



Client's Name: _____ Case #: _____ Date: _____

Your continuing eligibility to CAAP benefits is subject to your compliance with the program requirements. Failure to comply and/or follow the instructions in **Section I** will result in case discontinuance, unless you have a verifiable Good Cause. To establish Good Cause, you must contact your **Worker U** _____ at _____ or call **CAAP Service Center** at **1-415-558-2227** within (3) work days from the date of the Discontinuance notice to claim Good Cause and present Good Cause verification. Good Cause is explained on Form 2133B, CAAP Rights and Responsibilities.

SECTION I: CONTINUE CAAP ELIGIBILITY INSTRUCTIONS

To continue your CAAP Eligibility, **the form/verification document listed below must be received by:**
_____.

To establish continue eligibility for CAAP, you must send the following items completed:
Please submit the following documents:

Other : _____

You must **also** comply with the following checked requirements:

Your continuing eligibility to CAAP benefits is subject to your compliance to pursue other income, as indicated below. Proof of application for the income specified must be received by: _____.

SSI/SSP Social Security Retirement Benefits UIB DIB Other _____

The verifications above may be submitted in one of the following ways:

- E-mailing it to _____; or
- Faxing it at (415) 558-4104; or
- Mailing it to the Human Services Agency, Attn: CAAP, P.O. Box 7988, San Francisco, CA 94120
- Dropping it off to the CAAP Drop Box at 1235 Mission St.

FAILURE TO COMPLY WITH ANY OF THE ITEMS ABOVE, WILL RESULT IN THE DISCONTINUANCE OF CAAP BENEFITS.

Worker Name: _____ Wkr. #: **U** _____ Phone #: _____

ACCEPTABLE VERIFICATION OF HOUSING/RESIDENCY IN SAN FRANCISCO

To meet CAAP eligibility, you must be able to establish continuous residency in San Francisco. Once you have met CAAP's residency requirements and you're housed, you must also verify your current housing status (refer to Section I). If you are homeless, you must verify continued presence in San Francisco (refer to Section II).

Section I: Housing Status Requirements

- You must verify that you are **currently** living in the address you provided. Your documentation must be current (within 60 days) that shows your name and your address.
- Acceptable documentations will be one of the following and must be dated within 60 days:
 - utility bills (excluding cell phone bills),
 - telephone online directory listing that shows your name and your address,
 - hotel or property manager's statement on their letterhead,
 - hotel rent receipt with the hotel official stamp,
 - lease agreement (if over 60 days, your landlord must confirm by telephone that you are still living in the address you provided),
 - eviction notice.
- You must also provide an acceptable documentation that shows your landlord or roommate's name and phone number and your address if you are providing a statement from them.
- Other documentations that will verify your housing status will be considered acceptable only upon approval by the Unit Supervisor.

-AND-

- You must also verify whether or not you pay **rent**:
 - If you are paying rent, you must provide a completed Rental Statement (Form 2143) or documentation that shows your name, the monthly amount that you pay, the date when the rent was last paid.
 - If you do not pay rent, you must provide a completed Provider Statement (Form 5033) or a statement that contains all the information required in Provider Statement.

Section II: Homeless Residency Requirements

- You must **verify** your continuous San Francisco residency within the last 30 days, or for the specific period indicated by your CAAP worker that shows **dates of contact** for at least 1 out of every 7 calendar days, by providing:

A. ONE OF THE FOLLOWING:

1. **Written verification** from a community agency or a shelter not participating in RTZ (shelter reservation system), indicating that you are currently receiving services in San Francisco. The verification must be written on letterhead paper, or on a form supplied by DHS; a computer print-out is also acceptable. Such verification must include the name and telephone number of the agency or shelter, and must show **dates of contact** as specified above.
Exception: If you are sleeping in a shelter participating in RTZ for the specified dates of contact above, your CAAP worker may verify your residency for you through RTZ. No written verification is necessary. Ask your CAAP worker.

OR

2. Written verifications with **dates of contact** as specified above from **TWO** San Francisco **merchants or representatives of City or community agencies**, confirming your continued presence in San Francisco. The verification must have the merchants' or representatives' names, store's address and telephone numbers.

OR

3. **EBT Transaction History** (available from your worker) print-out that shows transactions **made in San Francisco** during the **last 30 days**, or within the specific period indicated by your CAAP worker.

OR

B. TWO DOCUMENTS FROM THE FOLLOWING LIST (LIMIT OF ONLY ONE DOCUMENT PER ITEM):

1. **Written statement** from someone who has occasionally **provided** you with **shelter**. The statement should include the provider's name(s), address(es), phone number(s), date(s) of stay and how much rent, if any, was paid, and it must also show **dates of contact** as specified above;
2. **Item of mail** with a **postmark**, addressed to your name, that was **delivered** by the Post Office to a San Francisco address (not a P.O. box) during the **last 30 days**, or within the specific period indicated by your CAAP worker.
3. On an **exception basis only**, a verbal or written statement from a person who is a verified San Francisco resident (requires Section Manager approval).

(8/1/2022)

Failure to comply with the above requirements will result in the denial or discontinuance of CAAP benefits.