



# Wichita Emergency Rental Assistance Continued Assistance Application

The Continued Assistance Application is for Wichita, KS households who have already received assistance through the WERAP program and are applying for additional assistance. If you have not already applied for and received WERAP assistance, do not continue with this form, please fill out the "Application Form" instead. You may find the Application Form on [wichita.gov/werap](http://wichita.gov/werap).

The WERAP program is for eligible low-income Wichita, KS households financially impacted by COVID-19. Households must be eligible and provide all required documentation in order to receive assistance. This program is for residents of Wichita, Kansas.

## Instructions:

Only fill out this form if you have already applied for and received assistance from WERAP.

Only one form should be submitted for the household. Please fill out this form to the best of your ability. If the form is incomplete when submitted, WERAP will reach out to you to complete the form. You may be asked to provide additional documentation. If you need additional space for household members or income sources please submit the additional information on a separate piece of paper.

Please submit this form only once. Submitting multiple forms per household may delay processing. Filling out this form does not guarantee continued assistance.

## Before you fill out this form, you will need:

- Your application ID# which can be found on the email linking you to this form.
- An email address and phone number where you can be reached.
- An email address and phone number for your landlord or property manager.
- Your signed lease if you have moved or entered into a new lease.
- Documentation of all household income.
- If you are applying for utility or rental arrears, you will need any past due notices.

For any requested documentation, please send files via email to [WERAP@wichita.gov](mailto:WERAP@wichita.gov) and include your name and WERAP Recertification Documents in the subject line (example: John Smith- WERAP Recertification Documents) so that your recertification documents can be forwarded to the specialist assigned your file.

Thank you for your cooperation in the recertification process.

1. Please supply your contact information, even if your information has stayed the same:

<b>Tenant Contact Information</b>	
Name	Original Application ID
Phone Number	Email Address

2. Are you currently residing at the same unit as the first time you applied for WERAP assistance?

*If yes, skip this section and continue to the next section.*

*If no, you must submit a copy of your new lease and complete the following section:*

Monthly Rent	Unit Address
Landlord Name	Landlord Address
Landlord Phone	Landlord Email

3. The Wichita Emergency Rental Assistance Program (WERAP) serves eligible households where one or more household member is eligible for unemployment, experienced a reduction in income, incurred significant costs, or experienced other financial hardship due, directly or indirectly, to the COVID-19 outbreak. Briefly explain how your negative financial impact continues and why you are in need of additional assistance:

4. Since you submitted your initial application, has anyone left your household?

*If yes, who?*

*If no, skip this section and continue to the next section.*

Name	Date of Birth
Name	Date of Birth
Name	Date of Birth

5. Since you submitted your initial application has anyone joined your household?

*If yes, complete the section below.*

*If no, skip this section and continue to the next section.*

<b>New Household Member #1</b>	
	Name
Gender	Date of Birth
Social Security Number	Race <small>(White, Black, American Indian/Alaskan Native, Asian, or Native Hawaiian Pacific Islander)</small>
Ethnicity <small>(hispanic/latino or not hispanic/latino)</small>	Citizenship <small>(Citizen, Eligible Noncitizen or Ineligible Noncitizen)</small>

<b>New Household Member #2</b>	
	Name
Gender	Date of Birth
Social Security Number	Race <small>(White, Black, American Indian/Alaskan Native, Asian, or Native Hawaiian Pacific Islander)</small>
Ethnicity <small>(hispanic/latino or not hispanic/latino)</small>	Citizenship <small>(Citizen, Eligible Noncitizen or Ineligible Noncitizen)</small>

<b>New Household Member #3</b>	
	Name
Gender	Date of Birth
Social Security Number	Race <small>(White, Black, American Indian/Alaskan Native, Asian, or Native Hawaiian Pacific Islander)</small>
Ethnicity <small>(hispanic/latino or not hispanic/latino)</small>	Citizenship <small>(Citizen, Eligible Noncitizen or Ineligible Noncitizen)</small>

<b>New Household Member #4</b>	
	Name
Gender	Date of Birth
Social Security Number	Race <small>(White, Black, American Indian/Alaskan Native, Asian, or Native Hawaiian Pacific Islander)</small>
Ethnicity <small>(hispanic/latino or not hispanic/latino)</small>	Citizenship <small>(Citizen, Eligible Noncitizen or Ineligible Noncitizen)</small>

6. Has your household's monthly income changed since your initial WERAP Application?

Yes

No

*Even if your income has not changed, you must still supply the requested income information below.*

7. What is your household's monthly gross (before tax) income broken down into the categories below?

*Please complete the sections that apply to your household.*

<b>Wages</b>	
	Household Member
Employer	Monthly Gross Wages
Please submit the most recent four weeks of check stubs showing your income.	

<b>Additional Household Wages (if applicable)</b>	
	Household Member
Employer	Monthly Gross Wages
Please submit the most recent four weeks of check stubs showing your income.	

<b>Social Security/SSI</b>	
	Household Member
	Please submit your most recent benefit statements from Social Security/SSI.
Monthly Gross Amount	

<b>Retirement Benefits</b>	
	Household Member
	Please submit your most recent benefits statement from retirement benefits administrator.
Monthly Gross Amount	

<b>Disability Benefits</b>	
	Household Member
	Please submit your most recent benefits statement from your disability benefits administrator.
Monthly Gross Amount	

<b>Unemployment</b>	
	Household Member
	Please submit the last four weeks of unemployment claims.
Monthly Gross Amount	

<b>Additional Unemployment (if applicable)</b>	Household Member
	Please submit the last four weeks of unemployment claims.
Monthly Gross Amount	

<b>TANF (Cash Assistance)</b>	Household Member(s)
	Please submit your most recent DCF benefit statement or a printout from the DCF website.
Monthly Gross Amount	

<b>Other Public Assistance</b>	Household Member(s)
Source	Monthly Gross Amount
Please submit verification of assistance from the income source, such as a signed statement or receipts for payment/goods.	

<b>Child/Family Support</b>	Household Member(s)
Source	Monthly Gross Amount
Please submit payment verification such as the most recent Kansas Payment Center (KPC) printout or a signed statement or receipts for goods or services paid on your behalf from a third party.	

<b>Total Household Monthly Income from all above sources:</b>	
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8. Please submit rent and/or utility statements.

For any requested documentation, please send files via email to [WERAP@wichita.gov](mailto:WERAP@wichita.gov) and include your name in the subject line and WERAP Recertification Documents (example: John Smith- WERAP Recertification Documents) so that your recertification can be forwarded to the specialist assigned your file.

9. Certification

I certify that the answers and information provided are true, accurate, complete, and correct. I understand that false answers and information that is inaccurate, incomplete, and/or incorrect constitutes fraud and will result in denial of participation in the Wichita Emergency Rental Assistance Program. I also understand that under Title 18, Section 1001 of the U.S. Code knowingly and willingly making false or fraudulent statements in order to receive a monetary benefit is a felony.

Signature	Date
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