

B. HOUSEHOLD INFORMATION:

List all other persons living in household on a permanent basis. Begin with the head of household and be sure to provide Social Security numbers for all family members.

<u>Name</u>	<u>Birth Date</u>	<u>Social Security No.</u>	<u>Relationship</u>	<u>Tribe/Roll No.</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Is the head of household or spouse disabled? _____

C. INCOME INFORMATION: List all family members at least 18 years of age who have income.

1. **Earned income:** This includes, but is not limited to, wages, salary, commissions, or profits (see staff for definition of income earned from self-employment). **You must provide a signed copy of income tax returns, W-2 forms, or other verification for all sources.**

<u>Name</u>	<u>Annual Income</u>	<u>Source of Income</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total annual earned income: \$ _____

2. **Unearned income:** This includes, but is not limited to, income from Tribal casino per capita, rental properties, child support and alimony, retirement, disability, unemployment, interest, tax refunds, general assistance, and public assistance. **Provide check stubs, statements, or other verification for all sources.**

<u>Name</u>	<u>Annual Income</u>	<u>Source of Income</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total annual unearned income: \$ _____

TOTAL COMBINED ANNUAL HOUSEHOLD INCOME (earned & unearned): \$ _____

D. HOUSING INFORMATION:

1. Have you or anyone in your household ever received any type of housing assistance from the Bureau of Indian Affairs, the Grand Ronde Tribal Housing Authority or the Confederated Tribes of the Grand Ronde Community of Oregon? _____ If yes, when? _____
2. Are you presently a homeowner? _____
3. If you are not currently a homeowner, have you owned a home within the past 3 years? _____
4. Are you currently pre-qualified by a lender for a home loan? _____ If yes, please attach a copy of the pre-qualification letter.

E. APPLICANT CERTIFICATION:

I, the undersigned applicant, certify the foregoing information to be true, complete and accurate to the best of my knowledge. It is the Tribe's position that the Down Payment Assistance Grant Program promotes the general welfare of the Tribe and its members and that grant payments are not taxable to the grantee. The Tribe is in the process of seeking a Private Letter Ruling on this issue from the Internal Revenue Service (IRS). The IRS has not specifically ruled on the taxability of the grant payments and may take the position that such payments are taxable. Please consult your personal tax advisor.

Applicant's Signature _____ **Date** _____

Spouse's Signature _____ **Date** _____

Please include a copy of the tribal enrollment card for the head of household.

The information provided in this application will remain confidential within the Grand Ronde Tribal Housing Authority and the Confederated Tribes of the Grand Ronde, with limited release of information to the Federal Office of Housing and Urban Development (for monitoring purposes only). No information will be released to outside parties without the written consent of the applicant(s).

APPLICANTS ARE RESPONSIBLE FOR KEEPING THE INFORMATION IN THEIR APPLICATION CURRENT.

THIS APPLICATION IS SUBJECT TO CURRENT ELIGIBILITY REQUIREMENTS AND AVAILABILITY OF FUNDING AT THE TIME OF SELECTION FOR PROGRAM PARTICIPATION.