

# **Homeowner Assistance Fund Program**

# Checklist List

The following information is required to process your application. Please submit copies of the following:

- State ID, Driver's License, or Tribal ID
- Verification of current income. Such as: Paycheck stub, monthly SSI statements, or monthly unemployment compensation statements.
- > Copy of IRS Form 1040 filed for the household in 2021 with the IRS.
- Copies of Utility Bills (Electric, Water, and Sewer) and/ or Past Due Mortgage Payment Billing.
- Personal Statement explaining how the COVID-19 Pandemic affected your household.

### PHOTOCOPIES ARE NOT ACCEPTED. PLEASE SUBMIT DOCUMENTS IN PDF FORMAT WHEN EMAILING.

The Homeowner Assistance Fund Program is eligible to applicants whose combined household gross income is at or below the median family income. Please see below for Tucson County median income levels.

FY 2022 HAF Income Limits Summary for Tucson, AZ								
	1	2	3	4	5	6	7	8
Greater of 100%								
AMI or 100%								
U.S. Median								
Income	\$ 90,000.00	\$ 90,000.00	\$ 90,000.00	\$ 90,000.00	\$ 90,000.00	\$ 90,000.00	\$ 95,150.00	\$ 101,250.00
Greater of 150%								
AMI or 100%								
U.S. Median								
Income	\$ 90,000.00	\$ 92,050.00	\$ 103,550.00	\$ 115,050.00	\$ 124,300.00	\$ 133,500.00	\$ 142,700.00	\$ 151,900.00



## HOMEOWNER ASSISTANCE FUND PROGRAM APPLICATION

Name:					_		
	ice: 🗌 Amer	e 🗆 Pao	cific Islander		k/African American 🗌		tive Hawaiian
Address:							
City:		Stat	e: Zip	o Code: _	Т	ribal ID #	
Phone No	).:			E-Mail A	ddress:		
List all ho	usehold memt	oers:				Inco	me <sup>1</sup>
Na	ame	D.O.B.	Tribal Affiliation	M/F	Social Security No.	Monthly	Annual

Current Monthly Gross Household Income: \$ \_\_\_\_\_

<sup>&</sup>lt;sup>1</sup>Income eligibility may be determined on either an annual (past 12 months) or current monthly basis (current monthly income times 12).

Homeowner Assistance Fund Application
Date: \_\_\_\_\_\_
Initals: \_\_\_\_\_\_

Total Gross Household Income for the past 12 months: \$ \_\_\_\_\_

Please provide a written attestation to household income and, to the extent available, attach supporting documentation (such as paystubs or other monthly wage statements; depository institution statements demonstrating regular income; copies of past tax filings (state and/or federal); other proof of 12-month income and related documentation such as W-2s and IRS Form 1099s; or written attestation from employer regarding income earnings).

- 1. A household must be deemed eligible to receive homeowner assistance. An eligible household must meet each of the following criteria:
  - a. The Homeowner must have experienced financial hardship after January 21, 2020. "Financial hardship" means a material reduction in income or material increase in living expenses associated with the COVID-19 pandemic that has created or increased a risk of mortgage delinquency, mortgage default, foreclosure, loss of utilities, or home energy services, or a displacement for a homeowner. Examples of financial hardship include job loss, reduction in income, increased costs due to healthcare or the need to care for a family member or increases in living expenses.

Did the Homeowner experience financial hardship after January 21, 2020?

Yes 🗌 🛛 No 🗌

If "Yes," please explain (and attach supportive documentation such as employment termination letter or healthcare bill or affidavit): \_\_\_\_\_

- b. Income eligible (eligibility determination based on documentation provided in support of this Application).
- 2. The Qualified Expenses for which the household wishes to obtain homeowner assistance related to the Homeowner's primary residence (attach supportive documentation) are:
  - Mortgage payment assistance:
     Amount: \$\_\_\_\_\_, from \_\_\_\_\_(date) to \_\_\_\_\_(date)
  - Financial assistance to allow the Homeowner to reinstate a mortgage or to pay other housing-related costs related to a period of forbearance, delinquency, or default<sup>2</sup>
     Amount: \$\_\_\_\_\_

<sup>&</sup>lt;sup>2</sup>"Housing-related costs related to a period of forbearance, delinquency, or default" includes payment of fees, penalties, and costs associated with such periods.

