

Ho-Chunk Housing Community Development
P. O. Box 730, Tomah, WI 54660
608-374-1245 toll free 800-236-2260
Tribal Repair and Improvement Program
For Low-Income Ho-Chunk Homeowners

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Tribal Repair and Improvement Program For Low-Income Ho-Chunk Homeowners

This program is intended to grant low-income tribal members up to \$20,000 for necessary home repairs on stick-frame homes. The grant amount for repairs on trailer or mobile homes is limited to \$7,500. These are the maximum lifetime grant amounts.

Section 1 ELIGIBILITY REQUIREMENTS

- You may qualify for this program if you meet the following conditions:
- You are an enrolled Ho-Chunk member or an enrolled member of a federally recognized Native American tribe. Enrolled Ho-Chunk members will be given preference for services.
- Your home is located within the service area of the Ho-Chunk Housing and Community Development Agency.
- You own your own home, and the title names as owner a Ho-Chunk tribal member or an enrolled member of a federally recognized Native American tribe.
- You meet income guidelines.
- You have not yet reached the maximum lifetime grant amount of \$20,000 repairs for stick built homes or \$7,500 for mobile home repairs.
- You have not received housing assistance from the Ho-Chunk Nation within the last five years. (This does not apply to Ho-Chunk Nation Elite Elders)
- If you have a mutual help home you must meet a ten year waiting period from date of conveyance

Section 2 ELIGIBLE REPAIRS UNDER TRIP

Examples of repair services HHCDA may provide include but are not limited to the following:

- | | |
|-------------------------------|------------------------------------|
| Furnace repair or replacement | Roofing repair or replacement |
| Fuel oil tank removed | Household electrical repair |
| Household plumbing repair | Sub-flooring repair or replacement |
| Wall repair | Window repair or replacement |
| Re-siding | ADA accessible bathroom |
| Lead Testing | Add insulation for proper R-value |
| Lead hazard reduction | Construction of handicap ramps |

Section 3 INELIGIBLE REPAIRS UNDER TRIP

Examples of repair services HHCDA **cannot provide** include but are not limited to the following:

- | | |
|--|---|
| Building garages or storage sheds | Make/correct structural changes to a home |
| Construction of additions onto home | Build decks or porches |
| Repair or replace household appliances | Cosmetic repair(s) |
| Repair any home that has been listed as condemned or unsafe for occupancy by a local government agency or municipality | |
| Repair any home that is damaged due to homeowners neglect and/or failure to maintain homeowners insurance | |

This program is funded by the United States Department of Housing and Urban Development and compliance with applicable federal requirements must be adhered to.

The Ho-Chunk Housing and Community Development Agency service area covers the Ho-Chunk Nation 14-county service area and all of Area 5. Total funds allocated for this program are limited. Funds are granted on a first-come first-serve basis for eligible applicants. Preference is granted to enrolled Ho-Chunk Nation tribal members.

Section 4

T.R.I.P. Process

1. Interested parties should contact the HHCDA for an application or questions at: 1-(800) 236-2260
2. Applications may be picked up, mailed or faxed to interested parties.
3. Completed applications must be returned by mail or in person. **No faxes will be accepted.**
4. Applicants not meeting eligibility requirements will be denied.
5. Incomplete applications will be in an inactive file until all required information is obtained from applicant.
6. Once an applicant is determined eligible, an environmental review is conducted on the home. Homes build before 1978 will be assessed for lead-based paint. This is a federally funded program and compliance with federal requirements must be adhered to and cannot be waived.
7. **Completed and eligible applications** are submitted to the Modernization/Development Director for a scheduled home inspection. Homes located outside of the HHCDA service area will be inspected by a licensed home inspector. (The inspection identifies home's deficiencies)
8. The HHCDA Inspector and homeowner will review the inspection report for necessary repair(s) or replacement(s). Repairs will be listed in order of importance. If the price estimation exceeds the grant amount, the homeowner will have to make decision(s) in order to meet the grant amount. (Some home(s) may be beyond repair in which case the D/M Director and Inspector will determine that repairs to the home would not be beneficial.)
9. The homeowner is required to obtain 3 (three) bids from reputable licensed contactors and submit them to the HHCDA with a written request of contractor preference. (If a contractor or sub-contractor is selected for a price over two thousand dollars, Davis Bacon Wages must be used on the project.)
10. Colors and styles of materials are made by the homeowner. (Brand name selection is not allowed under HUD guidelines, without the phrase "or equal to".)
11. The contractor is not allowed to place lien waivers against the homeowner's home.
12. Any repairs or improvements outside of the "agreement for services" between the Development Agency and the contractor with a scope of work that increase the contract cost must be paid by the homeowner.
13. All work performed will have a one year workmanship and a material warranty. The warranty will be the responsibility of the homeowner. Any warranty work shall be requested by the homeowner to the contractor. The one-year period starts when the final inspection is completed and is accepted by the homeowner and the HHCDA.
14. Grievances or disputes will be submitted to the Contracting Officer in writing.

