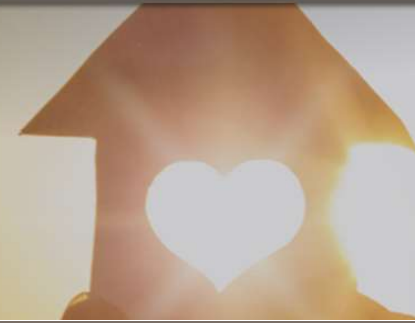


North Dakota Housing Stabilization Program

[View Required Documents](#)



NORTH DAKOTA DEPARTMENT OF HEALTH & HUMAN SERVICES

ND Housing Stabilization Program

Applicant Front End User Guide

September 8, 2023

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SUBMIT A HOUSED APPLICATION

HOUSING STABILITY HOUSED APPLICATION OVERVIEW

The following are Eligibility requirements to submit a Housed Application for the ND Housing Stabilization Program:

1. Homeless application is approved
2. The Applicant has met with the Housing Stability coach or has a Housing Facilitator and has completed Letter of Commitment (LOC) and Pre-lease trainings
3. The Housing Stability Coach acknowledges completion of appointment with the applicant
4. The Applicant acknowledges completion of appointment with the Housing Stability coach
5. A Letter of Commitment (LOC) has been issued by the STATE
6. The Applicant has found an apartment/home, and the lease agreement meets the requirements outlined in the LOC
7. The monthly rent amount falls within the limits of the approved LOC
8. The Applicant has the Housing Provider's Information

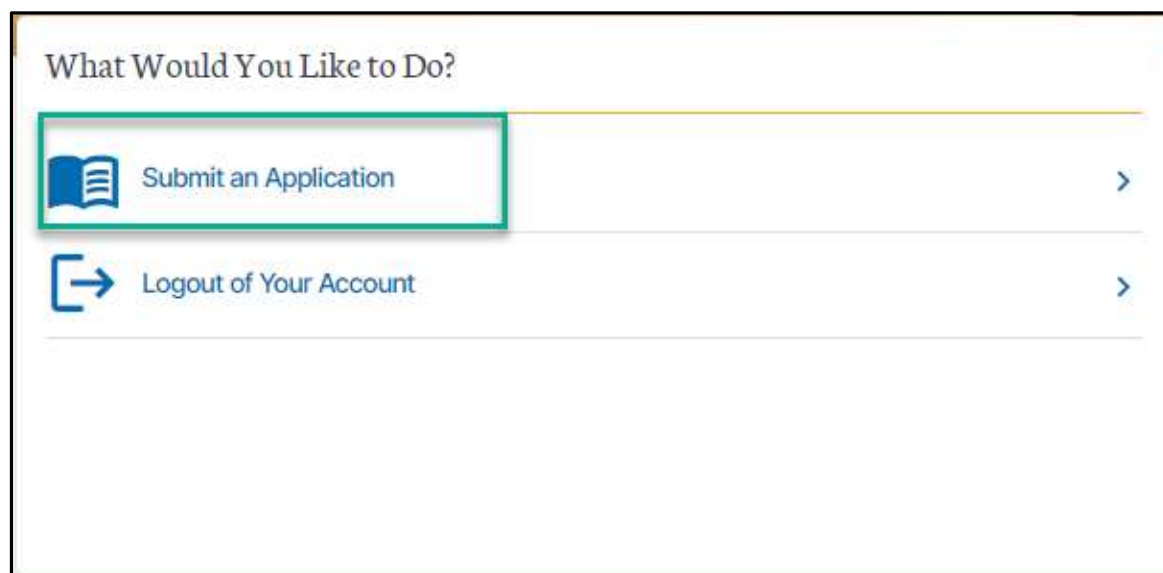
ENTER APPLICATION PORTAL

ND Housing Stabilization Program Portal URL:

https://ndhousingstability.servicenowservices.com/nd_housing_stability

Step 1: Enter the Application Portal.

- After logging in, you will be redirected to the home page.
- Click the **'Submit an Application'** button.



