



City of East Providence
Roberto L. DaSilva
Mayor

FOR IMMEDIATE RELEASE

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City rolls out two initiatives to address residents' housing needs

EAST PROVIDENCE, RI – The City of East Providence has rolled out two new initiatives to assist residents negatively impacted by COVID-19.

Mayor Bob DaSilva, together with the City's Finance Department and Office of Community Development, has rolled out a Housing Assistance Program and an opportunity for Tax Sale relief.

The Housing Assistance Program will provide assistance to eligible tenants/homeowners who are facing financial hardship, specifically due to the pandemic and are at risk of eviction or foreclosure. (See packet information and application below)

In addition, Mayor DaSilva also signed Executive Order 2021-004, which postpones the annual tax sale process to December 2021. With the tax sale scheduled for May 1, 2022, this will allow the taxpayer additional time to become current and therefore not be subject to the \$300 levy fee. (See Executive Order 2021-004 below)

"Our City's residents are facing challenging times during this pandemic," Mayor DaSilva said. "With these two initiatives, we are able to provide our eligible resident tenants, landlords/homeowners with some of relief from financial hardship during a difficult time."

Housing Assistance Program:

Information Packet

The Housing Assistance Program is designed for eligible tenants/homeowners who are experiencing financial hardship due to COVID-19, and are at risk of eviction or foreclosure that might result in becoming homeless. Owner occupied landlords are eligible for this program and may also initiate on behalf of their tenants.

Type of Assistance

Tenants:

- The Housing Assistance Program will provide up to three (3) months in rent to stay in current unit.
- Approved assistance payments will be issued directly to landlords.

Homeowners:

- The Housing Assistance Program will provide up to three (3) months for mortgage payments to avoid foreclosure.
- Payments will be made to the provider of such services on behalf of an individual or family, and not directly to an individual or family.

Eligibility

Tenants:

- Rent an apartment in East Providence
- Be or have been unemployed or underemployed beginning March 1, 2020 or after due to the pandemic (retirees exempt)
- Have been current on rent payments as of March 1, 2020
- Have less than \$5,000 in nonretirement, liquid assets. Non-retirement, liquid assets include bank accounts, stocks, bonds, investments and cash value of life insurance
- Meet household income limits

Homeowners:

- Own a one-to four family property or condominium in East Providence

- Be or have been unemployed, underemployed, or not receiving rent beginning March 1, 2020 or after due to the pandemic (retirees exempt)
- Have been current on mortgage payments as of March 1, 2020
- Have less than \$5,000 in non-retirement, liquid assets. Non-retirement, liquid assets include bank accounts, stocks, bonds, investments and cash value of life insurance
- Meet household income limits

Total Gross Household Income Must Be Under the Limits Below

1 Person -\$48,750

2 Person -\$55,700

3 Person-\$62,650

4 Person -\$69,600

5 Person -\$75,200

6 Person-\$80,750

7 Person-\$86,350

8 Person-\$91,900

How is Household Income defined?

- Household income consists of current gross income from all sources including social security, pension, salaries, wages, interest income, rent, unemployment benefits, etc.
- Household size is the number of people who live in the home or housing unit regardless of relationship.

Examples of Financial Hardship:

- Household members may have been laid off, terminated, loss of hours, lost wages or business income, or been unable to work due to quarantine or a lack of childcare, or had an extraordinary unreimbursed medical expense exceeding 7.5 percent of one's adjusted gross income for the year.
- Applicants should prepare a short explanation of how COVID-19 has caused a financial hardship that has put them at risk of eviction or foreclosure.

For more information or to apply:

Call the Community Development office at (401) 435-7536, visit us online at www.eastprovidenceri.gov under Departments/Community Development, or email jcollins@eastprovidenceri.gov or dbachrach@eastprovidenceri.gov

City of East Providence

App rec: _____

HOUSING ASSISTANCE PROGRAM
APPLICATION

The information requested in this form is used by the Community Development Office to document your eligibility to participate in the Housing Assistance Program, and in the monitoring of program funds. It will not be disclosed outside of our requirements to determine your eligibility.

Certain information (i.e. marital status, race, sex, etc.) is requested solely for the purpose of determining compliance with federal Civil Rights Law. Your response will not affect consideration of your application. The personal information is used for statistical purposes only.