Section 5

Stipulation of Lien

T.R.I.P. Applicant

The Tribal Repair Improvement Program (T.R.I.P.) was intended to fix the homes of low-income tribal members. It is not intended to repair a home prior to sale. The Board of Commissioner past the “Stipulation of Lien” on August 8, 2002 and further clarified the policy on June 19, 2008 in order to secure the meaning of the grant.

The Ho-Chunk Housing and Community Development Board of Commissioners will file a lien against your home for the cost of the repairs and or improvements through T.R.I.P.

Removal of Lien

1. The lien will be released after a 5 (five) year period, or
2. If you sell your home within five years of T.R.I.P. home repairs granted by the HC Housing and Community Development Agency, you will be required to pay back the full amount of the grant before your home is released, or
3. If you fail to use your house as your primary residence or default on your mortgage causing foreclosure of the home for a five year period upon receipt of the grant, repayment of the grant will be required. For each full year the repayment obligation will be forgiven by 20% of the grant amount, or
4. An appeal may be written by the homeowner to the HC Housing and Community Development Board of Commissioners for an “emergency” exception sale of home.

I, _____ have read the above statement and agree, that if awarded a T.R.I.P. grant, to permit a lien against my property.

Name: _____ Signature: _____
(Please print)

Date: ____/____/____

Section 7

Please provide the following information on all members of the household:

Name	Relationship	Age	Date of Birth	Sex M/F	Social Security #	Enrollment Number	Occupation
1.	Head of Household						
2.							
3.							
4.							
5.							
6.							

(You must provide copies of Social Security cards for each family member age six and older.)

What types of Housing Assistance have you received from the Ho-Chunk Nation in the past five years?

1. _____
2. _____
3. _____

List any repairs and or improvements that have been done to the house since you have lived there? Also indicate whether you did this work yourself or if this work was hired out.

1. _____
2. _____
3. _____

List all repairs that your home is in need of.

1. _____
2. _____
3. _____
4. _____
5. _____

Use the back side of this sheet for further repairs needed.

Section 8

Annual Household Income

Household Member	Source of Income	Gross Annual Income
	Wages & Tips	\$
	Per Capita	\$
	Retirement	\$
	Social Security	\$
	Disability	\$
	Other:	\$
Total Annual Gross Household Income		\$

Section 9

Assets

This section is to be completed by both applicant and spouse. If the assets such as bank accounts are held jointly, please indicate.

Applicant:

Spouse/Co Applicant

List checking and savings Account below:	Cash or Market Value	List checking and savings Account below:	Cash or Market Value
Name & address of bank or credit union:	[] checking [] savings	Name & address of bank or credit union:	[] checking [] savings
Real estate owned: (Enter Market Value)	\$	Real estate owned: (Enter Market Value)	\$
Automobiles owned: List make and year:	\$	Automobiles owned: List make and year:	\$

APPLICANTS STATEMENT:

I/We certify that the information given to Ho-Chunk Housing and Community Development Agency on household composition, income, allowances and deductions is accurate and complete to the best of my/our knowledge and belief. I/We understand that false information is punishable under federal law; I/We understand that false statements or information will make me ineligible for housing services.

Signature of Head of Household

Date

Signature of Spouse/Co-applicant

Date

Section 12

AUTHORIZATION FOR THE RELEASE OF INFORMATION

I/we, the undersigned, with this, authorize the Ho-Chunk Housing and Community Development Agency and their agents to obtain any information, necessary, to process the HUD housing 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 representative, 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 Housing and Community Development Agency and/or their agents.

I/we, the undersigned, with this, release the Ho-Chunk Housing and Community Development Agency 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.

This 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)	(Date)
_____	_____	_____
(SSN of applicant)	(Date of birth of applicant)	(Date)
_____	_____	
(Print name of co-applicant)	(Signature of co-applicant)	
_____	_____	
(SSN of co-applicant)	(Date of birth of co-applicant)	

Section 13

Original is retained by the requesting organization. form HUD-9886 (7/94) ref. Handbooks 7420.7, 7420.8, & 7465.1

Authorization for the Release of Information/Privacy Act Notice

to the U.S. Department of Housing and Urban Development (HUD) and the Housing Agency/Authority (HA) Persons who apply for or receive assistance under the following programs are required to sign this consent form: PHA-owned rental public housing, Turnkey III Homeownership Opportunities, Mutual Help Homeownership, Opportunity Section 23 and 19(c) leased housing, Section 23 Housing Assistance Payments, HA-owned rental Indian housing, Section 8 Rental Certificate, Section 8 Rental Voucher, Section 8 Moderate Rehabilitation,

Failure to Sign Consent Form: Your failure to sign the consent form may result in the denial of eligibility or termination of assisted housing benefits, or both. Denial of eligibility or termination of benefits is subject to the HA's grievance procedures and Section 8 informal hearing procedures.

