

2023-
2024

APPLICATION FOR THE LOAN PROGRAM



Oneida Housing Sector

Oneida Nation of the Thames

2023-2024



RENOVATION LOAN APPLICATION 2023-2024

1. Complete all sections to be considered as a successful Candidate
2. Please print clearly.
3. Housing does not accept incomplete applications.

REASON FOR RENOVATION LOAN/GRANT (**Please Circle**):

TYPE: Renovation Seniors Grant

CATEGORY : Structural Electrical Heating Plumbing Fire Safety

Over Crowding, as defined by the National Occupancy Standard

1. PERSONAL INFORMATION:

Name of Applicant: _____

Address: _____

Band # _____ Telephone # _____ Work # _____

Date of Birth ____/____/____ Social Insurance # _____

Marital Status: Please circle one: Married Single Common law

Spouse's name (if applicable): _____

Band # _____ Telephone # _____ Work # _____

Date of Birth ____/____/____ Social Insurance # _____

How many dependents reside in household? Please list:

Name	Age	Sex	Relationship	Band Name	Band Number

Other Income Sources: _____

How much do you receive a month? _____

Spouse's Employer: _____

Address: _____

Telephone #: _____ How long have you worked there? _____

Position: _____ Monthly salary: _____

Full time or part time employment? _____

4. ASSETS:

Account Type (Chequing/Saving/Investments)	Institution Name	Value (in current dollars)	Maturity Date (dd/mm/yy)

5. LIABILITIES:

Do you have financial obligations other than rent?

If so please list names and amounts owed: (such as credit cards, bank loans, etc.)

Debtor	Account Type (Line of Credit/Car Loan/Credit Card)	Amount Owing (in current dollars)

6. OTHER PERSONAL INFORMATION:

Note: This information is used to conduct a credit check

Bank Institution _____ Card #: _____

Primary Cardholder Name (as it appears on card): _____

Other Holder's Name & Acct. Number: _____

Drivers License #: _____

Vehicle Make, Model & Year: _____

Nearest Relative not living with you: _____

Complete Mailing Address: _____

Telephone #: _____ Relationship: _____

7. **CREDIT REFERENCES: Cell phone Bill, Tv Bill, hydro Bill etc.
(Must Be Completed to Consider Application Complete)**

Name: _____ Address: _____

Acct. #: _____ Monthly Payment: _____ Balance: _____

Name: _____ Address: _____

Acct. #: _____ Monthly Payment: _____ Balance: _____

Name: _____ Address: _____

Acct. #: _____ Monthly Payment: _____ Balance: _____

8. FINANCIAL ANALYSIS

(Must Be Completed to Consider Application Complete)

A \$400 monthly payment is required as a condition for a Renovation Loan

Step 1. Monthly Income:

Monthly Income	Average Monthly Income Amount
Employment Income	\$
Social Assistance Benefits	\$
Pension Benefits	\$
Employment Insurance Benefits	\$
Alimony, Child Support	\$
Other Income	\$
Total Monthly Income:	\$

Step 2. Monthly Expenses:

Monthly Expenses	Average Monthly Amount
Rent/Mortgage	\$
Utilities	\$
Insurance (House, car, medical)	\$
Phone, Cable, Internet	\$
Car/Truck loan Payment	\$
Gas, and Other Transportation Costs	\$
Personal Loan Payments	\$
Credit Card Payments	\$
Groceries	\$
Clothing	\$
Child Care, School/Sporting Fees, etc.	\$
Entertainment	\$
Other	\$
Total Monthly Expenses:	\$

Step 3. Amount Available For Other-Related Expenses:

Total Monthly Income (Step 1)		\$
Total Monthly Expenses (Step 2)	<i>Minus</i>	\$
Amount Available For Housing-Related Expenses:	<i>Equals</i>	\$

9. DECLARATION:

I/We authorize the Oneida Nation of the Thames, Housing Department to obtain and/or exchange information with any personal agent towards establishing or verifying my financial standing. **Information provided will be kept confidential and will not be shared with any outside party.**

I/We authorize the Oneida Nation of the Thames, Housing Department to obtain/conduct a credit check. **Information provided will be kept confidential and will not be shared with any outside party.**

I/We declare that all statements made in the foregoing application are true to the best of my/our knowledge and that no information has been concealed or omitted.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____

FOR OFFICE USE ONLY:

Application Submitted to: _____ Date Received: _____

Time Received: _____ Action Taken: _____

Referred to Land & Estates Department: Yes _____ No _____
