



TAGIUGMIULLU NUNAMIULLU
HOUSING AUTHORITY

P.O. BOX 409
BARROW, ALASKA 99723

TELEPHONE (907) 852-7150

FAX (907) 852-4367 - Accounting
FAX (907) 852-2038 - Admin.

NAHASDA Housing Repair/Assistance Checklist

This application is for the NAHASDA Repair/Assistance Program, which is a partnership between Tagiugmiullu Nunamiullu Housing Authority (TNHA) and the local Tribal Governing body. Each applicant must meet certain eligibility requirements:

1. Applicant's income must be 80% or less of Median Family Income. Income Taxes or third party verifications will be used to verify.
2. Applicant must provide Certificate or Degree of Indian Blood or a copy of Tribal Enrollment Card.
3. Homes must be owner occupied, and located in the six villages of Anaktuvuk Pass, Atqasuk, Kaktovik, Nuiqsut, Point Lay, and Wainwright.

<p>IMPORTANT! Please use this checklist to insure that your application is completed correctly and that omission of these documents will not necessarily delay your file.</p>	<p>Applicant, Check this column to certify document is enclosed</p>	<p>Check by Housing Authority, when received</p>
<p>1. A signed copy of the Housing Assistance Application. ALL Applicants (Mandatory)</p>		
<p>2. Release and Agreement Not to Sue All Applications (Mandatory)</p>		
<p>3. A copy of or application for your certificate of Indian Blood, or a copy of your tribal enrollment card. ALL Applicants (Mandatory)</p>		
<p>4. A copy of a Warranty Deed or a Quit Claim Deed to your House. Helpful but not Mandatory</p>		
<p>5. Copies of each household member's most recent income tax statement form 1040, including all PFD's, social security, retirement, disability, unemployment benefits, child support, alimony, per capita payments, and interest. Copy of each house hold member Shareholder Dividends (Mandatory)</p>		
<p>6. We would like photographs of the house, both interior and exterior, as it stands today. Helpful, but not Mandatory</p>		

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APPLICATION FOR HOME HEATING SYSTEM UPGRADE

Home Heating System Upgrades are available to qualified low-income enrolled tribal members residing in Anaktuvuk Pass, Atqasuk, Kaktovik, Nuiqsut, Point Lay, and Wainwright. Eligibility is restricted exclusively to owner-occupied privately owned homes, physically located in those villages.

Applications will be accepted only until May 30, 2009 for the replacement of low efficiency home heating systems with high efficiency ENERGY STAR® or EPA rated systems.

Applicant Information

Name: _____

Street Address or P.O. Box #: _____ City: _____ State: _____ Zip: _____

Phone # where you can be contacted: _____

Are you an enrolled member of a federally recognized tribe? Yes [] No [] Name of Tribe _____

Family Composition (Persons who live in your home)

Family Member Number	Name(s) of Your Family Members	Relationship To You	Date of Birth	Sex (M or F)	Social Security Number*
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

*Social Security number is required for all family members who are 6 years of age or older

Estimated Family Income (for next 12 months)

Income from employment:

Family Member Number	Employer Name(s) & Address	Rate Per Hour	Rate Per <u>Week</u>	Total Per Year
1.		\$		
2.		\$		
3.		\$		
4.		\$		

Other income:

Source	Rate Per Month	Total Per Year
TANF	\$	
Social Security	\$	
S.S.I.	\$	
Unemployment	\$	
Pensions	\$	
Leases	\$	
Own Business	\$	
Other*	\$	

*Other sources of income include alimony, relief, service allotments, assistance from relatives, payments for foster children, and any other regular source of income. Please do not list income that cannot be anticipated with certainty.

Information about your home

- **Do you own your home?** Yes No
- **Do you permanently live in this home?** Yes No
- **Is it physically located in Anaktuvuk Pass, Atqusuk, Nuiqsut, Point Lay, or Wainwright?**
Yes No
- **Do you own the land on which this home is located?** Yes No
- **What status is the land now listed in?** Individual Trust Tribal Trust Individually Restricted (Allotment) Tribal Restricted Tribal Fee Simple Fee Patented I do not know
- **If you do not own the land, do you have:** A leasehold interest? Use Permit Other

Signature and consent to release information

I understand that this application is not a contract and is not binding in any manner. I hereby authorize TNHA to obtain any and all information necessary for the purpose of verifying the statements made above. I also understand that it is my responsibility to inform TNHA if there is any change in my family status along with reporting any changes in income, living conditions and change of address. I further certify that all of the answers given are true, complete and correct to the best of my knowledge and belief, and are made in good faith.

Applicant's Signature

Date

Signature of TNHA employee receiving application

Date Complete Application Received

Note: If you are now living in a home served by a TNHA program (Mutual Help, LIPP, or have a pending but approved Tribal Upgrade Program application) do not apply.

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TAGIUGMIULLU NUNAMIULLU REGIONAL HOUSING AUTHORITY

NAHASDA REPAIR PROGRAM

RELEASE AND AGREEMENT

I/we, _____, hereby accept residence repair services offered by Tagiugmiullu Nunamiullu Regional Housing Authority (“TNHA”), under the NAHASDA Repair Program. The repairs will be made to my/our property known as _____ [street address] (“the Property”). I further understand that acceptance of repair(s) under the program will does not include obligation, either explicit or implied, to address any or all structural or building code violations which may exist beyond the immediate scope of the repair.

Definition of TNHA. As used herein, “TNHA” means not only Tagiugmiullu Nunamiullu Regional Housing Authority but also its Board of Commissioners, employees, and agents.

Assumption of risk of loss. On my/our own behalf and on behalf of all owners of any interest in the Property and my/our heirs and assigns, I/we acknowledge that I/we am/are voluntarily participating in the NAHASDA Repair Program and agree to assume any risk of loss associated with the repairs, unless the loss is the result of TNHA’s gross negligence or recklessness.

Release and agreement not to sue. I/we hereby release, discharge and agree not to sue TNHA for any injury to any person or damage or loss of value to any property, real or personal, arising from or in connection with TNHA’s residence repair service to the Property, from whatever cause, except TNHA’s gross negligence or recklessness.

I/WE HAVE CAREFULLY READ THIS RELEASE AND AGREEMENT NOT TO SUE AND FULLY UNDERSTAND ITS CONTENTS. I/WE AM/ARE AWARE THAT THIS IS A FULL RELEASE OF ALL LIABILITY AND SIGN IT OF MY/OUR OWN FREE WILL.

RESIDENCE OWNER(S):

SIGNATURE DATE

SIGNATURE DATE