

**MAYOR'S OFFICE OF HOUSING AND COMMUNITY DEVELOPMENT
CITY AND COUNTY OF SAN FRANCISCO**

AFFIDAVIT OF FINANCIAL HARDSHIP DUE TO COVID-19

Homeowner Name(s): _____

Property Address: _____ San Francisco, CA _____

I (We) _____, have experienced financial hardship caused by the COVID-19 pandemic, and my (our) household is unable to meet the financial obligations of my (our) housing expenses.

1. The amount that is currently due or will be due is \$ _____.
2. My (Our) ability to pay the above amount has been negatively affected by the COVID-19 virus for the following reasons* (check all that apply):

Reduction in work hours as follows: _____

Temporary business shut down as follows: _____

Layoffs or terminations due to COVID-19 as follows: _____

Increase in out-of-pocket medical expenses as follows: _____

Other (explain): _____

*Homeowner(s) must provide written documentation in support of the claim of financial hardship related to COVID-19. The types of documentation that are acceptable include, but are not limited to, a letter or notice from employer, establishing proof of reduction in work hours or proof of employer/ business shut down due to COVID-19, medical bills, etc. If homeowner(s) is self-employed, homeowner(s) shall provide proof of self-employment including federal income tax returns and a signed explanation of the hardship.

3. Contact information for employer is as follows:

Name of Employer: _____ Address: _____

Contact Name: _____ Phone: _____ Email: _____

I swear or affirm that the answers are true and reflect my current finances and status regarding COVID-19. I understand that a material misstatement fraudulently or negligently made in this affidavit or any other statement made by me (us) in connection with an application for a Homeowner Emergency Loan Program (HELP) loan may constitute a federal violation punishable by a fine and/or denial of my (our) application for a HELP loan, or, if HELP loan funds have been released prior to discovery of the false statement, immediate recalling of the HELP loan, which may be in addition to any criminal penalty imposed by law. I authorize the City to obtain records of information pertaining to my financial or employment status from any source in order to verify the information provided by me.

Dated this _____ day of _____, 2020

Applicant's Signature: _____

Given the current exigency, Homeowner(s) agrees that Homeowner(s) may self-authenticate their sworn statement herein and no notary shall be required.