



(530) 895-4474
 FAX (530) 895-4459
 TDD/TTY (800) 735-2929
 (800) 564-2999 Butte County Only
 WEBSITE: www.butte-housing.com
 2039 Forest Avenue • Chico, CA 95928

HOUSING AUTHORITY of the County of Butte

HOMELESS DEFINITION

<p>Category 1</p>	<p>Literally Homeless</p>	<ul style="list-style-type: none"> • Written observation by the outreach worker; <u>or</u> • Written referral by another housing or service provider; <u>or</u> • Certification by the individual or head of household seeking assistance stating that (s)he was living on the streets or in shelter. • For individuals exiting an institution – one of the forms of evidence above <u>and</u>: <ul style="list-style-type: none"> ○ Discharge paperwork <u>or</u> written/oral referral; <u>or</u> ○ Written record of intake worker’s due diligence to obtain above evidence <u>and</u> certification by individual that they exited institution.
<p>Category 2</p>	<p>Imminent Risk of Homelessness</p>	<ul style="list-style-type: none"> • A court order resulting from an eviction action notifying the individual or family that they must leave; <u>or</u> • For individual and families leaving a hotel or motel – evidence that they lack the financial resources to stay; <u>or</u> • A document and verified oral statement; <u>and</u> • Certification that no subsequent resident has been identified <u>and</u> • Self-certification or other written documentation that the individual lack the financial resources and support necessary to obtain permanent housing.
<p>Category 3</p>	<p>Fleeing or Attempting to Flee DV</p>	<ul style="list-style-type: none"> • FOR VICTIM SERVICE PROVIDERS: <ul style="list-style-type: none"> ○ An oral statement by the individual or head of household seeking assistance which states: They are fleeing; they have no subsequent resident; and they lack resources. Statement must be documented by self-certification or a certification by the intake worker. • FOR NON-VICTIM SERVICE PROVIDERS: <ul style="list-style-type: none"> ○ Oral statement by the individual of head of household seeking assistance that they are fleeing. This statement is documented by self-certification or by the caseworker. Where the safety of the individual or family is not jeopardized, the oral statement must be verified; <u>and</u> ○ Certification by the individual or health of household that no subsequent resident has been identified; <u>and</u> ○ Self-certification, or other written documentation, that the individual of family lacks the financial resources and support networks to obtain other permanent housing.



The Housing Authority is an equal opportunity employer and housing provider.

