



Department of Administration
COVID-19 Homeowner Assistance Program

Post Office Box 638 / Ada, OK 74821-0638 / (580) 757-9082 / Toll-free: (833) 551-0980 / Fax: (580) 272-1398 / Email address: HAP@Chickasaw.net

COVID-19 Homeowner Assistance Program Application

The Homeowner Assistance Program (HAP) provides mortgage payment assistance, utility assistance, non-escrowed taxes, and insurance assistance, to eligible households who have experienced a COVID-19 qualified financial hardship since January 21, 2020. Eligible households include Chickasaw citizen homeowners or homeowners permanently living with a Chickasaw citizen spouse and/or dependent, within the United States.

Please submit one application per household.

Which eligibility group applies to your household?

- I am a Chickasaw citizen
- A Chickasaw citizen lives in the household
- None of the above

Household Income Information:

How many live in your household? _____ State: _____ County: _____

What is the total gross household monthly income? _____

Gross income is the sum of all wages, salaries, profits, interest payments, rents, and other forms of earnings, before any deductions or taxes.

Are you able to provide supporting documentation of household income? Yes No

Supporting documentation for income verification is highly recommended, but may not be required. Documentation may include paystubs, W-2s, other wage statements, tax filings, bank statements demonstrating regular income, or attestation from an employer, etc.

COVID-19 Hardship Information:

A COVID-19 qualified financial hardship is a material reduction in income or material increase in living expenses associated with the coronavirus pandemic that has created or increased the risk of mortgage delinquency, mortgage default, foreclosure, or loss of utilities or home energy services.

This includes the following:

- **Reduction of income** - Temporary or permanent loss of earned income documented after January 21, 2020.
- **Increase in living expenses** - Increase in out-of-pocket household expenses directly related to the coronavirus pandemic after January 21, 2020.

Has your household experienced a material reduction in income or a material increase in living expenses due to the COVID-19 pandemic? Yes No

Please check each condition that applies to the homeowner or household member who has experienced a material reduction in household income or a material increase in living expenses due to the COVID-19 pandemic (check all that apply):

Reduction of income:

- Have been laid off temporarily or permanently.
- Have had work hours reduced.
- Are self-employed, and their business is no longer supplying them with income, or such income has been reduced.
- Are independent contractors or gig workers who have not been able to earn fees, or whose fees have been reduced.
- Have become sick themselves or have been advised by a governmental or medical professional to self-quarantine.
- Have had to leave a job or reduce hours in order to care for a person who is sick.
- Have had to leave a job or reduce hours to care for dependents whose ordinary situations (such as school or daycare) have been disrupted.

Increase in living expenses:

- Had an unexpected COVID-19-related medical or funeral expense.
- Had unexpected COVID-19-related child care or elderly care expenses.
- Have reported income for a household member that is not typically contributed to mortgage and/or housing-related expenses.
- Other conditions resulting in loss of income or increased expenses due to the COVID-19 pandemic. (Please describe below.)

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- I/we certify that the COVID-19 impact information provided above is true, complete, and correct to the best of my/our knowledge. I/we agree to provide any documentation that may be requested to verify eligibility.
 - I/we attest that all information provided is true, complete, and correct. I/we understand that I/we have been asked to provide supporting documentation such as pay stubs, W-2s, or other wage statements, tax filings, bank statements demonstrating regular income, or other forms of documentation to support the monthly income amount and if I/we are unable to provide this documentation as indicated above, it will not affect the eligibility determination.

Primary Homeowner/Borrower Information:

Name: _____
First Middle Last Suffix

Birth date: _____ Chickasaw citizenship ID no.: _____

Mailing address: _____
Street City State ZIP

Physical address: _____
Street City State ZIP

Home phone no.: (____) _____ Cell phone no.: (____) _____

Email address: _____

Preferred method of communication: Phone Email U.S. mail

Please provide details regarding the situation to allow us to better assist you quickly.
Please attach a separate sheet if more space is needed.

Is there a co-owner/co-borrower? Yes No

Co-owner/Co-borrower Information:

Name: _____
First Middle Last Suffix

Birth date: _____ Chickasaw citizenship ID no.: _____

Mailing address: _____
Street City State ZIP

Physical address: _____
Street City State ZIP

Home phone no.: (____) _____ Cell phone no.: (____) _____

Email address: _____

Preferred method of communication: Phone Email U.S. mail

Household Information:

Use the following table to list all household members. Include yourself as a household member. A household is defined as a group of related or unrelated individuals who usually live together and share income and expenses. **Chickasaw citizenship will be verified. Chickasaw citizenship ID no. is highly recommended, but not required for verification.**

First name	Last name	Birth date	Gender	Tribal affiliation	Citizenship ID no.

Mortgage Payment Assistance:

Mortgage payment assistance provides full or partial monthly mortgage payment assistance for monthly principal and interest payments, including escrowed items. If there are past due payments, the first disbursement will be applied to the past due balance before assistance will be provided for current due payments.

Do you have a primary mortgage on your home? Yes No
Are you requesting primary mortgage payment assistance? Yes No

First Mortgage Information:

Mortgage company name: _____

Mortgage company address: _____
Street City State ZIP

Mortgage company phone no.: (____) _____ Mortgage loan number: _____

Mortgage company email address: _____

What type of loan is your primary mortgage?

