COLVILLE INDIAN HOUSING AUTHORITY DOWN PAYMENT ASSISTANCE PROGRAM

P.O. Box 528 Nespelem, WA 99155

Washington Relay No. for Hearing Impaired 1-800-833-6388

Phone #(509) 634-2172 1-800-294-3023 FAX #(509) 634-8107

Manufactured Home	_ New home
Aanufactured Home	New home

APPLICANT		SPOUSE/SIGNIFICANT OTHER					
First Name	Initial	Last Name		First Name:	Initial	Last Name	
Mailing Address		Time at Addre	ess	Mailing Address		Time at Address	SS
City		State	Zip Code	City		State	Zip Code
Physical Location of Ro	esidence			Physical Location of	Residenc	e	
Former Address		Time at A	Address	Former Address		Time at A	Address
City		State	Zip Code	City		State	Zip Code
Social Security No.	Driver'	s License / St.	Tribal ID #	Social Security No.	Driver	's License / St.	Tribal ID #
Date of Birth	Home I	Phone No.	# Dependents	Date of Birth	Home Phone No. # Deper		# Dependents
Other Names Used EMAIL ADDRESS:			Other Names Used EMAIL ADDRESS:				
Attach Paystubs/Inco			will be requ	revious year, and ALL ired in file. oyed, please attach inco			security card copies
Current Employer			Current Employer				
Address			Telephone No.	o. Address		Telephone No.	
City		State	Zip Code	City		State	Zip Code
How Long	Position	n/Grade	Monthly Gross \$'s	How Long Position/Grade		Monthly Gross \$s	
Former Employer & Position How Long		How Long	Former Employer & Position How L		How Long		
Other Household Income – Source, How Long, Mon. Amt. Child Support-		Other Household Income - Source, How Long, Mon. Amt. Child Support-			, Mon. Amt.		

CIHA DPAP APP.

<u>HOUSEHOLD MEMBERS</u>: List all persons who live in your household on a permanent basis, not including yourself or your spouse.

NAME	BIRTH DATE	SOC. SEC.#	RELATION SHIP	ENROLL#

INCOME INFORMATION:

List <u>ALL</u> household members at least 18 years of age who have income, including yourself and your spouse. This includes wages, salary, public assistance, social security, disability, child support, etc.

NAME	SOURCE OF INCOME	AMOUNT

LEAD BASED PAINT REQUIREMENT:

If Lead Based Paint assessment is required in accordance with 24 CFR part 35, 40 CFR part 745, and CCT's Toxic Lead Code 6-13, it is the sole responsibility of the applicant to pay for all of the costs involved. No grant will be made until all applicable Lead Based Paint codes are in full compliance. This applies to any pre-1978 built homes.

	THIS HOME WAS BUILT IN THE YEAR:
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COLVILLE INDIAN HOUSING AUTHORITY

APPLICATION FOR DOWN PAYMENT ASSISTANCE

Please complete this Personal Financial Statement.

ASSETS	Present Value	LIABILITIES	Payments	Present Balance
Home		Rent or Mortgage		
		To Whom		
Cash in Bank		Home Insurance		
Auto – Year, Make and Model		Auto		
Auto – Year, Make and Model		Auto		
		Auto Insurance Per Month		
Other Real Estate		Other Real Estate		
Personal Property		Unsecured Colville Tribal Credit		
Other Assets		Colville Tribe		
		Public Works Housing/Solid Waste		
Other:		Colville Indian Housing Authority		
		Credit Cards / Other Debt		
		Educational Loans		
		OTHER:		
		Alimony/Child Support		
TOTAL	\$	TOTAL	\$	\$

Down Payment Amount Requested: §	Purchase Price of Home: §
How Many People Live in Your Household?	
What Mortgage Lender are you applying with? _	

Applicant: Circle One --- MARRIED SEPARATED UNMARRIED (Includes Single, Divorced, Widowed)

