# ANETH CHAPTER HOUSING ASSISTANCE APPLICATION

#### CHECKLIST OF REQUIRED DOCUMENTS FOR NEW HOME CONSTRUCTION

1.	Housing Application Filled out completely and containing enrollment information and family size and composition.
2.	Income Verification/Statement of Household Copies of pay check stubs, a letter of information containing income source/benefits. Telephone verification by
	employer is acceptable.
3.	Evidence of Land Ownership
	Copy of Home Site Lease or certification from Navajo Land Administration Office.
4.	Archeological Clearance
	Copy of an Archeological Clearance study will is required for all new structural projects.
5.	Map to Property
	How to get to your home site lease area from the Chapter House.
6.	Pictures
	Pictures of applicant's current living condition and home site lease area.
7.	Voter's Registration
	Copy of applicant's voter's registration.
8.	Memorandum of Understand for Self-Help Assistance
	An agreement made between the Aneth Chapter and applicant in which the applicant agrees to provide own labor for project if assisted. This form will be made available when application and supporting documentation are
	submitted to the Aneth Chapter Administration Office.
9.	Authorization for Release of Information
	Applicant(s) must acknowledge that Aneth Chapter may share essential information to resource agencies only
	when required and deemed necessary. Disclosure of information requested is voluntary and failure to disclose certain items of information requested may result in a delay in the processing of an application or its rejection.
10	INDITE Family Information Chart
10.	UNRHF Family Information Sheet Applicant must fill out the family information sheet which will be made available when applicant has submitted
	required documentation.
11.	Referrals
	If there are any referrals written by medical agencies, etc. which you feel will assist you acquiring assistance.
12.	Chapter Resolution
	Copy of Chapter Resolution. A public request form will be forwarded to be considered at the Chapter Meeting
	upon fund availability.

Notice: Application submission does not guarantee assistance; it shall be understood by the applicant that any travel he/she may make during the course of this application process is a personal choice and shall hold harmless the Aneth Chapter for those decisions.

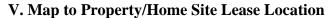


## Application for Aneth Chapter Housing Assistance Uniform Housing Assistance Application

This application is designed to be completed by the applicant(s). Applicant(s) should complete this form in its entirety. Applicant(s) must provide information requested for herein including all supporting documentation. Information provided shall be used to determine eligibility and priority for housing assistance.

I. Household								
Applicant Name (include Jr. or Sr. if applicable)			Co-Applicant Name (include Jr. or Sr. if applicable)					
11		**				11		
DOB	Census No.	Social Security No.	DOB		Census No.	Social Se	ecurity No.	
Mailing Address	Mailing Address			Mailing Address				
Work No.		Cell No.	Work No. Cell No.					
Email (if applicat	Email (if applicable)				Email (if applicable)			
Marital Status: N	Married [ ] Se	parated [] Unmarri	ed [] Divo	rced [	1			
Are you or your s		or a widow of a vetera	in? (if yes, ind	licate d	ates of service)			
Is any member of	the household	nandicapped or disable	d?					
If yes, will that he	ousehold memb	er require reasonable ac	ccommodation	ns?				
Do you expect an	y additions to tl	ne household within the	e next 12 mon	ths?				
Do you have full	custody/legal g	ardianship of your dep	pendents?					
No. of Dependent	ts:							
List all household members that are applying to live in this home with you.								
Name (Firs	t, Middle, Last)	Relationship to Hea of Household	d Date of 1	Birth			Disability Yes/No	
II. Request fo	r Housing A	ssistance						
Indicate type of housing assistance you are requesting:								
Minor Renovation Partial Assistance								
Major Renovation/Addition New Construction								
Do you have an approved home site lease? If yes, do you have Archeological Clearance?  If applying for renovation/addition, do you have ownership verification such as title, legal waiver of ownership or								
		on, do you have owners	hip verification	on such	as title, legal wa	aiver of owne	ership or	
ownership transfe	er of the home?							

What is your family's current housing situation? □ Own □ Rent □ Live w/family □ Other						
How much personal funding are you willing to contribute to complete the project?						
Have you ever been a partype of assistance and from				n? (If yes, please indicate date;		
type of assistance and inc	oni whom assis	ance was received	1)			
Will this be a Self-Help	project? (If yes	please provide a	list of names of individual	s who will assist you)		
1 1				•		
What are your family's h	ousing goals?					
III. Employment In	formation					
		1.	C- A1:			
Applicant: are you emplo	oyea?		Co-Applicant: are you empoccupation:	pioyed?		
Name & Address of Emp	olover		Name & Address of Empl	over		
rame of radioss of Emp	,10 y C1		value & Hadress of Empi	9,01		
Length of Employment	Gross Month	ly Income	Length of Employment	Gross Monthly Income		
If other household memb	ers are employ	ed or receiving ge	neral assistance please pro	ovide our office with		
information.						
	1 1					
Household Income(s) Ca			Φ.			
Spouse Incor	sehold Income	= ;	D			
Other Addition			\$			
	s Family Incon	ne = :	\$			
			<u> </u>			
IV. Present Home (	Characterist	ics				
Owner	Year Built	No. of Rooms	Present overall conditio	n of the home:		
				] Excellent [] Other []		
Type of Construction (frame, block, etc.)			Type of heating system:			
71	•	,	Wood/Coal [] Wall heater [] Furnace [] Other []			
How many people are presently living in the home?						
Is there running water currently servicing home? (if no, please indicate nearest water supply source)						
Is there electricity currently servicing home? (if no, please indicate nearest electricity source)						
Is there a sewer system c	urrently service	ng home? (if no, p	olease indicate nearest sew	ver facility)		



Please draw a map to the property or home site lease area. Please be specific and accurate using permanent point of reference from the Aneth Chapter Administration.



#### VI. Additional Information

Please provide a reason for requesting assistance through the Aneth Chapter, include any problems or conditions in the family which merits special consideration by the Aneth Chapter:

VII. Certification
VII. Cerunication
I hereby certify that information in Items I through VII are true and accurate to the best of my knowledge. I understand any falsification of statement may disqualify my application for housing assistance. I also agree to comply with the terms and conditions of the Aneth Chapter Housing Assistance Guidelines and Housing Assistance Policies and Procedures.
I further understand that the Aneth Chapter is relying on this information to verify my household's eligibility and priority for Aneth Chapter Housing Assistance program(s). I certify that all information and answers to the questions contained in this application are true and complete to the best of my knowledge. I authorize consent to have the Aneth Chapter verify the information contained in this application for purpose of proving my eligibility for housing assistance provided by the Aneth Chapter. I will provide all necessary information including sources(s) of all types of income, names, addresses, phone numbers, where applicable and any other information required for expediting the application process. I hereby authorize and instruct the Aneth Chapter to obtain and review my application and supporting documentation for qualifying purposes. I consent to the release of information needed to determine my eligibility, including minors who will reside in the home, for a program that best fits my needs and circumstances.
I understand that providing false information or making false statements is grounds for denial of my application. I further understand that review of this application is contingent on the eligibility criteria and the applicable program requirements and policies as they now exist or as they may hereafter be amended.
Applicant's Signature Date
Co-Applicant's Signature Date
XIII. Aneth Chapter Administration review, findings and recommendations

## **ANETH CHAPTER**

Housing Assistance Program

### AUTHORIZATION FOR RELEASE OF INFORMATION

all persons and	Housing Application as we dorganizations from Liabilious resource agencies and Housing	ity for providing	nts thereto. F Legally-refer	urther, I hereby re ent information (	elease to the
Signature(s):	Applicant	D	vate		
	Co-Applicant	D	vate		