Roommate Certification Virginia Rent Relief Program

I, (applicant name), hereby attest under penalty of perjury that I am	
currently residing at	(physical property address) where I
have entered into an agreement with	(leaseholder or landlord
name) to pay a share of the monthly rent in the am	nount of \$, beginning
(month/day/year) until	(month/day/year). Additionally, I
certify that my rental arrangement during this time	e period is best described as:
Roommate: The Rent Relief Progran	n (RRP) defines roommate as an adult
applicant who has a written agreement with the la	ndlord. The applicant may or may not have
dependent children and is not a family member of	the other adult(s) listed on the lease.
As a Virginia Rent Relief Program (RRP) applicant, I	certify that I meet the program's criteria and
am unable to pay my monthly rent. Additionally, I o	certify that I have not received any other
form of federal, state, or local subsidy or financial a	assistance for rent during the same time
period with the requested RRP and that I will repay	any RRP assistance determined to be
duplicative. I understand that any misrepresentation	on of information or failure to disclose
information requested on this form may disqualify	me from participation in RRP, and may be
grounds for termination of assistance.	





I understand that any misrepresentation of information or failure to disclose information requested on this form may disqualify me from participation in RRP, and may be grounds for termination of assistance. WARNING: It is unlawful to provide false information to the government when applying for federal public or benefit programs per the Program Fraud Civil Remedies Act of 1986, 31 U.S.C. §§ 3801-3812. I certify that the above information is true and correct.

Applicant Printed Name

Applicant Signature

Leaseholder Printed Name

Leaseholder Signature

Landlord Printed Name (if applicable)

Landlord Signature (if applicable)

Date



