



# Resident Application for DC Water Cares: Multifamily Assistance Program

Use this form to apply for rent relief if your multifamily building participates in DC Water’s Multifamily Assistance Program (MAP).

## Background

The DC Water Cares: Multifamily Assistance Program (MAP) permits the owner or Owner’s Association of a multifamily building to enter an agreement with DC Water for rent relief up to \$2,000 per eligible occupied unit. The multifamily owner or Owner’s Association may only participate in the MAP if a tenant is income-eligible (below 80% AMI). **If the multifamily owner agrees to the terms and conditions of the MAP**, the owner or Owner’s Association will apply 80% (up to \$1,600) of the credits to the eligible occupant’s rental or Association account.

## Step 1. Determine if your household is eligible for relief.

To qualify:

1. You must be the leaseholder or owner of record for the unit and reside in a multifamily building where the owner or Owner’s Association of that building is responsible for directly paying your unit’s DC Water bill.
2. Your total household income must be below 80% Area Median Income. See the table below for FY 2023.

Household Size	1	2	3	4	5	6	7+
Income Maximum	\$79,700	\$91,100	\$102,500	\$113,850	\$125,250	\$136,650	\$148,050*

## Step 2: Tell us about your household

Applicant First Name:		Applicant Last Name:					
Email:		Phone:					
Property Address:				Unit #:	Washington, DC	ZIP:	
Do you receive any of the following? Check all that apply.		<input type="checkbox"/> TANF	<input type="checkbox"/> SNAP	<input type="checkbox"/> LIHEAP	<input type="checkbox"/> UDP		
Do you live in an affordable housing unit or subsidized housing?		<input type="checkbox"/> Yes		<input type="checkbox"/> No			
Primary Household Language:		<input type="checkbox"/> English	<input type="checkbox"/> Amharic	<input type="checkbox"/> Chinese	<input type="checkbox"/> French		
		<input type="checkbox"/> Spanish	<input type="checkbox"/> Vietnamese	<input type="checkbox"/> Korean	<input type="checkbox"/> Other: _____		
HOUSEHOLD MEMBER NAME				ANNUAL INCOME			
				\$			
				\$			
				\$			
				\$			
				\$			
				\$			
				\$			
Total Number of Household Members:				Household Total Annual Income		\$	

### Step 3: Agree to terms.

I hereby:

- Affirm that all information in this application is true and complete to the best of my knowledge.
- Affirm that the applicant is the lessee or owner who resides at the application address.
- Understand that I can be penalized by fine and/or imprisonment for making false statements.
- Understand that my signature on this application grants DOEE permission to contact any parties necessary to verify the information that I have provided.
- Grant DC Water permission to inform the owner of my multifamily building or HOA of my MAP eligibility.
- Grant DC Water permission to provide information in my file to other District agencies and organizations from whom I may seek assistance and for purposes of verification, research, evaluation, and analysis.
- Grant DOEE permission to provide me with information about other programs for which I may also be eligible.

Signature: \_\_\_\_\_

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

### Step 5: Submit your application.

**Send this application along with copies of the following documents:**

- Applicant's photo identification (Driver's license, passport, government issued photo identification);
- Proof of household income for each of the income earning household members listed in the application, such as a recent paystub, Social Security benefit letter, or unemployment.

#### Submission Options

##### **Online**

DC Water Cares: MAP Application

##### **By Mail**

DOEE, Attn: Affordability & Efficiency Division  
Multifamily Assistance Program  
1200 First Street, N.E., 5<sup>th</sup> Floor, Washington, DC 20002

### Step 6: DOEE reviews your application

DOEE will review your application within 10 business days of receiving the application.

**If eligible:** You will receive a written communication from DC Water with the details of your approval.

**If ineligible:** You will receive a communication from DOEE.

### Frequently Asked Questions

**Who can I contact if I have additional questions about the program or eligibility requirements?**

Please call 202-354-3750 or email [cares@dcwater.com](mailto:cares@dcwater.com)

**How often can I receive assistance?**

District residents may apply for assistance once per fiscal year and this program will terminate on September 30, 2023 or before if insufficient funds are available. The MAP program may be extended after October 1, 2023 if authorized by the DC Water Board.

