



Appeal Request - RentHelpMN
(Emergency Rental Assistance Program)

APPLICANT INFORMATION

Applicant Name (full name): _____

Birth Date of Applicant: _____

Address of Rental Property (No., Street): _____

City: _____ State: _____ ZIP Code: _____

Telephone Number: _____ Email: _____

Which denial notice are you appealing? Date of letter: _____

Application ID: _____ Application Date: _____

Tell us the reason for your appeal:

- I was denied because I was over income, but I am income eligible
- I was denied because my past debt could not be verified. I have included information to verify the debt.
- I was denied because it could not be verified that I was a renter, but I am renting from a property owner.
- I was denied because my financial hardship could not be established, but I did experience financial hardship due to the COVID-19 outbreak.
- I was denied because it could not be verified that I was at risk of homelessness or housing instability, but I am at risk of homelessness or housing instability.
- Part of my request was denied, or the amount of my request was reduced incorrectly.
- I was denied because my application was determined to be potentially fraudulent.
- Other (please explain):



Targeted Assistance

If there is any documentation you would like considered when your appeal is reviewed, please include the documents with your appeal. You will not have a later chance to provide documentation.

- I have not included additional information
- I have included additional information/documentation: (please list documents provided)

Signature of Appellant: _____ Date: _____

Mail or fax your appeal to the RentHelpMN Program Team at:

RentHelpMN Document Services Center
 3745 Louisiana Ave. S.
 St. Louis Park, MN 55426

Fax: 952-285-2318