APPLICATION SHOULD BE SIGNED AND DATED ON PAGE 4.

PROPERTY ADDRESS:		Year:	#UNITS:
APPLICANT:		Email:	
Street:	City:		Zip:
Phone:		Alt. Phone:	
Marital Status:	<input type="checkbox"/> Married	<input type="checkbox"/> Divorced	<input type="checkbox"/> Widowed <input type="checkbox"/> Single
Race/Ethnicity:	<input type="checkbox"/> White	<input type="checkbox"/> Black	<input type="checkbox"/> Portuguese <input type="checkbox"/> Cape Verdean
<i>Check all that apply</i>	<input type="checkbox"/> Asian	<input type="checkbox"/> American Indian	<input type="checkbox"/> Hispanic <input type="checkbox"/> Other:
Female-Headed Household <input type="checkbox"/> Yes <input type="checkbox"/> No		Elderly (over 62) <input type="checkbox"/> Yes <input type="checkbox"/> No	

CO-APPLICANT:		Email:	
Street:		City:	Zip:
Phone:		Alt. Phone:	
Number of people in household:	Number of children under 6 yrs. of age or visiting regularly (at least 14 times per year):		

Single Family Household Members (list all additional non-applicant members)			
Name:	Age:	Name:	Age:
Name:	Age:	Name:	Age:

Multi-Family/Rental Property Information (a <i>Tenant Information Form</i> must be completed for each unit)			
Is the property rented? <input type="checkbox"/> Yes <input type="checkbox"/> No		Owner-Occupied? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total # of units:
Unit #:	Resident Name:	Phone:	
Unit #:	Resident Name:	Phone:	
Unit #:	Resident Name:	Phone:	

HOUSEHOLD INCOME INFORMATION

Household Member Name:	
Currently Employed? q Yes q No	If Yes, Employer:
Employer Address:	
Employer Phone:	Position:
Years Employed:	Gross Monthly Income:
Average Overtime Earnings:	Part Time/Seasonal Employment:
Other Monthly Income	
Social Security Benefits:	Retirement/Pension Income:
Child Support/Alimony:	Other:

Household Member Name:	
Currently Employed? q Yes q No	If Yes, Employer:
Employer Address:	
Employer Phone:	Position:
Years Employed:	Gross Monthly Income:
Average Overtime Earnings:	Part Time/Seasonal Employment:
Other Monthly Income	
Social Security Benefits:	Retirement/Pension Income:
Child Support/Alimony:	Other:

HOUSEHOLD INCOME INFORMATION, cont.

Household Member Name:	
Currently Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Employer:
Current or Previous Employer Address:	
Current or Previous Employer Phone:	Position:
Years Employed:	Gross Monthly Income:
Average Overtime Earnings:	Part Time/Seasonal Employment:
Other Monthly Income	
Social Security Benefits:	Retirement/Pension Income:
Child Support/Alimony:	Other:

Household Member Name:	
Currently Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Employer:
Current or Previous Employer Address:	
Current or Previous Employer Phone:	Position:
Years Employed:	Gross Monthly Income:
Average Overtime Earnings:	Part Time/Seasonal Employment:
Other Monthly Income	
Social Security Benefits:	Retirement/Pension Income:
Child Support/Alimony:	Other:

BANK ACCOUNT INFORMATION

Type of Account	Balance	Institution
Savings	\$	
Checking	\$	
Other:	\$	

DEBTS AND OBLIGATIONS

HOME MORTGAGE: Current residence	
Balance Owed:	Monthly Payment:
Yearly Taxes:	Yearly Insurance:
Mortgage Company/Bank:	

If you own other properties, please list on a separate sheet of paper the above mortgage information for each.

CREDIT CARDS OR OTHER INSTALLMENT ACCOUNTS	
Description	Monthly Payment

ADDITIONAL ASSETS

Please list any additional assets owed, i.e. 2 nd house, an investment, gems, jewelry, coin collections, antique cars, etc.

DESCRIPTION OF FINANCIAL HARDSHIP DIRECTLY DUE TO COVID-19

APPLICANT'S CERTIFICATION

IMPORTANT: *Applicant please read before signing.*

I/We understand that if any statement contained in this application is intentionally not true or correct, I/We may be subject to criminal prosecution or, as applicable, my/our application may be denied.

