

Return Funds Form

INSTRUCTIONS: Answer all fields in this form and return payment in the form of a check to Minnesota Housing. Please address return to:

Minnesota Housing
ATTN: RentHelpMN Payments
400 Wabasha Street North, Suite 400
St. Paul, MN 55102

Applicant/Tenant Information

Name: _____

Applicant ID: _____ Phone Number: _____ Email: _____

Address (street address, city, state, zip code):

Payment Type

Was it an Automated Clearing House (ACH) payment? YES NO

Was the check issued by the Minnesota Housing Finance Agency? YES NO

*****If the check was issued by another entity, likely another unit of local government, please email Payments@renthelpmn.org for assistance**

Payee Information

Name of company as listed on the check or ACH payment: _____

Contact information of the company:

Address (street address, city, state, zip code): _____

Phone number: _____ Email: _____

Amount Returned

Is this the full amount of the assistance? YES NO

*If partial, please provide detail on the amount returned below:

Reasons for return (check all that apply):

- | | |
|-----------------------------------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Tenant no longer resides at property | <input type="checkbox"/> Duplicate payment received |
| <input type="checkbox"/> Payment is not addressed to the correct payee or tenant | <input type="checkbox"/> Not my property |
| <input type="checkbox"/> Portion of check not applicable to rent, (e.g., utility) | <input type="checkbox"/> Other (please describe below) |
- _____