

VERIFICATION OF HOMELESSNESS

Skagit County defines a homeless person as someone who is living on the street or in an emergency shelter, or who would be living on the street or in an emergency shelter without homelessness assistance.

_____ meets the definition of homelessness, as follows:
(Client Name)

_____ Released from jail or work-release with no housing options and no resources to pay for housing. *Required documentation: Third party verification from the institution*

_____ Released from inpatient treatment or hospital or other institution, with no housing options or resources to pay for housing.
Required documentation: Third party verification from the institution

_____ Received pay-or vacate notice, imminent risk of losing housing.
Required documentation: Current notice to vacate housing

_____ Living on the street or other public/private place not designated for, or ordinarily used as a regular sleeping accommodations for human beings, such as tent, vehicle, abandoned building, etc.
Required documentation: Client must complete self-certification statement

_____ Living temporarily with family or friends.
Required documentation: Letter from friend or family member stating that the client must vacate the unit.

or...

_____ Emergency shelter
Required documentation: Third party verification from the shelter.

_____ Transitional housing
Required documentation: Third party verification from the transitional housing program.

SELF-VERIFICATION

I, _____, certify that I fall under the definition of homelessness as described above. I am certifying, under penalty of perjury that the following information is true and correct.

Client: _____ Date: _____

Narrative describing the current living situation that is defined as homeless:

THIRD PARTY VERIFICATION

Provider Signature: _____

Provider's Agency: _____

Date: _____

Printed Name: _____

Telephone Number: _____

