



## COMMUNITY DEVELOPMENT DIVISION

### Home Renovation Loan Application

Attached are the application materials for the Home Renovation Loan program. This program provides financing for approved homeowners to renovate and/or improve their primary residence. Please complete the highlighted areas on the forms and return to the Housing Department, along with your Tribal identification card.

Please note that there may be a waiting list for the program. Applications are reviewed in order, according to placement on the waiting list. If you have any question about the program or application, please call Mary Bedausky at (800) 709-6445 ext. 7748 or direct at (320) 532-7748.

Sincerely,

Mary Bedausky, Loan Coordinator  
Mille Lacs Band of Ojibwe Housing Department  
Office: 320-532-7748  
Fax: 320-532-4197  
Email: [mary.bedausky@millelacsband.com](mailto:mary.bedausky@millelacsband.com)

**APPLICANT**

**Income Information Note: You must submit proof of all income you are claiming**

Household member name	Earned Income	Unearned Income	Source of Income (see below)

Total Income for Household: \_\_\_\_\_

Typical Sources of Income:	-Full-time Salary / wages	-Social Security
	-Part-time Salary / wages	-Social Security
	-Alimony	-Self-Employment
	-Child Support	-Commission
	-TANIF	-SSI
	-Veterans Benefits	-Housing Rental Income

Please explain any unique situations about your income here:

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Applicants must provide written documentation proving all income claimed. For income received from employment, signed request for verification of employment from (enclosed in application package) is sufficient. Applicants who are self-employed will be required to provide complete tax returns for the previous years. Awards letters may be used to prove social security, retirement, pension, or veterans benefits. If applicant is claiming income from support, copy of relevant court order must be provided, along with documentation of payments received.

Do you pay child support? \_\_\_\_\_ If yes, what amount per month? \_\_\_\_\_

**Housing Information**

Address of home to be renovated: \_\_\_\_\_  
\_\_\_\_\_

Is this home your permanent residence? Y / N

How many months out of the year do you live there? \_\_\_\_\_

Do you have documentation that you are the owner of the house? Y / N

Do you and will you continue to occupy the house as your primary residence? Y / N

Provide a description of the renovations/home improvements that you are requesting to Finance. **The Mille Lacs Band of Ojibwe Housing Department strongly encourages You to prioritize your renovation by first completing projects which will resolve or Improve health and safety issues.** If you know the expected costs, please include

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### **General Information**

Do you own the land on which you wish to renovate / improve this home? Y / N

If no, provide the name(s) of the owners: \_\_\_\_\_

Are your mortgage payments on the home current? Y / N

Are your property taxes current? Y / N

How much is your monthly mortgage payment? \_\_\_\_\_

Who is the mortgagee? \_\_\_\_\_

Amount of unpaid balance remaining: \$ \_\_\_\_\_

Estimated market value of the home: \$ \_\_\_\_\_

Do you own any other house not occupied by your family? Y / N

If yes, state where house is located: \_\_\_\_\_ and who occupies it \_\_\_\_\_

Name of Insurance company that insures the House: \_\_\_\_\_

Policy #: \_\_\_\_\_

Note: Applicants are required to carry homeowners insurance. If approved for financing, Applicants must provide the Housing Department with proof of insurance

### **Acknowledgment and Agreement**

The undersigned specifically acknowledges and agree(s) that: (1) the loan requested by application will be secured by Either a first or second mortgage: (2) the property will not be used for any illegal or prohibited purpose or use: (3) all Statements made in this application are made for the purpose of obtaining the loan indicated herein: (4) verification or Reverification of any information contained in this application may be made at any time by the lender. Its agents



Successors and assigns, either directly or through a credit reporting agency, from any source named in this application, And the original copy of this application will be retained by the lender, even if the Loan is not approved: (5) the Lender, Its agents, successors and assigns will rely on the information contained in the application and I / we have a continuing Obligation to amend and /or supplement the information provided in this application if any of the material facts which I / we have represented herein should change prior to closing: (6) in the event my/our payments on the loan indicated on This application become delinquent, the lender, its agents, successors and assigns, may, in addition to their other rights And remedies report my/our name and account information to accredit reporting agency (7) ownership of the loan May be transferred to successor or assigned of the lender without notice to me and/or administration of the loan account May be transferred to an agent, successor or assign of the lender without prior notice to me (8) the lender, its agents, Successors and assigns make no representations or warranties, express or implied, to the Borrower(s) regarding the Property, the condition of the property, or the value of the property.

### **Certification**

I/we certify that the information provide in this application is true and correct as of the date set forth opposite my/our Signature(s) on this application and acknowledge my/our understanding that any intentional or negligent Misrepresentation(s) of the information contained in this application may result in civil liability and/or criminal Penalties including, but not limited to fine or imprisonment or both under the provisions of Title 18, United States Code, Section 101, et. Seq. and liability for monetary damages to the lender, its agent, successors and assigns, Insurers and any other person who may suffer any loss due to reliance upon any misrepresentation which I/we have Made on this application. I also agree that I am hereby applying for a loan and other personal information in Order to determine my eligibility for financing. I understand that if I provide any false or misleading information, my Application may be denied.

