



HO-CHUNK NATION

Subject: Existing Mortgage Refinance	Title: Existing Mortgage Assistance (EMA)
Scope: Ho-Chunk Nation members with funding to be applied toward their Existing Mortgage.	Effective Date: 07/01/18
Issuing Authority: Executive Director Department of Personnel	Responsible Official Signature:
Legislative Authority: Employee Relations Act 6 HCC § 5 4 b. (2), Housing for the General Welfare of Veterans, Elders, and Non-Elders 8 HCC § 5.	Policy Number: Revised Policy DOH-HOP-04-10-17-003

1 Policy Statement:

1.1 This policy will establish a process for assisting enrolled Ho-Chunk Nation members with financing towards their existing mortgage from an outside lender by:

1.1.1 Determine eligibility and selection criteria for applicants seeking Down Payment Assistance Refinance.

1.1.2 Establish policy and procedures for the Department of Housing Down Payment Assistance Refinance Program

2 Purpose:

2.1 The purpose of this policy is assist enrolled Ho-Chunk Nation members by providing a grant to pay off mortgage loans in a shorter period of time and/or converting to a fixed rate.

3 Rational and Background:

3.1 The Existing Mortgage Assistance (EMA) Pilot Program was initiated on 07/24/2014 to increase housing opportunities for enrolled Ho-Chunk Nation members to live in adequate homes, create stable neighborhoods and communities by lowering monthly payments, and reducing interest rates.

3.2 The EMA Pilot Program Procedure had not been sanctioned or approved by the Executive Director of Personnel which is required for departments to develop, implement, and revise as necessary internal procedures, operating rules and policies pertaining to the unique operational requirements of the work unit for efficient and effective performance. (Employment Relations Act 6 HCC § 5, Chapter 1, section 4 b. (1)).

3.3 This policy reflects current legislation of the Ho-Chunk Nation Code; Housing, Real Estate, and Property, Housing for the General Welfare of Veterans, Elders, and Non-Elders cited as 8 HCC § 5, Section 3:

3.3.1 The Ho-Chunk Nation Department of Housing shall provide centralized leadership to develop equal housing opportunities using funds allocated for this purpose more strategically and efficiently, improving the use of socio-economic resources, and by creating unified goals and objectives



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stimulating durable housing options which benefit Ho-Chunk members by improving access to safe and affordable housing. Develop housing opportunities creating self-sufficiency/sustainability.

- 3.3.2 This Policy will ensure the Nations resources are used in a reasonable and prudent manner.

4 Policy:

4.1 Eligibility

- 4.1.1 Must be an enrolled Ho-Chunk Nation member and will provide proof of enrollment, 18 years of age or older, and legally competent. Must submit a completed EMA Application with the following documentation:
- 4.1.1.1 Signed Authorization for Release of Information
 - 4.1.1.2 Certificate of homeowners insurance
 - 4.1.1.3 Proof of ownership (copy of warranty deed, land lease)
 - 4.1.1.4 Loan pay off statement
 - 4.1.1.5 One year mortgage loan history
 - 4.1.1.6 Copy of current paid property taxes
 - 4.1.1.7 Financial institution's name, address, phone number, and loan officer's name.

4.2 Mortgage loan must be in good standing

4.3 Mortgage loan must be with a lender outside of Ho-Chunk Nation and only applies to the first mortgage.

4.4 The grant is strictly for the Applicant's principle and interest only.

4.5 Applicant must have no outstanding delinquencies or debts in bad standing with the Ho-Chunk Nation.

4.6 Applicant must agree to place Ho-Chunk Nation as second lien holder for a period of five (5) years from date of closing.

4.7 Applicant's request for assistance will not be reviewed until all required documents have been received, which is the applicant's responsibility.

4.8 Applicant must agree to this once in a lifetime utilization of this program. If a grant is approved and utilized, the applicant's name will be withdrawn from the Ho-Chunk Nation's Home Ownership Program or Veterans Home Ownership Program waiting list and will not be eligible to receive any additional funding.

