



Department of Planning & Development

City of Everett Rental Assistance Program - Landlord Agreement

This agreement is made on _____ [Date] between the City of Everett and the undersigned landlord ("Landlord"). This agreement outlines the terms and conditions for participation in the City of Everett Rental Assistance Program (the "Program"), which provides financial assistance to tenants facing financial hardship.

1. Landlord Information

- Name: _____
- Address: _____
- Phone Number: _____
- Email Address: _____

2. Tenant Information

- Tenant Name(s): _____
- Rental Property Address: _____

3. Payment Details

- **Amount of Assistance:** \$5,000 (maximum)
- **Purpose of Assistance:** The funds are to be applied directly to the tenant's rent, covering arrears, current rent, or future rent obligations.
- **Payment Method:** Payment will be made directly to the Landlord in the form of a check.

4. Landlord Responsibilities

The Landlord agrees to the following:

1. To accept the payment from the Program as partial or full rent payment for the Tenant.
2. To provide a signed W-9 form along with this agreement.
3. To confirm in writing within 30 days of receiving the payment that the funds were applied to the Tenant's rent.
4. To contact the City of Everett immediately if any portion of the grant cannot be used for its intended purpose and return any unused funds allocated for that tenant.

5. Program Terms

- The Landlord understands and agrees that the assistance provided is a one-time payment and does not constitute ongoing rental support.
- Participation in the Program shall not preclude the Landlord from pursuing legal remedies for lease violations unrelated to rent non-payment. Notwithstanding the foregoing, the Landlord expressly reserves all rights and remedies to pursue recovery of any outstanding rent balance remaining after receipt of the assistance.

6. Certification and Signature By signing this agreement, the Landlord certifies that the information provided is true and accurate to the best of their knowledge and that the payment will be applied as described above.

Landlord Signature: _____

Date: _____



City of Everett

FOR STAFF USE ONLY

Application received on:

City Staff Initial:



City of Everett