



MAIN OFFICE

700 W. Main Street, Alhambra, CA 91801
Tel: 626-262-4510 TDD: 626-943-3898
www.lacda.org

HOUSING ASSISTANCE DIVISION

SITE: ANTELOPE VALLEY OFFICE - 2323 E. Palmdale Blvd., Suite B, Palmdale, CA 93550 Tel: 661-575-1511

OWNER CLAIM FOR PHYSICAL DAMAGE TO A SUBSIDIZED UNIT

The attached Compensation Claim Form for reimbursement of physical damage costs (in excess of the amount of security deposit paid) for the unit subsidized by the Los Angeles County Development Authority (LACDA), caused by a formerly homeless family during their occupancy. You must complete and return the Damage Claim Compensation form to our office within 5 calendar days of learning of the move out, or contract termination, whichever is first.

If you intend to claim damages, you must enclose documentation showing the basis for the charges, including verifiable third party evidence of the actual cost incurred. Payment for damages can be claimed only to the extent that they have not been paid by the tenant.

Note: Any amount owed by the tenant to the owner for damages will first be deducted from the maximum security deposit that the owner specified in the lease agreement. The LACDA will pay for qualified damage costs beyond security deposit but not to exceed \$2000. This represents the maximum amount that the LACDA will pay under any circumstances.

Your deadline to return the receipts of repairs to the LACDA must be within 30 calendar days from the HQS move-out inspection date. No claims and receipts received after this date will be honored.

If you have any questions regarding completion of this form, please contact the Housing Advisor Unit Supervisor Hector Lemus at (626) 586-1597.



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DAMAGE CLAIM COMPENSATION FORM

Date:
Vendor Code:
Claimant Name:
Address:
Tenant ID:
Tenant Name:
Address:
Security deposit held by owner: \$
Total Damage Claim Amount: \$

Attach a copy of the Owner Claim to the Tenant with supporting documentation.

Remarks:
