



707 Wilshire Blvd., 10th Floor  
Los Angeles, CA 90017  
Ph: 213 683.3333  
Fax: 213 892.0093  
TTY: 213 553.8488  
www.lahsa.org

## MEMO

**To:** The Honorable Members of the Los Angeles City Council  
**From:** Nathaniel VerGow, Deputy Chief Systems Officer   
**Date:** July 20, 2025  
**Re:** Report on Problem-Solving Funds for Fire Impacted Victims (Council File: 25-0006-S16)

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### SUMMARY

On March 4, 2025, the Los Angeles City Council approved C.F. [25-0006-S16](#) (Hernandez – Soto-Martinez), for the Los Angeles Homeless Services Authority (LAHSA) to report on recommendations that enable access to Problem-Solving Funds for people experiencing and/or at imminent risk of homelessness due to the 2025 firestorms. This report outlines the existing process for accessing these funds and provides recommendations to streamline access for fire-impacted victims.

### BACKGROUND

Problem-Solving is a Housing-First approach to creating flexible, safe, and cost-effective solutions to quickly resolve a housing crisis and to divert people from the homelessness system. Eligible expenses for Problem-Solving funds include security deposits, first month's rent, back rent, rental arrears, motel stays, utility payments, bus passes, gas cards, automobile maintenance, costs for obtaining lost documents such as birth certificates and IDs, and essential appliances. While Problem-Solving can be used in a variety of circumstances, it is not the primary or most appropriate resource for households displaced by natural disasters such as wildfires.

Households impacted by fire should be directed first to resources explicitly designed for disaster response, including the Federal Emergency Management Agency (FEMA), the California Office of Emergency Services (Cal OES), and the Los Angeles County Department of Consumer and Business Affairs (DCBA). These agencies provide more robust and tailored support for disaster survivors. Problem-Solving eligible individuals and households should exhaust these options first. This report assumes the household has exhausted these resources prior to engaging with Problem-Solving.

LAHSA's Problem Solving Fund provides one-time financial assistance to support households that are experiencing homelessness, are imminently at risk of homelessness, or are fleeing domestic/intimate partner violence. To qualify for LAHSA's Problem-Solving assistance, individuals must have been previous renters before the firestorms and have exhausted Red Cross and FEMA resources. Eligible individuals can access funds through the following steps:

1. **Complete LAHSA's Non-Traditional Partner Problem-Solving Tracking Tool.** This live e-form collects basic client information, including gross income, contact information, current homelessness status, and location, among other identifying information. It must be submitted digitally via a webpage browser. For an individual or household to access this tool, they can visit: <https://forms.office.com/Pages/ResponsePage.aspx?id=m1SuC9hSO0qqGdUGYrMII36qfawNGwHJoR-hvw-WMBUMk1BTFIJQzINRUMzRDdPVzFMRjBETjE1Uy4u>



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2. **Enroll the Client in Homeless Management Information System (HMIS).** The client must be enrolled in the “Problem-Solving Program” within HMIS. If they are not already in the system, a new profile must be created.
3. **Complete LAHSA’s Problem-Solving Assistance Funds Request Form.** This downloadable form must be emailed to [psassistancefunds@lahsa.org](mailto:psassistancefunds@lahsa.org) after completion. The form is attached to this report as Appendix A.

The request in LAHSA’s Problem-Solving Assistance Funds Request Form must include the client’s expected housing income, assuming assistance is provided. A completed Problem-Solving Assistance Financial Assessment in HMIS will ensure LAHSA staff are notified of all alerts related to the specific Problem-Solving request. Finally, as an attachment to Form 2, clients must include previous lease agreements and confirmation from the landlord or management company that they lost their housing due to the fires.

Council offices with Basic User HMIS access can create profiles and enroll clients who meet eligibility into the Problem-Solving Program.

### DISCUSSION

To ensure fire-impacted individuals can efficiently access Problem-Solving Funds and Council office staff can expedite requests, LAHSA is exploring the following:

- **Expedited Intake and Verification Process:** A priority processing track for fire-displaced individuals would reduce delays, and an automated verification system could directly confirm American Red Cross and FEMA resource exhaustion. This will ensure that eligible individuals receive assistance without unnecessary administrative bottlenecks.
- **Simplified Documentation Requirements:** Acknowledging that personal documents may have burned or been lost in the fire storms, this would remove access barriers. Alternative proof of displacement, such as FEMA case numbers, insurance claims, or American Red Cross verification, would be accepted in place of traditional landlord confirmation. Furthermore, self-certification affidavits could be allowed for clients unable to obtain standard documentation, recognizing the unique challenges faced by disaster victims.
- **Retroactive Problem-Solving Assistance:** For anyone experiencing homelessness who stayed in an American Red Cross Evacuation Center or County/City Disaster Relief Center, LAHSA would cross reference site manifests to personally offer Problem-Solving support for victims. Assistance could be extended to not only renters, but those whose makeshift shelters and/or dwellings were impacted by the fires. LAHSA Homeless Engagement Teams (HET) would attempt to contact clients housed at these sites, offering Problem-Solving support.
- **Extended Problem-Solving Support:** For individuals displaced due to smoke inhalation, short-term problem-solving assistance may help cover eviction prevention and transportation costs



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necessary to maintain employment that supports their housing. As with all expenses, clients must demonstrate how these costs contribute to their housing stability.

