



LANDLORD VERIFICATION FORM
MARICOPA COUNTY HUMAN SERVICES DEPARTMENT

Instructions: Parts 1-4 must be completed by the landlord or property manager. This form must be submitted with completed IRS W-9 Form. A landlord may register as a county vendor in lieu of a completed W-9 Form (Step III).

Please note that if the tenant is approved, Maricopa County Human Services Department will issue payment within **10 business days** from the date of approval.

PART I: TENANT INFORMATION						
TENANT NAME (FIRST LAST)						
RESIDENTIAL ADDRESS						
THE MONTHLY PAYMENT OF		\$	IS DUE ON		OF EVERY MONTH.	
THE TOTAL AMOUNT OF RENTAL AND APPLICABLE FEES OWED BY THE TENANT IS						\$
Includes: Past due rent, current month of rent, late fees, court fees, and related costs						
MONTHS PAST DUE Please check all that apply.						
<input type="checkbox"/> Apr '20	<input type="checkbox"/> July '20	<input type="checkbox"/> Oct '20	<input type="checkbox"/> Jan '21	<input type="checkbox"/> Apr '21	<input type="checkbox"/> July '21	<input type="checkbox"/> Oct '21
<input type="checkbox"/> May '20	<input type="checkbox"/> Aug '20	<input type="checkbox"/> Nov '20	<input type="checkbox"/> Feb '21	<input type="checkbox"/> May '21	<input type="checkbox"/> Aug '21	<input type="checkbox"/> Nov '21
<input type="checkbox"/> June '20	<input type="checkbox"/> Sept '20	<input type="checkbox"/> Dec '20	<input type="checkbox"/> Mar '21	<input type="checkbox"/> June '21	<input type="checkbox"/> Sept '21	<input type="checkbox"/> Dec '21
PART II: LANDLORD OR PROPERTY MANAGER INFORMATION						
INDIVIDUAL/SOLE PROPRIETOR NAME (FIRST LAST)						
BUSINESS NAME				DBA		
NAME ON PAYMENT <input type="checkbox"/> Individual/Sole Proprietor Name <input type="checkbox"/> Business Name <input type="checkbox"/> DBA						
PAYMENT REMITTANCE ADDRESS						
PHONE NUMBER				EMAIL ADDRESS		
PART III: COUNTY VENDOR REGISTRATION						
<u>Landlords must register as a Maricopa County vendor or submit a completed IRS W-9 Form. If this has been provided to the same tenant previously, it is not required. For first-time tenants, please complete one of the following options.</u>						
OPTION 1 Register as a Maricopa County vendor at: https://azdom-vss-ext.hostams.com/PRDVSS2X1/Advantage4						
ENTER YOUR VENDOR CODE V						
OPTION 2 Print out and complete the W-9 Form by visiting https://www.irs.gov/pub/irs-pdf/fw9.pdf . The W-9 Form must be completed according to IRS instructions, and then attached to this document.						
<input type="checkbox"/> By checking this box , I am verifying that the completed W-9 Form has been attached.						
PART IV: LANDLORD OR PROPERTY MANAGER SIGNATURE						
<input type="checkbox"/> By checking this box, I certify that upon receipt of rental payment, any judgement for eviction shall be vacated, all eviction actions shall be dismissed, and the Tenant will not be evicted for the months in which rent is paid by this program. This could include rental payments for three months into the future. (Mandatory)						
<input type="checkbox"/> By checking this box, I certify that payments received shall be applied to rent and/or applicable fees for the Tenant indicated above. (Mandatory)						
_____				_____		
Printed Name of Landlord or Property Manager				Phone Number/ Email Address		
_____				_____		
Landlord or Property Manager Signature				Date		