Rent Automation Agreement

(THIRD PARTY REIMBURSEMENT ONLY, DOES NOT APPLY TO TRUELINK CARD)

Trust Beneficiary Name: _____

Trust Beneficiary Advocate: _____ *(if applicable)*

I agree and acknowledge that I would like CPT Institute to automate my:

☐ Rent in the amount of $_____.

    I would like to initiate my rent request to be generated 3 weeks prior of the due date every _____ month. (Example: 1st month)

    I sent in a copy of my most up-to-date Lease/Rental Agreement dated from _____ to _____. (Automation will expire on the last date, please send in another form to activate another automation.)

☐ Mortgage in the amount of $_____.

    I would like to initiate my mortgage request to be generated 3 weeks prior of the due date every _____ month. (Example: 1st month)

    I sent in a copy of my most up-to-date Mortgage Agreement/Statement.

CONFIRM PAYEE INFORMATION:

Payee Name: _____

Mail Payment to: _____

ACKNOWLEDGEMENT:

_____(initial) I understand my Rent Check will be sent 3 weeks prior to the due date. My check will be mailed to the payee above and arrive within normal processing time of 7-10 business days.

_____(initial) If I fail to notify my CPT Representative of any changes, my rent request will be processed based on the details above.

_____(initial) If I am on Medicaid Benefits in California a Share-of-Cost will be applied on my rent request.

_____(initial) If my cash balance is low in my trust account, my account will not be able to pay for my rent request. I will notify my CPT Representative.

Signature: _____   Date: _____

PLEASE SEND A COPY OF YOUR RECENT RENTAL AGREEMENT TO ACTIVATE AUTOMATION.

CONTACT CPT INSTITUTE & SEND THE INTAKE FORM TO: inbox@cpttrust.org