

**ANETH CHAPTER  
HOUSING ASSISTANCE APPLICATION**

CHECKLIST OF REQUIRED DOCUMENTS FOR RENOVATION/ADDITION PROJECTS

- \_\_\_ 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 Home Ownership Verification**  
Official document indicating the applicant has the legal right to make improvements to home and that the applicant is the rightful owner of the home.
- \_\_\_ 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 areas of the home which need improvements.
- \_\_\_ 7. **Material Listing**  
A listing of materials needed for the proposed project.
- \_\_\_ 8. **Price Quotations on Material Listing**  
Must submit 2-3 price quotations of the material listing which are standard grade materials.  
*Note: Aneth Chapter reserves the right to verify that materials are standard materials and order changes to materials if quotations reflect materials which are beyond reasonable.*
- \_\_\_ 9. **Floor Plan**  
A schematic layout of home with approximate measurements indicating areas which will be improved/added to.
- \_\_\_ 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. **UNRHF Family Information Sheet**  
Applicant must fill out the family information sheet which will be made available when applicant has submitted required documentation.
- \_\_\_ 10. **Referrals**  
If there are any referrals written by medical agencies, etc. which you feel will assist you acquiring assistance.
- \_\_\_ 11. **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 Information**

Applicant Name (include Jr. or Sr. if applicable)			Co-Applicant Name (include Jr. or Sr. if applicable)		
DOB	Census No.	Social Security No.	DOB	Census No.	Social Security No.
Mailing Address			Mailing Address		
Work No.		Cell No.	Work No.		Cell No.
Email (if applicable)			Email (if applicable)		
Marital Status: Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried <input type="checkbox"/> Divorced <input type="checkbox"/>					
Are you or your spouse a veteran or a widow of a veteran? (if yes, indicate dates of service)					

Is any member of the household handicapped or disabled?

If yes, will that household member require reasonable accommodations?

Do you expect any additions to the household within the next 12 months?

Do you have full custody/legal guardianship of your dependents?

No. of Dependents:

*List all household members that are applying to live in this home with you.*

Name (First, Middle, Last)	Relationship to Head of Household	Date of Birth	Tribal Affiliation & Census No.	Disability Yes/No

**II. Request for Housing Assistance**

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 ownership transfer 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 participant of the Aneth Chapter Housing Assistance Program? (If yes, please indicate date; type of assistance and from whom assistance was received)

Will this be a Self-Help project? (If yes, please provide a list of names of individuals who will assist you)

What are your family's housing goals?

**III. Employment Information**

Applicant: are you employed?		Co-Applicant: are you employed?	
Occupation:		Occupation:	
Name & Address of Employer		Name & Address of Employer	
Length of Employment	Gross Monthly Income	Length of Employment	Gross Monthly Income

If other household members are employed or receiving general assistance please provide our office with information.

*Household Income(s) Calculations:*

Head of Household Income	=	\$	_____
Spouse Income	=	\$	_____
Other Additional Income	=	\$	_____
Annual Gross Family Income	=	\$	_____

**IV. Present Home Characteristics**

Owner	Year Built	No. of Rooms	Present overall condition of the home: Poor [ ] Fair [ ] Good [ ] Excellent [ ] Other [ ]
Type of Construction (frame, block, etc.)			Type of heating system: 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)

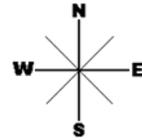
Is there a sewer system currently servicing home? (if no, please indicate nearest sewer facility)

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**V. Map to Property/Home Site Lease Location**

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*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.*



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**VI. Additional Information**

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*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:*

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**VII. Certification**

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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

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**XIII. Aneth Chapter Administration review, findings and recommendations**

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**ANETH CHAPTER**

*Housing Assistance Program*

AUTHORIZATION FOR RELEASE OF INFORMATION

I, \_\_\_\_\_, hereby authorize the Aneth Chapter to verify the information provided in the Housing Application as well as any attachments thereto. Further, I hereby release all persons and organizations from Liability for providing Legally-referent information to the Chapter's various resource agencies and Housing Sub-Committee in connection with my Housing Application.

Signature(s): \_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant

\_\_\_\_\_  
Date