

**Northern Circle Indian Housing Authority**  
**Application for On-Site Housing / Manchester-Point Arena**

<b>Name:</b>		<b>Phone:</b>	
<b>Mailing Address:</b>		<b>E-mail:</b>	
<b>City, Zip</b>		<b>County:</b>	
<b>Tribal Affiliation:</b>			
<b>Family Composition: Name/Relationship/Birthdate/Social Security # of each person who will live in your home</b>			
<b>Name</b>	<b>Relationship/Sex (circle male or female)</b>	<b>Birthdate</b>	<b>Social Security Number</b>
1. _____	Head _____	_____	_____
2. _____	Spouse _____	_____	_____
3. _____	Child (M,F) _____	_____	_____
4. _____	Child (M,F) _____	_____	_____
5. _____	Child (M,F) _____	_____	_____
6. _____	Child (M,F) _____	_____	_____
7. _____	Child (M,F) _____	_____	_____
8. _____	Child (M,F) _____	_____	_____
<b>Applicant Data:</b>	<b>Please indicate if you are:</b>	<b>Yes/No</b>	<b>Explain if necessary</b>
1. Elderly (62 years or older)			
2. Handicapped or Disabled			
3. Veteran – Branch Served, Year Served			
4. Have you ever been evicted from NCIHA managed on-site housing? If yes, explain			
5. Do you have any outstanding debts with NCIHA or your tribe? If yes, explain			
<b>Housing Data</b>	<b>See Attached Resolution No. 2008-105-120608</b>		
1. Do you own a home that exists on your Rancheria or elsewhere?			
2. Do you live in a home that is owned by your tribal government or that has been remodeled or constructed with BIA Housing Improvement Program (HIP) funding, within the past five (5) years?			
3. Do you have a lot or land assignment as recognized by your tribal government?			
4. List your relative named on the original 1936 Tribal Membership Roll			





**Northern Circle Indian Housing Authority**  
**Application for On-Site Housing / Manchester-Point Arena**

<b>Income Information:</b>	<p>The income data provided in this section will determine which housing program you may qualify for. All information is kept confidential and is subject to verification. IF NCIHA is unable to verify the information your application will be considered "incomplete" and returned to you. To avoid delaying your application, please complete this section as thoroughly as possible.</p>
----------------------------	---

**Employment:**

1. Name of family member employed \_\_\_\_\_  
 Name of employer \_\_\_\_\_  
 Address of employer \_\_\_\_\_  
 Phone # , fax, email \_\_\_\_\_

2. Name of family member employed \_\_\_\_\_  
 Name of employer \_\_\_\_\_  
 Address of employer \_\_\_\_\_  
 Phone # , fax, email \_\_\_\_\_

3. Name of family member employed \_\_\_\_\_  
 Name of employer \_\_\_\_\_  
 Address of employer \_\_\_\_\_  
 Phone # , fax, email \_\_\_\_\_

<b>Other Income</b>	<b>TANF, SSI, SSB, Veterans, UIB, Tribal Per Capita</b>
---------------------	---

1. Family member employed: \_\_\_\_\_  
 Agency: \_\_\_\_\_  
 Agency address: \_\_\_\_\_  
 Agency phone #: \_\_\_\_\_, fax: \_\_\_\_\_, email: \_\_\_\_\_

2. Family member employed: \_\_\_\_\_  
 Agency: \_\_\_\_\_  
 Agency address: \_\_\_\_\_  
 Agency phone #: \_\_\_\_\_, fax: \_\_\_\_\_, email: \_\_\_\_\_

3. Family member employed: \_\_\_\_\_  
 Agency: \_\_\_\_\_  
 Agency address: \_\_\_\_\_  
 Agency phone #: \_\_\_\_\_, fax: \_\_\_\_\_, email: \_\_\_\_\_

**Northern Circle Indian Housing Authority**  
**Application for On-Site Housing / Manchester-Point Arena**

<b>Applications Accepted By:</b>	
<b>FAX OR E-MAIL:</b> <b>707-468-5615</b> or <a href="mailto:smoncivais@pacific.net">smoncivais@pacific.net</a> Subject Line: <b>Attention: Management Dept.</b>	<b>MAIL:</b> <b>Northern Circle IHA</b> <b>694 Pinoleville Drive</b> <b>Ukiah, CA 95482</b>
<b>Applicant's Signature and Acknowledgment of Factual Data:</b>	
<p>I declare under penalty of perjury that I have fully, completely and accurately answered all of the questions contained in this consent form and that all of the information contained in this consent form is true and correct. I agree that if I fail to disclose requested information or if any of the information provided herein is inaccurate or incomplete, by omission or commission, NCIHA shall have the right to eliminate me from consideration for available housing for a period of at least one year and if I have already been selected for housing, to rescind my rental lease or mutual help agreement and I shall then upon demand immediately vacate the premises.</p>	
<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <b>Applicant's Signature</b>	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <b>Date</b>