REQUIRED DOCUMENTS - HOUSED APPLICATIONS

Click the **View Required Documents** button to view the documents to have when you apply for the ND Housing Stabilization Program.

Below are documents required for housed applications:

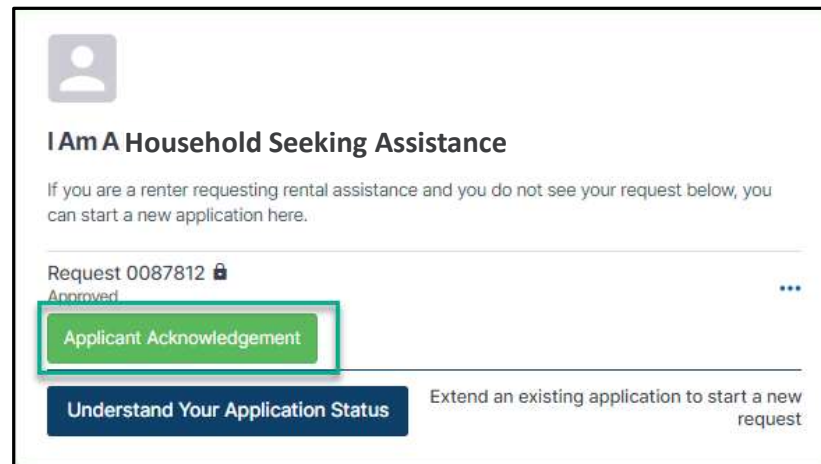
1. Government-issued photo ID
2. Signed Lease agreement
3. Documentation (Ledger) showing how much you owe your housing provider for rent, fees such as renter's insurance, garage, service fee, pet, fee, etc.



ACKNOWLEDGE LETTER OF COMMITMENT (LOC) AND PRE-LEASE TRAININGS

Step 2a: Acknowledge Letter of Commitment (LOC) and Pre-lease trainings

After the completion of the Letter of Commitment (LOC) and Pre-lease trainings, navigate to the Renter Dashboard, click the **Applicant Acknowledgement** button.



ACKNOWLEDGE LETTER OF COMMITMENT (LOC) AND PRE-LEASE TRAININGS

Step 2b: Acknowledge Letter of Commitment (LOC) and Pre-lease trainings

In the window that opens, click the **Agree** button in response to the question **I acknowledge that I have met with my housing stability coach.**



Applicant Acknowledgement

I acknowledge that I have met with my housing stability coach.

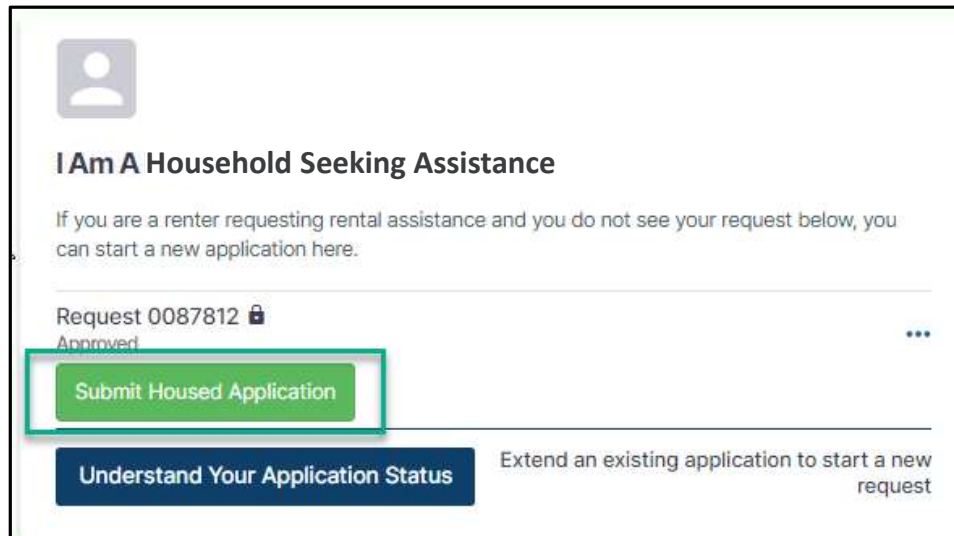
Agree Close

Upon the completion of the acknowledgement, the Housing Stability Coach will issue a LOC

SUBMIT A HOUSED APPLICATION

Step 1: Submit a Housed Application

After the LOC has been issued by the Housing Stability Coach and you have found housing with a signed lease agreement, navigate to the renter dashboard. Click the **Submit Housed** button to begin the application process.