CUSTOMER COMMENTS			
Please be aware that THE FEDERAL LAW C			
Except as otherwise provided in this section, wh			e executive, legislative, or judicial
branch of the Government of the United States,	.	•	
(1) falsifies, conceals, or covers up by any tri			
(2) makes any materially false, fictitious, or f			
(3) makes or uses any false writing or docum	ent knowing the	e same to contain any materially f	alse, fictitious, or fraudulent statement or
entry;	.1 . 5	1 4	
shall be fined under this title or imprisoned not	more that 5 year	rs or both.	
I/WE hereby authorize anyone to release income/credit info enable CIHA to evaluate my/our request for down payment assistance. Verification may be obtained from any source n from any credit-reporting agency. I/WE agree that the application of the company credit reporting agency.	assistance. I/WE camed in the applica	pertify that all statements are true and com ation, my employer, Colville Tribal Credit	plete and are submitted for the purpose of obtaining , Tribal Police, the State Patrol Department and
x		X	
Applicant's Signature	Date	Spouse Signature	Date

APPLICANT(s)	 	

ENTITY OBTAINING OR RELEASING INFORMATION

Colville Indian Housing Authority P.O. box 528 Nespelem, WA 99155

Contact Housing Services Officer 509 634 2172

1. <u>PURPOSES</u>: In signing this consent and authorization form, you are authorizing Colville Indian Housing Authority (CIHA) to request, obtain, and verify income and other necessary information which may affect eligibility or the level of assistance under the CIHA programs, including but not limited to Mutual Help, Rental, and Down Payment Assistance Programs. CIHA needs appropriate information to verify household income, tribal enrollment, and similar data to determine if you are eligible for any benefits and they are at the correct amount.

Further, CIHA will need similar information during the time period you are receiving any benefits under CIHA programs to ensure such benefits continue to be set at the correct amount during the reaffirmation information process.

Finally, release of certain information about you will be necessary not only to obtain or verify the data outlined above, but also to respond to other entities and programs who have a need for such information during the period you are applying for or are receiving housing benefits from CIHA. CIHA may release certain information to the source and entities or programs identified in Paragraph 2 below.

2. <u>SOURCES TO WHOM INFO. MAY BE RELEASED, OBTAINED AND VERIFIED:</u>

- A. Public Utility Districts, including Okanogan PUD, Nespelem Valley Electric, Ferry County PUD, and Avista.
- B. Any and all Colville Tribal Programs or Colville
 Tribal Enterprise Programs; including but not
 limited to the Tribal Credit, Energy Assistance
 Program, TANF Program, Social Services,
 Employment and Training, Adult Education, CCT
 Payroll, any branch of CETC Payroll, Colville
 Business Council, Food Distribution Program,
 Early Childhood Program, Alcohol Program, and
 Mental Health.

- C. Colville Tribal Law Enforcement Entities, including but not limited to the Tribal Prosecutor, Tribal Police, Adult and Juvenile Probation Officers, and the Tribal Court.
- D. Washington State Agencies, including the Employment Security Dept., Dept. of Social and Health Services, and similar state entities or branches dealing with welfare or food stamp assistance, unemployment compensation wages, benefits, or income.
- E. Federal Agencies, including the Social Security Administration (for wage and self-employment data or retirement income); Bureau of Indian Affairs (monetary accounts, personal and real property data including probate proceedings); and federal law enforcement entities (Federal Bureau of Indian, Immigration and Naturalization Service, etc.)
- F. Current and former employers concerning salary and wages.
- G. Financial Institution concerning unearned income (i.e. interest and dividends).
- 3. WHO MUST SIGN CONSENT FORMS: Each member of your household who is 18 years of age or older must sign the consent form. Additional signatures must be obtained from new adult members joining the household or whenever members of the household become 18 years of age.
- 4. FAILURE TO SIGN CONSENT FORM: Your failure to sign this consent form may result in the denial of eligibility or termination of benefits under CIHA programs. Any such denial or termination will be promptly communicated in writing to you by CIHA.

CONSENT AND AUTHORIZATION STATEMENT

I hereby consent and authorize the Colville Indian Housing Authority to obtain, request, verify, and release information to the sources listed above for the purposes specified in Paragraph 1.

This consent includes any CIHA participates in computer matching programs with such sources. I agree that photocopies of this form may be used to accomplish its purpose.

