

**Emergency Rental Assistance Program
U.S. Department of the Treasury Survey**

Survey Landing Page

OMB Control Number: 1505-0268

OMB Expiration Date: 09/30/2021

Welcome to the U.S. Department of the Treasury (Treasury) survey for assistance under the Emergency Rental Assistance Program (ERA). Your responses will be used to better understand the current status of your agency's implementation of rental assistance programs and inform future guidance. Please refer to Treasury's webpage for information regarding the terms and conditions of the program: <https://home.treasury.gov/policy-issues/cares/emergency-rental-assistance-program>.

We are requesting one voluntary response per entity that entered into an ERA financial assistance agreement with Treasury. We are seeking input about current and planned use of the ERA financial assistance award, including any transfers or payments that your organization has made to landlords, utility providers, and households since receiving the ERA award.

Please contact EmergencyRentalAssistance@treasury.gov with any questions, and thank you for your participation in this important program.

PAPERWORK REDUCTION ACT NOTICE

The information collected will be used for the U.S. Government to process requests for support. The estimated burden associated with this collection of information is 1 hour per response. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Office of Privacy, Transparency and Records, Department of the Treasury, 1500 Pennsylvania Ave., N.W., Washington, D.C. 20220. DO NOT send the form to this address. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid control number assigned by OMB.

Survey

1. To enable us to link your records, what is your Emergency Rental Assistance Award Number issued by Treasury? For example, ERA-0000000000.

[ERA-0000000000]

[Recipient enters for authentication purposes and linking to ERA application submission; taken from pre-populated email; add mandatory character limit where it doesn't delay; one unique ERA# or "It appears you already made a submission. Please contact your organization's other representatives and/or Treasury for assistance."]

2. Has your agency decided to cancel its ERA financial assistance agreement with Treasury and transfer its ERA funds to another agency or, in the case of a local government recipient, to its state government?

[YES/NO]

2a. If yes, what is the name of that agency?

[Text Box] [Stop survey – go to certification box section below].

3. Prior to receiving the ERA funds, did your agency already have a rental assistance program in place?

[YES/NO]

3a. If yes, approximately when was the program(s) established? If available, please provide a link to the enabling legislation or the online program guidelines.

[month/ (option of 2020 or 2021)] [provide check box for more than 1 year ago]

[text box for link]

4. Prior to receiving the ERA funds, did your agency already have a utility assistance program in place?

[YES/NO]

4a. If yes, approximately when was it established?

[month/ (option of 2020 or 2021)] [provide check box for more than 1 year ago]

5. Is the jurisdiction of your agency covered by a state or local eviction moratorium (separate from the federal CDC eviction moratorium)?

[YES/ NO]

5a. If yes, please provide a link to the enabling legislation or executive order the jurisdiction used to create the moratorium and its guidelines

Link: [Text]

For questions 5-12, please coordinate with any subrecipients to provide an answer that reflects the assistance extended by such subrecipients.

6. Has your agency begun accepting applications from landlords or tenants in connection with the ERA funds (including pre-applications, lottery reservations or other initial indications of interest in program participation)?

[YES/NO]

6a. If yes, when did your agency begin accepting applications from landlords and tenants?

[Date]

6b. If no, approximately when does your agency anticipate opening applications to landlords and tenants?

[Date]

7. Which of the following best describes your agency's approach to accepting applications for assistance using ERA funding?

[Online only / In-person only / Combination of Online and In-Person Enrollment]

[Other (please explain)]

[Text box]

8. How many applications for assistance has your agency received from landlords and tenants for assistance using the ERA award? Please provide the most recent available data and the effective date for that data. Please enter 0 if your agency has not begun accepting applications.

Number: [Number Box]

Date: [Date]

9. What is the total dollar amount of the ERA award that your agency has allotted, obligated or otherwise legally committed to a program of your agency or agreement(s) with other service provider(s) that will issue payments to tenants, landlords, utility providers, housing stability providers? Please provide the most recent available data and the effective date for that data.

Please use your conventional budget and accounting standards in defining allotted, obligated and committed and draw from your system of record where available. Please enter \$0 where applicable.

Amount: [\$]

Date: [Date]

10. Approximately how many households has your agency assisted using the ERA funds by providing payments to landlords or utility providers or direct financial assistance to households? Please provide the most recent available data and the effective date for that data. Also, please provide the date of the first payment made to an eligible landlord, utility provider or household.

Number: [#]

Date: [Date] Date of first payment: [Date]

11. Has your agency developed and adopted written procedures for the rental or utility assistance program through which ERA funding is being or will be distributed? If available, please provide an online link to the legislative authority and procedures for your ERA-funded program.

[YES/NO]
[text box for link]

12. Is your agency currently utilizing, or planning to utilize, subgrantees to assist in the implementation of your ERA-funded rental or utility assistance program, including another government agency, non-profit or for-profit partner?

[YES/NO]

12a. If yes, please describe how your agency is engaging partners (for example, open application process, sole source, expansion of existing contract or partnership agreement)

[text box]

12b. If yes, please check each of the following ways in which partners will (or already do) assist in the implementation of your agency's ERA-funded rental or utility assistance program:

- Outreach or marketing
- Taking applications
- Reviewing and approving applications
- Providing assistance to populations with specialized needs (for example, people with disabilities or limited English proficiency)
- Other [Text box]

13. Would your agency be interested in participating in peer-to-peer learning in order to connect with other agencies that are implementing ERA programs? Please feel free to communicate other ways in which Treasury could best support your rental assistance program.

[Text box]

Certification

I am an authorized official for the agency (grantee) that has received an award from the U.S. Department of the Treasury under the ERA program.

Authorized Representative Name:

[Text box no signature required]

[E-mail]

[Best Contact Phone Number]

Submit

[Pop up or page refresh – must be prompted with some form of confirmation of submission]

Thank you for your time! Treasury may contact you for additional insights into your responses.