SUBMIT A HOUSED APPLICATION

Step 2: Submit a Housed Application

In the window that opens

- Select **Yes** in response to the question **Have you found a rental apartment/home?**
- Select **Yes** in response to the question **Does this lease agreement meet the requirements of participation in Housing Stability services as outlined within your Letter of Commitment and explained by your Housing Stability Coach?**
- Select **Yes** in response to the question **Does the monthly rent amount fall within the limits of the approved Letter of Commitment?**
- Select **Yes** in response to the question **Do you have your Housing Provider's information (Name, Telephone number and email address)?**
- Click the **Submit** button

★ Housed Application Questionnaire

Have you found a rental apartment/home? *

Yes

Does this lease agreement meet the requirements of participation in Housing Stability services as outlined within your Letter of Commitment and explained by your Housing Stability Coach? *

-Select-

Does the monthly rent amount fall within the limits of the approved Letter of Commitment? *

-Select-

Do you have your Housing Provider's information (Name, Telephone number and email address)? *

-Select-

Submit Close

NOTE: To complete the housed application, you must have a signed lease agreement and your Housing Provider's Information

COMPLETE APPLICANT INFORMATION

Step 3: Provide the **physical address of the rental property/unit** for which assistance is being requested.

- Provide the **address** of the property. **Step 3** →
- Provide the **city** the property is in.
- Provide the **state** the property is in.
- Provide the **zip code** of the property.
- Press **Validate Address**.

Step 4: Review address information in the Confirm Address pop-up and press **Accept Formatted Address**.

Note: The "County" field will auto-fill based on the zip-code identified by the validated address. Only property addresses within North Dakota will be considered as eligible for program assistance.

COMPLETE APPLICANT INFORMATION

Step 5:

- Select the number of bedrooms from the drop-down list in response to the question **How many bedrooms does the rental unit have?**
- Select **Yes** or **No** in response to the question **Is your mailing address the same as your residence address?**
 - If **Yes** is selected, enter your mailing address information.
 - If **No** is selected, proceed to the next question

How many bedrooms does the rental unit have? *

-Select- ▼

Is your mailing address the same as your residence address? *

Yes No

COMPLETE APPLICANT INFORMATION



Step 6: Review and confirm if the total number of household members has increased, decreased or stayed the same since the last application.

- If there is a change in the total number of household members, select the updated number from the drop-down list in response **Please confirm the number of people in your household.**
 - If there is an increase, click the **Add Household Member** button to complete household member information for each additional individual living in your household.
 - If there is a decrease, click the Edit icon to delete the household member information
 - If there is no change, proceed to the next question

Please confirm the number of people in your household. *

1

Name:	Head of Household	Relationship:	Date of Birth:	Sex:	Last years income	Last Mo. Income	Prior Mo. Income	Edit
Amy Test	Yes	Self	1980-09-10	Female	1,500.00	1,000.00	1,000.00	
Total					1,500.00	1,000.00	1,000.00	

Add Household Member

COMPLETE APPLICANT INFORMATION

Step 7: Review and confirm the contact information provided in the previous application is still the same for your Housing Facilitator or Case Worker if applicable.

Make the necessary updates by performing the steps below:

- Select **Yes** or **No** in response to the question **Do you have a Housing Facilitator?**
 - If **Yes** is selected, enter the following information:
 - Housing Facilitator's First Name
 - Housing Facilitator's Last Name
 - Housing Facilitator's Agency
 - If **No** is selected, proceed to the next question
- Select **Yes** or **No** in response to the question **Are you working with a Case Worker from the Human Services Center or Human Services Zone?**
 - If **Yes** is selected, enter the following information:
 - Select the Case Worker's county from the drop-down list this will autofill the Case Worker's Zone
 - Case Worker's First Name
 - Case Worker's Last Name
 - Case Worker's Telephone Number
 - If **No** is selected, proceed to the next question

Do you have a Housing Facilitator?*

Yes No

What is your Housing Facilitator's First Name? *

What is your Housing Facilitator's Last Name? *

What agency does your Housing Facilitator work at? *

Are you working with a Case Worker from the Human Services Center or Human Services Zone? *

Yes No

Select Case Worker's County *

Case Worker's Zone * ?

What is your Case Worker's First Name? *

What is your Case Worker's Last Name? *

What is your Case Worker's Telephone Number? *

COMPLETE APPLICANT INFORMATION

Step 8: Review and confirm the contact information provided for the primary applicant is still the same. This information is needed for NDHS Case Reviewers to communicate regarding the application and for notifications to be enabled.

Make the necessary updates by performing the steps below:

- Applicant's email address
- Re-enter Applicant's email address
- Applicant's phone number
- Re-enter Applicant's phone number
- Is this a cell phone number?

NOTE: If you selected **Yes** to is this a cell phone number, the following questions will be prompted:

- Would you like to receive updates to your application via text message?
- Select your carrier (Drop-down selection).

Please provide your contact information below. If you do not have an email address and/or phone number, enter an alternate contact where you can be reached.

Applicant email address: *

Re-enter Applicant email address: *

Applicant phone number: *

Re-enter Applicant phone number: *

Is this a cell phone number? *

Yes No

Would you like to receive updates to your application via text message? *

Yes No

Select your carrier: *

AT&T

COMPLETE APPLICANT INFORMATION

Step 9: Review and Confirm details about Federal, State, or local government assistance programs that a household member is enrolled in.

Make the necessary updates by performing the steps below:

- In response to the question **At any time since March 13, 2020, did you or a member of your household receive assistance from ANY of the following federal, state, or local government assistance programs?** select the check box for any benefit program(s) a household member receives assistance from.
- If a program is selected, Select Yes or No in response to the question **Can you provide documentation for your enrollment in any of the above assistance/benefits programs?**
 - If **Yes** is selected, upload benefits documentation by clicking the **Add Document** button
 - If **No** is selected, provide an explanation in text box provided and click the check box next to **I/we attest that the statement above is true.**

ND Rent Help can utilize income information that has already been verified by other federal programs to eliminate the need for you to provide detailed information in this application.

A recently completed income certification and participation in certain programs can SPEED UP your qualification and application for this program.

Please note that your confirmation of participation in any of the federal, state or local government assistance programs below does NOT negatively affect your eligibility for participation in the State program.

At any time since March 13, 2020, did you or a member of your household receive assistance from ANY of the following federal, state, or local government assistance programs?

LIHEAP

SSI (not SSA retirement or disability income)

WIC

Can you provide documentation for your enrollment in any of the above assistance/benefits programs? *

Yes No

Upload Benefits Documentation *

COMPLETE APPLICANT INFORMATION

Step 10: Review and Confirm the following questions to provide documentation of loss of income, significant cost and/or financial hardship.

Make the necessary updates by performing the steps below:

Select from the drop-down list in response to the question **Can you provide documentation to demonstrate a loss of income, significant cost, and/or other financial hardship?**

NOTE: if you are unable to provide documentation:

- Document unavailable
- Provide an explanation in the text box provided
- Click the check box next to **I/we attest that one or more of my/our household members: qualified for State unemployment insurance (UI) benefits at any time after January 1, 2020, or experienced a reduction in household income, incurred significant costs, or experienced other financial hardship due, directly or indirectly due to the COVID-19 public health emergency.**

Can you provide documentation to demonstrate a loss of income, significant cost, and/or other financial hardship? *

Tax return information from 2019 and 2020

-Select-

- Unemployment benefit statement
- Unemployment Monetary Determination letter or payment history
- Monthly pay statements before AND after the impact of COVID-19
- Letter from employer showing a decrease in income
- Copies of medical, childcare, transportation, or other significant expenses your household has incurred as a result of COVID-19
- Approval letter for federal, state or local government assistance programs such as Medicare, SNAP, TANF
- Written attestation from your employer, caseworker or government agency
- Tax return information from 2019 and 2020
- Document unavailable