### **CONCLUSION**

The 2025 firestorms have caused many residents to experience or be at risk of homelessness, necessitating a responsive and efficient funding mechanism. By prioritizing fire-impacted individuals, reducing bureaucratic barriers, and enhancing inter-agency coordination—once Red Cross, FEMA, and other disaster-related resources have been exhausted—LAHSA can help ensure timely access to Problem-Solving funds and prevent further displacement and homelessness in Los Angeles. Further discussion and implementation of these recommendations will strengthen the City’s ability to address disaster-related housing crises effectively now and in the future; however, it is important to note that Problem Solving is funding exclusively through CoC HHAP and lacks a dedicated funding source beyond the current fiscal year, which may limit the sustainability of this approach.





Click links to learn more about <a href="#">Required Documents</a>		
<b>ALL REQUESTS MUST INCLUDE →</b>	<input type="checkbox"/> <a href="#">Photo Identification or Alternate Documentation</a> <input type="checkbox"/> Homeless verification, self-certification, or proof of homelessness. One of the following is required: <ul style="list-style-type: none"> <li>• <a href="#">LA CoC Homelessness Verification Form</a></li> <li>• <a href="#">Imminent Risk of Homelessness Certification form</a></li> </ul> <input type="checkbox"/> Income verification, self-certification, or proof of income. One of the following is required: <ul style="list-style-type: none"> <li>• <a href="#">3rd Party Income Verification form</a></li> <li>• <a href="#">Self-Declaration of Income/No Income form</a></li> <li>• Proof of Income (pay stubs, verification of benefits)</li> </ul>	
Financial Assistance Category	Required Documents Checklist <b>NOTE:</b> All documents are <b>required</b> at the time of submission of PSARF.	Amount Requested
<b>Host Household Assistance</b> <i>TAY/Adult up to \$600/30 day OR \$1000/60 days; Families up to \$1,200/30 days OR \$2,000/60 days</i>	<input type="checkbox"/> <a href="#">Host Family Commitment Form</a> <input type="checkbox"/> Host <a href="#">W-9</a>	\$ _____
<b>Utility Assistance for Host Household</b> (assistance or arrears) <i>reasonable costs not to exceed Host Household Assistance limits</i>	<input type="checkbox"/> <a href="#">Host Family Commitment Form</a> <input type="checkbox"/> Copy of Utility bill(s)	\$ _____
<b>Reunification Services</b> <i>reasonable costs, one time</i>	<input type="checkbox"/> <a href="#">Reunification Services Request Form</a> <input type="checkbox"/> Invoice/Estimate/Proof of Pricing <input type="checkbox"/> Proof of Parenthood ( <i>if</i> reunifying out of LA County with minors): <ul style="list-style-type: none"> <li>○ Birth Certificate</li> <li>○ Adoption records</li> <li>○ Other court records</li> </ul> <b>Required Prior to Exiting Case in HMIS:</b> <input type="checkbox"/> Receipt/Proof of Payment	\$ _____
<b>Motel/Hotel</b> <i>(Can only be used with reunification services) up to 3 nights prior to departure, reasonable costs</i>	<input type="checkbox"/> <a href="#">Reunification Services Request Form</a> <input type="checkbox"/> Invoice/Estimate/Proof of Pricing <b>Required Prior to Exiting Case in HMIS:</b> <input type="checkbox"/> Receipt/Proof of Payment	\$ _____



