

City of Boston Rental Relief Fund Funding Acceptance Letter

Office of Housing Stability
43 Hawkins Boston, MA 02114

Expiration Date _____

Landlord Name _____
Tenant(s) Name: _____
Rental Address _____

The Rental Relief Fund (RRF) Administering Agency intends to provide the following financial assistance on behalf of the above named Participant (must insert "N/A" if Not Applicable):

Monthly Rent Amount \$ _____

Arrears Owed \$ _____

Total Amount of Rental Assistance \$ _____ (up to twelve months of rental assistance or rental arrears not to exceed \$15,000)

Owner Acknowledgements

- I certify that I am the property owner (or authorized agent for the owner) of the above referenced property (Participant Address).
- I certify that by accepting payments for rent in accordance with this letter,
 - I agree to reinstate the Participant's tenancy.
 - I agree not to proceed with eviction for the duration of this assistance.
 - I agree to dismiss an eviction case if rental arrears are covered by this assistance.
 - I agree to notify the Office of Housing Stability if there are any changes in Participant's tenancy
 - I agree to participate in at least one mediation session with mediators at the Office of Housing Stability if any issues arise with Participant's tenancy.
- If the RRF Administering Agency makes a rental assistance payment on behalf of the Participant, I agree to comply with all landlord obligations in accordance with [M.G.L., c.186 s. 15B](#).
- If the Participants' tenancy is terminated prior to the period for which any monthly rental assistance payments were made, I agree to return the unused balance of said funds to the RRF Agency.
- Nothing in this letter precludes the owner/agent from using any and all remedies available under law, including the institution of eviction proceedings against the Participant, if the Participant fails to pay any future rent due after the date of this letter.
- I understand that providing false information or making false statements may be grounds for denial of my application. I also understand that such action may result in criminal penalties.

Property Owner/Agent Signature

RRF Administering Agency Staff Signature

Property Owner/Agent Name

RRF Administering Agency Staff Name & Title

Property Owner/Agent Phone

Date Letter Signed: _____

Contact information for the Office of Housing Stability:
(Email) rrf@boston.gov
(Phone) 617-635-4200