Can you provide documentation to demonstrate a loss of income, significant cost, and/or other financial hardship? *

Document unavailable

In detail, please explain why you cannot provide documentation of loss of income, significant cost, and/or other financial hardship *

I/we attest that one or more of my/our household members: qualified for State unemployment insurance (UI) benefits at any time after January 1, 2020, or experienced a reduction in household income, incurred significant costs, or experienced other financial hardship due, directly or indirectly due to the COVID-19 public health emergency. *

COMPLETE APPLICANT INFORMATION

Step 11: Review and Confirm proof of identification.

Make the necessary updates by performing the steps below:

Select **Yes** or **No** to the question **Do you have a valid (or expired eight years or less) photo driver's license or photo identification card issued by North Dakota or another State?**

- If **Yes**, click **Add Document** to upload proof of identification
- If **No**, use the drop-down to select the type of identification that can be provided.
 - Click **Add Document** to upload a copy of your selected identification

Do you have a valid (or expired eight years or less) photo driver's license or photo identification card issued by North Dakota or another State? *

Yes No

Please upload a copy of your photo identification *

Add Document

Do you have a valid (or expired eight years or less) photo driver's license or photo identification card issued by North Dakota or another State? *

Yes No

Please select a type of identification you can provide (may require additional validation procedures or potential delay) * ⓘ

-Select- ▼

- Select-
- International Passport or Passport Card
- U.S. Permanent Resident Card
- Alien Registration Receipt Card
- U.S. Government and Military Dependent ID
- University, College, or High School ID Card with photograph
- Verifiable Employer-Issued ID Card with Photograph
- Work Authorization

...n verified by other federal information in this application.

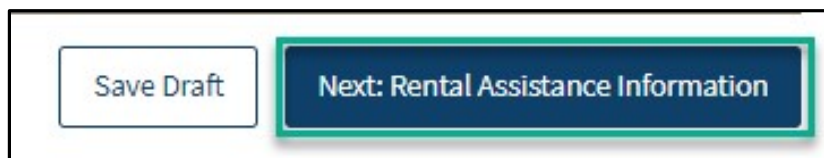
...in certain programs can SPEED UP

...the federal, state, and local

COMPLETE APPLICANT INFORMATION

Step 12: Review completed Applicant Information and move on to the **Rental Assistance Information** page.

- Once complete, click **Next: Rental Assistance Information** button to move on to the next page.
- Click **Save Draft** to save the application in its current state and complete later.



COMPLETE RENTAL ASSISTANCE INFORMATION

Step 13: On the Rental Assistance Information page, provide information related to your Housing Provider and rental information.

- Select from the drop-down list in response to the question **Is your Housing Provider an Individual or a Company?**
 - a) If **Individual** is selected, enter the Housing provider's Information
 - b) If **Company** is selected,
 - a) Select the Company from the drop-down list
 - a) If the Housing Provider is not on the list, select **Other** and enter the Housing Provider's information
- Select **Yes** or **No** in response to the question **Is your Housing Provider an immediate family member?**
- Click the **Add Document** button to upload the signed lease agreement

The image shows three sequential screenshots of a web form:

- Screenshot 1:** A dropdown menu titled "Is your Housing Provider an Individual or a Company? *". The menu is open, showing options: "-Select-", "Individual", and "Company". The "Company" option is highlighted in blue.
- Screenshot 2:** The same dropdown menu is shown with "Company" selected. Below it is a sub-section titled "Select Company * ?" with a help icon. A second dropdown menu is open, showing options: "-Select-", "-Select-", "Alliance", "Bismarck Rentals", and "Campbell".
- Screenshot 3:** A radio button question: "Is your Housing Provider an immediate family member? *". There are two radio buttons, "Yes" and "No", both of which are unselected. Below this is a text prompt: "Please provide a formal rental agreement signed and dated by yourself and your housing provider? *". At the bottom is a blue button labeled "Add Document".

