



KING COUNTY HOUSING AUTHORITY

HARDSHIP POLICY

The **Hardship Policy** is designed to allow KCHA flexibility to address unique, unforeseeable circumstances that may occur and to protect families in crisis. In order to be considered for a hardship rent, the household must apply for all benefits for which it may be eligible. Zero income households will be required to report income changes on a quarterly basis, until income is restored to the household.

Hardship Criteria.

The following categories for Hardship will apply to all KCHA housing programs participants:

1. **Extraordinary Cost of Living:** A household may apply for a hardship review when they experience an extraordinary cost of living that exceeds 50% of the household's monthly income. Costs of living are limited to gross rent plus monthly out-of-pocket cost for medical and child care expenses. Gross Rent is defined as actual monthly rent paid plus the assigned energy assistance supplement, or minimum rent (if applicable).
2. **Waiver of Minimum Rent / Extension of Energy Assistance Reimbursement beyond six (6) months:** The household would need to demonstrate that: (1) the loss of additional energy assistance would put the household at risk of losing their housing; (2) their continued lack of income has not been through the fault of the household and (3) the household has applied for, but been unsuccessful in connecting to available financial resources for which they might be eligible. NOTE: The household has been denied assistance (TANF, etc.) due to non-compliance with program requirements would not be considered a hardship under this category.
3. **Additional Interim Review:** A WIN Rent household that has previously requested the maximum number of interim reviews to decrease their rent, but experiences an additional unforeseen decrease in income may request a hardship review. To be eligible for relief (1) the family's decrease in income could not have been due to the action or inaction of a member of the household; and (2) if the interim review was not applied, the family's shelter burden would exceed 50% of monthly income. No hardship will be granted if KCHA determines the family could (but is not) accessing an available alternate income source.
4. **Deduction for Medical or Child Care Expenses above the \$10,000 Cap:** A household eligible to receive a reduction from gross income for medical or child care related expenses may request a hardship review to request a reduction of gross income above the \$10,000 cap. In order to be eligible for relief under this criterion, the family must document that (1) the claimed expense is not reimbursable from an outside source; and (2) annualized costs for rent and out-of-pocket medical and/or child care expenses, for which they are eligible, would exceed 50% of gross income. In the case of child care expenses, the amount of child care assistance paid is reasonable in relation to amounts charged for similar care available in close proximity to the household's current child care provider.
5. **Mandatory reductions to fixed income in excess of \$500:** Households who experience a reduction in a "fixed" source of income (GAU, Disability Lifeline, SSI, Social Security and Government or Private Pensions) may be eligible for a reduction in rent when KCHA determines the loss of income was out of the control of the recipient. In such cases, KCHA will: (1) conduct an interim review for reductions to a fixed income source in an amount greater than \$500 per year. (Rather than the standard \$2,000 threshold required under KCHA's Interim Review policy). (2) coordinate with state and/or federal agencies as possible to document the income change, streamline the review process and recalculate rent in order to limit the impact upon the participating household.

Applying for Consideration: To be considered for relief under the Hardship Policy, complete the attached form and submit it to your Sr. Housing Specialist (Section 8) or KCHA Property Management Office (Public Housing). The paper will be forwarded to the Hardship Committee for review. While most decisions are made in less time, the Hardship Committee will make every effort to render and inform you of a decision within thirty (30) calendar days.

Appeals: Families, who disagree with the Hardship review decision, may appeal the determination through the Housing Authority's existing Grievance process.



HARDSHIP REVIEW REQUEST FORM

Head of Household:		
Address:		
Telephone:		Client Number:

I am requesting a hardship review for the following reason (please check appropriate box):

- Extraordinary Cost of Living
(When combined monthly expenses including Rent, KCHA Energy Assistance Supplement and unreimbursed medical and/or child care expenses exceed 50% of income.)
- Waiver of Minimum Rent /Extension of Energy Assistance Reimbursement beyond six (6) months
- Deduction for Medical Expenses above \$10,000 cap
- Deduction for Child Care Expenses above \$10,000 cap
- Additional Interim Review
- Decrease in fixed income source in excess of \$500 (fixed income sources include: GAU, Disability Lifeline, SSI, Social Security and Government or Private Pensions)

Please describe why you need this hardship consideration (use the back of this page if necessary):

Signature: _____ Date: _____

<p>For KCHA Use ONLY, Additional Information:</p> <hr/> <hr/> <p>IMPORTANT INSTRUCTIONS FOR FIELD STAFF: Attach current <u>and</u> prior Rent Calculation Sheet (413PH/808 Section8) forms and submit COMPLETED Hardship Review request form to Hardship Review Committee Chair at Central Office.</p>
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