



**Statement of Landlord (Affordable Housing Development)**

I/we, am/are the owner or authorized agent of the owner of the premises at:

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I/we hereby state as follows:

- *The rental units for which I/we are applying for rental assistance are part of an affordable development as defined by the rental assistance program;*
- *Access to rental assistance is being made available to all tenants in the development who owe past due rent but are otherwise in compliance with the lease;*
- *The amount of rent owed is accurate to the best of my/our information and records;*
- *I/we agree to provide additional documents as requested by the program including but not limited to: lease, income verifications, evidence of back owed rent, or any other relevant documentation that is available to me and requested by the program;*
- *I/we understand that program rules require repayment of the rental assistance received through the program if it is later determined that I/we have made a material misrepresentation of fact in the application;*
- *I/we agree that for 90 days after the first of the month in which the final rental payment was paid by the program, I/we will forbear from sending a rental demand notice; charging new fees or penalties for late payment; sending a notice of termination of tenancy; or filing an eviction complaint unless for material non-compliance with the rental agreement or the Rhode Island Residential Landlord Tenant Act other than nonpayment of rent.*
- *I/we agree that if an Eviction Complaint has been filed relating to any rental unit for which rental assistance for back rent is sought I/we agree to dismiss the case and authorize the program to notify the District Court of Rhode Island that I/we have agreed to dismiss the eviction case and for the court file to be sealed.*

By signing below, I/we certify that the information provided in this application, including information on the amount of rent owed, is accurate and complete to the best of my/our knowledge and belief. I/We understand that false statements or information are punishable under federal law. I/We also understand that false statements or information are grounds for repayment of funds received through the program.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date