



HO-CHUNK NATION
DEPARTMENT OF HOUSING

Title: Down Payment Assistance Program Policy	Effective Date: 06/18/2013	Revision Date: 04/21/2015
		Page: 1 of 5
Executive Director Signature: 	Signature Date: 9/22/15	

Purpose: The Down Payment Assistance Program was designed to assist enrolled Ho-Chunk Nation members with the purchase of an affordable, and safe house.

Section 1: Eligibility

- 1-1 Must be an enrolled member with the Ho-Chunk Nation.
- 1-2 Must be at least 18 years or older and legally competent.
- 1-3 No applicant will receive benefits under this program more than once.
- 1-4 The applicant must not have any unpaid debts to the Ho-Chunk Housing Department or Ho-Chunk Housing & Community Development Agency (HHCDA).
- 1-5 Any amount exceeding the closing cost shall be applied to the principal balance of the loan.
- 1-6 **There will not be any reimbursements or distribution of funds if closing is prior to approval by down payment departmental review.**

Section 2: Eligible Property Requirements

- 2-1 New Construction and Existing Purchase are eligible properties. All documents must be submitted at least four weeks prior to the scheduled closing.
- 2-2 The property must be a single-family home, and be legally zoned for residential use.
- 2-3 The house cannot be on land identified by F.E.M.A. as having special flood hazards.
- 2-4 The property must meet housing quality standards, a professional building inspection report must be submitted with the application.

- 2-5 The Building Inspection should be clear of all Safety, Health, and Code violations. Any other violation identified by the Ho-Chunk Nation via inspection report will be identified to the applicant.
- 2-6 Rural properties on private septic and well systems:
 - a. Inspections must be performed by a licensed inspector provided by the seller.
 - b. Inspections identify the systems components and statements identifying all parts of system are in proper working order.
 - c. Repairs are the seller’s responsibility. All repairs must be done by professional licensed personnel.
- 2-7 Ineligible properties include but are not limited to: vacant land, fixer-uppers, rental or commercial properties, manufactured homes, mobile homes or travel trailers, condominium and multi-family apartment buildings.
- 2-8 This Down Payment Assistance grant cannot provide assistance for the purchase of a Ho-Chunk Nation Home Ownership Program home.

Section 3: Application Process

- 3-1 Completed Down Payment Assistance Application.
- 3-2 A copy of the HUD-1
- 3-3 Financial Institution’s name, address, phone number including the name of the “loan officer”.
- 3-4 Copy of a Building Inspection Report by a State Certified Building Inspector.

Section 4: Terms and Conditions

- 4-1 The grant amount cannot exceed \$10,000.00 and can only be used for down payment and closing costs.
- 4-2 If this grant is used in conjunction with the HHCDA Down Payment Assistance, there should be an aggregated total of \$10,000.00 of Down Payment Assistance per eligible household.
- 4-3 The grant will be released to the Title Company or appropriated third-party closing agent at the time of closing.

I am aware of the Eligibility and all Requirements listed on pages 1-4.

Applicant

Date

Co-Applicant

Date

Witness

Date



HO-CHUNK NATION
DEPARTMENT OF HOUSING

Down Payment Assistance Application

APPLICATION INFORMATION					
Applicant's Name (include Jr. or Sr. if applicable)			Co-Applicant's Name (include Jr. or Sr. if applicable)		
Tribal Enrollment #	Home Phone	Age	Tribal Enrollment #	Home Phone	Age
Present Address (street, city, state, ZIP)			Present Address (street, city, state, Zip)		
Date of Birth	Social Security Number		Date of Birth	Social Security Number	

FINANCIAL INSTITUTION INFORMATION	
Financial Institution/Lender Name: _____	
Street Address: _____	
City: _____	State: _____ Zip Code: _____
Contact Person: _____	Phone: _____ Ext. _____

PROPERTY INFORMATION	
Street Address of New Property: _____	
City: _____	State: _____ Zip Code: _____
County: _____	Type of Home: <input type="checkbox"/> Single Family Home <input type="checkbox"/> Townhouse <input type="checkbox"/> Duplex <input type="checkbox"/> Condo
Source of Heat in the Home: <input type="checkbox"/> Gas <input type="checkbox"/> LP <input type="checkbox"/> Electric <input type="checkbox"/> Wood <input type="checkbox"/> Oil <input type="checkbox"/> Other _____	Age of the Property: _____
Is the home you are purchasing or building on private water and sewer ? <input type="checkbox"/> Yes <input type="checkbox"/> No	

I/We certify that the information provided in this application is true and correct as of the date set forth opposite my/our signature(s) on this application and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained within this application may result in a penalty of being ineligible for the Down Payment Assistance and a denial of the processing of the application and any future applications for this program.

Printed Name of Applicant

Signature of Applicant

Date

Printed Name of Co-Applicant

Signature of Co-Applicant

Date

ONLY ONE APPLICATION PER HOUSEHOLD



HO-CHUNK NATION
DEPARTMENT OF HOUSING

AUTHORIZATION FOR RELEASE OF INFORMATION

I/we, the undersigned, with this, authorize the Ho-Chunk Nation Department of Housing and their agents to obtain any information, necessary, to process the Ho-Chunk Nation Home Ownership Application. This information may be obtained from the following sources, any of the Programs of the Ho-Chunk Nation, federal, state, and local governments and any of their agencies and representatives, law enforcement agencies, financial institutions, and current and prior landlords. This list is not all-inclusive and may include any additional agency, government, or private source, as deemed necessary by the Ho-Chunk Nation Department of Housing and/or their agents.

I/we, the undersigned, with this release the Ho-Chunk Nation Department of Housing and/or their agents any requested information from the following agencies: federal, state and local governments, law enforcement agencies, financial institutions, and current or prior landlords.

The information requested may be given by fax, telephone or in writing. This release is valid for fifteen (15) months from the date of the applicant's signature. This release is valid if photocopied and does not have to have an original signature.

I/we, have read the terms and conditions of the AUTHORIZATION FOR THE RELEASE OF INFORMATION and with this, give consent for the release of any requested information.

Printed Name of Applicant

Signature of Applicant

S.S.N. of Applicant

Date of Birth of Applicant

Date

Printed Name of Co-Applicant

Signature of Co-Applicant

S.S.N. of Co-Applicant

Date of Birth of Co-Applicant

Date