Borrower's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Borrower's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return completed application package to:  
Mille Lacs Reservation Band of Ojibwe Housing Department  
43408 Oodena Drive  
Onamia, MN 56359

**Mille Lacs Band of Ojibwe Housing Department**  
**43408 Oodena Drive**  
**Onamia, MN 56359**  
**Telephone: (320) 532-7448 Fax: (320) 532-4192**

**REQUEST FOR VERIFICATION OF EMPLOYMENT**

**To:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby request that you furnish information to the Mille Lacs Band of Ojibwe Housing Department and/or the Mille Lacs Band regarding my present and/or past employment.

Applicant: \_\_\_\_\_ Signature: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Employee Number: \_\_\_\_\_

**Part 1 – Verification of Employment**

<b>1. Present Position</b> _____	<b>2. Date of Hire</b> _____	<b>3. Probability of Continued Employment</b> _____	<b>4. If Overtime or Bonus, is its Continuance likely?</b> Overtime <input type="checkbox"/> YES <input type="checkbox"/> NO Bonus <input type="checkbox"/> YES <input type="checkbox"/> NO
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**5. Current Base Pay \$** \_\_\_\_\_ **( ) Annual ( ) Monthly ( ) Hourly ( ) Weekly ( ) Other(Specify)**  
(IF PAID HOURLY, PLEASE INDICATE AVERAGE HOURS WORKED PER WEEK UNDER #8)

Anticipated Increases? ( ) YES ( ) NO Effective Date: \_\_\_\_\_ Amount \$ \_\_\_\_\_ Per \_\_\_\_\_

<b>6a. Earnings Year-to-Date Base Pay</b>	<b>Past Year</b>	<b>7. For Military Personnel Only</b>
		Taxable Pay (Monthly) Non-taxable Pay (Monthly)

\$ _____	\$ _____	-----
b. Earnings Year-to-Date Overtime	Past Year	Base Pay Career C Pay Quarters VHA

\$ _____	\$ _____	\$ _____ \$ _____ \$ _____ \$ _____
c. Earnings Year-to-Date Bonus	Past Year	Pro Pay Other(Specify) Ration Other(Specify)

\$ _____	\$ _____	\$ _____ \$ _____ \$ _____ \$ _____
d. Earnings Year-to-Date Incentive Pay, Commissions, Tips, Etc.	Past Year	Flight Pay Clothing

\$ _____	\$ _____	\$ _____ \$ _____
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**8. Remarks: (If paid hourly, please indicate average hours worked each week during current and past year; also indicate if there are conditions such as weather that affect the number of hours worked.)**

**Part II - Certification**

This form should be completed and signed by a bona fide representative of the employer such as time-keeper, bookkeeper or accountant. In no event should it be completed by the employee. Federal statutes provide severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy.

Signature/Title: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

Please Return to: Mille Lacs Band of Ojibwe Housing Department  
43408 Oodena Drive  
Onamia, MN 56359  
Please direct any questions to (320) 532-7748

**THIS COPY FOR CO-APPLICANT**

**Mille Lacs Band of Ojibwe Housing Department**  
**43408 Oodena Drive**  
**Onamia, MN 56359**  
**Telephone: (320) 532-7448 Fax: (320) 532-4192**

**REQUEST FOR VERIFICATION OF EMPLOYMENT**

**To:** \_\_\_\_\_

I hereby request that you furnish information to the Mille Lacs Band of Ojibwe Housing Department and/or the Mille Lacs Band regarding my present and/or past employment.

Applicant: \_\_\_\_\_ Signature: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Employee Number: \_\_\_\_\_

**Part 1 – Verification of Employment**

<b>1. Present Position</b>	<b>2. Date of Hire</b>	<b>3. Probability of Continued Employment</b>	<b>4. If Overtime or Bonus, is its Continuance likely?</b> Overtime <u>YES</u> <u>NO</u> Bonus <u>YES</u> <u>NO</u>
_____	_____	_____	

**5. Current Base Pay \$** \_\_\_\_\_ **( ) Annual ( ) Monthly ( ) Hourly ( ) Weekly ( ) Other(Specify)**  
**(IF PAID HOURLY, PLEASE INDICATE AVERAGE HOURS WORKED PER WEEK UNDER #8)**

Anticipated Increases? ( ) YES ( ) NO Effective Date: \_\_\_\_\_ Amount \$ \_\_\_\_\_ Per \_\_\_\_\_

<b>6a. Earnings Year-to-Date Base Pay</b>	<b>Past Year</b>	<b>7. For Military Personnel Only</b>
\$ _____	\$ _____	Taxable Pay (Monthly) Non-taxable Pay (Monthly)

<b>b. Earnings Year-to-Date Overtime</b>	<b>Past Year</b>	<b>Base Pay</b>	<b>Career C Pay</b>	<b>Quarters</b>	<b>VHA</b>
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

<b>c. Earnings Year-to-Date Bonus</b>	<b>Past Year</b>	<b>Pro Pay</b>	<b>Other(Specify)</b>	<b>Ration</b>	<b>Other(Specify)</b>
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

<b>d. Earnings Year-to-Date Incentive Pay, Commissions, Tips, Etc.</b>	<b>Past Year</b>	<b>Flight Pay</b>	<b>Clothing</b>
\$ _____	\$ _____	\$ _____	\$ _____

**8. Remarks: (If paid hourly, please indicate average hours worked each week during current and past year; also indicate if there are conditions such as weather that affect the number of hours worked.)**

**Part II - Certification**

This form should be completed and signed by a bona fide representative of the employer such as time-keeper, bookkeeper or accountant. In no event should it be completed by the employee. Federal statutes provide severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy.

