

TEMPORARY HOUSING LEASE AGREEMENT

Insurance Loss Displacement - Comprehensive Agreement

IMPORTANT NOTICES

INSURANCE-RELATED TEMPORARY HOUSING

- This is NOT a standard residential lease
- Special provisions apply due to insurance displacement
- Flexible terms accommodate uncertain repair timeline
- Insurance company may be direct payor

AGREEMENT IDENTIFICATION

- **Agreement Date:** November 15, 2024
- **Move-in Date:** November 20, 2024
- **Reference Number:** THL-2024-11-3847

PARTIES TO THE AGREEMENT

LANDLORD/LESSOR:

- **Legal Name:** Robert and Sarah Mitchell
- **DBA:** N/A
- **Address:** 1425 Oak Ridge Drive, Gainesville, GA 30501
- **Phone:** (770) 555-8921 | (770) 555-8922
- **Email:** rmitchell.rentals@email.com
- **Tax ID/SSN:** XXX-XX-7891 (last 4 for 1099 purposes)
- **Property Manager:** N/A

TENANT/LESSEE (Displaced Policyholder):

- **Name(s):** James and Maria Thompson
- **Permanent Address:** 892 Lakeview Terrace, Gainesville, GA 30506 (Currently uninhabitable due to fire damage)
- **Mailing Address:** Same as temporary residence below
- **Phone:** (678) 555-3456 | (678) 555-3457

- **Email:** thompson.family2024@email.com
- **Employer:** Northeast Georgia Medical Center / Lanier Technical College

INSURANCE INFORMATION:

- **Carrier:** State Farm Fire and Casualty Company
- **Policy Number:** 47-BK-8923-5
- **Claim Number:** 2024-GA-78234
- **Adjuster:** Patricia Williams, (800) 555-7823 ext. 4521
- **ALE/Loss of Use Limit:** \$75,000 or 12 months
- **Payment Arrangement:** ☒ Direct Pay ☐ Reimbursement ☐ Split

SECTION 1: PROPERTY DESCRIPTION

Temporary Residence Details

ADDRESS: 756 Maple Street, Unit B
Gainesville, GA 30501

PROPERTY TYPE: ☐ Single Family Home

☒ Apartment - Unit #B12

☐ Condominium

☐ Townhouse

☐ Extended Stay Hotel

SPECIFICATIONS:

- **Bedrooms:** 3
- **Bathrooms:** 2
- **Square Footage:** Approximately 1,450 SF
- **Garage/Parking:** 2 spaces, covered parking area, spaces #12 and #13
- **Storage:** ☒ Included - 8x10 storage unit in basement ☐ Not included
- **Furnished:** ☐ Fully ☒ Partially ☐ Unfurnished

COMPARABLE TO DAMAGED HOME: ☒ Yes - Similar size/amenities

☐ No - Differences: N/A

Insurance approval for differences: ☒ Obtained 11/14/2024 ☐ Pending

Included Amenities

FURNISHINGS (partially furnished):

Room	Items Included	Condition	Value
Living Room	Sofa, coffee table, TV stand	Good	\$1,200
Kitchen	Dining table, 4 chairs	Good	\$600
Bedroom 1	Queen bed frame, dresser	Good	\$800
Bedroom 2	Twin beds (2), nightstand	Fair	\$500
Bedroom 3	Desk, bookshelf	Good	\$300

[Detailed inventory attached as Exhibit A]

UTILITIES INCLUDED:

Utility	Included	Tenant Pays	Account Info	Cap/Limit
Electric	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Georgia Power #445623	N/A
Gas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Included in rent	\$150/mo
Water/Sewer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	City utilities	Reasonable use
Trash	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Included	Standard service
Internet	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Spectrum 200Mbps	Included
Cable/Stream	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Tenant to arrange	N/A

APPLIANCES PROVIDED: ☒ Refrigerator ☒ Range/Oven ☒ Microwave ☒ Dishwasher
☒ Washer ☒ Dryer ☐ Small appliances

SECTION 2: TERM AND RENT

Lease Term Structure

INITIAL TERM:

- **Commencement:** November 20, 2024 at 2:00 PM
- **Initial Period:** 6 months
- **Estimated End:** May 20, 2025 (subject to repair completion)

FLEXIBILITY PROVISIONS:

- Automatic month-to-month conversion after initial term
- No penalty for early termination with proper notice

- Extensions available with insurance approval
- Term tied to habitability of permanent residence

Rent and Payment Terms

- **MONTHLY RENT:** \$2,400
- **Security Deposit:** \$2,400 ☐ Waived due to insurance
- **First Month:** \$1,760 (Prorated: \$80 daily rate x 22 days for November)
- **Last Month:** ☐ Not required ☒ Required: \$2,400
- **Pet Deposit:** ☐ N/A ☒ \$300 ☐ Waived

PAYMENT SCHEDULE:

- **Due Date:** 1st of each month
- **Grace Period:** 5 days
- **Late Fee:** \$50 or 5% (waived if insurance delay)

PAYMENT METHODS ACCEPTED: ☒ Insurance company direct payment

☒ Check payable to: Robert and Sarah Mitchell

☒ Electronic transfer to: Account details provided separately

☐ Online portal

☐ Third-party service

Insurance Direct Payment Provisions

IF INSURANCE PAYS DIRECTLY:

1. Landlord agrees to accept insurance payments
2. Required documentation:
 - W-9 for tax reporting (completed 11/15/24)
 - Proof of ownership (provided)
 - Lease copy to insurance (sent 11/16/24)
3. Payment timing: May vary from standard due date
4. Tenant not liable for insurance delays/disputes
5. Late fees waived for insurance processing delays

BILLING COORDINATION: Landlord will provide monthly invoices to:

