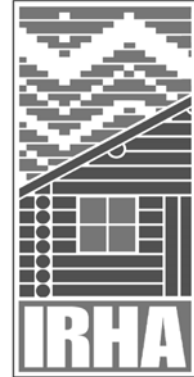


# INTERIOR REGIONAL HOUSING AUTHORITY

828 27<sup>th</sup> Avenue • Fairbanks, Alaska 99701

Phone: (907) 452-8315 • Fax: (907) 452-8324



Applicant Name: \_\_\_\_\_ Date of Application: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please bring copies of the following items with your application. Failure to provide the necessary copies will delay the processing of your application.

- Application form completely filled out and signed.
- Certificate of Indian Blood (CIB) card (you can obtain that card at the Bureau of Indian Affairs.)
- Income verification:
  - Pay stubs for the last 2 pay periods.
  - Verification of all other income
- Picture ID for each adult.
- Complete Rental History for the past three (3) years.

## NOTICE TO ALL APPLICANTS

**In order for Interior Regional Housing Authority (IRHA) to determine your eligibility for the Program, all documentation and information required must be completed and returned to IRHA within thirty (30) days of the receipt of our completed application form. If you require assistance in completing this application, please contact the Housing Department. This application is not a declaration of eligibility. It is only for the purpose of determining eligibility, after which you MAY be placed on the waiting list for assistance.**



**Interior Regional Housing Authority  
RENTAL ASSISTANCE  
APPLICATION**

**Please read and completely fill-out ALL questions to enable IRHA to process your application. Use additional paper if necessary. PRINT or TYPE.**

Applicant Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Co-Applicant: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Other Names Used: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_, State \_\_\_\_\_ Zip Code \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Do you currently:
Rent _____
Own _____
Other _____

**Please list all persons who will be living in your home**

NAME	SS NUMBER (if available)	Marital Status	GENDER	AGE	RELATIONSHIP
Applicant:					
Co-Applicant:					

Have you ever been evicted or suspended from any HUD housing program?  Yes  No

Have you been a homebuyer or homeowner in the last three years?  Yes  No

Do you have Certificate of Indian Blood card?  Yes  No

Are any members of your immediate family related to any employees or Board of Commissioners of IRHA? If Yes, explain, \_\_\_\_\_  Yes  No

Applicant's  
Current Employer Name and Address:

\_\_\_\_\_ From: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_\_ To: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Co-Applicant's  
Current Employer Name and Address:

\_\_\_\_\_ From: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_\_ To: \_\_\_\_ / \_\_\_\_ / \_\_\_\_



**INCOME:** You must list all income earned or received by everyone listed on your application, including Native Corporation income. This includes all income from wages, self-employment, child support, social security, disability, retirement income, worker's compensation, etc. List gross amounts received and **attach verification for all income.**

(Note: If you are self-employed, that income will be verified through your tax returns.) For more information about appropriate verification, please see the last page of this application form.

FAMILY MEMBER	SOURCE OF INCOME	GROSS MONTHLY INCOME	YEARLY INCOME	Verification Attached

**TENANCY INFORMATION/ RENTAL HISTORY – Please provide last 3 years history**

Landlord Name	Address, City, State	Telephone Number	Rental Period	

- Yes**    **No**   Has any household member applied for or been housed under any federal rental assistance program?
- Yes**    **No**   Do you or any household member owe money to AHFC or any other federally subsidized housing program?
- Yes**    **No**   Have any household members been evicted from federally subsidized housing?  
Please explain: \_\_\_\_\_
- Yes**    **No**   Has any household member been evicted for reason of drug-related criminal activity; or evicted for disturbing neighbors or property destruction:   Please explain \_\_\_\_\_  
\_\_\_\_\_
- Yes**    **No**   Is any household member required to register on the State of Alaska Sex Offender list? Please explain: \_\_\_\_\_

**Special Considerations:**

- Yes**    **No**   Disabled: Are you or any household member disabled? Please attach verification.
- Yes**    **No**   Are you currently Homeless? Please attach 2 letters of verification from individuals that can attest to your living conditions.

**Please list assets of all adult household members.**

<b>ASSETS:</b>	<b>AMOUNT/VALUE</b>	<b>CURRENT MONTHLY EXPENSES:</b>	<b>AMOUNT</b>
Cash in Savings:	\$ _____	Rent:	\$ _____
	\$ _____	Utilities:	\$ _____
Stocks / Bonds:	\$ _____	Student Loans:	\$ _____
Life Ins. Cash Value:	\$ _____	Debt Payments:	\$ _____
Real Estate*			\$ _____
Mobile Home:	\$ _____		\$ _____
House:	\$ _____	Insurance:	\$ _____
Land:	\$ _____	Telephone:	\$ _____
Automobiles:	\$ _____	Child Care:	\$ _____
Other Assets:	\$ _____	Car Payments:	\$ _____
	\$ _____	Other:	\$ _____
	\$ _____		\$ _____
<b>TOTAL ASSETS:</b>	<b>\$ _____</b>	<b>TOTAL MONTHLY EXPENSES:</b>	<b>\$ _____</b>

\*List address of all real estate owned: \_\_\_\_\_

Interior Regional Housing Authority requests information concerning your Tribal affiliation, if applicable. Please list your Regional and Village Corporation below. This information is helpful to Interior Regional Housing Authority when applying for future funds.

