ORANGE COUNTY HOUSING AUTHORITY



Landlord Signing Bonus and Tenant Move-in Assistance Program

The Orange County Housing Authority (OCHA) recently received limited funding through the County of Orange for a landlord incentive program. The incentives provided under this limited program include a landlord unit signing bonus structure for new and existing landlords, security deposit assistance for OCHA participants*, and refrigerator costs reimbursement for OCHA participants.

NEW OWNER SIGNING BONUS:

When a new owner agrees to rent a previously unassisted unit to an OCHA program participant, the property owner will be eligible to a bonus of \$1,000. The new owner must agree to a 12-month lease period and to receive payment by Direct Deposit.

EXISTING OWNER SIGNING BONUS:

When an existing landlord agrees to rent a previously assisted unit to an OCHA program participant, the property owner may be eligible to a bonus of \$500. The existing owner must agree to a 12-month lease period and, if the previous occupant was an OCHA participant, they must have occupied the unit for a period of no less than one year.

Bonus Payment(s) to be processed once the signed 12-month lease has been received and Housing Assistance Payment contract has been executed.

SECURITY DEPOSIT ASSISTANCE:

An OCHA program participant may request security deposit assistance. Security deposit assistance payments may not exceed the amount of two month's rent. Upon an OCHA program participant's moveout from an assisted unit, any remaining security deposit will be returned to the OCHA program participant.

California security deposits are governed by California Code of Civil Procedure. If at any time a conflict occurs between OCHA's security deposit assistance program processes and the governing California Code of Civil Procedure, the most restrictive of the two shall prevail.

ONE TIME REFRIGERATOR ASSISTANCE:

OCHA program participants that do not have access to purchase their own refrigerator and the identified unit does not come equipped with an owner provided refrigerator, may request Refrigerator Assistance. Upon request, OCHA may reimburse an OCHA participant who purchased a refrigerator to meet HQS requirements. OCHA program participants may receive assistance one time only unless otherwise approved by OCHA.

If you are interested in participating in any of these programs, please complete the appropriate form and email your request to LLincentive@occr.ocgov.com. If you have additional questions, please contact us (714) 480-2962.

*OCHA program participant is defined as selected from the Orange County waiting list or referred by the Orange County Coordinated Entry System. Portability and Mobility participants are excluded.



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OC HOUSING AUTHORITY

1501 ST. ANDREW PLACE, FIRST FLOOR
SANTA ANA, CA 92705
PHONE: 714.480.2700
FAX: 714.480.2945

CCCommunity Resources

Owner Incentive/Security Deposit Payment Letter to Owner

Date:	
This letter is to confirm that the Orange C make the following payment(s) to the prop	
□owner incentive in the amount of \$	
□ security deposit in the amount of \$	
These payments are in reference to the effective date of: for the renta	_
Street and unit #	
City, Zip code	
Owner Incentive/Security Deposit check pa	ayment will be made payable to:
Full Payee Name	
Street	
City, State, Zip Code	
The owner incentive/security deposit is Landlord Incentive Program. The securi section 1950.5, specifically the subsection the tenant's termination of tenancy and ma	ity deposit is governed by Civil Code s regarding refunds of the deposit upon
Any remaining security deposit funds paid be refunded to tenant upon the end of the ten	
Payment of owner incentive/security depose up to ten (10) business days to process. If p please contact the Housing Specialist listed	payment is not received within this time,
Housing Specialist Signature	Phone Number



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OC PUBLIC LIBRARIES

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TENANT REQUEST FORM FOR REFRIGERATOR REIMBURSEMENT

Date:
Tenant Name: ID#
Contact Address:
City:, CA Zip:
Telephone#: (Alt#: (
I am requesting the reimbursement for the purchase of a refrigerator in the
amount of \$ for the unit located at:
due to a financial hardship and that I was unable to secure any assistance from existing community programs.
I certify that I did not have access to a refrigerator, that one was not provided by the property and equipped in the above unit, and that I have purchased a refrigerator appropriate for my family size.
I understand that I may receive this assistance one-time only and approval for this request is subject to funding availability.
Tenant Signature
Tenant Signature

OC HOUSING AUTHORITY

1501 ST. ANDREW PLACE, FIRST FLOOR SANTA ANA, CA 92705 PHONE: 714.480.2700 FAX: 714.480.2812

For official use only				
OCHA Staff name:		Pass HQS: Yes No		
		Request Approved?		
Supervisor signature:		☐ Yes ☐ No		
Section Chief/		Request Approved?		
Manager signature:		Yes No		



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TENANT REQUEST FORM FOR SECURITY DEPOSIT ASSISTANCE

Date:	-			
Tenant Name:		ID#		
Contact Address:				
City:	, CA Zip:			
Telephone#: ()	Alt#: ()			
I am requesting financial a	ssistance \$	to pay the security		
deposit for the unit located a				
		due to a financial		
hardship and I am not able to secure any assistance from the existing				
community programs. I understand that I am responsible for ensuring I follow				
the lease agreement and	maintain the unit ac	cording to housing quality		
standards to receive a refund	d of the security deposit	t. Any refund of the security		
deposit should be used toward the leasing of a new unit, should I choose to				
move from the unit.				
I understand that funding is	limited and annuoval	of this was upon in subject to		
I understand that funding is	ililileu, and approvai	of this request is subject to		
funding availability.				
Tenant Signature				
Please submit this form with the Request for Tenancy Approval (RTA)				
form.				
For official use only				
OCHA Staff name:		Pass HQS: ☐ Yes ☐ No		
		Request Approved?		
Supervisor signature:		☐ Yes ☐ No		

Request Approved?

☐ Yes ☐ No

OC HOUSING AUTHORITY

1501 ST. ANDREW PLACE, FIRST FLOOR SANTA ANA, CA 92705 PHONE: 714.480.2700 FAX: 714.480.2812

Section Chief/

Manager signature: