## **Town of Huntington Community Development Agency**

## **Rental Arrears Assistance Duplication of Benefits Certification**

It is hereby I	(tenant) certify that the rental arrears
payments will be made on my behalf	
to	(Landlord/Property owner) of the property
located at:	

with funds received from the Town of Huntington Community Development Agency under the Emergency Rental Arrears Assistance program due to the impact of the COVID-19 pandemic. It is further certified that I have not been, nor will received funding for rental arrears payments from any source whatsoever. This includes, but is not limited to any other disaster relief or insurance program at the Federal, State, or local level as well as the private sector. Furthermore I\_\_\_\_\_\_ agree to repay any and all assistance that is determined to be duplicative. I make this certification under oath and with the knowledge that

the Town of Huntington CDA will rely upon the truth of the statements herein made.

Tenant Signature (Print name)

Tenant (Print name)

Sworn to be \_\_\_\_\_\_ this \_\_\_\_\_ day of

\_\_\_\_\_20\_\_\_\_

Notary Public