



## ARE YOU A HOMEOWNER IN NEED OF ASSISTANCE?

The Homeowner Assistance Fund (HAF) Program with the Colorado River Indian Tribes may be able to assist you.

### What is the HAF Program?

A program established under the American Rescue Plan to lessen the effects of financial hardships of homeowners associated with the COVID-19 pandemic. These funds are provided to prevent loss of utilities, home energy services, insurance and covering reasonable home repairs for health and safety.

- Utility, Internet, Broadband Payment Assistance (Maximum Assistance \$3,000)
- Insurance Assistance (Maximum Assistance \$5,000)
- Displacement Prevention (Home Repair) Assistance (Maximum Assistance \$70,000)

### Who can apply for the HAF Program?

Enrolled Tribal Members of the Colorado River Indian Tribes, who are legal homeowners (living in the home as their primary residence) who have been financially impacted by Covid-19 pandemic and are at or below 150% of the average area median income limits.

### Documentation Requirements for Eligibility:

- Complete a Homeowner Assistance Application
- Personal Statement documenting financial impact due directly to COVID-19
- Proof of Income (W-2 forms, current paystubs, bank statements, etc.)
- Proof of Residency (Mortgage, conveyance document or an Official Letter from Tribal Council)
- Utility Statement (Current statement or utility bill showing delinquency, if applying payment assistance)
- Tribal Identification Card or Certificate of Indian Blood

Applications can be picked up at:

**Housing Improvement Program - 13372 1<sup>st</sup> Avenue, Parker, AZ 85344**

Or send an email request to: [Bregitte.Ploos@crit-nsn.gov](mailto:Bregitte.Ploos@crit-nsn.gov) or [Kristian.Nopah@crit-nsn.gov](mailto:Kristian.Nopah@crit-nsn.gov)

If you should have any questions, please call us at (928) 669-6738.

# CRIT Housing Improvement Program Policies and Procedures

## *Homeowner Assistance Fund (HAF) Program Policy*

### **Introduction and Purpose**

Homeowner Assistance Fund (HAF), which was established under section 3206 of the American Rescue Plan Act of 2021 (the ARP) This guidance may be updated, revised, or modified at any time, and the Secretary of the Treasury may waive the terms of this guidance in their sole discretion to the extent permitted by law.

According to the ARP, the HAF was established to mitigate financial hardships associated with the coronavirus pandemic by providing funds to eligible entities for the purpose of preventing homeowner mortgage delinquencies, defaults, foreclosures, loss of utilities or home energy services, and displacements of homeowners experiencing financial hardship after January 21, 2020, through qualified expenses related to mortgages and housing.

### **Policy**

Homeowners requesting assistance for Utilities, Home Insurance or Displacement Prevention must complete the Homeowner Assistance Fund Application. Applications shall be available at the Housing Improvement Program office (H.I.P.)

### **Procedures**

- A. **Requesting Assistance:** Applicants can call the Housing Improvement Program office for a ***Homeowner Assistance Fund Application*** at (928) 669-6738, email: [Bregitte.Ploos@crit-nsn.gov](mailto:Bregitte.Ploos@crit-nsn.gov) or [Kristian.Nopah@crit-nsn.gov](mailto:Kristian.Nopah@crit-nsn.gov), or stop by the H.I.P. office 13372 1<sup>st</sup> Avenue, Parker, AZ 85344.
- B. **Applicants:** Applicants must be enrolled Tribal Members of the Colorado River Indian Tribes, eligible applicants must be the legal homeowners and reside within the boundaries of the Colorado River Indian Tribes Reservation. The application must be completed by legal homeowner residing in home as the primary residence. Rental homes are not eligible for assistance
- C. **Application Process:** Once the ***Homeowner Assistance Fund Application*** is completed and submitted to the H.I.P. Office. Completed applications will be reviewed by H.I.P. staff.  
H.I.P. will process utility or insurance assistance through the CRIT Accounting Department.  
H.I.P. will contact contractors for home repairs and will acquire three (3) bids with contractors per Colorado River Indian Tribes Procurement Policy\*
- D. **Priorities of Repairs:** Repairs will be carried out in the order in which applications are received.

\*PROCUREMENT POLICY OF THE COLORADO RIVER INDIAN TRIBES. This Procurement Policy is established for the Colorado River Indian Tribes (Tribe) by Resolution No. 76-10, dated March 30, 2010, becomes effective on May 1, 2010 with amendments approved by Resolution No. 163-15 dated May 6, 2015 and by Resolution No. 216-17 dated June 27th, 2017 with an effective date of October 1, 2017.

