



Jamison Management Company

COVID-19 Payment Plan Request Form

Date: \_\_\_\_\_

Resident Name(s): \_\_\_\_\_

Property Address: \_\_\_\_\_ Unit: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email(s): \_\_\_\_\_

I am not withholding the balance because of a repair issue or the condition of my unit. The reason I have not or will not pay my rent in full is (Include COVID-19 related reason and attach or email [info@jamico.com](mailto:info@jamico.com) proof from Your Employer or Doctor explaining why your compensation has been reduced):

I do not have any repair or maintenance issues with my unit except for what I have written here. (Write "none" if no repairs needed.) \_\_\_\_\_

As of (date) \_\_\_\_\_, my outstanding rent balance is \$ \_\_\_\_\_. I propose the following payment plan (include \$ amounts you can pay and dates you can pay them, if possible):

BY SIGNING BELOW, I AM STATING THAT I understand this is not a change to my rental agreement, this is my proposal and it applies only to the rent due as of today. I understand that I will still receive a Notice to Pay Rent, and it is not waived, changed or cancelled by this proposal. If my proposal is not accepted and an eviction is filed, it can result in my wages being garnished.

I declare, under penalty and perjury, that what I wrote above is true and correct. I understand this is only a proposal and not valid until signed by a representative of Jamison Management Company.

Print Tenant Name

Tenant Signature

Date

**-Office Use-**

| Date | O/S Rent Amount | O/S Late Fees | Total O/S Balance | #of time late in 12 months |
|------|-----------------|---------------|-------------------|----------------------------|
|      |                 |               |                   |                            |

Owner/Landlord

Approved on (Date):