



I. DOWN PAYMENT ASSISTANCE PROGRAM

W/Pf	Occupant	Date of Applica- tion	Proof of Enroll- ment	Annual Income @ Time of Appl.	Family Size @ Time of Appl.	Income Limit	Differ- ence	Eligi- ble?	# of Bed- rooms	Purchase Price	Price within TDC?	Verified Check Issued to Mortgage Co.?	Date of Assist- ance	Lead- Based Paint?	Useful Life Agree- ment	Insurance?	Comments



II. REHABILATION ASSISTANCE PROGRAM

W/P	Occupant	Date of Application	Proof of Enrollment	Annual Income @ Time of Application	Family Size @ Time of Application	Income Limit	Difference	Eligible?	Date of Assistance	Useful Life Agreement	Comments

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III. RENTAL ASSISTANCE PROGRAM

W/P	Occupant	Date of Applica- tion	Proof of Enrollment	Annual Income @ Time of Application	Family Size @ Time of Application	Income Limit	Difference	Eligible @ Time of Entrance?	Adequate Income Verifi- cation?	Number of Bed- rooms	Rent Calculation (30% or less)	Date of Assist- ance	Comments

Office of Native American Programs

Occupancy Monitoring Plan Appendix 2 - Tenant Files Review Forms

IV. HOMEOWNERSHIP PROGRAM

W/P	Occupant	Date of Applica- tion	Proof of Enrollment	Annual Income @ Time of Application	Family Size @ Time of Application	Adequate Income Verifica- tion?	Income Limit @ Time of Application	Difference	Eligible @ Time of Entrance?	Number of Bed- rooms	Payment Calculation (30% or less – 15% if MH)	Date of Assistance	Comments