



Mesa Grande Band of Mission Indians' Homeowner Assistance Program Application

Name \_\_\_\_\_ Enrollment number \_\_\_\_\_

Address \_\_\_\_\_

Phone number \_\_\_\_\_ email \_\_\_\_\_

How do you prefer to be contacted:  mail  phone  email

Do you pay a mortgage on your home?  Yes No

Is your household income below \$76,000?  Yes No

You will be asked to provide supporting documentation. You may still be eligible depending on where you live and how many people are in your household? \_\_\_\_\_

Are you behind in your mortgage or utility payments?  Yes No

Does one or more members of your household qualify for unemployment benefits? If yes, please complete I \_\_\_\_\_ am eligible for unemployment benefits. Signature \_\_\_\_\_

I \_\_\_\_\_ Tribal Member from the Mesa Grande Band confirm that: Due to COVID, I/we experienced a reduction in household income; or occurred significant cost; or experienced Other financial hardship due directly or indirectly to the COVID outbreak. Signature \_\_\_\_\_

Is any member of your household receiving any other mortgage assistance from another Tribe or state or federal agency?  Yes  No

I certify that the answers, information, and documentation I have provided regarding this request for assistance is correct and complete. I understand that the information and documentation I provide to the Tribe, including my income and personal information will be retained for a minimum of 5 years and may be part of a review or audit. I authorize the Mesa Grande Band of Mission Indians to speak with my loan company in matters related to presenting an assistance payment of my mortgage in arrears. I understand that the Tribe may provide a one-time payment on my behalf without intent or obligation to change or resolve any matters regarding my loan agreement. I understand my loan company may receive a 1099 for the mortgage paid to them.

Signature \_\_\_\_\_

**MESA GRANDE BAND OF MISSION INDIANS'  
HOMEOWNER ASSISTANCE PROGRAM  
VERIFICATION & DOCUMENT REQUEST LIST**

Please provide at least one for a member of your household as evidence of housing instability or risk of homelessness:

- Delinquency notice
- Foreclosure notice
- Past due utility bill
- Evidence of unsafe or unhealthy living conditions
- Other statement of risk of housing instability

Provide, notice of unemployment eligibility (if applicable)

**Proof of Household Income**

How many people live in your home? \_\_\_\_\_  
*Initial*

Provide a copy of your loan documents.

My/our total Household Income is \_\_\_\_\_ per month/year \_\_\_\_\_  
*Initial*

Please provide the following documents that apply to your household income:

2020 Adjusted Gross Income from Income Tax Return; or  
2020 W-2; or

One month of recent check stubs or a financial verification letter from:

- Employer
- Indian Health
- TANF
- Social Security

If your application is approved, the mortgage assistance will be paid directly to your loan company.  
Please provide the following for payment processing on your behalf:

1. Physical Address of your home including any space or unit number:

\_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip

2. Loan Company Name: \_\_\_\_\_

3. Company Address: \_\_\_\_\_  
\_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip

4. Customer file number / Mortgage account number: \_\_\_\_\_

5. Company Contact: \_\_\_\_\_

6. Company phone number and/or email address: \_\_\_\_\_

7. Company Tax Identification Number or Social Security Number, or Duns \_\_\_\_\_

