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 renal 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

<table>
<thead>
<tr>
<th>Size of Family Unit</th>
<th>Gross Monthly Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$2,317</td>
</tr>
<tr>
<td>2</td>
<td>$3,030</td>
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<tr>
<td>3</td>
<td>$3,743</td>
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<td>4</td>
<td>$4,456</td>
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<td>$5,882</td>
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<td>7</td>
<td>$6,015</td>
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<tr>
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<td>$6,149</td>
</tr>
</tbody>
</table>

**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
# Rental Support Application

(First, Last & Deposit)

(kh'anamakwst ntsayka munk-skukum ntsayka tilixam)

Together we strengthen our people

## General Information

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Roll #</th>
<th>Birthday</th>
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<table>
<thead>
<tr>
<th>Street Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
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</table>

<table>
<thead>
<tr>
<th>Mailing address if different</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>Home Phone</th>
<th>Message/Cell</th>
<th>County</th>
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<table>
<thead>
<tr>
<th>Email Address</th>
<th>Number of Household Members</th>
<th>Date of Request</th>
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<tbody>
<tr>
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Is this a single household? Yes or No (circle one)
Is this a household with roommate(s) Yes or No (circle one)

Estimated dollar amount requested $___________

**Estimated Monthly Income:** $___________

☐ Wages  ☐ Unemployment  ☐ Child Support  ☐ TANF  ☐ SSD/SSI  ☐ Tribal Disability  ☐ Other

List any other programs you are currently working with:

<table>
<thead>
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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
- □ 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

__________________________  ____________________________________________
Signature                              Date

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60% OF MEDIAN INCOME GUIDELINES

We respect your personal information and will honor your confidentiality
Confederated Tribes of Grand Ronde
Social Services Department
Landlord/Owner Verification

(TO BE COMPLETED BY LANDLORD/OWNER ONLY)

Landlord (Property Manager)
and/or Owner’s Name: __________________________________________

Address: ________________________________________________________

_________________________________________________________________

Telephone (Day): ____________________________ (Evening): ______________________

County and office where ownership may be verified: ________________________________

Date of Rental Agreement: __________________

Address of Rental: ______________________________________________________

_________________________________________________________________

Tenants listed on agreement (all names): __________________________________________

_________________________________________________________________

Landlord
Signature: ____________________________ Date: __________________

(Office use only)
County Assessor Phone #: ________________________________

Owner Verified: Yes ○ No ○

Notes: __________________________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

Case Worker Signature: ____________________________ Date: __________________

Confidential
Request for Taxpayer Identification Number and Certification

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

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; check only one of the following seven boxes:
   - Individual/sole proprietor
   - Corporation
   - Partnership
   - Trust/estate
   - Limited liability company. Enter the tax classification (e.g., Corporation, S Corporation, etc.)
   - For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the LLC classification of the single-member owner.

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)

   (Applies to accounts maintained outside the U.S.)

5. Address (number, street, and apt. or suite no.)

6. City, state, and ZIP code

7. List account number(s) here (optional)

Requester's name and address (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 Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.

Note: If the account is in more than one name, see the instructions for line 1 and the chart on page 4 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 on page 3.

Sign Here

Signature of U.S. person

Date

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted. Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

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 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? on page 2.

By signing the filed-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.

Cat. No. 10231X

Form W-9 (Rev. 12-2014)