4.9 Mortgage payments will not be suspended at age fifty-five (55).

4.10 If Applicant has received Down Payment Assistance through the Ho-Chunk Nation Department of Housing or Ho-Chunk Housing and Community Development Agency, they will remain eligible for the EMA.

4.11 Grant Terms:

4.11.1 Grants shall be awarded on a first come, first served basis when completed EMA application and required documents are received, contingent on program funding.

4.11.2 Grants shall not exceed the maximum amount of \$50,000.00.



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- 4.11.3 Applicant must agree to reside in the home as primary residence for a period up to five (5) years to be determined on the amount of grant received. If applicant resides in the home less than five (5) years the repayment of the grant will be made according to the payback schedule determined at closing.
- 4.11.4 Repayment of EMA will be required if the Applicant defaults on their mortgage or forecloses on the home.
- 4.11.5 Each year the applicant resides in the home, \$10,000 of the grant is forgiven.
- 4.11.6 Applicant is responsible for any closing costs, appraisals, assessments, penalties and fees associated with restructuring their mortgage debt.
- 4.11.7 If the Applicant does not agree and/or meet this sections requirement, the Applicant will be considered ineligible to receive EMA.
- 4.11.8 Down Payment Assistance recipients who received a DPA grant of up to \$10,000.00 shall be eligible for the EMA grant of up to \$50,000.00 per the terms of the DPA program at the time they received the grant.

5 Procedure:

- 5.1 Applications can be obtained from Ho-Chunk Nation website www.Ho-Chunk.com or the Department of Housing.
- 5.2 Application received by Housing staff should be stamped date of receipt.
- 5.3 Residential Services Advocate (RSA) shall log all EMA applications and review applications for completeness and verify receipt of the following documentation:
 - 5.3.1 Proof of Ho-Chunk Nation enrollment.
 - 5.3.2 Verification of first mortgage from financial institution's application or through e-mail from financial institution.
 - 5.3.3 Verification of mortgage loan history for one calendar year.
 - 5.3.4 Verification that a copy of warranty deed or land lease is received.
 - 5.3.5 Verification that a copy of insurance is received.
 - 5.3.6 Verification that property taxes are current.
- 5.4 RSA will forward all documentation to the Home Ownership Program Manager (HOPM) for review.
- 5.4 HOPM will review the Loan Payment History.
- 5.5 HOPM will determine if Applicant is on HOP waiting list.
- 5.6 HOPM shall verify that Applicant meets all criteria.
- 5.11 HOPM informs Residential Services Advocate (RSA) to prepare EMA Review Sheet for the Department of Housing Executive Director (ED) to approve or deny the application.
 - 5.11.1 Approval or denial of all applications will be determined by Eligibility Criteria established by the EMA program and the Housing for the General Welfare of Veterans, Elders, and Non-Elders 8 HCC § 5.
- 5.12 HOPM will inform RSA of ED's decision.



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- 5.12.1 If approved, RSA will prepare Grant Approval Stipulation Letter and mail to applicant for signature, and send Grant Approval Letter to the Financial Institution.
 - 5.12.2 If denied, RSA will prepare denial letter for HOPM's signature and mail to Applicant.
 - 5.13 HOPM receives signed Grant Approval Stipulation Letter from Applicant.
 - 5.13.1 HOPM will inform RSA to obtain wire instructions from the Financial Institution to prepare Draw Request.
 - 5.13.2 RSA will get HOPM signature on Draw Request.
 - 5.13.3 HOPM will deactivate applicant on HOP waiting list.
 - 5.13.4 HOPM will verify that the Ho-Chunk Nation has been added as the second lien holder until terms of the grant are met.
 - 5.14 RSA will give Draw Request with wiring instructions to Junior Accountant (JA) for processing.
 - 5.15 JA will process the wire through the current financial software.
 - 5.16 JA will forward wire confirmation from Treasury Department to the RSA.
 - 5.17 HOPM performs final review and close file.
- 6 Attachment/Forms:
- 6.1 Employment Relations Act 6 HCC § 5, as amended May 23, 2017, page 5
 - 6.2 Existing Mortgage Assistance Application
 - 6.3 Authorization for Release of Information
- 7 Definitions:
- 7.1 Draw Request – Processing document filled out by the proper individual to request a payment to be processed through the Financial Division.
 - 7.2 EMA – Existing Mortgage Assistance.
 - 7.3 HOPM – Home Ownership Program Manager
 - 7.4 JA – Junior Accountant
 - 7.5 RSA – Residential Services Advocate
- 8.0 Policy History:
- 04/10/17: Policy Approved by the Executive Director of Personnel
 - 11/06/17: Policy revision-002 Approved by the Executive Director of Personnel
 - 02/27/18: Policy revision-003 Approved by the Executive Director of Personnel