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□ Mortgage principal reduction<sup>3</sup>

Amount: \$\_\_\_\_\_

□ Principal reduction on mortgage down payment assistance loans provided by non-profit or governmental entities to Homeowner

Amount: \$\_\_\_\_\_

□ Facilitation of mortgage interest rate reductions<sup>4</sup>

Amount: \$\_\_\_\_\_

 Payment assistance for delinquent property taxes to prevent Homeowner tax foreclosure Amount: \$

□ Payment assistance for:

□ Homeowner's utilities, including electric, gas, home energy (including firewood and home heating oil), water, and wastewater

Amount: \$\_\_\_\_\_, from \_\_\_\_\_(*date*) to \_\_\_\_\_(*date*)

- Homeowner's internet services, including broadband internet access service Amount: \$\_\_\_\_\_, from \_\_\_\_\_(date) to \_\_\_\_\_(date)
- □ Homeowner's homeowner insurance, flood insurance, and/or mortgage insurance Amount: \$\_\_\_\_\_

□ Homeowner's association fees or liens, condominium association fees, or common charges Amount: \$\_\_\_\_\_

- $\Box$  Cost of assistance to prevent Homeowner displacement
  - Assistance to enable the household to receive clear title to the primary residence Amount: \$\_\_\_\_\_
- 3. Has the household received any other federally funded assistance duplicative of any Qualified Expenses for which the Homeowner is seeking financial assistance?
  - Yes 🗆 🛛 No 🗆

If "Yes," please explain: \_\_\_\_\_\_

<sup>&</sup>lt;sup>3</sup>"Mortgage principal reduction" includes reductions in a second mortgage provided by a non-profit or governmental entity.

<sup>&</sup>lt;sup>4</sup>"Mortgage interest rate reduction" includes a reduction in loan interest rate through refinancing or loan modifications. TOKA may pay on behalf of the Homeowner fees and costs for such mortgage interest rate reduction.

Homeowner Assistance Fund Application Date: \_\_\_\_\_ Initals: \_\_\_\_\_

By signing this Application, I attest that the information provided is complete and true to my knowledge. I understand that any false information will void my Application.

 $\boxtimes$  Additional attestations are attached to this Application.

Signature:	 Date:	
-		

FOR OFFICE USE ONLY:						
Does the household have a household income that is not more than 150 percent of the area median income?						
Yes 🗆	No 🗆					
Does the household have a household income that is not more than 100 percent of the area median income?						
Yes 🗆	No 🗆					
The household is eligible $\Box$ ineligible $\Box$						
		Approved:				
INTAKE OFFICER	DATE	Executive Director	DATE			

Homeowner Assistance Fund Application
Date: \_\_\_\_\_
Initals: \_\_\_\_\_

#### **RELEASE AND CONSENT**

The information specified on this Release and Consent will be used by the Tohono O'odham Ki:Ki Association (TOKA) to verify information provided in the Application related to requests for assistance. By signing this form, the Applicant authorizes any mortgage provider, provider of mortgage down payment assistance, utility or home energy services provider, internet provider, insurance agent, homeowner's or condominium association, property tax assessor, or contractor hired to complete home repairs or additions to furnish or release to TOKA such information as TOKA determines to be necessary to verify information provided in the Application for the Homeowner Assistance Fund Program. Additional disclosure of the information will not be made without the specific consent of the undersigned, except to a federal law enforcement agency upon such agency's notification to TOKA of a violation or possible violation of civil or criminal law by the undersigned.

This is a consent to release information about:

Name of Homeowner

Social Security Number

Date of Birth

I understand that this Release and Consent expires automatically on \_\_\_\_\_\_ (*date*) unless I revoke it sooner in a writing to both TOKA and the person or entity providing the information. Any information already released before my revocation may be used as stated on this Release and Consent.

By my signature below, I affirm that I have read this Release and Consent, or it has been read to me, and I understand its content.

Name of Homeowner

Signature

Date