- Conventional/other loan
- Federal Housing Administration (FHA) loan
- Veterans Administration (VA) loan
- U.S. Department of Agriculture (USDA) loan
- Revenue bond loan

What is your current monthly mortgage payment? _____

Does your mortgage payment include (check all that apply):

- Property taxes
- Homeowner's insurance
- Mortgage insurance
- Homeowner/condo association fees

Are you delinquent on your first mortgage? Yes No

If yes, what is the amount you are delinquent on your first mortgage? _____

Have you applied to your mortgage loan servicer for assistance with your first mortgage delinquency? Yes No

If yes, please check all options that you were offered to help resolve your first mortgage delinquency:

- Repayment plan
- Deferral or partial claim
- Modification
- Reinstatement (lump sum)

Can you afford your monthly first mortgage payment after receiving assistance from the HAP? Yes No

Do you need the help of a Chickasaw Nation housing counselor to keep your home or make sure your monthly first mortgage payment is affordable? Yes No

Do you have a second mortgage on your home? Yes No

Are you requesting secondary mortgage payment assistance? Yes No

Second Mortgage Information:

Second mortgage company name: _____

Second mortgage company address: _____
Street City State ZIP

Second mortgage company phone no.: (____) _____ Second mortgage loan number: _____

Second mortgage company email address: _____

What type of loan is your second mortgage?

- Conventional/other loan
- Federal Housing Administration (FHA) loan
- Veterans Administration (VA) loan
- U.S. Department of Agriculture (USDA) loan
- Revenue bond loan

What is your current monthly second mortgage payment? _____

Does your second mortgage payment include (check all that apply):

- Property taxes
- Homeowner's insurance
- Mortgage insurance
- Homeowner/condo association fees

Are you delinquent on your second mortgage? Yes No

If yes, what is the amount you are delinquent on your second mortgage? _____

Have you applied to your mortgage loan servicer for assistance with your second mortgage delinquency? Yes No

If yes, please check all options that you were offered to help resolve your second mortgage delinquency:

- Repayment plan
- Deferral or partial claim
- Modification
- Reinstatement (lump sum)

Can you afford your monthly second mortgage payment after receiving assistance from the HAP? Yes No

Do you need the help of a Chickasaw Nation housing counselor to keep your home or make sure your monthly second mortgage payment is affordable? Yes No

Non-escrowed Assistance:

Non-escrowed assistance provides full or partial payment assistance to pay homeowner's insurance, flood insurance, mortgage insurance, delinquent property taxes to prevent homeowner tax foreclosures, and property charges coming due in the 90 days following HAP approval. Applications can include homeowners with or without a mortgage. If there is a past due payment, the first disbursement will be applied to the past due balance.

- Property tax assistance

Name of property tax authority: _____

Property tax authority address: _____
Street City State ZIP

Phone no.: (____) _____ Property tax account number: _____

Amount of property tax assistance requested: _____

- Homeowner insurance assistance

Name of homeowner insurance provider: _____

Homeowner insurance provider address: _____
Street City State ZIP

Phone no.: (____) _____ Homeowner insurance account number: _____

Amount of homeowner insurance assistance requested: _____

Utility Assistance:

Utility assistance provides full or partial monthly payment assistance to make payments for utility or internet access services. If there are past due payments, including interest and prospective charges, under circumstances in which non-payment threatens access to utility or internet services, the first disbursement will be applied to the past due balance before assistance will be provided for current due payments.

- Utilities and home energy costs

Use the following table to list utility and home energy costs with their related fields. Utility types include electricity, firewood, water/sewer, fuel oil, gas, internet, and propane.

Utility <small>(gas, water, propane, etc.)</small>	Utility company	Phone number	Account number	Status <small>(current or past due)</small>	Current amount due	Cut-off date <small>(if applicable)</small>

Has anyone in your household applied for, or received any mortgage, property tax, homeowner insurance, or utility

assistance from any source (local, state, federal, tribal, or private organization) after January 2020?

Yes No

Please explain other housing assistance that you have already received. Provide all of the sources of financial and/or housing assistance (the name of the local, state, federal, tribal, or private organization).

Supporting Documentation:

- I have attached the following documentation to my application:
 - Income documentation (supporting documentation for income verification is highly recommended, but may not be required.)
 - Utility bill(s)
 - Mortgage statement(s)
 - Property tax statement
 - Homeowner insurance statement
 - Participant certification
 - Authorization for Disclosure of Personal Information

Applications will not be considered complete until all required supporting documentation is received.

Certification:

By signing below, I/we certify that I/we have read the participant certification, that I/we attest that all statements within the participant certification are true and correct and apply to me/us; that I/we have reviewed this application and the information included with this application; and that all information included with this application is correct and complete to the best of my/our knowledge and any funding or assistance received will be used for the intended purpose; and that I/we will cooperate with the Chickasaw Nation as reasonably necessary to process my/our application.

Applicant signature _____

Date _____

Please submit the completed application and supporting documentation to:

**The Chickasaw Nation
Homeowner Assistance Program
Post Office Box 638
Ada, OK 74821-0638
Phone no.: (580) 757-9082
Toll-free: (833) 551-0980
Fax: (580) 272-1398
Email address: HAP@Chickasaw.net**

This project is being supported, in whole or in part, by federal award number HAFP-0167 awarded to the Chickasaw Nation by the U.S. Department of Treasury. Assistance will be provided based on funds available through this award.