

Date: _____

Landlord Name and Address:

Dear _____,

My name is _____ and I am a tenant at the following address: _____.

Pursuant to the San Mateo County Board of Supervisors' Emergency Regulation 2020-01, I am writing to tell you that I am unable to pay my rent this month because of the financial impacts of the COVID-19 epidemic. Specifically, I am unable to pay because:

- ___ I (or a family member) am sick with COVID-19.
- ___ I lost my job because of COVID-19.
- ___ My employer reduced my hours at work because of COVID-19.
- ___ I lost income because I had to comply with shelter-in-place orders.
- ___ I cannot work my regular hours because my child(ren)'s school/daycare is closed because of COVID-19.
- ___ I have substantial medical expenses because of COVID-19.
- ___ I have other financial hardship caused by COVID-19.

I am enclosing documentation showing that the above is true. Because of this, I believe that I qualify to have my rent considered a Delayed Payment under the Emergency Regulation. Please keep my personal financial and/or medical information confidential, and contact me if you have any questions. Thank you.

Sincerely,

Signature

Name