b. Departments and Units.

(1) Each department, division, or unit of the Nation, with the prior approval and consultation of the Executive Director of the Department of Personnel, may develop, implement, and revise as necessary internal procedures, operating rules and policies pertaining to the unique operational requirements of the work unit for efficient and effective performance. Advance notice of internal unit procedures and rules shall be provided to employees and must be posted in public places to serve as notice to all employees.

(2) Internal unit procedures, rules and policies shall not conflict with this Act. Where conflicts may arise between internal rules and procedures, this Act will govern.

5. Employment Clause.

a. Equal Employment Opportunity. With the exception of Ho-Chunk and Native American Preference in Employment as set forth in paragraph (b), below, it will be a violation of this Act to discriminate based on an individual's sex, race, religion, national origin, pregnancy, age, marital status, sexual orientation, or disability.

b. Ho-Chunk Preference in Employment Clause. The Nation exercises Native American Preference in employment and shall exercise Ho-Chunk Preference in employment under limited circumstances, which furthers a legitimate governmental purpose, including the goal of employing Ho-Chunk members at a rate to meet or exceed a majority (50% plus 1) total employees.

(1) The Nation will exercise Ho-Chunk and Native American Preference in Employment, prioritized as follows:

- (a) Enrolled Hocak Wazijaci member.
- (b) Spouse or Parent of a dependent Hocak Wazijaci member.
- (c) Enrolled Native American of a federally recognized tribe.

When the Ho-Chunk Nation is the Employer providing funding, it shall give preference in Equal Opportunities first to Ho-Chunk Members, then to Spouses or Parents of Ho-Chunk Members, and then to other Native Americans; provided, that the Tribal Member, Spouse or Parent of a Tribal Member, or Native American, as the case may be, meets the minimum necessary qualifications. If no candidate for an Employment Opportunity meets the Minimum Necessary Qualifications, then preference shall be given first to Ho-Chunk Members, then to Spouses or Parents of Ho-Chunk Members, and then to other Native Americans, who are capable of being trained to the Minimum Necessary Qualifications of the position. Thereafter, the Employment Opportunity shall be open to any other candidate who meets the Minimum Necessary Qualifications of the position.



HO-CHUNK NATION
DEPARTMENT OF HOUSING

Existing Mortgage 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
Mailing Address (street, city, state, zip code)			Mailing Address (street, city, state, zip code)		
Date of Birth	Social Security Number		Date of Birth	Social Security Number	

	PROPERTY INFORMATION	
Street Address of 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		

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

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 Existing Mortgage Assistance and a denial of the processing of the application and any future applications for this program.

Applicant Signature	Date	Co-Applicant Signature	Date
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ONLY ONE APPLICATION PER HOUSEHOLD



HO-CHUNK NATION
DEPARTMENT OF HOUSING

AUTHORIZATON FOR THE 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 Department of Housing Assistance 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
Date

Signature of Applicant

S.S.N. of Applicant

Date of Birth of Applicant

Printed Name of Co-Applicant
Date

Signature of Co-Applicant

S.S.N. of Co-Applicant

Date of Birth of Co-Applicant