Financial Assistance Category	<b>Required Documents Checklist</b> <b>NOTE:</b> All documents are <b>required</b> at the time of submission of PSARF.	Amount Requested
<b>Rental Arrears</b> <i>up to four months' rent</i>	<input type="checkbox"/> Signed Lease/ Rental Agreement <input type="checkbox"/> Proof of Housing Subsidy (if applicable) <input type="checkbox"/> Proof of Property Ownership <input type="checkbox"/> Property Management Agreement (if applicable) <input type="checkbox"/> Property Owner or Management <a href="#">W-9</a> <input type="checkbox"/> Arrears Notice/Ledger indicating amount owed <input type="checkbox"/> <a href="#">Habitability Inspection Form</a>	\$ _____
<b>Security Deposit</b> <i>Up to one month of rent</i>	<input type="checkbox"/> Lease/Rental Agreement (signature not required) OR <a href="#">Unit Certification</a> (when lease/rental agreement is not available) <input type="checkbox"/> Proof of Housing Subsidy (if applicable) <input type="checkbox"/> Proof of Property Ownership <input type="checkbox"/> Property Management Agreement (if applicable) <input type="checkbox"/> Property Owner or Authorized Agent W-9 <input type="checkbox"/> <a href="#">Habitability Inspection Form</a> <b>Required Prior to Exiting Case in HMIS:</b> <input type="checkbox"/> Lease/ Rental Agreement, signed	\$ _____
<b>Rental Assistance, new unit</b> <i>up to two months' rent</i>	<input type="checkbox"/> Lease/Rental Agreement (signature not required) OR <a href="#">Unit Certification</a> (when lease/rental agreement is not available) <input type="checkbox"/> Proof of Housing Subsidy (if applicable) <input type="checkbox"/> Proof of Property Ownership <input type="checkbox"/> Property Management Agreement (if applicable) <input type="checkbox"/> Property Owner or Authorized Agent W-9 <input type="checkbox"/> <a href="#">Habitability Inspection Form</a> <b>Required Prior to Exiting Case in HMIS:</b> <input type="checkbox"/> Lease/ Rental Agreement, signed	\$ _____
<b>Rental Assistance, existing unit</b> <i>up to two months' rent</i>	<input type="checkbox"/> Signed Lease/ Rental Agreement <input type="checkbox"/> Proof of Housing Subsidy (if applicable) <input type="checkbox"/> Proof of Property Ownership <input type="checkbox"/> Property Management Agreement (if applicable) <input type="checkbox"/> Property Owner or Authorized Agent <a href="#">W-9</a> <input type="checkbox"/> <a href="#">Habitability Inspection Form</a>	\$ _____
<b>Utility Assistance</b> <i>(assistance or arrears) reasonable costs</i>	<input type="checkbox"/> Lease/ Rental Agreement, signed <input type="checkbox"/> Utility bill(s)	\$ _____
<b>Miscellaneous Housing Costs</b> <i>reasonable costs, one-time</i>	<input type="checkbox"/> Lease/Rental agreement or addendum OR <a href="#">Unit Certification Form</a> OR <a href="#">Host Family Commitment Form</a> <input type="checkbox"/> Invoice/Estimate/Proof of Pricing (if not indicated in lease)	\$ _____
<b>Automobile Repair/Registration</b> <i>reasonable costs up to \$3,000, one-time</i>	<input type="checkbox"/> Proof of vehicle ownership (registration/title/bill of sale/other) OR Loaner vehicle commitment letter from vehicle owner <input type="checkbox"/> Invoice/Estimate/Proof of Pricing <b>Required Prior to Exiting Case in HMIS:</b> <input type="checkbox"/> Receipt/Proof of Payment	\$ _____



**Problem-Solving Assistance  
Request Form (3898)**

Financial Assistance Category	Required Documents Checklist	Amount Requested
	<b>NOTE:</b> All documents are <b>required</b> at the time of submission of PSARF.	
<b>Furniture</b> <i>TAY/Adult up to \$1000,            Families up to \$1800; one time</i>	<input type="checkbox"/> Lease/Rental Agreement (signature not required) OR <a href="#">Unit Certification</a> (when lease/rental agreement is not available) OR <a href="#">Host Family Commitment Form</a> <input type="checkbox"/> Invoice/Estimate/Proof of Pricing <input type="checkbox"/> Vendor <a href="#">W-9</a>	\$ _____
<b>Gas Cards</b> <i>up to six (6) \$50 cards for employment OR 1.5x amount required to reach Reunification destination, once per calendar year</i>	<input type="checkbox"/> Employment acceptance letter OR Employment work schedule (when gas cards are to support travel to work) <input type="checkbox"/> Printout of <a href="#">gas cost estimate</a> from www.gasbuddy.com website (when gas cards are to support travel for reunification) <b>Required Prior to Exiting Case in HMIS:</b> <input type="checkbox"/> Signed <a href="#">Gas/Grocery Card Acceptance form</a>	\$ _____
<b>Grocery Cards</b> <i>TAY/Adult up to \$450,            Families up to \$900; twice per calendar year</i>	<input type="checkbox"/> Unsigned <a href="#">Gas/Grocery Card Acceptance form</a> <b>Required Prior to Exiting Case in HMIS:</b> <input type="checkbox"/> Signed <a href="#">Gas/Grocery Card Acceptance form</a>	\$ _____
<p align="center">*Additional documentation may be requested on a case-by-case basis.            *Anything above the financial limits requires a service extension.</p> <p>* Problem-Solving Assistance Funds Requests will only be approved when Problem- Solving Conversations are recorded in HMIS and when HMIS case notes indicate that other options have been fully explored.</p>		<b>REQUEST TOTAL</b> \$ _____

**Agency Information**

I certify that the information provided to support this request is accurate to the best of my knowledge.

Staff Name: \_\_\_\_\_ Staff Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Agency Name: \_\_\_\_\_ Is your agency located in the City of Los Angeles?  Yes  No

Staff Signature: \_\_\_\_\_ Date Completed: \_\_\_\_\_

**LAHSA AUTHORIZATION (FOR LAHSA PS UNIT USE ONLY)**

Approved?  Yes  No

Notes:

LAHSA PROBLEM-SOLVING STAFF NAME	SIGNATURE	DATE
_____	_____	_____

\*After review, a note will be entered in HMIS profile. For questions, please reach out to [psassistancefunds@lahsa.org](mailto:psassistancefunds@lahsa.org).