



Confederated Tribes of Grand Ronde
Social Services Department
9615 Grand Ronde Road Grand Ronde OR. 97347
503-879-2034 | 800-242-8196 | Fax: 503-879-5127
Email: ssdinfo@grandronde.org

RENTAL SUPPORT PROGRAM

The Social Services Department is pleased to offer the Rental Support Program to all eligible Tribal Members. The purpose of this program is to assist Tribal member adults or households of Tribal Member youth with the high costs of housing by providing assistance to secure rental housing through financial support towards first, last and deposit fees. The funding for this program is limited and the program will remain open until all funding has been expended.

- This is a first come, first served program.
- Completed applications and supporting documents must be received to process applications.
- Assistance can only be provided once in a 5 year period.
- Tribal member will receive up to \$4,500 based on fees included in Rental Agreement.
- Payment will be made directly to the landlord or rental agency and require appropriate Tax Forms.
- Assistance provided to Tribal member household or Tribal member portion of the fees in roommate situations.
- These funds cannot be used in combination with Emergency Assistance or Student Rental Assistance.
- Quarterly Per capita will be counted in the month provided.

Eligibility:

- Tribal Member adult or Tribal Member child in home.
- Assistance is limited to Tribal households within the United States.
- Applicants cannot have received this assistance within the last 5 years.
- Must have sustainable income to cover rent on a monthly basis after assistance is provided.
- Household must meet income criteria of 60% of Median Income Guideline.

60% OF MEDIAN INCOME GUIDELINES

Size of Family Unit	Gross Monthly Income
1	\$2,317
2	\$3,030
3	\$3,743
4	\$4,456
5	\$5,169
6	\$5,882
7	\$6,015
8	\$6,149

Documentation required:

- Completed Application
- Proposed Rental Agreement with all fees listed
- Income Verification for all adult household members
- W-9 (included) completed by Landlord or Rental Agency
- Landowner Verification Form completed by Landlord or Rental Agency.
- Verification that Tribal Member child lives in the home.

Please submit application and documentation by email to ssdinfo@grandronde.org or by mail to:

Confederated Tribes of Grand Ronde
Social Services Department
9615 Grand Ronde Road
Grand Ronde OR. 97347

If you have questions or need assistance in completing the application, please contact the Social Services department at your earliest convenience, we are here to help and look forward to working with you.

Tammy C. Garrison
Emergency Assistance Programs Coordinator
Confederated Tribes of Grand Ronde
Social Services Department
503-879-2077

FOR SOCIAL SERVICES USE ONLY		
NAME (LAST/FIRST)		
DATE COMPLETED		



RENTAL SUPPORT APPLICATION

(FIRST, LAST & DEPOSIT)

(k^hanamakwst ntsayka munk-skukum ntsayka tilixam)

TOGETHER WE STRENGTHEN OUR PEOPLE

GENERAL INFORMATION					
<i>First Name</i>		<i>Last Name</i>		<i>Roll #</i>	<i>Birthdate</i>
<i>Street Address</i>			<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Mailing address if different</i>			<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Home Phone</i>		<i>Message/Cell</i>		<i>County</i>	
<i>Email Address</i>			<i>Number of Household Members</i>		<i>Date of Request</i>
<p><i>Is this a single household? Yes or No (circle one)</i> <i>Is this a household with roommate(s) Yes or No (circle one)</i></p> <p>Estimated dollar amount requested \$ _____</p> <p><i>Estimated Monthly Income: \$</i> _____</p> <p> <input type="checkbox"/> Wages <input type="checkbox"/> Unemployment <input type="checkbox"/> Child Support <input type="checkbox"/> TANF <input type="checkbox"/> SSD/SSI <input type="checkbox"/> Tribal Disability <input type="checkbox"/> Other </p>					

List any other programs you are currently working with:	
<i>Office/Department:</i> _____	<i>Office/Department:</i> _____
<i>Office/Department:</i> _____	<i>Office/Department:</i> _____

We respect your personal information and will honor your confidentiality

Check-off List of Required Documents

Documentation required:

- Completed Application
- Proposed Rental Agreement with all fees listed
- Income Verification for all adult household members
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Signature

Date

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60% OF MEDIAN INCOME GUIDELINES

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Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1	Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.		
2	Business name/disregarded entity name, if different from above		
3	Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ▶ _____		
5	Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)	
6	City, state, and ZIP code		
7	List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number											
				-			-				
or											
Employer identification number											
				-							

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.