



30 Elizabeth Street, Derby, CT 06418  
Telephone (203) 736-5420 Fax (203) 736-5425

**EVICTION & FORECLOSURE PREVENTION PROGRAM (EPP) APPLICATION**

***Please complete the following information and return to EFPP at the address below. Applicants who qualify based on their completed -application must participate in two appointments: an intake appointment to verify eligibility and a mediation appointment with their landlord. Applicants who are denied assistance may request a desk review in writing within 15 days of notification of denial.***

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_ Referred by: \_\_\_\_\_

How long have you lived at this address \_\_\_\_\_ Family Size: Adults \_\_\_\_\_ Children \_\_\_\_\_

Total Monthly Income, from all sources, before taxes: \$ \_\_\_\_\_

Current sources of income (circle all that apply):      Employment    Unemployment    Worker's Comp    Child Support  
Pension    AFDC    SAGA    SSI    SSD  
Other \_\_\_\_\_

Have you received Temporary Financial Assistance (TFA) in the last six months? Yes: \_\_\_\_\_ No \_\_\_\_\_

Name of landlord or Mortgage Company: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Monthly Rent/Mortgage Payment: \$ \_\_\_\_\_

If subsidized housing, circle one:      Housing Authority      Section 8      RAP      Other

Are you going to be able to pay your current rent on or before the 10<sup>th</sup> of the month?      Yes \_\_\_\_      No \_\_\_\_

Do you have a Notice to Quit or a letter from your mortgage company?      Yes \_\_\_\_      No \_\_\_\_

Have you used the Eviction Prevention Program in the past?      Yes \_\_\_\_      No \_\_\_\_      If yes, when? \_\_\_\_\_

Please explain why you fell behind in your rent or mortgage payments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_