



EVERETT MATTERS COVID AID APPLICATION

The City of Everett is using CARES Act funding to provide food assistance, rental assistance, legal aid, or emergency housing assistance to Everett residents in need.

The following application can be emailed directly to EverettCares@ci.everett.ma.us.

Those unable to email the application may come to City Hall during normal business hours to fill out an application. Please bring copies of all supporting documentation when applying. All documentation will be necessary to complete the application.

For housing assistance, the City of Everett is partnering with ABCD to use a portion of the City's CARES Act funding to provide financial relief to residents and families that are in immediate danger of losing housing due to financial hardship created by the pandemic.

The City will refer approved applicants to ABCD, who will contact those residents and work with them to have checks issued directly to the tenant's landlord or to the homeowner's mortgage company.

The City anticipates that if applicants provide ABCD with all the information they need on the application, residents will have a rent or mortgage payment made within a week of the process starting with ABCD.

The City will provide up to \$5,000 per individual resident or up to \$10,000 in assistance for families. Applications will be processed on a first come, first served basis until the City has exhausted the \$1.3M in relief funds.

Those who have received mortgage/rental relief from the Commonwealth, such as RAFT, are not eligible to receive additional housing benefits through this program.



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Please complete the following forms. Incomplete applications will not be processed. Completed applications should be e-mailed to EverettCares@ci.everett.ma.us or dropped off at City Hall.

1. Name:
2. Address in Everett:
3. Do you receive mail at this address? Yes No
4. Contact Phone Number:
5. Number of family members at this address?
 - Number ABOVE the age of 18 years old? _____
 - Number BELOW the age of 18 years old? _____
6. Please provide any documentation verifying loss of income due to COVID19. This includes showing that you are behind on your rent, a printed bank statement and/or 2 paystubs from the last 30 days of unemployment.

If you are unable to provide a printed bank statement please upload a signed attestation stating "I, (printed name) am unable to pay my rent due to COVID19 and do not have the ability to provide a bank statement." – Please include signature and Date.

Please attach the lease, identification, verification of current income (2 paystubs from the last 30 days of employment for ALL household members; If unemployed, please provide the unemployed benefit verification from Massachusetts Dept. of Unemployment)

7. Are you currently disabled?

Yes

No

8. Are you a Veteran?

Yes

No

9. Is anyone in your family working?

Yes

No

10. Is anyone in your family collecting unemployment?

Yes

No

11. Do you receive other food assistance? (Select all that apply)

SNAP

WIC

P-EBT

I do not receive food assistance.

12. What language do you wish to be communicated in?

English

Spanish

Other: _____

13. Has your ability to meet daily living expenses been negatively affected because of the COVID19 pandemic? Please explain.

14. What do you need assistance with? (Select all that apply)

- Food Assistance
- Rental Assistance
- Legal Aid (Eviction)
- Other: _____