COMPLETE RENTAL ASSISTANCE INFORMATION

Step 14:

- Select the date in response to the question **Date Rental Agreement Began**
- Select the date in response to the question **Date Rental Agreement is Scheduled to end**
- Select **Yes** or **No** in response to the question **Is your rental agreement month-to-month?**
- Select the date in response to the question **When is your first rent payment due?**
- Enter the total monthly rent amount excluding any additional fees paid to your Housing Provider
- Select **Yes** or **No** in response to the question **Do you pay your Housing Provider additional fees such as renter's insurance, garage, service fee, pet, or any other charge indicated in the lease**
 - If **Yes** is selected, enter the monthly amount for each applicable fee
 - If **No** is selected, proceed to the next question

Date Rental Agreement Began: *

Date Rental Agreement is Scheduled to end: *

Is your rental agreement month-to-month? *
 Yes No

When is your first rent payment due? *

How much is the monthly rent amount excluding any additional fees paid to your Housing Provider? *

Do you pay your Housing Provider additional fees such as renter's insurance, garage, service fee, pet, or any other charge indicated in the lease? *
 Yes No

Please enter the costs for any recurring monthly charges:

Garage Fees: *

Service/Admin Fees: *

NOTE: The Total Monthly Rent Amount (including fees) should not exceed the approved LOC limit

COMPLETE RENTAL ASSISTANCE INFORMATION

Step 15:

- Select **Yes** or **No** in response to the question **Are utilities included in the monthly rent cost?**
 - If **Yes** is selected, enter the monthly amount for each applicable fee
 - If **No** is selected, proceed to the next question

Are utilities included in the monthly rent cost? *

Yes No

Step 14

Step 16: Click the **Add Month** button to submit a request for up to 3months of rent.

Step 15

Please click the Add Month button to submit a request for up to 3months of rent

No months have been added

Add Month

In the new pop-up window that opens:.

- Please select the month and year for which you are seeking rental assistance
 - Total monthly rent amount
 - Amount provided by another Federal, State, or Local program: Indicate **amount of assistance received** that month from a benefits program.
 - Total renter portion of unpaid rent (not including late fees): This field auto-populates based on responses above.
 - Is this amount past due?
 - Late fees (if applicable)
 - Assistance requested from this program: This field auto-populates based on **sum of Late Fees and Unpaid rent**.
- Press **Save** to be redirected to the previous page.
 - Repeat for additional months by pressing **Add Month**.

Edit Month

Please select the month and year for which you are seeking rental assistance:

-Select- -Select-

Total monthly rent amount: *

0.00

Amount provided by another Federal, State, or Local program:

0.00

Total renter portion of unpaid rent (not including late fees): *

0.00

Is this amount past due? *

Yes No

Assistance requested from this program: *

0.00

*The assistance requested from the Program shall not duplicate any other federal, state, or local assistance for the same costs or same periods

Save

Step 15

COMPLETE RENTAL ASSISTANCE INFORMATION

Step 17:

Click the check boxes to submit additional expenses for:

- Unpaid Security Deposit
- Unpaid Rental Application or Screening Fees

NOTE: Approval is determined on a case-by-case basis. Please note that the State cannot reimburse for expenses paid out of pocket or not included on the ledger.

Are utilities included in the monthly rent cost? *

Yes No

Applicants are eligible to submit a request for additional expenses related to housing other than rent that may be considered for payment. Approval is determined on a case-by-case basis. Please note that the State cannot reimburse for expenses paid out of pocket or not included on the ledger.

Unpaid Security Deposit

Unpaid Rental Application or Screening Fees

COMPLETE RENTAL ASSISTANCE INFORMATION

Step 18: Review completed Rental Assistance Information and move on to the **Payment Information** page.

- Once complete, click **Next: Payment Information** button to move on to the next page.
- Click **Save Draft** to save the application in its current state and complete later.
- Click **Back: Applicant Information** to return to the previous page



COMPLETE PAYMENT INFORMATION

Step 19: Review the Payment Information statement and press **Next: Certification**

NDHS Housed Application
Request 0087827

Last Saved:
2023-09-12 9:23am

1 Applicant Information 2 Rental Assistance Information 3 Payment Information 4 Certification

Payment Information

If for any reason you need to stop or log out, please scroll down and click on the Save Draft button at the bottom right of your screen, and all the information entered will be saved for the next time you log back into your application.