I also understand that if I or any adult member of my family fails to sign this consent form, such action may constitute grounds for denial of eligibility and/or termination of assistance from CIHA. However, I also understand that if this should occur, then I will be properly notified in writing by CIHA of such grounds for denial or termination.

Finally, I understand and agree that this consent and authorization form will remain in effect until I am either determined ineligible for assistance or I am no longer participating in any CIHA programs, whichever occurs first.

Signatures Required:			
Head of Household	Date		
nead of Household	Date		
Social Security Number of Head of Hou	usehold	Other Family Member over age 18	Date
Spouse	Date	Other Family Member over age 18	Date
Other Family Member over age 18	Date	Other Family Member over age 18	Date
Other Family Member over age 18		Other Family Member over age 18	Date

Down Payment Assistance Policy Revision: October 16, 2001

Revision: March 11, 2004, Resolution 2004-07 Revision: December 17, 2004, Resolution 2005-08

Revision: February 13, 2008, Resolution 2008-06 Revision: February 12, 2013, Resolution 2013-12

Revision: April 18, 2016, Resolution 2016-12

DOWN PAYMENT ASSISTANCE PROGRAM POLICY

Purpose: It is the Colville Indian Housing Authority's (CIHA) mission to assist tribal members to obtain decent, safe and sanitary housing. This policy is designed to assist tribal members with down payment assistance in order to purchase housing for themselves and their families. The policy has been developed to maintain compliance with the Native American Housing Assistance and Self Determination Act (NAHASDA) while assisting lower income tribal member families.

Scope: This policy shall apply to down payment assistance provided by the CIHA to tribal members who need such assistance to purchase their own homes on the private market.

- A. **Eligibility:** Any Tribal member who desires down payment assistance for the purchase of a home on the private market must submit a complete application to CIHA. The following guidelines apply to be eligible for the Down Payment Assistance Program: (DPAP)
 - 1. Applicant must be an enrolled member of the Confederated Tribes of the Colville Reservation, and must be otherwise eligible for services from CIHA.
 - 2. <u>Household income</u> shall not exceed 100% of the National Median Income guidelines as established by the Department of Housing and Urban Development as defined by NAHASDA 24 CFR 1000.104. A copy of the most recent income limits is posted at the CIHA main office.
 - a. Due to CIHA jurisdiction over a multi-county service area, the income limits will be set at the county with the highest income limits. If the income limit for the selected county located within CIHA service area is lower than the United States median income, the National Median Income limit must be used.
 - b. All sources of income must be reported by all members of the household who are 18 years of age or older. CIHA will use the definition of income according to HUD 24 Section 8, Part F or the Internal Revenue Services (IRS) whichever is most advantageous to the family or the CIHA. NAHASDA_24 CFR 1000.10(b)(1), sets forth the definition of annual HUD's Section 8 programs in 24 CFR Part 5, subpart F (except when determining the income of a homebuyer for owner-occupied rehabilitation projects, the value of the homeowner's principal residence may be excluded from the calculation of Net Family Assets). The IRS definition is cited in 24 CFR 1000.10(b)(3).
 - c. *Examples* of acceptable documentation for income verification are: pay stubs, income tax statements, copies of checks, bank statements where payments are received through direct deposit, and award letters from Federal, State and Local agencies.

- d. Applicants who are attending college must provide a copy of their Colville Tribal Education Assistance Program (CTEAP) Higher Education GRANT CALCULATION form, if applicable, OR verification of any other student assistance that will be received.
- 3. If married, those individuals who sign for the home loan will also be responsible to sign the CIHA Down Payment Assistance Program documents.
- 4. The applicant does not have immediate financial resources to make the required down payment to the lending institution. The applicant does not own a homesite property that could satisfy the lender's down payment requirements.
- 5. The applicant must qualify for standard home loan financing in all aspects except for the ability to provide a down payment. The proposed monthly debt to income ratio of applicant and or spouse may not exceed 40%. Consideration for a Loan will also be based on factors including income, credit history and employment history, which follows standard loan practices.
- 6. Any applicant owing a debt to the CIHA shall be considered ineligible until such debt is paid in full.
- 7. Any applicant owing a debt to the Colville Confederated Tribes or any Tribal entity shall be considered ineligible until such debt is paid in full or must first get a letter from that entity which shows that the applicant has entered into a repayment plan approved for debt pay back.
- 8. The applicant must be a first time homebuyer and not have owned real estate within the last three years. Several exceptions to the first time homebuyer rule will be considered on a case by case basis and include:
 - a. an applicant that already owns, as their principal residence, a dwelling unit not in compliance with applicable building codes and which cannot be brought into compliance with such codes for less than the cost of constructing or purchasing a code compliant structure,
 - b. an applicant who is recently divorced or legally separated, where the previously owned home was held jointly and the applicant relinquishes all ownership rights to said home.
- 9. No member of the family purchasing the home may have any interest in any other home while receiving assistance under this Program.
- 10. Such other factors, including but not limited to a history of rental or homebuyer payment problems, or poor credit that Executive Director or his/her designee will take into consideration to indicate whether the family is a good candidate or not for the DPAP.
- 11. The applicant must be willing to participate in the pre-ownership counseling program

