

**AVCP Regional Housing Authority
 US Treasury Homeowner Assistance Fund Program
 Application for Assistance**

Date Received:
 Received by:

Type of Assistance Request *Check all that apply to your application.*

<input type="checkbox"/> Mortgage Delinquency	<input type="checkbox"/> Loss of Utilities	<input type="checkbox"/> Internet Services Assistance	<input type="checkbox"/> HOA Fees
<input type="checkbox"/> Mortgage Default	<input type="checkbox"/> Loss of Home Energy Service	<input type="checkbox"/> Condominium Association Fees	
<input type="checkbox"/> Mortgage Foreclosure	<input type="checkbox"/> Homeowner Insurance	<input type="checkbox"/> Prevention of Displacement of Homeowner	
<input type="checkbox"/> Rehabilitation / Modernization		<input type="checkbox"/> Weatherization	

1. APPLICANT INFORMATION

Name	
Mailing Address	
Physical Address	
City, State and Zip	
Cell Phone	
Landline	
Email Address	

2. TRIBAL AFFLIATION

Name of Tribe	
Mailing Address	
City, State and Zip	

3. MORTGAGE COMPANY or HOW DO YOU OWN YOUR HOME

Name of Company	
Mailing Address	
City, State and Zip	

4. UTILITY PROVIDERS INFORMATION

Utility Assistance	Name of Utility Company	Address	Telephone
<input type="checkbox"/> Heating Fuel			
<input type="checkbox"/> Electricity			
<input type="checkbox"/> Water/Sewer			
<input type="checkbox"/> Garbage			
<input type="checkbox"/> Internet			

5. FAMILY COMPOSITION and INCOME INFORMATION

		NAME	DOB	INCOME	PFD? Y/N
1	Head				
2	Spouse				
3	<input type="checkbox"/> Adult <input type="checkbox"/> Child				
4	<input type="checkbox"/> Adult <input type="checkbox"/> Child				
5	<input type="checkbox"/> Adult <input type="checkbox"/> Child				
6	<input type="checkbox"/> Adult <input type="checkbox"/> Child				
7	<input type="checkbox"/> Adult <input type="checkbox"/> Child				

ATTESTATION

AVCP RHA will require homeowners to attest that they experienced **financial hardship** after January 21, 2020. The attestation must describe the nature of the financial hardship (for example, job loss, reduction in income, or increased costs due to healthcare or the need to care for a family member).

Financial Hardship means a material reduction in income or material increased in living expenses associated with the coronavirus pandemic that has created or increased a risk of mortgage delinquency, mortgage default, foreclosure, loss of utilities or home energy services, or displacement for a homeowner.

Check box(es) that apply to your request and provide the documents required:

Income

I attest to my household income and attaching supporting **documents** such as:

- Paystubs
- W2s or other wage statements
- IRS Form 1099s
- Tax filings
- Depository Institute Statement
- Attestation from an employer
- SSI/SSA/APA statements
- Not Employed
- Did not complete taxes

Financial Hardship

I attest I have experienced hardship after January 21, 2020. Financial hardship included:

- Material Reduction in income
- Material increased in living expenses that has created or increased a risk of:
 - Mortgage delinquency
 - Mortgage default
 - Foreclosure
 - Loss of utilities
 - Loss of home energy services
 - Internet Expenses
 - Displacement of homeowner
 - Rehabilitation/Modernization
 - Weatherization
 - Arrearages of Qualified Expenses
- Care for family member

CERTIFICATION

I certify that the information provided to the AVCP Regional Housing Authority for the Homeowner Assistance Fund Program on household composition, income, and qualifiers are accurate and complete to the best of my knowledge and belief. I understand false statements or information are punishable under federal law. I also understand false statements or information are grounds for termination of the Homeowner Assistance Fund Program.

Signature	Date

Please be sure the application is *complete*, and *all* supporting documents are included (i.e., tax forms/paystubs, mortgage invoice/statement, utility bill/statement, home fuel bill/statement, and/or internet bill/statement).

Please submit your Application for Assistance to:

Fax: (907)543-4020 Attn: HAF
Email: nandrew@avcphousing.org

or Mail it to: AVCP Housing Authority Attn: HAF
PO Box 767
Bethel, AK 99559

Call (907)543-3121 or Email nandrew@avcphousing.org if you have any questions.