TLINGIT HAIDA REGIONAL HOUSING AUTHORITY
HOMEOWNER ASSISTANCE FUND (HAF)
PROGRAM ASSISTANCE APPLICATION

Please complete this application and provide the required supporting documentation. Information provided will be used to determine eligibility.

APPLICANT INFORMATION

Applicant Full Name:	**Date of Birth:**
Physical Address:	**Community:**
Mailing Address (if different):	**Primary Phone:**
Email:	**Tribal Enrollment Number:**

1. PROOF OF TRIBAL CITIZENSHIP

Attach a copy of your Tribal Enrollment Card, Certificate of Indian Blood (CIB), or other Tribal enrollment verification.

2. HOMEOWNERSHIP

Do you own the home at the physical address listed above? ☐ **Yes** ☐ **No**

You must own and occupy the home as your primary residence to be eligible for this program. If you do not own the home, you are not eligible to apply.

Please provide proof of homeownership. Acceptable documentation may include a deed, title, mortgage statement, or other legal document showing ownership of the property and address.

3. HOUSEHOLD MEMBERS AND INCOME

List yourself and everyone who currently lives in your home. Report each household member's gross monthly earned and unearned income.

Household Member	Relationship	Date of Birth	Earned Income	Unearned Income	Total Gross Monthly Income

TOTAL GROSS MONTHLY HOUSEHOLD INCOME: $_____

Earned Income: income from working or operating a business, including wages, salaries, tips, commissions, bonuses, self-employment income, seasonal employment, and other compensation for work.

Unearned Income: income from sources other than employment, including Social Security/SSI, pensions or retirement, disability benefits, public or Tribal assistance, TANF, child support, alimony, foster care or adoption subsidies, Veterans benefits, unemployment, workers' compensation, rental income, dividends, and other regular income.

Provide your most recent federal tax return or other THRHA-approved documentation to verify household income.

AUTHORIZATION, RELEASE AND CERTIFICATION

I authorize Tlingit Haida Regional Housing Authority (THRHA) to obtain and verify information reasonably necessary to complete and determine eligibility for my Homeowner Assistance Fund application. I authorize persons, employers, agencies, financial institutions, and other organizations having information relevant to my application to release information to THRHA when needed to verify my identity, Tribal citizenship, household composition, household income, homeownership, homeowner's insurance, or other information necessary to determine HAF eligibility.

I understand that information obtained through this authorization will be used only for the administration, verification, and completion of my Homeowner Assistance Fund application.

I certify that I own and occupy the home identified in this application as my primary residence; that I have listed all persons who currently live in my household; and that the household income and all other information and documentation I have provided are true and complete to the best of my knowledge. I understand that false, misleading, or incomplete information may result in denial of assistance and may be subject to applicable penalties.

I understand that THRHA may request additional documentation when necessary to verify information or determine eligibility. I understand that applying does not guarantee assistance and that assistance is subject to Homeowner Assistance Fund eligibility requirements and availability of funds.

Financial Hardship

I certify that I or a member of my household has experienced financial hardship after January 21, 2020, that makes me eligible for this program. (Examples may be unemployment, loss of household income, significant costs or expenses incurred, or other financial hardships.)

Briefly describe below:

_____

_____

Applicant Printed Name: **Applicant Signature:**	**Date:**
Co-Applicant/Co-Owner Printed Name (if applicable): **Signature:**	**Date:**

Program Assistance

Homeowner Assistance Fund assistance may be available for property taxes, electricity, heating, water and sewer, trash, internet, homeowner's insurance, and mortgage assistance.

For each type of assistance requested, attach a copy of the current bill, statement, invoice, or other documentation showing the amount owed. Documentation must:

- Show the applicant's name and physical/property address; and
- Be dated within ninety (90) days of the application date.

Attach copies of all applicable bills or statements to your completed application and submit them together to THRHA.

REQUEST OR SUBMIT AN APPLICATION

Email: repairs@thrha.org **Phone:** 907-780-6868 **Fax:** 866-253-0890
Applications may also be brought to a local THRHA office or given to a T&H Community Navigator for submission.
Attn: Program Services Department

COMPLETE APPLICATIONS AND REQUIRED DOCUMENTATION MUST BE RECEIVED BY SEPTEMBER 10, 2026.

You will be notified if your application is approved. Program closes on September 30, 2026.