

**Northern Circle Indian Housing Authority  
Down Payment Assistance Application**

**Applicants Name:** \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
Co-Applicants Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Street/PO Box City State Zip Code

**Tribal Affiliation:** \_\_\_\_\_

**Family Information:**

<u>Name:</u>	<u>Social Security #</u>	<u>Date of Birth</u>	<u>Gender</u>
_____ Applicant	_____	_____	_____
_____ Co-Applicant	_____	_____	_____
_____ Child	_____	_____	_____
_____ Child	_____	_____	_____
_____ Child	_____	_____	_____

**Income Information:**

- ✓ Type of Income: \_\_\_\_\_
- ✓ Annual (Gross) Household Income: \$ \_\_\_\_\_

**Applicant Housing Information:**

- ✓ How long have you lived at your present address? \_\_\_\_\_ Current Monthly Rent? \_\_\_\_\_
- ✓ Have you or co-applicant owned any real property in the past three (3) years? Yes \_\_\_ No \_\_\_
- ✓ If yes how long ago, and where was it located? \_\_\_\_\_
- ✓ Have you completed the educational requirements and received your 1<sup>st</sup> Time Homebuyer Certificate? Yes \_\_\_ No \_\_\_
- ✓ Do you know your FICO score? Yes \_\_\_ No \_\_\_
- ✓ In what area (city) would you prefer to purchase your first home? \_\_\_\_\_

\_\_\_\_\_  
Applicants Signature Date:

\_\_\_\_\_  
Co- Applicants Signature Date:

Date Application Received: \_\_\_\_\_

(NCIHA-Initial)

Please return to: NCIHA Attn: Dana Novoa, 694 Pinoleville Dr., Ukiah, CA 95482  
(707) 468-1336 ext 111