- **Tenant:** thompson.family2024@email.com

- **Insurance:** claims.invoices@statefarm.com
- **Format:** PDF with itemized charges
- **Timing:** 5 days before due date

SECTION 3: INSURANCE DISPLACEMENT PROVISIONS

Special Circumstances Acknowledgment

BOTH PARTIES ACKNOWLEDGE:

1. Tenant is displaced due to house fire on October 28, 2024
2. Emotional distress and disruption are expected
3. Flexibility and understanding are necessary
4. Primary goal is temporary shelter during repairs
5. This is not intended as a long-term tenancy

Early Termination Rights

TENANT MAY TERMINATE WITHOUT PENALTY:

When Primary Residence Becomes Habitable

- Notice Period: 30 days or less
- Pro-rated refund for unused rent
- No early termination fee

If Insurance Coverage Exhausted

- Notice Period: 45 days
- Good faith effort to negotiate
- No liability beyond coverage limits

Changed Circumstances

- Total loss determination
- Sale of damaged property
- Relocation for employment

LANDLORD MAY TERMINATE ONLY:

- For material breach with 30 days cure period

- If insurance company fails to pay after 60 days
- With 90 days notice for documented need

SECTION 4: OCCUPANCY AND USE

Authorized Occupants

ADULTS (18 and over):

1. James Thompson, DOB: 03/15/1982
2. Maria Thompson, DOB: 07/22/1984

MINORS (under 18):

1. Emily Thompson, Age: 14
2. Michael Thompson, Age: 11
3. Sophia Thompson, Age: 7

Maximum Occupancy: 6 persons (fire code limit)

Pet Provisions

PETS DISPLACED FROM DAMAGED HOME: ☒ Pets permitted as follows:

- **Type/Breed:** Golden Retriever
- **Name:** Bailey
- **Weight:** 65 lbs
- **Licensing:** Current through 06/2025
- **Vaccination:** Current, records provided

Pet Provisions:

- **Additional Rent:** \$25/month ☐ Waived
- **Pet Deposit:** \$300 ☐ Waived
- **Restrictions:** Must be leashed in common areas
- **Damage responsibility:** Tenant liable beyond normal wear

SECTION 5: MAINTENANCE AND REPAIRS

Responsibility Matrix

Item	Landlord	Tenant	Notes
REPAIRS			
Major repairs	✓		Over \$100
Minor repairs		✓	Under \$100
Emergency repairs	✓		Tenant must notify
MAINTENANCE			
HVAC service	✓		Quarterly
Lawn care	✓		Weekly service
Snow removal	✓		As needed
Pool/spa	N/A	N/A	Not applicable
Pest control	✓		Monthly

Emergency Procedures

EMERGENCY CONTACTS:

- **Fire/Police/Medical:** 911
- **Landlord Emergency:** (770) 555-8922
- **Maintenance Emergency:** (770) 555-0911
- **Utility Emergencies:**
 - Electric: (800) 555-1234
 - Gas: (800) 555-4567
 - Water: (770) 555-7890

SECTION 6: PROPERTY CONDITION

Move-In Condition

INSPECTION REQUIREMENTS:

- Joint inspection within 48 hours of move-in
- Document all existing conditions
- Photos/video encouraged
- Written inspection form required

- Copy to insurance company

EXISTING CONDITIONS:

- Living Room: Small stain on carpet near window
- Kitchen: Minor scratch on countertop
- Bedroom 2: One outlet needs repair (scheduled)
- Bathroom 2: Slow drain in tub [See attached inspection form - Exhibit B]

SECTION 7: LEGAL PROVISIONS

Required Insurance

- Tenant must maintain renters insurance: \$100,000 minimum
- Liability coverage: \$300,000 minimum
- Additional insured: ☒ Landlord ☐ Not required
- Proof required: ☒ Before move-in ☐ Within 5 days

SECTION 8: FINANCIAL SUMMARY

Complete Financial Picture

Item	Amount	Due Date	Paid To	Method
First Month Rent	\$1,760	At signing	Landlord	Check
Security Deposit	\$2,400	At signing	Landlord	Check
Pet Deposit	\$300	At signing	Landlord	Check
Last Month	\$2,400	At signing	Landlord	Check
Total Move-in	\$6,860			

Insurance Coverage Tracking

ALE/LOSS OF USE COVERAGE:

- **Total Available:** \$75,000 or 12 months
- **Monthly Allocation:** \$6,250
- **Rent Portion:** \$2,400
- **Utilities Portion:** \$200
- **Other Expenses:** \$3,650
- **Projected Duration:** 6-8 months

- **Coverage Exhaustion Date:** Estimated July 2025

SECTION 9: SIGNATURES

Agreement Execution

LANDLORD SIGNATURE:

Robert Mitchell

Date: November 15, 2024

Sarah Mitchell

Date: November 15, 2024

TENANT SIGNATURE(S):

James Thompson

Date: November 15, 2024

Maria Thompson

Date: November 15, 2024

ATTACHMENTS

Required Attachments: ☒ Exhibit A: Property Inventory (furnished items)

☒ Exhibit B: Move-in Inspection Form

☒ Exhibit C: Rules and Regulations

☒ Exhibit D: Insurance Claim Documentation

☒ Exhibit E: Pet Agreement

☒ Exhibit F: Utility Information Sheet

☒ Exhibit G: Emergency Procedures

☐ Exhibit H: Lead Paint Disclosure (N/A - built 1995)

☐ Exhibit I: Mold Disclosure (not required)

☒ Exhibit J: Photo Documentation

This agreement is designed for temporary housing due to insurance displacement. It is not intended as a standard residential lease. Consult with legal counsel for specific state requirements and modifications.

