



## COMMERCE

<Today's Date>

<Tenant Mailing>

The Montana Department of Commerce (Commerce) currently has a minimum rent policy of \$50.00 for all program participants. A review of your file indicates that **you may be eligible** for a minimum rent hardship waiver.

**You may apply for a waiver of the minimum rent if one of the following statements describes your household situation:**

- The family has lost eligibility for or is awaiting federal, state, or local assistance, including a family that includes a member who is a non-citizen lawfully admitted for permanent residence.
- The family would be evicted because it is unable to pay the minimum rent.
- Family income has decreased because of changed family circumstances, including the loss of employment.
- A death has occurred in the family.

When you request a hardship waiver, the \$50.00 minimum rent will be suspended beginning the month following your request for review. During this review period, Commerce will verify your circumstances to determine if you are eligible for the waiver and, if so, whether the hardship will be temporary (lasting less than 90 days) or long-term (lasting more than 90 days).

### **If you are NOT eligible**

If Commerce determines there is no qualifying financial hardship reason, the minimum rent will be reinstated within 30 calendar days of Commerce's notice. All back rent from the beginning of the suspension must also be repaid on Commerce's terms and conditions.

### **If the hardship is temporary**

The minimum rent will be reinstated from the beginning of the suspension period and Commerce may negotiate a repayment agreement with the family, if necessary, for any rent not paid during this period.

### **If the hardship is long term**

You will be exempt from minimum rent for as long as the hardship continues. Families are not required to repay back rent when hardships are long term.

If you wish to apply for the minimum rent hardship, please fill out the enclosed request form and mail it back to the Montana Department of Commerce within 30 days from the date of this letter.



## Montana Department of Commerce

### Request for Hardship Exemption to Minimum Rent Requirement

I, \_\_\_\_\_ as head of household, hereby declare that my family is unable to pay the minimum rent required by the Montana Department of Commerce (Commerce) Housing Choice Voucher program because of the following hardship(s) (check all that apply):

- ☐ My family has lost eligibility for, or is awaiting an eligibility determination for a Federal, State, or local assistance program resulting in our inability to pay the minimum rent.
- ☐ My family will be evicted because of our inability to pay the minimum rent.
- ☐ My family income has decreased resulting in our inability to pay the minimum rent.
- ☐ The death of a member of my household has occurred resulting in our inability to pay the minimum rent.

**I understand that I must provide documentation providing the hardship as determined by Commerce.**

If it is determined by Commerce that the hardship is temporary, I understand that I will be required to pay back any and all minimum rents waived as a result of this request. I also understand that a determination to waive the minimum rent is based on a hardship as I designated, and I am required to report in writing any changes in my family circumstances that may have changed that hardship.

I understand that I have the right to an informal hearing under grievance or hearing procedures of a Commerce determination of no hardship or temporary hardship.

\_\_\_\_\_  
Head of Household Signature

\_\_\_\_\_  
Date

