

KENAITZE SALAMATOF *Housing*

SAFE HOMES PROGRAM

Dear Applicant:

To determine your eligibility for the Safe Homes Program, all documents and information required must be completely filled out and returned to the Kenaitze/Salamatof TDHE Housing Office. Any information you give will be verified by your Housing Authority.

The following checklist is to help you meet those requirements necessary to process your application. If any one is not checked then the application will be returned to you.

- Application must be **completely filled out and signed**
- Income Tax Return forms for the past 3 yrs verifying your income
- Verification of Employment with 2 past pay period stubs
- Verification of Other Income such as AK PFD, SSI, Unemployment, etc.
- Certificate of Indian Blood
- Bring your ID, Tribal ID, and Social Security Card with you
- Copies of all Birth Certificates in the household living with you
- Borough Assessment, **Are there delinquent taxes**
- Copy of deed, bank agreement, quit claim, lease
- Insurance, fire, flood, etc

KENAITZE SALAMATOF *Housing*

Safe Homes Program

Please read carefully and print or type all questions and sections of the application. Use additional paper if necessary.

GENERAL

Primary applicant first name	MI	Last	Home phone:
			Work phone:
Co-Applicant first name	MI	Last	Home phone:
			Work phone:
Current Physical Address	City	State	Zip
Mailing Address	City	State	Zip
List ALL persons who are and will be living with you			
Name	SSN	Marital Status	Gender Birthdates Age Relationship
Applicant:			
Co-applicant:			

EMPLOYMENT

Applicant's Current Employer	Date of Hire	Phone Number of Employer
Employer's Address	City	State Zip
Co-applicant's Current Employer	Date of Hire	Phone Number of Employer
Employer's Address	City	State Zip

INCOME VERIFICATION (Please attach 2 pay stubs for each income if any)

Primary Income: You must list all income earned by everyone in your household. This includes income wages from Employer, self employment, cash given to you. Please provide proof

Family Member	Source of Income	Gross Monthly Income	Yearly Income
Applicant:			
Co-applicant:			

Other Income: This includes your Alaska Permanent Fund Dividend, Native Corporation dividends, Child Support, Social Security and Disability, Retirement, Worker's Compensations, etc. Please provide proof

Family Member	Source of Income	Gross Monthly Income	Yearly Income
Applicant:			
Co-applicant:			

Safe Homes Program

Kenaitze/Salamantof Housing has established a program for qualified low and moderate-income Alaskan Natives/American Indians for repairs and upgrades of their homes. Policies and procedures have been set forth to provide the following services; to make certain homes are handicapped accessible, work to improve upgrades such as conducting weatherization and energy efficient home repairs, and guarantee the health and safety issues are met environmentally.

Basic guidelines are as follows:

1. Kenaitze/Salamantof Tribal Member
2. Alaskan Native/American Indian
3. Within the income guideline limits
4. There is a need established
5. Home must be owned or have been leased a two year primary residence
6. Must be a primary residence
7. Pay back the Kenaitze/Salamantof Housing if not maintained as primary place of residence on a pro-rated scale.

The following is a set guideline of funding through our grant system:

\$0 - \$5,000	Maximum monies for mobile home
\$0 - \$14,000	No lien/no-payment will be expected from the participant unless house is sold within two (2) years of weatherization/modernization. Payback will be required if not maintained as primary place of residence. Fire Insurance is a requirement.
\$0 - \$14,500	Only Elders qualify

Before any work begins on the participant's home, Project Supervisor and Contractor will review the scope of work and a cost estimate will be made for your home.

I have read the above agreement and understand all the terms and conditions made by KIT/STC.

Applicant Signature

Date

Co-applicant's Signature

Date

Things you should know

Purpose: When you are applying for assistance you must provide all information within this application. There are penalties if you knowingly omit or give false information.

Completing the application: When you give your answers to the application you must include the following information:

- All sources of money you and any adult in your household
- Any money you receive on behalf of your child
- Income from assets or business assets you may have or have sold in the last two years for less than its value such as your home or property or land.
- Earnings from a second or a part time job, or even babysitting cash received and please provide written documentation from the person you received it from
- Any anticipated income such as early surrender of retirement
- All bank accounts, savings, stocks and bonds, certificates of deposit, Estate that are owned by you and anyone in your household
- All the names of people who will actually be living with you whether they are related, temporary or not.

Penalties for committing fraud: The United State Department of Housing and Urban Development places high priority on preventing fraud. If your application form contains false or incomplete information, you may be:

- Evicted from your house
- Required to repay all overpaid housing assistance you received
- Fined up to \$10,000.00
- Imprisoned for up to five years and convicted of a felony offense
- Prohibited from receiving future assistance

Your state and local government may have other laws as well.

Be aware of fraud: You should be aware of the following fraud schemes:

- It is wrong to pay any money to file the application
- It is wrong to pay any money to move up on the application list
- It is wrong to pay anything not covered by your lease
- Do get a receipt for any money you pay
- Do get a written explanation if you are required to pay any money other than what your contract covers

Signing the application: Do not sign the application unless you have read and understood each part of the form. Be sure that everything is complete and accurate. When you do sign the application you are claiming that it is true and complete to the best of your knowledge.

Kenaitze/Salamantof TDHE: Reserves the right to conduct criminal background checks on all applicants and based on our finding we have the right to refuse assistance. Criminal acts and convictions of any kind or even a citation involving drugs, violence, kidnapping, domestic violence, sex offence will disqualify you from assistance. Traffic Violations are not a factor unless otherwise noted different in your background check.

