

# STATE HOUSING TRUST FUND HOMELESS VERIFICATION CHECKLIST

Client Name: \_\_\_\_\_

## Category 1: Literally Homeless – Family lacks fixed, regular, and adequate nighttime residence, meaning:

- A. Primary nighttime residence that is public/private not meant for human habitation; **or**
- B. Living in a publicly/privately operated shelter designed to provide temporary living arrangements (including TH and hotel/motel paid for by charitable or government program); **or**
- C. Exiting an institution where residing for 90 days or less **and** resided in ES or place not meant for habitation **immediately before** entering institution

### Documentation Requirements:

- A. Written observation by outreach worker; **or**
- B. Written referral by another housing or service provider; **or**
- C. Certification by HOH seeking assistance stating they were living in shelter or on streets
- D. If exiting institution, **one form of evidence above and:**
  - 1. Discharge paperwork **or** written/oral referral, **or**
  - 2. Written record of intake worker's due diligence to obtain above evidence **and** certification by person exiting institution

## Category 2: Imminent Risk of Homelessness – Will imminently lose their primary nighttime residence, provided that:

- A. Residence will be lost within 14 days of application for homeless assistance; **or**
- B. No subsequent residence has been identified; **and**
- C. Family lacks resources or support needed to obtain permanent housing

### Documentation Requirements:

- A. Written eviction notifying family that they must leave; **or**
- B. Family leaving a hotel/motel – evidence that they lack financial resources to stay; **or**
- C. A documented and verified oral statement describing the situation; **and**
  - 1. **(applies to AB&C)** Certification that no subsequent residence has been identified; **and**
  - 2. **(applies to AB&C)** Self-certification or other written documentation that individual lacks financial resources and support to obtain permanent housing

## Category 4: Fleeing/Attempting to Flee DV – Any family who:

- A. Is fleeing, or is attempting to flee, domestic violence; **and**
- B. Has no subsequent residence; **and**
- C. Lacks the financial resources and support to obtain permanent housing

### Documentation Requirements:

- A. Written self-certification or certification by a service provider that:
  - 1. They are fleeing; **and**
  - 2. They have no subsequent residence; **and**
  - 3. They lack the financial resources and support to obtain permanent housing
- B. Where the family safety is not jeopardized, the situation from which the family is fleeing must be verified