CARES ACT AFFIDAVIT OF COMPLIANCE
JD-HM-41 New 7-20
C.G.S. §§ 47a-23, 47a-23a;
Pub.L. 116-136 ("CARES Act")

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.ct.gov

Instructions:
1. *Select all that apply. If a Section does not apply, leave it blank.*
2. *When completing the applicable sections of this Affidavit, to determine if your mortgage loan is included in the CARES Act, you may visit either (or both) of the following websites:* https://ww3.freddiemac.com/loanlookup/ *or* https://www.knowyouroptions.com/loanlookup

For information on ADA accommodations, contact a court clerk or go to: *www.jud.ct.gov/ADA*.

Judicial District	Address of court

Name of case	Docket Number

Affidavit of Compliance With or Non-Applicability of Federal CARES Act: (Coronavirus Aid, Relief, and Economic Security Act - P.L. 116-136)

The undersigned hereby deposes and states the following:

Section I

The plaintiff affirms that the premises listed in the notice to quit and complaint in this case is:

☐ Not a "covered dwelling" as defined in Section 4024 of the CARES Act; **OR**

☐ A "covered dwelling" as defined by Section 4024 of the CARES Act but:
- this action was not filed between March 27, 2020 and July 25, 2020; **and**
- the notice to quit was delivered to the tenant(s)/occupant(s) after July 25, 2020; **and**
- the notice to quit gave the tenant(s)/occupant(s) 30 or more days to quit the premises.
  The quit date on the notice to quit is: _____

Section II - *Complete this section only if you are the owner of a multi-family residential property with 5 or more units.* ***Select all that apply****. See CARES Act, Section 4023.*

The plaintiff affirms that Section 4023 of the CARES Act does not prohibit this eviction from proceeding because:

☐ The mortgage loan payments are not currently in forbearance pursuant to Section 4023 of the CARES Act.

☐ The mortgage loan payments were in forbearance pursuant to Section 4023 of the CARES Act. The forbearance period ended on (*date*)_____. The notice to quit in this eviction (1) was not delivered to the tenant(s)/occupant(s) during the forbearance period, and (2) gave 30 or more days for the tenant(s)/occupant(s) to quit the premises.

☐ The mortgage loan payments are currently in forbearance pursuant to Section 4023 of the CARES Act, but this eviction was not brought ONLY for nonpayment of rent. This eviction was also brought for the following reasons:

_____

_____

Section III - *Complete this section only if you are the servicer of a mortgage loan on a 1-4 family residential property and this is a foreclosure-related eviction from that property.* ***Select all that apply****. See CARES Act, Section 4022.*

The plaintiff affirms that Section 4022 of the CARES Act does not prohibit this eviction from proceeding because:

☐ The property listed in the notice to quit and complaint does not secure a Federally-backed mortgage loan that is owned, insured, or guaranteed by Fannie Mae, Freddie Mac, FHA, VA, or USDA.

☐ The Plaintiff did not initiate any judicial foreclosure, move for a foreclosure judgment, or seek a foreclosure-related eviction from March 18, 2020 through May 17, 2020.

☐ The premises listed in the notice to quit and complaint is vacant or abandoned.

In preparing this Affidavit of Compliance, the undersigned has personally reviewed the applicable mortgage documents, related federal statutes, and property details of the premises.

Signed *(Affiant)* ▶	Print or type name of person signing	Date signed

Subscribed and sworn to before me:	on Date	Signed *(Assistant Clerk, Notary, Commissioner of the Superior Court)*

Print Form

Reset Form

Name of case	Docket Number

Certification

I certify that a copy of this document was or will immediately be mailed or delivered electronically or non-electronically or in hand on _____ *(date)* to all attorneys and self-represented parties of record and to all parties who have not appeared in this matter and that written consent for electronic delivery was received from all attorneys and self-represented parties receiving electronic delivery. *(If necessary, attach additional sheets with names, addresses and methods of delivery.)*

Name and address of first attorney or party	☐ Hand delivered ☐ Mailed ☐ Electronically delivered
Name and address of second attorney or party	☐ Hand delivered ☐ Mailed ☐ Electronically delivered
Name and address of third attorney or party	☐ Hand delivered ☐ Mailed ☐ Electronically delivered
Name and address of fourth attorney or party	☐ Hand delivered ☐ Mailed ☐ Electronically delivered

Signed *(Signature of filer)* ▶	Print or type name of person signing	Date signed
Mailing address *(Number, street, town, state and zip code)*		Telephone number