Recertification: You must provide information at least one a year. Some programs require that you report any changes in income or family composition immediately. You must report recertification forms all income changes such as pay increases, added or loss of benefits, change of job for any and all family members. You must report any family member who has moved in or out.

I understand that use of a photocopy of this release may be necessary to verify one or more of my references. I authorize that use and request that such a copy be honored fully, as if it were original. I understand that a photocopy of this form will also serve as authorization.

I have read and understood this important notice to applicant.

Applicant Signature

Date

Co-applicant

KENAITZE
SALAMATOF
Housing

SAFE HOMES PROGRAM

I understand and agree that by participating in the Kenaitze/Salamantof TDHE Safe Home Program, I will not sell my home for a period of two (2) years. If I should have to sell my home for some unforeseen reason, I agree to repay the full amount of the funding expended on the rehabilitation of my residence to the Kenaitze/Salamantof TDHE. The total cost will include but not limited to all monies spent on inspection, labor, material, independent contractors, and administrative fees incurred.

In the event of death of a participant, the payback of funding won't be necessary provided the home stays in the possession of the immediate family. If the home is sold, the rehabilitation funding will have to be repaid.

A Deed of Trust will be recorded at the time of rehabilitation for the amount of funding necessary to complete the project.

Applicant _____

Date _____

Co-applicant _____

Date _____

Signature Authorization Form

To Whom It May Concern:

I hereby authorize Kenaitze/Salamantof Housing, to verify my past and present employment earnings.

I also authorize the Social Security Administration or any other State or Federal Government agency to release verification of my income, date of birth, the type of benefits, the effective date and the length of time the benefits will be received to Kenaitze/Salamantof Housing.

The information the Housing obtains is only to be used in the processing of my application for the weatherization and modernization program.

Applicant

Date

Co-applicant

Date

Effective
February 13, 2008

FY 2008 NAHASDA Income Limits for ALASKA

Community Name	INCOME LIMIT- 1 PERSON	INCOME LIMIT- 2 PERSONS	INCOME LIMIT- 3 PERSONS	INCOME LIMIT- 4 PERSONS	INCOME LIMIT- 5 PERSONS	INCOME LIMIT- 6 PERSONS	INCOME LIMIT- 7 PERSONS	INCOME LIMIT- 8 PERSONS
Anchorage Borough Low Income Limit Anchorage Borough Median Income	43,050 55,100	49,200 63,000	55,350 70,800	61,500 78,700	66,400 85,000	71,350 91,300	76,250 97,600	81,200 103,900
Aleutians East Borough Low Income Limit Aleutians East Borough Adjusted Median Income	38,200 47,700	43,650 54,600	49,100 61,400	54,550 68,200	58,900 73,700	63,300 79,100	67,650 84,600	72,000 90,000
Aleutians West Census Low Income Limit Aleutians West Census Median Income	43,050 62,600	49,200 71,500	55,350 80,500	61,500 89,400	66,400 96,600	71,350 103,700	76,250 110,900	81,200 118,000
Bethel Census Area Low Income Limit Bethel Census Area Adjusted Median Income	43,050 53,800	49,200 61,500	55,350 69,200	61,500 76,900	66,400 83,100	71,350 89,200	76,250 95,400	74,650 101,500
Bristol Bay Borough Low Income Limit Bristol Bay Borough Median Income Limit	41,050 51,300	46,900 58,600	52,800 66,000	58,650 73,300	63,350 79,200	68,050 85,000	72,750 90,900	77,400 96,800
Denali Borough Low Income Limit Denali Borough Median Income	43,050 60,600	49,200 69,200	55,350 77,900	61,500 86,500	66,400 93,400	71,350 100,300	76,250 107,300	78,650 114,200
Dillingham Census Area Low Income Limit Dillingham Census Area Adjusted Median Income	38,200 47,700	43,650 54,600	49,100 61,400	54,550 68,200	58,900 73,700	63,300 79,100	67,650 84,600	72,000 90,000
Fairbanks North Star Borough Low Income Limit Fairbanks North Star Borough Median Income	39,950 49,900	45,650 57,000	51,350 64,200	57,050 71,300	61,600 77,000	66,200 82,700	70,750 88,400	74,050 94,100
Haines Borough Low Income Limit Haines Borough Adjusted Median Income	38,200 47,700	43,650 54,600	49,100 61,400	54,550 68,200	58,900 73,700	63,300 79,100	67,650 84,600	72,000 90,000
Juneau Borough Low Income Limit Juneau Borough Median Income	43,050 60,900	49,200 69,600	55,350 78,300	61,500 87,000	66,400 94,000	71,350 100,900	76,250 107,900	78,650 114,800
Kenai Peninsula Borough Low Income Limit Kenai Peninsula Borough Adjusted Median Income	38,200 47,700	43,650 54,600	49,100 61,400	54,550 68,200	58,900 73,700	63,300 79,100	67,650 84,600	72,000 90,000
Ketchikan Gateway Borough Low Income Limit Ketchikan Gateway Borough Median Income	40,800 51,000	46,650 58,300	52,450 65,600	58,300 72,900	62,950 78,700	67,650 84,600	72,300 90,400	76,700 96,200
Kodiak Island Borough Low Income Limit Kodiak Island Borough Median Income	40,950 51,200	46,800 58,500	52,650 65,800	58,500 73,100	63,200 78,900	67,850 84,800	72,550 90,600	76,950 96,500
Lake and Peninsula Borough Low Income Limit Lake and Peninsula Borough Adjusted Median Income	38,200 47,700	43,650 54,600	49,100 61,400	54,550 68,200	58,900 73,700	63,300 79,100	67,650 84,600	72,000 90,000