



# Clearing House Verification Tool

HSED FY2023

**INSTRUCTIONS:**

Using the MHDC Clearing House and CP-112 Eviction Relief Eligibility, complete the "Prior Assistance" and "Requested Assistance" for each year that the household received, or is requesting assistance. **Complete this form in its entirety, including the final questions at the end of page 3.**

**IMPORTANT REMINDERS:**

- Households cannot receive rental assistance for months where prior rental assistance was received. This is considered a Duplication of Benefits and is not an eligible expense under HSED.
- Households cannot receive utility assistance for months where prior utility assistance was received. This is considered a Duplication of Benefits and is not an eligible expense under HSED.
- For more guidance regarding Clearing House Verification, reference the HSED Eviction Relief Eligibility recorded training on <https://mhdc.com/programs/community-programs/covid-relief>.
- If you have questions regarding a household's eligibility, please contact your program administrator before providing Eviction Relief Assistance.
- Once all verifications are complete, total the combined months of assistance at the bottom of this form. IF the Head of Household is also requesting a Security Deposit, add one month of assistance to the combined final total.

2020		Prior Assistance		Requested Assistance		Total Months of Assistance
#	Months	Rental Assistance	Utility Assistance	Rental Assistance	Utility Assistance	<i>Insert "1" for each line item that contains an "X", unless the request is a Duplication of Benefits.</i>
1	April					
2	May					
3	June					
4	July					
5	August					
6	September					
7	October					
8	November					
9	December					
<b>Total Months of Assistance (2020):</b>						
						<i>Insert the combined months of assistance from the column above.</i>

Notes:

2021		Prior Assistance		Requested Assistance		Total Months of Assistance
#	Months	Rental Assistance	Utility Assistance	Rental Assistance	Utility Assistance	<i>Insert "1" for each line item that contains an "X", unless the request is a Duplication of Benefits.</i>
1	January					
2	February					
3	March					
4	April					
5	May					
6	June					
7	July					
8	August					
9	September					
10	October					
11	November					
12	December					
<b>Total Months of Assistance (2021):</b>						
						<i>Insert the combined months of assistance from the column above.</i>

Notes:



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2022		Prior Assistance		Requested Assistance		Total Months of Assistance
#	Months	Rental Assistance	Utility Assistance	Rental Assistance	Utility Assistance	<i>Insert "1" for each line item that contains an "X", unless the request is a Duplication of Benefits.</i>
1	January					
2	February					
3	March					
4	April					
5	May					
6	June					
7	July					
8	August					
9	September					
10	October					
11	November					
12	December					
<b>Total Months of Assistance (2022):</b>						
						<i>Insert the combined months of assistance from the column above.</i>

Notes:

**REMINDER:** If providing forward rent assistance, you must include the months of assistance in the Requested Rental Assistance column below.

2023		Prior Assistance		Requested Assistance		Total Months of Assistance
#	Months	Rental Assistance	Utility Assistance	Rental Assistance <i>(Include Forward Rent)</i>	Utility Assistance	<i>Insert "1" for each line item that contains an "X", unless the request is a Duplication of Benefits.</i>
1	January					
2	February					
3	March					
4	April					
5	May					
6	June					
7	July					
8	August					
9	September					
10	October					
11	November					
12	December					
<b>Total Months of Assistance (2023):</b>						
						<i>Insert the combined months of assistance from the column above.</i>

Notes:



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REMINDER: If providing forward rent assistance, you must include the months of assistance in the Requested Rental Assistance column below.

2024		Prior Assistance		Requested Assistance		Total Months of Assistance
#	Months	Rental Assistance	Utility Assistance	Rental Assistance <i>(Include Forward Rent)</i>	Utility Assistance	<i>Insert "1" for each line item that contains an "X", unless the request is a Duplication of Benefits.</i>
1	January					
2	February					
3	March					
4	April					
5	May					
6	June					
7	July					
8	August					
9	September					
10	October					
11	November					
12	December					
<b>Total Months of Assistance (2024):</b>						<i>Insert the combined months of assistance from the column above.</i>

Notes:

**Is the client requesting a Security Deposit?**

*IF yes, insert "1" on this line and add one month to "Combined Months of Assistance" below:*

**COMBINED MONTHS OF ASSISTANCE:**

Calculate the combined total months of assistance from 2021-2024, including **all forward rent payments**. Insert this total at the end of CP-112 Eviction Relief Eligibility.

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