



CHECK LIST FOR FIRST TIME HOMEBUYERS DOWN PAYMENT ASSISTANCE

Applicant Name: _____

Initials: **Documents Required:**

_____ **Copy of Tulalip Tribal Membership**

_____ **Letter to Tulalip Board of Directors**
(Requesting Assistance)

_____ **Completed Delinquent Form**

_____ **Copy of Purchase and Sales Agreement**
(Include amount of down payment required)

_____ **Letter or Certificate of Completion for**
Homebuyer Training and Credit Counseling
(everyone listed on the loan will need this)

_____ **Escrow Letter with Escrow File Number**

_____ **Name and address of Lender or Escrow/Title**
Company Name: _____

_____ **Wire Transfer Instructions**

_____ **Amount of Grant Awarded \$** _____

Applicant turned in application on: _____

Down payment Policy for First Time Homebuyers

The Down Payment Assistant Policy (DPAP) will govern the disbursement of funds that provide assistance to any qualified Tulalip Tribal Member within the accustomed areas of the Tulalip Tribes who do not presently own, have title or has entered into a legal binding purchase agreement of a modular or stick framed home.

1. Awards will be in the form of a Grant that is not required to be paid back and not to exceed **\$10,000.00 per household.**
2. **Awards are to First Time Homebuyers only that complete three (3) hours of homebuyers training and three (3) hours of credit counseling by a Certified lender or financial counseling agency.**
3. Down Payment Grants can be used towards the purchase of a modular or stick framed home that is built or placed on a permanent foundations within the Tulalip Tribes Treaty ceded area as set forth in the Treaty of Point Elliott. (As far north as Ferndale, as far East as Index, as far south as Tacoma, and as far west as the Tulalip Bay coastline line.)
4. Applicants must be a Tulalip Tribes member 18 years of age or older.
5. Applicants must provide a copy of their purchase agreement at the time of application.
6. The award will be in the form of a one-time grant to the borrower(s) that can be used towards the purchase of a new modular or stick framed home to cover only down payments, closing costs or escrow fees.
7. Applicant cannot be delinquent on any debt owed to the Tulalip Tribes or departments or programs governed under the Tulalip Tribes.
8. All awards will be made directly to the lending institution or Escrow Company in the name of the borrower(s).
9. Grants cannot be used for the purchased of any Federal or Tribal subsidized home loan program.
10. A current credit report with all three credit bureaus information attached with application.
11. If there is another person named on the purchase and sales agreement other than the tribal member they must also provide a certification of participation and completion in the (3) hours of homebuyers training and the (3) hours of credit counseling by a certified lender or financial counseling agency.
12. If the applicant is purchasing the home with a spouse, or other party only one DPAP grant is allowed at a time for the same purchase and sale agreement/loan.



Tulalip Tribes Down Payment Assistance Program

Down Payment Assistance funds are paid through two different sources. To see which one your application will fall under please answer the questions below:

How many adults and children live in the home? _____

What is the gross household income including children? _____

Name(s): _____ Date: _____

Current Address: _____

Phone Number(s): _____

Address of Property being Purchased: _____

Amount of Grant Requesting: _____

Type of Home: _____

(Ex. Stick Built, Manufactured, Other)

- If you are purchasing land to build a home you will need to secure the home loan before applying for the DPA grant. The grant is for first time home purchases not vacant land purchases.

Do you own the Property? _____

Letter or Certificate of Completion: _____

Tribal Enrollment #: _____

Date of Birth: _____

Email/ additional contact:



Authorization to Release Information

I, _____ authorize the Tulalip Tribes TTHAP Program to release all information required for this Grant. The release of information by you is authorized whether such information is of record or not. I do hereby release you and all person, agencies, agents, employees, firms, companies, or parties affiliated with you from any damages resulting from providing such information. This authorization is valid for ninety (90) days from the date of signature below. Please keep a copy of my release request for your files.

Signature

Date

Print

Signature(S)

Date

Print



Tulalip Tribes Housing & Community Development Department

THE FOLLOWING MUST BE SIGNED BY ALL TULALIP TRIBAL ENTITIES LISTED BEFORE APPLICATION WILL BE ACCEPTED

Name: _____ **Tribal ID or Drivers License:** _____

Address: _____

This Section is to be completed by All Tribal Entities:

| | | | | |
|---|---------------------|-------|-------------|-------|
| Tulalip Tribes Finance: (Tribal Member Only) | _____ | _____ | _____ | _____ |
| | Authorized Official | Title | Balance Due | Date |

| | | | | |
|---------------------------|---------------------|-------|-------------|-------|
| Tulalip Tribes Utilities: | _____ | _____ | _____ | _____ |
| | Authorized Official | Title | Balance Due | Date |

| | | | | |
|--------------------------|---------------------|-------|-------------|-------|
| Tulalip Salish Networks: | _____ | _____ | _____ | _____ |
| | Authorized Official | Title | Balance Due | Date |

| | | | | |
|-----------------------|---------------------|-------|-------------|-------|
| Tax & Licensing Dept: | _____ | _____ | _____ | _____ |
| | Authorized Official | Title | Balance Due | Date |

| | | | | |
|---------------|---------------------|-------|-------------|-------|
| Tribal Court: | _____ | _____ | _____ | _____ |
| | Authorized Official | Title | Balance Due | Date |

| | | | | |
|-----------------------|---------------------|-------|-------------|-------|
| Tulalip Housing Dept: | _____ | _____ | _____ | _____ |
| | Authorized Official | Title | Balance Due | Date |

| | | | | |
|--|---------------------|-------|-------------|-------|
| Tulalip Land Lease: (Street Lights & Fire Dist) | _____ | _____ | _____ | _____ |
| | Authorized Official | Title | Balance Due | Date |

This Section To Be Completed By The Applicant:

By signing below, I acknowledge that this information is true and correct.

Applicant Signature

Spouse

Print Name

Date