- established by the CIHA DPAP.
- 12. The applicant must qualify for a mortgage loan through a financial institution. CIHA cannot provide down payment assistance for transactions involving land contracts or any lease to purchase scenarios.
- B. **Application:** To be considered by CIHA, the application must contain the following documents. (Some of the required information will be available from the lender.) Any exceptions to submission of required documents must be approved by the CIHA Executive Director's approval.
 - 1. Verification of Colville Tribal Enrollment.
 - 2. A Release of Information signed by all members of the household who are 18 years of age and older.
 - 3. Wage verification for all members of the household, if no income is reported from adults, a zero income verification form is required.
 - 4. The legal description of the home site property to be purchased.
 - 5. A copy of the Purchase and Sale Agreement.
 - 6. A copy of appraisal with FEMA designation.
 - 7. Must provide a statement from lending institute which verifies the approval of a home loan, pending the down payment requirement. Statement must include the monthly mortgage amount, anticipated property taxes, and insurance costs for use with the debt to income ratio. The statement must be on the lending institute's letterhead and include the purchase price and minimum required down payment.
 - 8. Financial statements as requested.
 - 9. Social Security numbers with a copy of the card, or other formal documentation that verifies the individual and their social security number
 - 10. Any additional information as requested by CIHA to determine eligibility for the program including but not limited to Landlord Statement, and Authorization for Use or Disclosure of Tenant/Homebuyer File Information to Application.

- C. **Limitations:** The following limitations will apply to all applications received for this program.
 - 1. THIS IS A ONCE IN A LIFETIME LOAN PER TRIBAL MEMBER PER FAMILY. This limitation does not prohibit an applicant to apply for the loan if they have a familial relationship with an individual who received the loan prior to the establishment of the relationship.
 - 2. The number of loans to be made under this program will be subject to the availability of funds CIHA has set aside for that purpose.
 - 3. Loans will only be provided for home purchases within the State of Washington.
 - 4. Down Payment Assistance Loans will only be made where the purchase includes both land and dwelling.
 - 5. Monthly principal, interest and insurance payment cannot exceed 30% of the household monthly income.
 - 6. Purchase price of the home cannot exceed the Total Development Cost (TDC) limits as outlined in 24 CFR 1000.158(c), which are limits published periodically by HUD to establish the maximum amount of funds (from all sources) that the recipient may use to develop or acquire/rehabilitate affordable housing. The recipient must complete a comparison of the cost of developing or acquiring/rehabilitating the affordable housing with the limits provided by the TDC and may not, without prior HUD approval, exceed the TDC maximum cost for the project.
 - 7. All pre-1978 built homes will be required to have Lead Based Paint (LBP) activities performed in accordance with 24 CFR part 35, 40 CFR part 745, and CCT's Toxic Lead Code 6-13.
 - (a) Lead hazard information pamphlet. CIHA or participating jurisdiction shall provide the lead hazard information pamphlet in accordance with §35.130
 - (b) LBP Disclosure form shall be provided by the Seller. "Disclosure of Information on Lead-Based Paint and/or Lead-Based Paint Hazards"
 - (c) LBP activities required for the dwelling unit, common areas servicing the dwelling unit, and the exterior surfaces of the building in which the dwelling unit is located:
 - (i) A visual assessment of all painted surfaces in order to identify deteriorated paint;
 - (ii) Paint stabilization of each deteriorated paint surface, and clearance, in accordance with §§35.1330(a) and (b), before occupancy; and
 - (iii) The testing agency or seller shall provide a notice to occupants in accordance with §§35.125(b)(1) and (c), describing the results of the clearance examination.