**Regional Corporation** \_\_\_\_\_

**Village Corporation** \_\_\_\_\_

**American Indian Tribe** \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_\_  
Co-Applicant Signature Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**APPLICANT (S) CERTIFICATION FORM**

**I hereby swear and attest that all of the information provided on this application is true and correct. I understand that this is not a contract and does not bind either party. If any information is found to false or misleading, I understand that I will be disqualified from the program or other actions may be taken against me. I also understand that this program is FEDERALLY funded through Interior Regional Housing Authority**

**Giving True and Complete Information**

I certify that all the information provided on household composition, income, family assets and items for allowances and deductions, is accurate and complete to the best of my knowledge. I have reviewed the application form and the HUD Form "Things You Should Know" and certify that the information on my/our application form is true and correct.

**Reporting on Prior Housing Assistance**

I certify that I have disclosed where I received any previous Federal housing assistance and whether or not any money is owed. I certify that we did not commit any fraud, knowingly misrepresent any information, or vacate the unit in violation of the lease in any previous Federal assistance.

**Owner-Occupancy Property**

I certify that the house will be my principal residence. I will not live anywhere else without notifying IRHA immediately in writing. I will not sublease the property unless it has been approved by IRHA.

**Cooperation**

I know that I am required to cooperate in supplying all information needed to determine my eligibility. I understand failure or refusal to do so may result in delays or termination of this case for eligibility determination.

**Criminal and Administrative Actions for False Information**

I understand that knowingly supplying false, incomplete or inaccurate information is punishable under Federal or State criminal law and is grounds for termination from the program.

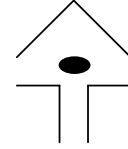
**Documentation**

IRHA will determine eligibility when my application is complete. All documentation and information required must be completed and returned to IRHA within thirty (30) days of the receipt of my application form. I understand that funds will be expended on a 'first come, first served' basis, and that if complete documentation is not received within thirty (30) days, IRHA will not be able to process my application.

**Signature and Date of All Household Adults**

\_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Signature

\_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Signature



May 1988  
P-88-2

## *Things You Should Know*

Don't risk your chances for Federally assisted housing by providing false, incomplete, or inaccurate information on your application and recertification forms.

**Purpose** This is to inform you that there is certain information you must provide when applying for assisted housing. There are penalties that apply if you knowingly omit information or give false information.

**Penalties for Committing Fraud** The United States Department of Housing and Urban Development (HUD) places a high Priority on preventing fraud. If your application or recertification forms contain false or Incomplete information, you may be:

- Evicted from your apartment or house;
- Required to repay all overpaid rental assistance you received;
- Fined up to \$10,000;
- Imprisoned for up to 5 years; and/or
- Prohibited from receiving future assistance.

Your State and local governments may have other laws and penalties as well.

**Asking Questions** When you sit down with the person who fills out your application, you should know what is expected of you. If you do not understand something, say so. That person can answer your question or find out what the answer is.

**Completing The Application** When you give your answers to application questions, you must include the following information:

**Income**

- All sources of money you and any "adult" member of family receives (wages, welfare payments, alimony, social security, pension, etc.).
- Any money you receive on behalf of your children (child support, social security for children, etc.);
- Income from assets (interest from a savings account, credit union, or certificate of deposit, dividends from stocks, etc.);
- Earnings from second job or part time job;
- Any anticipated income (such as a bonus or pay raise you expect to receive).

**Assets**

- All bank accounts, savings bonds, certificates of deposit, stocks, real estate, etc. that are owned by you and any adult member of your family/household who will be living with you.
- Any business or asset you sold in the last 2 years for less than its full value, such as your home to your children.

**Family/Household Members** • The names of all of the people (adults and children) who will actually be living with you whether or not they are related to you.

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**Signing the Application** • Do not sign any form unless you have read it, understand it, and are sure everything is complete and accurate.

• When you sign application and certification forms you are claiming that they are complete to the best of your knowledge and belief. You are committing fraud if you sign a form knowing that it contains false or misleading information.  
• Information you give on your application will be verified by your housing agency. In addition, HUD may do computer matches of the income you report with various Federal, State or private agencies to verify that it is correct.

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**Recertifications** You must provide updated information at least once a year. Some programs require that you report any changes in income or family/household composition immediately. Be sure to ask when you must recertify. You must report on recertification forms:

- All income changes, such as pay increases or benefits, change of job, loss of job, loss of benefits, etc. for all adult family/household members.
- Any family/household member who has moved in or out.
- All assets that you or your family/household members own and any asset that was sold in the last 2 years for less than its' full value.

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**Beware of Fraud** You should be aware of the following fraud schemes:

- Do not pay any money to file an application.
- Do not pay any money to move up on the waiting list.
- Do not pay for anything not covered by your lease.
- Get a receipt for any money you pay.
- Get a written explanation if you are required to pay any money other than rent (such as maintenance charges).

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**Reporting Abuse** If you are aware of anyone who has falsified an application, or if anyone tries to persuade you to make false statements, report them to the manager of your project or PHA. If you cannot report to the manager, call the local HUD office or the HUD Hotline on (202) 472-4200.  
This is not a toll free number. You can also write to the HUD HOTLINE, Room 8254, 451 Seventh Street, S.W., Washington, DC 20410.

I HAVE READ AND UNDERSTAND THIS BULLETIN:

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_