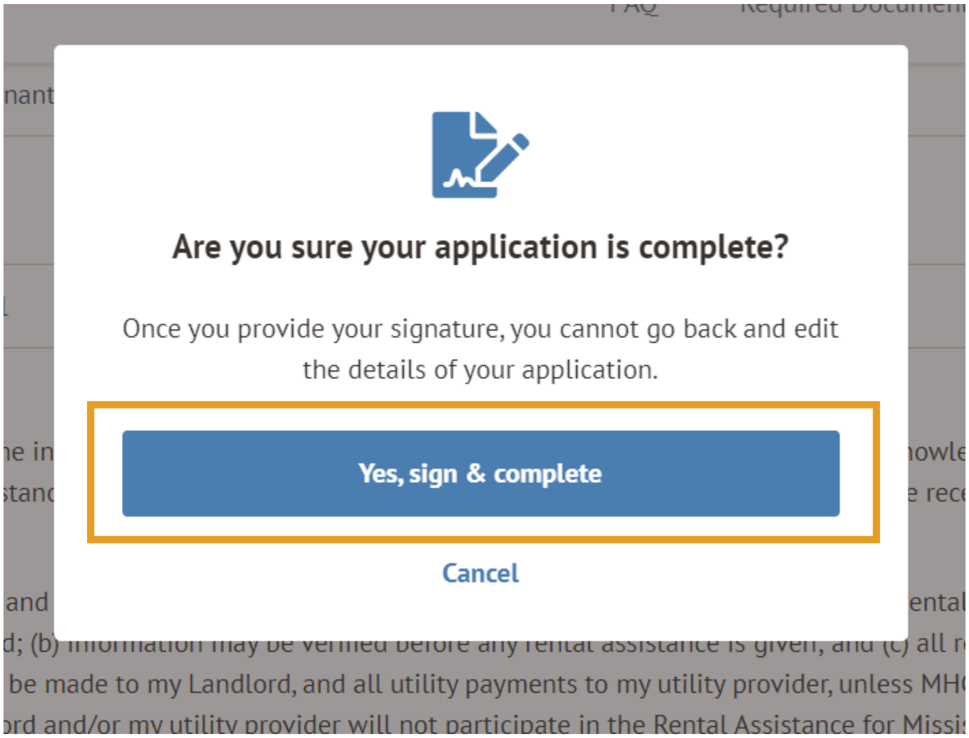
I certify that the information provided on this form is true and complete to the best of my knowledge and belief. I understand that I can be fined and required to return to MHC any financial assistance received fraudulently.

By submitting and electronically signing this application, I certify that I understand that (a) rental assistance is not guaranteed; (b) information may be verified before any rental assistance is given; and (c) all rental payments will be made to my Landlord, and all utility payments to my utility provider, unless MHC determines that my Landlord and/or my utility provider will not participate in the Rental Assistance for Mississippians Program. Further, I understand that any person knowingly submitting false information herein shall be guilty of criminal offenses under federal and state law, and upon conviction, shall be punished by imprisonment and/or fines under the laws and regulations of the United States of America and the State of Mississippi, in addition to the requirement to return any funds received to MHC. By entering your name below and submitting this application, you are acknowledging your understanding of the foregoing sentence.

Finish

Cancel

28. Click “Yes, sign & complete”



You’re Done! You’re Application has been officially submitted.