

Verification of Homelessness

Section 1

I, _____, have applied for rental assistance through the Oregon Housing Opportunities in Partnership program (OHOP) funded by Housing and Urban Development (HUD). Because the United States government funds this program, I understand that OHOP is required to verify my homeless status.

I certify that I am homeless and currently staying in the following place(s):

I do not have any resources to obtain housing for the following reason(s):

I verify that all statements regarding my housing status are true and understand that false, misleading or incomplete information may result in termination from the OHOP program.

Client signature: _____ Date: _____

OHA non-discrimination policy

If you believe you have been discriminated against, contact the Office of Equity and Inclusion:

- Web: www.oregon.gov/OHA/OEI
- Email: OHA.PublicCivilRights@state.or.us
- Phone: 1-844-882-7889, 711 TTY
- Mail: Office of Equity and Inclusion Division
421 SW Oak St., Suite 750
Portland, OR 97204

OHA language access statement

You can get this document in other languages, large print, braille, or a format you prefer free of charge.

Phone: 971-673-0144

Email: Community.Services@odhsoha.oregon.gov

We accept all relay calls, or you can dial 711.

Section 2: Third-party homeless documentation

Provide third-party documentation, as appropriate. Check the appropriate box and attach documentation to this form.

The participant is sleeping in places not meant for human habitation such as cars, parks, sidewalks, abandoned buildings, etc.

Documentation may include letters or memos regarding the participant's activities in the recent past that could be used to document homelessness. This would include documentation from the client's case manager, neighbors, private citizens, police, sheriff, homeless outreach agencies, Traveler's Aid, churches, the address used for public assistance checks, etc.

Participant is homeless and living in a shelter or in transitional or supportive housing for homeless persons who originally came from the streets or emergency shelters

Documentation should include a letter or memo from the homeless service agency verifying the client's current homeless status.

Participant is exiting a short-stay facility, such as a detox center, crisis center, jail, etc. (90 days or less) and who previously resided on the street, in a shelter, or in a place not meant for human habitation immediately prior to entering that institution.

Documentation should include a letter or memo from the short-term facility or Provider verifying the client's current homeless status.

Persons fleeing domestic violence

Obtain written verification from the participant that they are fleeing, or is attempting to flee a domestic violence situation, has no other residence and lacks resources or support networks to obtain permanent housing. If Participant is unable to prepare verification, OHOP or the client's case manager may prepare a written statement about the Participant's previous living situation for the Participant to sign and date.

Section 3 (OHOP use only): OHOP program certification

Based upon the information provided to me by the client listed above and accompanying third party documentation, I find them to be homeless and eligible for assistance.

Housing coordinator name: _____

Housing coordinator signature

Date