It is the sole responsibility of the applicant or seller to pay for all of the costs

involved.

- D. **Types of Loans Covered by Program:** CIHA has also established requirements concerning the terms of the financing that will be supported through this Program. Only the following types of loans will be considered eligible for assistance under this program: FHA, VA, Section 184 and conventional loans. If the home is financed with FHA mortgage insurance, then financing is subject to all FHA requirements. Otherwise, all underwriting standards of the selected lender's financing program will apply.
- E. **Types of Loans Expressly Excluded:** The following forms of financing are not eligible for assistance under this Program:
 - 1. Balloon payment mortgages
 - 2. Variable-rate interest mortgages
 - 3. Financings that involve pre-payment penalties on conventional loans
 - 4. Seller financed purchases
 - 5. Other loan arrangements indicative of predatory or high-risk lending.
- F. **Selection of Loanees:** Loans will be awarded on a first come, first served basis when determined eligible and qualified. Applications will be processed according to the certification date. Incomplete applications will not be considered for assistance. The Executive Director of the CIHA reserves the right to loan exceptions at his/her discretion based on need. Examples include but are not limited to emergency housing needs due to catastrophic circumstances of fire,
- G. **Amount:** The maximum amount of assistance will be based on 5% of the approved loan amount, based on the appraised value of the home, not to exceed a maximum amount of \$10,000.00 per loan. The loan will not include any of the closing costs or other related loan fees. The loan will not be used to buy up on the approved loan amount in order to meet purchase price. The applicant is not automatically entitled to that amount and will not receive that amount if 5% of the approved loan amount based on the appraised value of the home is below \$10,000.00.
- H. Loan Amount Limitations: According to 24 CFR 1000.110 (2) Other assistance, including down payment assistance, to non low-income Indian families, cannot exceed: (Income of family at 80 percent of median income/Income of non low-income family) × (Present value of the assistance provided to family at 80 percent of median income).
- **I. Loan Acceptance Agreement:** An applicant who is determined eligible and receives a loan must enter into a Loan Acceptance Agreement with CIHA, setting out the terms and conditions of the grant. Those terms and conditions include, but shall not be limited to, the following:
 - 1. The Loanee must maintain the dwelling as the primary place of residence for at least

five years or agree to repay the loan, as stated in the Useful Life contract.

- 2. The Agreement will require the Loanee enter into such binding agreements as are applicable to ensure that the dwelling remains affordable housing for its "useful life." If the Loanee violates this requirement, Loanee will be required to repay to CIHA a prorated amount of the grant.
- 3. The Loan monies are non-repayable when and if the terms of the Loan Acceptance Agreement have been met, as agreed by both parties.
- **J. Financial Counseling:** The applicant must sign a pre-homeownership counseling agreement that will require the applicant and any co-borrower to attend a series of one-on-one counseling sessions prior to the purchase of the home. In the pre purchase sessions, the Housing Services Officer (HSO) and the applicant(s) will identify relevant goals for sessions. Once the goals are reached, the HSO will award a pre ownership education certificate to the applicant.
- **K. Appeals:** An applicant may appeal a grant request denial or amount of grant by submitting a written request for an appeal hearing with the Executive Director. The request will include the applicant's specific concerns and facts. The Executive Director will notify the applicant of their scheduled hearing date. Decision rendered by Executive Director shall be final.
- **L. Abuse of Program:** Misuse of this program or the misuse of these grant funds will result in prosecution to the greatest extent of the law.
 - **2 CFR 200.113 Mandatory disclosures.** The non-Federal entity or applicant for a Federal award must disclose, in a timely manner, in writing to the Federal awarding agency or pass-through entity all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award. Failure to make required disclosures can result in any of the remedies described in § 200.338 Remedies for noncompliance, including suspension or debarment. (See also 2 CFR part 180 and 31 U.S.C. 3321).