



SOCIAL HOUSING REGULATORY AUTHORITY
(“The SHRA”)

Residential Rent Relief Grant Application Form

Social Housing Landlords



SOCIAL HOUSING REGULATORY AUTHORITY

FORM 1A: RESIDENTIAL RENT RELIEF APPLICATION FORM

PART A: TO BE COMPLETED BY LANDLORD/ SHI/ MOE/ ODA's					
Name of Applicant					
Address of property					
District			Municipality		
SHI		MOE		ODA	
Please provide a description of the property (incl number of units, number of tenants etc.)					
How many tenants are applying for grant relief funds?					
What is the total grant amount applied for?					
What measures were put in place to cushion the Impact of COVID on tenants?					
How many tenants failed to pay their rent between 1 st April – 30 th September 2020?					
How much are you owed in rental arrears for that specified period?					
Describe the impact that COVID 19 pandemic had on your institution (financial, human resources, operational impact, social etc.)					
Quantify the financial implications of the impact of COVID 19 on your institution?					
How has the tenant's non-payment affected your business?					
Provide a motivation to support your request for rent relief assistance					
Please provide any other information to support this grant funding application					

PART B: DECLARATION BY LANDLORD/ SHI's/ MOE's/ ODA's

I, the undersigned landlord does hereby solemnly / under oath declare:

1. That all the information contained in this application form is true and correct and that all material facts have been disclosed therein;
2. That all information provided by tenants has been checked and verified;
3. That I/ we lease the identified residential property to the applicant;
4. That I/ We undertake not to evict the tenants that are awarded rent relief grants for a period equivalent to the months covered by the awarded grant or until the lease agreement lapses, or whichever period is shorter.
5. That I/ we are aware that if any information supplied by us in this application and the supporting documents that must be included are incorrect or fraudulent, it may result in legal action and criminal prosecution against us

Signature of Landlord's (Duly Authorised signatory)

.....

Date

.....

PART C: LANDLORD'S BANKING DETAILS

Account number:

Branch Code:

Account Type:

Postal Address:

Telephone numbers:

Email address:

Full description of legal status and registration number

To be completed in presence of commissioner of oaths;

PART D: COMMISSIONER OF OATHS
<p>I CERTIFY that the Deponent/s has/have acknowledged that he/she/they* know and understand the contents of their affidavit's, which was/were signed and sworn to/affirmed* before me at</p> <p>.....on this day of of the year 20</p> <p>OFFICIAL DATE STAMP</p> <p>Full names and Surname:</p> <p>.....</p> <p>Identity Number</p> <p>Capacity:</p> <p>Postal Address:</p> <p>Area:</p> <p>Signed by Commissioner of Oaths</p> <p>.....</p>

Checklist for Landlord/ Means testing

DOCUMENTS REQUIRED	Yes/No
Has the application been completed in full?	
Has the landlord checked and verified all information and documents provided by tenants?	
Has the landlord provided the rent relief/ debt collection policy or proof of rent-relief measures implemented (e.g. board resolutions and/or meeting minutes/ emails)?	
Has the landlord submitted proof of bank account?	
Has the landlord submitted arrears arrangement contract?	
Has the landlord submitted a statement showing the outstanding balances on the tenant's account?	
Has the landlord submitted the rent rolls as at 1 st April 2020 and 30 th September 2020?	
Undertaking by landlord that no evictions will be instituted for the approved grant recipients.	
Has the landlord provided a copy of the latest Audited Financial Statements?	