

## ADDENDUM

### EMERGENCY RENTAL ASSISTANCE PROGRAM REPORTING GUIDANCE

#### Revised Q1 and Q2 ERA1 and ERA2 Reporting Requirements for State, Local and Territorial Recipients

- ERA1 and ERA2 State, Local and Tribal (SLT) Recipients are no longer required to meet all reporting requirements detailed in Treasury's [ERA Reporting Guidance v 1.0](#) for the first (Q1) and second (Q2) quarter of 2021 by July 29, 2021, as previously scheduled.
- ERA1 and ERA2 SLT Recipients will be required to submit partial Q2 reports around August 6, 2021. A final submission deadline will be provided in the near future. The Q2 partial report consists of a subset of mandatory data elements that mirror the reports that Recipients already submitted for Treasury's interim reporting cycle through Q1 and monthly submissions with minor updates and two brief narrative questions.
- In addition to the partial Q2 submission, ERA1 and ERA2 SLT Recipients must provide brief monthly reports for the months of July and August 2021, in keeping with previously announced guidance.

#### Quarterly Report Beginning in Q3

- ERA1 and ERA2 SLT Recipients are required to submit full quarterly financial and programmatic reports, consistent with Treasury's [ERA Reporting Guidance v 1.0](#), beginning with the Q3 2021 reporting period. Recipients are required to submit their Q1, Q2 and Q3 reports by October 15, 2021, and future quarterly reports as required in the ERA Reporting Guidance v 1.0.

#### Q1 and Q2 ERA Reporting Requirements for Tribes, Tribally Designated Housing Entities, and the Department of Hawaiian Home Lands

- ERA1 Recipients that are Tribes, Tribally Designated Housing Entities, and the Department of Hawaiian Home Lands will be required to submit Q2 partial reports around August 6, 2021. A final submission deadline will be provided in the near future. In addition, these Recipients are required to provide financial and programmatic reporting as detailed in Treasury's [ERA Reporting Guidance v 1.0](#) beginning with the Q3 2021 reporting period. These Recipients are not required to submit full Q1 and Q2 reports by July 29, 2021 and are not required to submit monthly reports.

Date: July 15, 2021

# Required Data Elements for August 6, 2021

## Program Overview

### Project Overview

#### Instructions

In the following section, you will create project Overviews for each ERA-funded project operated by your organization. The project Overviews contain information like name, website, service area, cumulative and quarterly obligations and expenditures and subrecipients. Each subsequent quarterly report will require you to review and update existing project Overview records as well as create new project Overview records for new ERA-funded projects.

#### FAIN

1234567890  
\* Recipient Project ID  
  
\* Customer Project Name  
  
\* ERA Project Website URL   
  
\* Geographic Service Area

## System for Prioritizing Assistance

### System for Prioritizing Assistance

\* Please provide a brief narrative description (7,000 characters or less) of the Recipient's system for prioritizing assistance to households with incomes less than 50% of area median income and to households with one or more members that have been unemployed for at least 90 days. Please provide the webpage URL where information is posted on the Recipient's website.

## Households Assisted

### ERA Applicants

Please provide the following data elements related to your ERA applications and assistance. For any data fields that do not apply, please enter '0':

\* Number of unique households that completed and submitted an application for ERA assistance:

\* Total number of unique households that received assistance of any kind under the ERA program:

\* Number of unique households that received ERA assistance of any kind for the first time:

### ERA Assistance Provided

Please provide the following data elements related to your provision of ERA assistance. For any data fields that do not apply, please enter '0':

Number of unique households that received ERA assistance by type:

\* a. Rent

\* b. Rental arrears

\* c. Utilities/home energy bills

\* d. Utilities/home energy costs arrears

\* e. Other expenses related to housing

\* f. Housing stability services

## Protecting Vulnerable Communities

Please provide the following data elements related protecting vulnerable communities. For any data fields that do not apply, please enter '0'.

Number of unique households at certain income levels:

\* Less than 30% of the Area Median Income ●

\* Between 30 and 50% of Area Median Income: ●

\* Between 50 and 80% of Area Median Income: ●

\* Total number of households that were deemed categorically eligible to receive ERA assistance based on prior enrollment in other income-based federal benefit programs: ●

\* Total number of recipient households whose income eligibility was determined with a fact-based proxy: ●

\* Total amount of ERA award paid to or for participating households: ●

\* Average Number of Months of Rent or Utility/Home Energy Payments Covered for Each Participant Household: ●

\* Average number of months of assistance provided by ERA utilities/home energy bills payments (excluding arrears): ●

## Total Obligations and Expenditures

### Amounts Paid (Expended) and Amounts Approved (Obligated) for Payment in the Reporting Period

Please provide the following data elements related to your provision of ERA disbursements for housing stability services and administrative expenses. For any data fields that do not apply, please enter '0'.

\* Total Dollar Amount of ERA Award Funds Approved (Obligated) to or for Participant Households ●

\* Total Dollar Amount of ERA funds Paid (Expended) for Administrative Expenses: ●

\* Total Dollar Amount of ERA Award Funds Approved (Obligated) for Administrative Expenses: ●

\* Total Dollar Amount of ERA Award Funds Paid (Expended) for Housing Stability Services: ●

\* Total Dollar Amount of ERA Award Funds Approved (Obligated) for Housing Stability Services: ●

# Certification

## Official Certification

I certify that the information provided is accurate and complete after reasonable inquiry of people, systems, and other information available to the ERA Recipient. The undersigned acknowledges that a materially false, fictitious, fraudulent statement or representation (or concealment or omission of a material fact) in this submission may be the subject of criminal prosecution under the False Statements Accountability Act of 1996, as amended, 18 U.S.C. § 1001, and also may subject me and the ERA Recipient to civil penalties, damages, and administrative remedies for false claims or otherwise (including under 31 U.S.C. §§ 3729 et seq.). The undersigned is an authorized representative of the ERA Recipient with authority to make the above certifications and representations on behalf of the ERA Recipient.

### Name and Title of Certifying Official

Name:  
Test User 1

Telephone:  
111-111-1111

Title:  
CEO

Email:  
✉ test@test.com

Submit Form