Signature/Title: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

Please Return to: Mille Lacs Band of Ojibwe Housing Department  
43408 Oodena Drive  
Onamia, MN 56359  
Please direct any questions to (320) 532-7748



# REQUEST FOR VERIFICATION OF RENT OR MORTGAGE ACCOUNT

Instructions: LENDER – Complete Part I. Items 1 - 8, have APPLICANT(S) complete Part I, Item 8 and forward directly to Creditor named in Part I, Item 1.  
LANDLORD/CREDITOR – Please complete Part II, and return directly to Lender named in Part I, Item 2.

## PART I – REQUEST

1. TO: (Name & Address of Landlord or Creditor)

2. FROM: *Mille Lacs Band of  
Ojibwe Housing Dept.  
43408 Oodena Dr.  
Onamia, MN 56359*

3. SIGNATURE OF LENDER

4. TITLE

5. DATE

6. INFORMATION TO BE VERIFIED:

PROPERTY ADDRESS:

ACCOUNT NAME & NUMBER:

\_\_\_\_ MORTGAGE

\_\_\_\_ RENTAL

\_\_\_\_ LAND CONTRACT

7. NAME & ADDRESS OF APPLICANT(S)

8. SIGNATURE OF APPLICANT(S)

## PART II – TO BE COMPLETED BY LANDLORD/CREDITOR

We have received an application for a loan from the above, to whom we understand you rent or have extended a loan. In addition to the information requested below please furnish us with any information you might have that will assist us in the processing the loan.

\_\_\_\_ Mortgage

\_\_\_\_ Land Contract

\_\_\_\_ Rental Account

Date originated \_\_\_\_\_

Interest rate \_\_\_\_\_

Has rented since \_\_\_\_\_

Original amount \_\_\_\_\_

Fixed \_\_\_\_\_ ARM \_\_\_\_\_

Amount of Rent \_\_\_\_\_

Current balance \_\_\_\_\_

FHA \_\_\_\_\_ Conv. \_\_\_\_\_

Is rent in arrears \_\_\_\_\_

Monthly payment p+i \_\_\_\_\_

FNMA \_\_\_\_\_

Amount \_\_\_\_\_

Payment of tax & ins. \_\_\_\_\_

Next pay date \_\_\_\_\_

No. of payments \_\_\_\_\_

Is mortgage current \_\_\_\_\_

No. of late payments \_\_\_\_\_

Is account satisfactory \_\_\_\_\_

COMMENTS:

SIGNATURE OF DEPOSITORY

TITLE

DATE

The confidentiality of the information you have furnished will be preserved where law requires disclosure of this information. This form is to be transmitted directly to the lender and is not to be transmitted through the applicant or any other party.



## AUTHORIZATION TO OBTAIN CREDIT INFORMATION

I hereby authorize the Mille Lacs Band of Ojibwe Housing Department, its agents or assigns, to verify my past and present employment earnings records, past and present employment status, bank accounts, stock holdings, and any other asset balances that are needed to process my mortgage loan application. I further authorize the Mille Lacs Band of Ojibwe Housing Department, its agents or assigns, to order a consumer credit report and verify other credit information, including past and present mortgage and landlord references. It is understood that a photocopy of this form will also serve as authorization.

The information the Mille Lacs Band of Ojibwe Housing Department, its agents or assigns, obtains is to be used in the processing of my application for a mortgage loan. This information may also be obtained in conjunction with a quality control review of the file after the loan has closed.

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Applicant (Signature)

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Date

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Social Security Number

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Date of Birth

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Tribal Enrollment Number

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Co-Applicant (Signature)

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Date

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Social Security Number

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Date of Birth

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Tribal Enrollment Number (if applicable)

Privacy Act Notice: The information to be obtained will be used by the lender, its agents or assigns, and any federal agency insuring, guaranteeing, or purchasing the mortgage to determine whether you qualify as a prospective borrower under the lender's and the agency's underwriting standards. The information will not be disclosed outside the lender or the federal agency without your consent except to the person or company verifying the information including, but not limited to, your employer, bank, lender, and any other credit references as needed to verify other credit information and as permitted by law. You do not have to give us this information but if you do not, your mortgage loan application may be delayed or rejected. The information we will obtain is authorized by Title 38, U.S.C., Chapter 37 (if VA); and 12 U.S.C. Section 17901 et seq (if HUD/FHA).