How to Apply for U.S. Treasury Emergency Rental Assistance

Using OSCARSS
Log in to OSCARSS application portal for Community Services

If unable to log in, select “Forgot Password” and the password will be emailed to the registrant.

Select “Forgot Email” to find out the email account paired with the applicant’s personal information.
The login page has resources to assist with the application.

- Choose the language
- See questions about eligibility and the program benefits
- View the tutorial and see how to apply
- New users can register for an account
- Get help with technical issues
Review the Informed Consent and Release of Information

Palm Beach County Continuum of Care Informed Consent and Release of Information

The Client Management Information System (CMIS) allows sharing of client information for the provision of services in Palm Beach County through the networked infrastructure that establishes electronic communication among Member Agencies. Participation in the CMIS enables the collection and sharing of unduplicated countywide aggregated data on homeless service delivery. The CMIS provides a standardized assessment of client needs, supports the creation of individualized service plans, and records the use of housing and other related services.

I understand that my data will be shared with the Partnering Agencies of the CMIS network.

- CMIS is a database which allows partnering agencies to capture and share information about the individuals they serve
- This information will help you access the appropriate resources to better meet your needs
- It will help you save time should you access services from another member agency
- Only authorized Staff in the CMIS System can access your data
- All information entered into this database is stored securely to protect your data from unauthorized access
- Non-Identifying information is used to provide reports for various funding agencies
- All information entered into the database will be maintained for an indefinite timeframe
- I may request an oral or written explanation of this information prior to accepting these terms
- The acceptance of this Agreement will be good for One Year from Date of Acceptance unless terminated by me

☐ [ ] Doris Davis hereby grant permission for and authorize the release of any information regarding myself and all household members entered into this database to CMIS Agencies

Agree
Review the Notice Regarding Collection of Social Security Numbers

Palm Beach County Notice Regarding Collection of Social Security Numbers

The following disclosure is being made pursuant to section 119.071(5), Florida Statutes.

Social security numbers of applicants and household members are requested because this information has been determined to be imperative for the performance of the duties and responsibilities prescribed by law under grants and programs operated by Palm Beach County, Community Services Department.

Used To:
1. Verify an applicant’s identity.
2. Verify household size.
3. Verify household income.

A social security number collected pursuant to this notice can only be used by the Florida Department of Economic Opportunity and Palm Beach County Community Services Department for the purposes specified above.

- I may request an oral or written explanation of this information prior to accepting these terms
- The acceptance of this Agreement will be good for One Year from Date of Acceptance unless terminated by me

☐ I, Doris Davis, hereby grant permission for and authorize the release of Social Security Numbers regarding myself and all household members entered into this database to Palm Beach County Community Services
Start a new application by selecting “Apply for Services”. Any existing applications will show with an option to “Edit”.
Answer questions related to the impact experienced by COVID
These questions are asked to determine eligibility for ERA funding.
ERA funding is only for households that rent. Refer to the website for other available funding sources.

<table>
<thead>
<tr>
<th>At Risk of Homelessness or Housing Instability:</th>
<th>□ Caring for or being a High Risk Individual</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ Rental Eviction Notice</td>
<td>□ Responsible for Caring for Children / Grandchildren at Home</td>
</tr>
<tr>
<td>☑ Utility Disconnection Notice</td>
<td>□ Past Due Rent Notice</td>
</tr>
<tr>
<td>□ Past Due Utility Notice</td>
<td></td>
</tr>
</tbody>
</table>

Total household income must be at or below 80% of Area Median Income (AMI) *

- Enter Total Number of Household Members *  
  - 3
- Enter Total Household income for 2020 *  
  - $63000
- Enter total household income for last 2 months *  
  - $10500

Calculate

Not eligible. Only Rent Application is eligible for ERA funding.
Request assistance for the services needed. Explain the situation and review and accept acknowledgements.

Check the boxes for services requesting. Explain the impact experienced from COVID pandemic. You cannot leave this area blank.
Provide details about the requested services.
Application Details requested by Service

**Rental Assistance**
- Eviction Notice
- Current lease agreement (cannot be expired)
- Landlord name, address, phone number, and email address
- Rental amount and late charges
- Amount of rent due; Balance statement must be submitted by the landlord
- Months covered for rental assistance
- Section 8/Subsidized housing information
  - Proof of assistance received from such programs (tenant portion identified)
  - Proof of rental reduction request to its Housing Authority

**Utility Assistance**
- Utility bill late notice
- Name of Utility company
- Utility bill with service address and service dates
- Utility service due date
- Utility account number
- Name on the account (must be in a household member’s name)
After completing service details and providing an explanation, review acknowledgements and accept acknowledgements, then select Next.
The application then proceeds with information regarding the applicant and the household.

**Personal Details**
- Ensure that the Social Security number is correct and has not been used in another household
- Check that Date of Birth is correct.

