

KARUK TRIBE TRAILER LOTTERY

Application & Checklist

Please make sure that all information in this application is accurate. The application must be completed in full and all the attachments must be submitted in order to process your application.

You must submit copies of the following information:

Copies of Identification for all Household members listed in the application.

Verification of Enrollment in an Indian Tribe, if claiming Indian Preference: Tribe Enrollment card, CDIB, etc.

Trailer Lottery

Point System Guidelines

Applications will be scored using a point-based system to prioritize housing need. Points may be combined when circumstances reasonably apply and are supported by documentation, in addition to other qualifying factors.

The Karuk Tribe reserves the right to verify documentation and determine final scoring. Submission of an application does not guarantee placement.

You will not be considered until your application is complete. Preference points and the date of your completed application will determine eligibility.

ADMISSIONS PREFERENCE (POINTS AS INCLUDED BELOW)

Enrolled Karuk Tribe Member =	3	Referred From Tribal Program =	2
Enrolled Karuk Descendent =	2	Secured Location for Trailer =	3
Other Tribal Member =	1	Disabled/Handicap =	2
Enrolled Karuk Elder (65) =	3	Veteran =	2
Karuk Near Elder (55 to 64) =	2		
Retired Karuk Elder =	3		
Karuk Tribe Employee =	2		
Employed/Actively Seeking =	1		
Without Permanent Housing/Homeless =	6		
Substandard Housing =	4		
Renting =	2		

If there are any additional circumstances or factors you believe should be considered in the review of your application, please describe them in detail and attach any supporting documentation you would like to be considered.

Upon receipt of your application, if there is missing information, you will be mailed a letter requesting the information. If you do not respond within fourteen (14) days, a second letter will be sent requiring a response within fourteen (7) days. If you do not respond to any of the letters your application will not be processed.

SUBMIT YOUR APPLICATION TO:

**Karuk Tribe, ATTN: Jacob Lantz
P.O. Box 1016, Happy Camp, California 96039
or trailerapp@karuk.us
Phone: (530) 493-1600 ext. 2016**

The Karuk Tribe has an inventory of RVs and travel trailers that will be made available to Tribal Members and descendants through a lottery process. As the Tribe works to draw down and conclude the trailer program, these units are being offered to Membership for personal use. While the trailers may serve as a housing resource for some recipients, the primary purpose of this effort is to distribute the remaining inventory in a fair and transparent manner to interested Tribal Members and descendants.

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Area of Preference: [] Yreka [] Happy Camp [] Orleans [] Other, Explain

Applicant Information

Full Name		
Date of Birth	Age	
Present Street Address		
Mailing Address		
City	State	ZIP
Home Phone	Cell/Message Phone	

Co-Applicant Information

Full Name		
Date of Birth	Age	
Present Street Address		
Mailing Address		
City	State	ZIP
Home Phone	Cell/Message Phone	

Household Member Information

List Head of Household First and include all persons who will live in your home.

Full Legal Name	Date of Birth		Relationship	Tribal Roll #	Enrollment Status

Indian Verification

Qualifying Household Member(s):	Enrollment Number(s):
Tribe:	Other Verification:

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Current Rental Situation

5	Are you living in substandard housing? <u>If yes, explain:</u>	[] Yes [] No
6	Are you paying rent in excess of 50% of your income? <u>If yes, explain:</u>	[] Yes [] No

Disabled / Handicapped Status

7	Is any household member Disabled or Handicapped? <u>If yes, attach documentation.</u>	[] Yes [] No
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Condition of Current Living Unit

Do you:	[] Own [] Rent [] Share [] Other, explain:				
Number in current residence:		Number of Bedrooms:		Monthly Rent:	
Type of Housing:	[] Single Family [] Duplex [] Apartment [] Mobile/Mfg. Home [] Other, explain:				
Current Landlord	Address	City	State	Zip	Phone
Please list all household items that are in need of repair, or inadequate:					

Background Information

8	List any other names used (including Maiden Names):	
9	Has any household member lived in low-income housing?	[] Yes [] No
	<u>If yes, list address/dates:</u>	
10	Have you or any household member been evicted from a residence?	[] Yes [] No
	<u>If yes, explain:</u>	
11		

Failure to provide requested information may result in delay or denial of application.

Trailer Location

Please provide address where you are able to locate a trailer with adequate water, sewer and power hook-ups:					

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Declarations of Applicant and Co-Applicant

I/We understand that any intentional or negligent misrepresentation of the information contained on this application may result in denial of the application. The Karuk Tribe may verify any information contained on this application through any sources, including background checks, criminal investigations or any other form of written or electronic media.

Applicant Signature (Head of Household)

Date

Co-Applicant Signature

Date

Other Household Member Over 18 Signature

Date