PAYMENT PLAN AGREEMENT (COVID-19 PANDEMIC)



LEASE CONTRACT DATE:					
OWNER'S NAME:					
RESIDENTS (LIST ALL RE	SIDENTS):				
DWELLING UNIT DESCRIPTION OF THE PROPERTY OF T					
(street address) in		<i>(city)</i> , STATE,	(zip code).		
Dear Resident(s):					
wages, incurred new medic	cal expenses or been laid of	off from their place of emp	esidents. Some residents have loyment as a result of the CO	OVID-19 pandemic.	
		_	rinto an agreement with you ne Lease Contract term durin		
, , , ,	nonth of the Lease Contrac	ct term following the mont	h in which this Agreement is	0	
	This may be done via any i	method normally permitte	documentation of your loss ed under the Lease Contractithin our discretion.		
For good and valuable con:	sideration, the receipt and	d sufficiency of which are	hereby acknowledged, we (ther described below. You as		
Payment Item	Currently Due	Current Amount	Date to be Paid	Amount	
	y Resident paragraph of		material breach by you of the ich we may sue you for evice		
provisions set forth herein, Lease Contract and state an	, we may in our sole discre nd/or local laws. To the ful n proceedings against you	tion pursue eviction for no llest extent authorized by	at are met. If you do not timel conpayment of rent and any of applicable state and local la yment Plan Agreement or a	other remedy under the w, we do not waive any	
Our choice to enforce, not e Lease Contract isn't a waive			nt of any payment due unde	r this Agreement or the	
Nothing contained in this A	Agreement waives, limits, v or in equity, all of which	prejudices or adversely a	ffects any of our rights, remers are expressly reserved, and in full force and effect.		
		3	amended herein remain in	full force and effect.	
Resident or Residents (All residents must sign)			Owner or Owner's Representative (Signs below)		