**Documents Required**
- Government issued ID or Passport
- Social Security Card
Complete Address Information

Address Information
- Ensure that the address is correct
- Be sure to include apartment numbers
- Don’t forget an emergency contact just in case!
- Proof of residency is required.
Provide information on the other household members

Household Details

- Ensure that the Social Security number is correct and has not been used in another household
- Check that Date of Birth is correct.
- Social Security cards may be requested to clear any discrepancies
Describe the Relationship of Family Members to the Head of Household

**Relationship to Head of Household**
- Mark if the household member is a veteran or disabled
- Answer questions regarding citizenship
Add income for the adults in the household

Household Income
- Income is required for each adult in the household or any other member receiving income

Select no income if the household has no income
Allowable Sources of Income

- Last Pay Stubs
- Bank Statements Prior to COVID-19 Crisis
- Last filed Tax Return if Self-Employed
- Total household income for 2020 (adjusted gross Income under IRS form 1040 series)
- Total household income for the two months prior to the submission of the application
- **Categorical Eligibility**: Determination letter from the government agency that verified the applicant’s household income at or below 80% AMI on or after January 1, 2020 are automatically eligible.
- Note: Additional information may be required by Case Manager during eligibility review.
Input annual income and last two months of income.

Use the calculator to assist in calculating income.
The calculator function works for Fixed Income and/or Variable Income

**Fixed Income**
- Input gross amount of income
- Select frequency
- Include hours per week and days per week if applicable
- Select “calculate” to calculate the income
- Select “Add” to add it to the application.

![Income Conversion: Unemployment Wages](image_url)
**Variable Income**

Input income amounts and frequency of pay. Select “Calculate”. The calculator will compute the income. Select “Add” to add it to the application.
This example shows weekly fixed income from Unemployment.
Income has been added. Select “Close” to return to the application page.

### Income for Doris Davis 1

<table>
<thead>
<tr>
<th>Description</th>
<th>Annual Gross Amount</th>
<th>Last 2 Months Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Income Prior to COVID-19 Crisis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Reduced Monthly Wages</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Checking Account Balance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Savings Account Balance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unemployment Wages</td>
<td>$14,300.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Tax Return</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Fixed Income – Social Security, Pension, Disability, etc</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Wages (2 Months) – Employment, Self-Employment, etc</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

Total Income: $14,300.00

Now add last two months of income
To add the last two months of income, input actual amount of income received each month. Add up to three months for consideration for other funding. Save and return to the Income page.
Income is complete. Select “Next”.

Palm Beach County Community Services
Helping People Build Better Communities

Household Income

Important Note: We have added the Last 2 Months to our income collection for your benefit. We have Multiple Funds with specific requirements for providing specific types of help to Palm Beach County Residents. Your recent Crisis may have affected your most recent income. Collecting the Last 2 Months of your household income will open more opportunities for our Case Managers to help your family.

<table>
<thead>
<tr>
<th>Name</th>
<th>Annual</th>
<th>Last 2 Months</th>
<th>View/Edit Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doris Davis 1</td>
<td>$14,300.00</td>
<td>$3,300.00</td>
<td>View/Edit Income</td>
</tr>
<tr>
<td>Icela Davis</td>
<td>$0.00</td>
<td>$0.00</td>
<td>View/Edit Income</td>
</tr>
<tr>
<td>Enrique Davis</td>
<td>$0.00</td>
<td>$0.00</td>
<td>View/Edit Income</td>
</tr>
</tbody>
</table>

Total Household Income: $14,300.00 $3,300.00

I certify that the household has no income

Previous
Next
Eligibility Outcome is determined based on the questions answered.
Supporting Documents must be provided to support the application and the crisis stated.
Supporting Documents to show Direct Impact from COVID

- At least two paystubs, one paystub before COVID-19 and one current (most recent) paystub during COVID-19 showing reduced hours. **Paystubs must show applicant’s name.**

- At least two bank statements with transaction history that shows your income (deposits) before COVID-19 and one current bank statements that shows your reduced income (deposits) during COVID-19. **Bank statement must include applicant’s name.**

- Lost employment, like a letter from employer. **Letter or email must have applicant’s name.**

- Evidence for Loss of Income if Self-Employed

- Qualified for unemployment—Unemployment award letter/statement from Department of Economic Opportunity (DEO) with unemployment amount and date range during COVID-19, after March 2020

- Any other verifiable document(s) that demonstrates a loss of income due to COVID-19. **Document must include applicant’s name.**
Supporting Documents to show Indirect Impact from COVID

- Increase in expenses due to COVID-19
- Responsible for caring for children/grandchildren at home
- Caring for or being a high risk individual
- Proof of lost/reduced child-support due to COVID-19 impact
Supporting documents will show in red for the application and each household member.

Be sure to click on the drop down box to see each family member.
Add supporting documents for each member on the application.
Supporting Documents

To add documents, select upload
Supporting Documents

Choose the document to be added. File should be pdf., .png, .jpg or .jpeg. Problems with uploading will occur if not using one of the listed formats.
Missing documents will show in red until all documents have been provided.

The Submit button will NOT show until ALL documents have been provided. If documents are showing required that do not apply, consider revising the application. For example: Requesting Social Security statement when no one is receiving Social Security benefits.
ID cards will request the expiration date
Children should not require any additional uploads unless they have income.

**During the eligibility review, the case manager may request additional documentation.**
Once the application is complete, Review the application.
Review of the application will show all sections.

<table>
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<th></th>
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<tr>
<td><strong>Description</strong></td>
<td></td>
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</table>

Select “Edit” to make any corrections.
The “Submit” button now shows because all documents have been provided.
Submitted applications show a confirmation message.
Applicants can check the status of the application on the home page of the OSCARSS profile.
For Questions, call (561)-355-4792