



TENANT RESOURCE CENTER

FOR HOUSING JUSTICE IN WISCONSIN

REAL LIFE, REAL SOLUTIONS • KEEPING FAMILIES SAFE IN THEIR HOMES • UNLOCKING THE DOORS TO AFFORDABLE HOUSING

Eviction Prevention: Dane County CARES Program LANDLORD INFORMATION AND AGREEMENT FORM

Name of owner/agent: _____

Preferred contact information: _____

Please print clearly the LANDLORD/COMPANY NAME and ADDRESS as it should appear on the check:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

RENTAL AGREEMENT VERIFICATION

I verify that _____
(tenant(s) name(s))
has a written / verbal rental agreement, with rent payments of \$ _____/month (not including
late fees or other fees) due on the _____ of each month, which expires on _____.

RENT PAST DUE and PROGRAM AGREEMENT

I verify that _____
(tenant(s) name(s))
is/are behind in rent for the month(s) of _____ for a total of \$ _____
past due as of today's date.

Owner agrees not to take any action to remove the tenant, including filing of eviction action in court, within 30 days of receipt of this payment.

I have read and agree with the above statements.

Owner's Signature: _____ Date Signed: _____

– OR –

Owner's Agent Signature: _____ Date Signed: _____

W9 INFORMATION

The IRS requires Tenant Resource Center to keep specific information on file for filing a Federal 1099. Please complete and return the attached W9. We will keep this document confidential and it is only for our own tax purposes. If you have any questions regarding the IRS rules, please call them at 1-800-829-1040.