- E. **Lodging:** HAF grant does not include lodging expenses. Applicant will be responsible for any lodging expenses associated with having to be out of the residence for a period of time while repairs are being conducted.
- F. **Follow Up:** H.I.P. will provide Tribal Council with the list of the completed applications and funding balances on a monthly basis.
- G. **Miscellaneous:** Contractors must have an Arizona or California contractor license and have a Tribal Business license registered with the CRIT Tax and Revenue Department, or be a local Tribal Contractor with a business license registered with CRIT Tax and Revenue.

### **Funding**

Funding will be based on availability on a first-come, first-serve basis. Assistance will be paid by allocated funds from Homeowner Assistance Fund (HAF) established under American Rescue Plan Act of 2021 (ARPA).

Date Submitted: \_\_\_\_\_  
Time Submitted: \_\_\_\_\_  
Received by: \_\_\_\_\_  
Application #: \_\_\_\_\_



# Colorado River Indian Tribes

## Housing Improvement Program

26600 Mohave Road, Parker, AZ 85344

Office: 928-669-6738

Fax: 928-669-6745

## HAF Homeowner Assistance Checklist

\*All application supporting documents are required to be considered for assistance\*

- \_\_\_\_\_ HAF Homeowner Assistance Application
- \_\_\_\_\_ Documented financial impact due directly to COVID
- \_\_\_\_\_ Release of Information
- \_\_\_\_\_ Income verification - last 30 days or Attestation document
- \_\_\_\_\_ Proof of Residency - Mortgage or Conveyance document  
or an Official Letter from Tribal Council
- \_\_\_\_\_ Utility Statement (current statement or utility bill showing  
delinquency, if applying payment assistance)
- \_\_\_\_\_ Tribal ID or Certificate of Indian Blood

\_\_\_\_\_  
Tribal Member Name

\_\_\_\_\_  
Staff Member

\_\_\_\_\_  
Date



# COLORADO RIVER INDIAN TRIBES

## HAF Homeowner Assistance Application

**\*Please complete all sections and provide supporting documentation\***  
**Incomplete applications will not be considered**

**Date:** \_\_\_\_\_

**Assistance Requested:**

- Utility Cost(s)  
  Insurance Assistance  
  Displacement Prevention

### General Information

**Head of the Household:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
City State Zip

**Residence Address:** \_\_\_\_\_  
City State Zip

**Phone#:** \_\_\_\_\_ **Message#:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

### Household Composition

**List all members currently in your household**

Names of Household Members (Legal Names)	Enrollment #	Date of Birth	Relationship to Head of the Household

## Household Income

**List Income for all adult household members:** Applicant must submit sufficient confirmation of the household's monthly income at the time of application for at least 30 days prior to the submission of this application.

Name of Household Member	Name of Employer Source of Income	Estimated Gross Annual Earnings

## Household Costs

List all costs for which you are applying for assistance.

Homeowner's Insurance	Account Name	Account Number	Amount Due
Utility Companies	Account Name	Account Number	Amount Due

**Housing Instability**

Does one or more individuals in your household face a risk of experiencing homelessness or housing instability, which may include (check all that apply):

- A past due utility, property tax bill or mortgage foreclosure notice
- Any other evidence of such risk

**If you checked any of the boxes above, attached supporting documentation demonstrating each type of housing instability (e.g., past due utility or eviction notice, add any other evidence of risk)**

**Financial Hardship**

Have one or more individuals in your household experienced financial hardship due directly to the COVID- 19 pandemic?    \_\_\_Yes \_\_\_No

**PLEASE DESCRIBE THE FINANCIAL IMPACT TO YOUR HOUSEHOLD DUE DIRECTLY TO COVID-19**

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# Colorado River Indian Tribes

## Authorization for Release of Information

I/we hereby authorize the Release of Information to the Housing Improvement Program Department, which is relevant and necessary to determine eligibility for the program that I/we are applying for.

I/we know that cooperation requires supplying all information needed to determine my eligibility. I/We understand that supplying false, incomplete or inaccurate information is punishable under Tribal Law.

By signing below, I/we authorize Colorado River Indian Tribes, Housing Improvement Program to verify information relevant to determining household eligibility by the following:

- Income of each household member age 18 and older
- Any other information that will determine eligibility

I/we agree that photocopies of the authorization may be used for the verification of information as needed by the Housing Improvement Program Department.

I/we understand all household members age eighteen (18) and older must sign and date this authorization form.

This authorization is effective for six months from date of signature.

Head of Household: \_\_\_\_\_  
Signature Date

Spouse/Adult Member: \_\_\_\_\_  
Signature Date

Other Adult Member: \_\_\_\_\_  
Signature Date

Other Adult Member: \_\_\_\_\_  
Signature Date