*Denotes required field

i This program is designed to make payments directly to Housing Providers.

However, in the rare instances your housing provider may be unresponsive or unwilling to accept direct payments from the State and you MAY be eligible to receive payment assistance directly. If you are approved for direct payment as a renter, payment will be mailed to the mailing address provided in the Applicant information page.

It is required that all direct payments are then turned over to the Housing provider within immediate receipt of payment. Failure to turn over payments to your housing provider, will result in disbarment with ND Housing Stability Program and immediate return of payments to ND Housing Stability Program.

Back: Rental Assistance Information Save Draft Next: Certification

COMPLETE CERTIFICATION

Step 20: Review the Payment Information statement and press **Next: Certification**

- Read/Review
- Click the **checkbox next to I have read and understand the acknowledgements**
- Press **Electronically Sign**

Certification

If for any reason you need to stop or log out, please scroll down and click on the Save Draft button at the bottom right of your screen, and all the information entered will be saved for the next time you log back into your application.

*Denotes required field

ACKNOWLEDGEMENTS

- I/We understand that electronic submission of my/our application and electronic signature serves as written and signed attestations for the purpose of the program.
- I/We declare under penalty of perjury that the foregoing is true and correct. I/We agree to provide, upon request, additional information or documentation upon request to the Program Administrator.
- I/We also understand that false statements or information will be grounds for denial of my/our application, termination of rental or utility assistance, recoupment of any funds disbursed and/or debarment from participating in other current or future assistance programs administered by DHS.
- I/We understand that this is an application for assistance and signing this application does not bind the program to offer rental or utility assistance nor does it bind me/us to accept any assistance offered.
- I/We understand that reasonable efforts will be made to make payments directly to my/our Housing Provider or utility provider. In the event that payments are made directly to me/us (for example, due to the Housing Provider declining to participate in the program), any funds issued to me/us under the program must be paid toward any applicable outstanding rental and utility obligation. I/We have no objection to inquiries from the State, the U.S. Department of Treasury or designees, for the purpose of verifying the facts herein stated. I/We have received, read and understand the program eligibility requirements, program guidelines and compliance requirements and hereby agree to abide by them for the duration in which they are enforced.
- I/We understand the Letter of Commitment Rules of Use and NDRH Rent Limits
- I/We understand that any lease agreement made outside of the parameters listed on the NDRH Letter of Commitment, will not be approved for payment.

I have read and understand the acknowledgements above *

Electronically Sign

Step 21: Review and accept Authorization to Release Information.

- Read/Review the **Authorization to Release Information Statements**
- Click the **Review Authorization Document** button
- In the window that opens, review and confirm the information populated is correct.
- Click the **Accept Document** button

AUTHORIZATION TO RELEASE INFORMATION

- Your signature on this form authorizes the program to use this authorization and the information obtained with it, to administer and enforce rules and policies, to determine eligibility for assistance, for coordination of services, and for purposes of research and evaluation.
- Any individual or organization, including any governmental agency may be asked to release information to support determination of eligibility for assistance. Information may be requested from, but is not limited to, the following persons and/or entities: courts, law enforcement agencies, Housing Provider, past and present employers, Social Service Agencies, utility companies, and other reasonably deemed commercial, non-profit and governmental third parties.
- By signing this form, I authorize the above persons, agencies, firms or corporations to make available any documents or record related to the program for inspection and copying.
- I hereby authorize the program to publish information regarding me/my household (not including personally identifiable information) and any awards which I may receive as part of its public transparency and accountability efforts. Information published may include but is not limited to the number of eligible households that receive funding, the type of assistance provided, acceptance rate of applicants, average funding provided per household, household income levels, and average number of monthly rental or utility payments that were covered by funding.