Sources of Information To Be Obtained

State Wage Information Collection Agencies. (This consent is limited to wages and unemployment compensation I have received during period(s) within the last 5 years when I have received assisted housing benefits.) U.S. Social Security Administration (HUD only) (This consent is limited to the wage and self employment information and payment of retirement income as referenced at Section 6103(l) (7) (A) of the Internal Revenue Code.) U.S. Internal Revenue Service (HUD only) (This consent is limited to unearned income [i.e., interest and dividends].) Information may also be obtained directly from: (a) current and former employers concerning salary and wages and (b) financial institutions concerning unearned income (i.e., interest and dividends). I understand that income information obtained from these sources will be used to verify information that I provide in determining eligibility for assisted housing programs and the level of benefits. Therefore, this consent form only authorizes release directly from employers and financial institutions of information regarding any period(s) within the last 5 years when I have received assisted housing benefits.

Authority: Section 904 of the Stewart B. McKinney Homeless Assistance Amendments Act of 1988, as amended by Section 903 of the Housing and Community Development Act of 1992 and Section 3003 of the Omnibus Budget Reconciliation Act of 1993. This law is found at 42 U.S.C. 3544. This law requires that you sign a consent form authorizing: (1) HUD and the Housing Agency/Authority (HA) to request verification of salary and wages from current or previous employers; (2) HUD and the HA to request wage and unemployment compensation claim information from the state agency responsible for keeping that information; (3) HUD to request certain tax return information from the U.S. Social Security Administration and the U.S. Internal Revenue Service. The law also requires independent verification of income information. Therefore, HUD or the HA may request information from financial institutions to verify your eligibility and level of benefits.

Purpose: In signing this consent form, you are authorizing HUD and the above-named HA to request income information from the sources listed on the form. HUD and the HA need this information to verify your household's income, in order to ensure that you are eligible for assisted housing benefits and that these benefits are set at the correct level. HUD and the HA may participate in computer matching programs with these sources in order to verify your eligibility and level of benefits.

Uses of Information to be Obtained: HUD is required to protect the income information it obtains in accordance with the Privacy Act of 1974, 5 U.S.C. 552a. HUD may disclose information (other than tax return information) for certain routine uses, such as to other government agencies for law enforcement purposes, to Federal agencies for employment suitability purposes and to Has for the purpose of determining housing assistance. The HA is also required to protect the income information it obtains in accordance with any applicable State privacy law. HUD and HA employees may be subject to penalties for unauthorized disclosures or improper uses of the income information that is obtained based on the consent form.

Private owners may not request or receive information authorized by this form.

Who Must Sign the Consent Form: 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.

PHA requesting release of information; **(Cross out space if none)** IHA requesting release of information: **(Cross out space if none)** (Full address, name of contact person, and date) **(Ho-Chunk Housing and Community Development Agency)**

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

Original is retained by the requesting organization. form **HUD-9886** (7/94) ref. Handbooks 7420.7, 7420.8, & 7465.1

Signatures:

Head of Household Date

Social Security Number (if any) of Head of Household

Spouse Date

Other Family Member over age 18 Date

Other Family Member over age 18 Date

Consent: I consent to allow HUD or the HA to request and obtain income information from the sources listed on this form for the purpose of verifying my eligibility and level of benefits under HUD's assisted housing programs. I understand that HAs that receive income information under this consent form cannot use it to deny, reduce or terminate assistance without first independently verifying what the amount was, whether I actually had access to the funds and when the funds were received. In addition, I must be given an opportunity to contest those determinations.

This consent form expires 15 months after signed.

Other Family Member over age 18 Date

Penalties for Misusing this Consent:

HUD, the HA and any owner (or any employee of HUD, the HA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form.

Use of the information collected based on the form HUD 9886 is restricted to the purposes cited on the form HUD 9886. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000.

Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the HA or the owner responsible for the unauthorized disclosure or improper use.

Privacy Act Notice. Authority: The Department of Housing and Urban Development (HUD) is authorized to collect this information by the U.S. Housing Act of 1937 (42 U.S.C. 1437 et. seq.), Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d), and by the Fair Housing Act (42 U.S.C. 3601-19). The Housing and Community Development Act of 1987 (42 U.S.C. 3543) requires applicants and participants to submit the Social Security Number of each household member who is six years old or older. Purpose: Your income and other information are being collected by HUD to determine your eligibility, the appropriate bedroom size, and the amount your family will pay toward rent and utilities. Other Uses: HUD uses your family income and other information to assist in managing and monitoring HUD-assisted housing programs, to protect the Government's financial interest, and to verify the accuracy of the information you provide.

This information may be released to appropriate Federal, State, and local agencies, when relevant, and to civil, criminal, or regulatory investigators and prosecutors. However, the information will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Penalty: You must provide all of the information requested by the HA, including all Social Security Numbers you, and all other household members age six years and older, have and use. Giving the Social Security Numbers of all household members six years of age and older is mandatory, and not providing the Social Security Numbers will affect your eligibility. Failure to provide any of the requested information may result in a delay or rejection of your eligibility approval.