I/We HEREBY certify under penalty of perjury that all information in this application is true and accurate to the best of my/our knowledge and belief.

Applicant's Signature

Co-Applicant Signature

DATE

Office Use Only:

1. Household with child under the age of 6 with elevated blood level and living in target area YES_____

2. Property built before 1940 YES_____

3. Property with moderate-severe interior or exterior deterioration YES_____

Household Size _____ Total Income _____ HUD Income Limit _____

Rental Property:

Tenant 1: Family Size _____ Total Income _____ HUD Income Limit _____

Tenant 2: Family Size _____ Total Income _____ HUD Income Limit _____

Tenant 3: Family Size _____ Total Income _____ HUD Income Limit _____

INCOME ELIGIBLE: YES _____ NO _____



HOUSING ASSISTANCE PROGRAM

APPLICATION CHECKLIST

Tenants

Required Documents as applicable for each adult (excludes full-time students)

- Proof of Income – 2 recent pay stubs, self-employment income statement, and/or statements of gross income received such as: Unemployment, Social Security, Pension, Veteran’s Administration, Worker’s Compensation, Child Support/Alimony, Foster Care, etc. _____
- A current lease agreement or other documentation of rent payment amount _____
- Proof of residency, such as a recent utility bill _____
- Copy of most recent checking and savings account statements _____
- Copy of driver’s license or photo ID _____
- Copy of eviction complaint/notice and/or summons _____
- Certification of Need Form signed and dated _____

Landlords/Owners

Required Documents as applicable for each adult (excludes full-time students)

- Proof of Income- 2 recent pay stubs, self-employment income statement, and/or statements of gross income received such as: Unemployment, Social Security, Pension, Veteran’s Administration, Worker’s Compensation, Child Support/Alimony, Foster Care, etc. _____
- Completed W-9 form or 2019 Federal Tax Return _____
- Evidence of rent owed, such as demand notices, bank statements, property management reports, or other written correspondence _____
- Copy of most recent mortgage statement _____
- Copy of driver’s license or photo ID _____
- Copy of current lease agreement _____
- Copy of foreclosure notice and/or summons _____
- Tenant Information/Agreement Form, signed, dated, and returned by each tenant _____
- Certification of Need Form signed and dated _____

Please submit this application along with copies of the above documents to:

City of East Providence Community Development 145 Taunton Ave. East Providence, RI 02914

Please email jcollins@eastprovidenceri.gov or call (401) 435-7536 for further assistance.



*City of East Providence
Office of the Mayor*

**SUPPLEMENTAL DECLARATION OF MUNICIPAL EMERGENCY
EXECUTIVE ORDER 2021-004
JANUARY 20, 2021**

MUNICIPAL EMERGENCY POSTPONING OF TAX SALE

WHEREAS, on March 9, 2020, the State of Rhode Island Governor, Gina M. Raimondo, issued Executive Order 20-02 declaring a state of emergency due to the outbreak of COVID-19; and

WHEREAS, on March 15, 2020, I, Mayor Roberto L. DaSilva, issued Executive Order 2020-004 declaring a state of municipal emergency due to the outbreak of COVID-19; and

WHEREAS, Governor Raimondo issued a continuation of the state of emergency through Executive Order 21-06 on January 19, 2021, which remains in effect; and

WHEREAS, the COVID-19 pandemic continues to remain a serious threat to both the health and safety of the residents of East Providence; and

WHEREAS, the COVID-19 pandemic has imposed unforeseen financial hardships on the residents of East Providence; and

WHEREAS, postponing the annual tax sale process to December 2021, with the tax sale scheduled for May 1, 2022 will allow the taxpayer additional time to become current and therefore not be subject to the \$300 levy fee.

NOW, THEREFORE, I, Mayor Roberto L. DaSilva, by virtue of the authority vested in me as the Mayor of the City of East Providence, pursuant to the Rhode Island General Laws and the Home Rule Charter of the City of East Providence, do hereby order and direct that the tax sale will now be deferred. The tax sale process will now begin in December 2021 with the sale scheduled for May 1, 2022.

This Order shall take effect immediately and remain in full force and effect unless renewed, modified or terminated by subsequent Executive Order.

So Ordered:

Roberto L. DaSilva
Mayor

