



A Tradition of Stewardship
A Commitment to Service

County Executive Office

1195 Third St.
Suite 310
Napa, CA 94559
www.countyofnapa.org

Main: (707) 253-4421
Fax: (707) 253-4176

Minh C. Tran
County Executive Officer

VERIFICATION OF TENANCY

This Section Completed by Agency:

(Applicant's Name[s]) _____ has applied for rental assistance through (Name of Agency/program helping the client) **Napa County – CESH Program.**

If approved for rental assistance, a check will be issued directly to the landlord/property manager.

THIS SECTION TO BE COMPLETED BY THE LANDLORD/PROPERTY MANAGER:

Please provide the following information:

Tenant Address: _____

Monthly Rent: _____

If moving-in: Deposit amount needed: _____

Amount already received from applicant: _____

Total amount needed to move in: _____

For Delinquent Rent: Rent due for what Month(s)?: _____

Past due amount: _____ Late Fee: _____

Total due: _____

Is eviction from property in process? Yes No

Check Payable to (landlord/property manager):

Name: _____

Address: _____

City: _____ Zip: _____

Federal Tax ID # or Social Security # (**REQUIRED FOR PAYMENT**): _____

Phone #: _____

Comments: _____

Signature of Landlord/Property Manager

Date

This Section Completed by Agency:

Return completed form by sending via email to CESH; email address CESH@countyofnapa.org; OR fax **707-253-4176**.

** If landlord/property manager is not in our vendor list, landlord/property manager will be required to fill out a W-9 form.