



**Harris County Community Services Department
Referral Form**

Complete the information below and email it to:

EvictionPreventionProgram@csd.hctx.net

Reason for Referral: Rental Assistance Mortgage Assistance

Name: _____

Phone number: _____ **Email:** _____

Address: _____

Landlord/Manager: _____

Phone number: _____ **Email:** _____

Has eviction been filed: Yes No

NOTES:

After receipt of referral the CSD assigned Department will screen client and inform them if they are eligible-this process can take up to 2-3 business days. **The submission of this form does not guarantee assistance.*