

## Robinson Rancheria Housing Department Assistance Application

<b>Program Applied For</b>	<b>Verification Needed</b>
<b>Down Payment Assistance</b> Max _____ Year _____ IHP _____	Income for all Household Members Title Down Payment Assistance Application
<b>On Reservation Homeowner</b>	Income for all Household Members Application for Homeownership
<b>Transitional/low rent town home</b>	Income for all Household Members Application for low rent unit
<b>Rental Assistance</b> Max \$500 per tribal member per year	Income for all Household Members Rental/lease Agreement
<b>Energy Assistance</b> Max \$150 per household per year	Income for all Household Members Utility Bill Responsibility statement (if not in tribal members name)
<b>Appliance Replacement</b> Max \$600	Income for all Household Members (For Rancheria residents only)
<b>Misc. Emergency Repairs</b>	Income for all Household Members (For Rancheria Residents Only) Proof of Emergency

Applicant Name \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Co-Applicant \_\_\_\_\_ Home Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street/PO Box      City      State      Zip Code

Physical Address \_\_\_\_\_

Street      City      State      Zip Code

Family Information \_\_\_\_\_ Social Security \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_

\_\_\_\_\_ Applicant \_\_\_\_\_

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

\_\_\_\_\_ Child \_\_\_\_\_

\_\_\_\_\_ Child \_\_\_\_\_

\_\_\_\_\_ Child \_\_\_\_\_

\_\_\_\_\_ Child \_\_\_\_\_

Employment Information (Provide information regarding all household members who are employed) this information will be entered into the Tribal Data Resources (TDR) system. This will determine what your percentage is based on the HUD's median household income guidelines. Please attach all income verifications to your application.

Applicant's Employer \_\_\_\_\_ Position/Title \_\_\_\_\_

Employer's Address \_\_\_\_\_ Length of Employment \_\_\_\_\_

Gross Monthly Income (income before deductions) \_\_\_\_\_ Hourly Rate \_\_\_\_\_

Previous Employer (If less than two years at current job) \_\_\_\_\_

Co-Applicant's Employer \_\_\_\_\_ Position/Title \_\_\_\_\_

Employer's Address \_\_\_\_\_ Length of Employment \_\_\_\_\_

Gross Monthly Income (income before deductions) \_\_\_\_\_ Hourly Rate \_\_\_\_\_

Previous Employer (If less than two years at current job) \_\_\_\_\_

Any other Household members employed? \_\_\_\_ Yes \_\_\_\_ No (if yes, on separate sheet of paper provide same information as shown above)

Applicant Housing Information

How long have you lived at your current address? \_\_\_\_\_ Current Monthly Rent \_\_\_\_\_

Have you or your co-applicant owned a house in the past three (3) years? \_\_\_\_ Yes \_\_\_\_ No  
If yes, how long ago and where was the property located? \_\_\_\_\_

Please list all places you have resident for at least a five year period.

Years at Address	Address	Landlord Name & Address	Contact Number

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Co-Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

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For Office Use Only

Date Application Received \_\_\_\_\_ By \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_

Reason for Decision

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