Review Authorization Document

sfri01059.pdf 1 / 1 82%

AUTHORIZATION TO DISCLOSE INFORMATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES
LEGAL DIVISION
SFN 1069 (9-2023)

PRIVACY STATEMENT: Disclosure of the social security number is voluntary and is requested for the purpose of accurate identification. Failure to disclose a social security number will not affect the disclosure of other information. The Department will not disclose treatment or your agreement to authorize disclosure of your health information. The Department may, however, require that you authorize disclosure of your health information if needed to make a determination about your eligibility for benefits or enrollment in a Department health plan.

Name of Client (Last, First, Middle Initial)	Social Security Number	Date of Birth
army test	111223333	1994-08-03
Previous Names Used		
Street Address	City	State
123 MAIN ST	WARWICK	ND
		ZIP Code
		58381

CLIENT RELEASE AND SIGNATURE

I, Hereby Authorize:

Decline and Cancel **Accept Document**

COMPLETE CERTIFICATION

Step 22: Submit application.

- a. Prior to submitting the application, you may review content of any previous page by selecting **Back: Payment Information**.
- b. Once ready, press **Submit** to complete application.

ACKNOWLEDGEMENTS

- I/We understand that electronic submission of my/our application and electronic signature serves as written and signed attestations for the purpose of the program.
- I/We declare under penalty of perjury that the foregoing is true and correct. I/we agree to provide, upon request, additional information or documentation upon request to the Program Administrator.
- I/We also understand that false statements or information will be grounds for denial of my/our application, termination of rental or utility assistance, recoupment of any funds disbursed and/or debarment from participating in other current or future assistance programs administered by DHS.
- I/We understand that this is an application for assistance and signing this application does not bind the program to offer rental or utility assistance nor does it bind me/us to accept any assistance offered.
- I/We understand that reasonable efforts will be made to make payments directly to my/our Housing Provider or utility provider. In the event that payments are made directly to me/us (for example, due to the Housing Provider declining to participate in the program), any funds issued to me/us under the program must be paid toward any applicable outstanding rental and utility obligation. I/We have no objection to inquiries from the State, the U.S. Department of Treasury or designees, for the purpose of verifying the facts herein stated. I/We have received, read and understand the program eligibility requirements, program guidelines and compliance requirements and hereby agree to abide by them for the duration in which they are enforced.
- I/We understand the Letter of Commitment Rules of Use and NDRH Rent Limits
- I/We understand that any lease agreement made outside of the parameters listed on the NDRH Letter of Commitment, will not be approved for payment.

I have read and understand the acknowledgements above*

[Electronically Sign](#)

AUTHORIZATION TO RELEASE INFORMATION

- Your signature on this form authorizes the program to use this authorization and the information obtained with it, to administer and enforce rules and policies, to determine eligibility for assistance, for coordination of services, and for purposes of research and evaluation.
- Any individual or organization, including any governmental agency may be asked to release information to support determination of eligibility for assistance. Information may be requested from, but is not limited to, the following persons and/or entities: courts, law enforcement agencies, Housing Provider, past and present employers, Social Service Agencies, utility companies, and other reasonably deemed commercial, non-profit and governmental third parties.
- By signing this form, I authorize the above persons, agencies, firms or corporations to make available any documents or record related to the program for inspection and copying.
- I hereby authorize the program to publish information regarding me/my household (not including personally identifiable information) and any awards which I may receive as part of its public transparency and accountability efforts. Information published may include but is not limited to the number of eligible households that receive funding, the type of assistance provided, acceptance rate of applicants, average funding provided per household, household income levels, and average number of monthly rental or utility payments that were covered by funding.

[Accepted](#)

[Back: Payment Information](#) [Save Draft](#) [Submit](#)

SUBMISSION VERIFICATION

Step 23: Review confirmation message that appears as a banner at the top of the screen.



ND HOUSING STABILITY SUPPORT INFORMATION

RESOURCES

ND Housing Stability Direct Support

For questions on system navigation or setting user preferences, contact the Supplier Registration Assistance Contact Center :

- *8:00am CT and 5:00 pm CT Monday through Friday at 701.328.1907*
- *Send an email to dhserb@nd.gov*