



## RISK MITIGATION FUND APPLICATION

---

The Risk Mitigation fund is a flexible fund that may provide financial assistance to mitigate various types of perceived risks incurred by landlords participating in subsidy programs. Risk Mitigation funds may reimburse eligible landlords when, by no fault of the landlord, there is a financial loss associated with a tenancy (e.g., excessive damages to a unit, tenant abandons the unit, or other situations considered on a case-by-case basis).

For funding to cover repairs for damages, assistance should only be requested when repair costs are more than the security deposit and cannot be related to general maintenance items. OCHCD reserves the right to require a landlord file for insurance for damages before an application is considered, have in-house Rehabilitation Specialists document the damage, provide specifications for completion of repairs, and inspect the completed work before funds are disbursed. Should the landlord also seek relief for damages through the judicial system and recoup any monies, OCHCD should be reimbursed for the monies paid by the Fund.

---

**APPLICANT NAME:** [Click here to enter text.](#)

**DATE:** [Click here to enter text.](#)

**ADDRESS OF HOUSING UNIT:** [Click here to enter text.](#)

**NAME OF TENANT:** [Click here to enter text.](#)

### **PARTICIPATING VOUCHER PROGRAM:**

- |   |  |
|---|--|
| <input type="checkbox"/> Housing Choice Voucher (HCV)                               | <input type="checkbox"/> Permanent Supportive Housing (PSHV)                               |
| <input type="checkbox"/> Supportive Services for Veterans and their Families (SSVF) | <input type="checkbox"/> HUD-VA Supportive Housing (HUD-VASH)                              |
| <input type="checkbox"/> Housing Opportunities for Persons with AIDS (HOPWA)        | <input type="checkbox"/> Key Rental Assistance (Key)                                       |
| <input type="checkbox"/> Transition to Community Living Voucher (TLCV)              | <input type="checkbox"/> Any Rapid Re-Housing (RRH) program                                |
|   | <input type="checkbox"/> Other (please specify): <a href="#">Click here to enter text.</a> |

**DESCRIPTION OF DAMAGE:** [Click here to enter text.](#)

**AMOUNT REQUESTED FOR DAMAGE:** [Click or tap here to enter text.](#)

### **REQUIRED ATTACHMENTS:**

- Documentation of damage
- Copy of the insurance claim/filing
- Copy of the lease or other documentation from the property manager showing security deposit
- Documentation of estimate for repair

Mailing Address  
P.O. Box 8181  
Hillsborough, NC 27278

Hillsborough Office  
300 W. Tryon Street  
Hillsborough, NC 27278

Chapel Hill Office  
2501 Homestead Road  
Chapel Hill, NC 27516

## Terms and Conditions

This Agreement details the rights and responsibilities of the undersigned Applicant under the Orange County Department of Housing and Community Development's Risk Mitigation Program. If approved, OCHCD may reimburse the Applicant for eligible financial losses associated with a tenancy, contingent upon the availability of program funds. By signing this document, the undersigned acknowledges reimbursement is contingent upon approval of the attached Application, and the amount reimbursed shall be based on the incident described in the attached Application and availability of program funds.

By signing this document, the undersigned attests the information and documentation provided in their application for Risk Mitigation funds is true and accurate. The undersigned further attests that they are the owner, property manager, or broker of the property located at the Address of the Housing Unit described in the Application, or person otherwise with legal standing duly and lawfully authorized to bind the owner, property manager, or broker of the property to the terms of this Agreement.

The undersigned further acknowledges they have received and reviewed the OCHCD Risk Mitigation Fund Policy. They further acknowledge and agree that in the event they receive Risk Mitigation funds, they shall continue to rent the unit in question (or another comparable unit, with approval from OCHCD) to a program participant for the period of time shown on the table below, based on the amount of funds received as shown below:

Amount Awarded	Commitment Period to Lease to Program Participant
More than \$2,000	1 year
More than \$5,000	2 Years

The time commitment shall be calculated from the date the Risk Mitigation payment is made. The Applicant shall comply with OCHCD verification that the assisted unit is leased to an eligible subsidized tenant.

I agree to accept Risk Mitigation funds from Orange County's Housing and Community Development Department in accordance with the Terms and Conditions herein.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

Notes:

Revised Oct 2021