



2717 N. Steves Blvd., Suite 8
Flagstaff, AZ 86004
928-440-5119

Red Feather Native Home Resource Network - Case Management Program

Who is eligible?

This is an application for multiple programs Red Feather offers individuals living on the Hopi or Navajo reservations. There are no costs to participate in this program. Requests for help are only accepted for a primary residence. Priority is given on a first-come basis, with additional selection points awarded to homes with elderly, disabled, veterans, and children. Some of the resources we have available at our disposal have restrictions on income, geography, and utility provider. Other resources do not have limitations. Regardless of your situation, we encourage you to provide all requested information, as this will enable us to identify the best possible way to help.

What type of work is covered?

This program is designed to connect housing resources to families in need. Our process begins by conducting a home assessment and helping to prioritize housing needs. We then assess available resources, including your own resources, and work in partnership with families to develop an action plan. As our funding allows, all clients are eligible for a modest financial contribution towards homeowner-led do-it-yourself projects and any available healthy home supplies, such as HEPA filters, Aging-Place-Items, and wood stove safety devices. When feasible, we also assist with health and safety housing repairs such as door and window upgrades, electrical and plumbing, heating, and cooling, roofing, ramps, wood stove changeouts, weatherization, etc. We do not provide cosmetic improvements. We rarely assist families with new homes and/or additions to their existing structure.

What type of assistance is provided?

Grant and loan application assistance
Home assessments
Home repair project management
Material Procurement
Financial Support for DIY Projects

Healthy Home Supplies
Resource recommendations
Sub-contractor management
Tool loans
Volunteer labor

Please mail or email completed documents to:

Red Feather Development Group 2717 N. Steves Blvd. Street, Suite 8 Flagstaff, AZ 86004
928-440-5119
TTY: 1-800-347-1695
services@redfeather.org

This institution is an equal opportunity provider.

"If you have a disability that limits your ability to access our facilities, please contact us so we can arrange for an alternative meeting location."



Office Use Only:

Date Received

APS Bill

Income Verified

Home Ownership

Circle all that apply:

APS WX

HPG

AIP

Ramp

WS inspection

Firewood

HEPA

HWS

Other:

Client Name:	
Mailing Address:	
Chapter/Village:	Email:
Phone 1:	Phone 2:
Name:	Phone:
<p>Draw Map of physical location and directions (provide as much detail as possible: color of house, vehicles, landmarks, etc.)</p>	

1. Have you received weatherization services at your current address? Yes or No
2. What year did you receive weatherization services? _____
3. Is the home you are applying for assistance with your primary residence? Yes or No
4. How old is your home? _____
5. How long have you lived in the home? _____
6. What type of home do you have? Cinder block _____ Stick frame _____ Mobile home _____ Stone _____ Hogan _____ Shed _____ Other: _____
7. Does anyone living in the home have any documented disabilities? Yes or No
8. Is anyone living in the home a veteran? Yes or No
9. Do you have children living in the home? Yes or No
10. What type of heating source do you use? Woodstove _____ Space heater _____ Furnace _____ Heat Pump _____ Other _____

HOME REPAIR NEEDS: Please Provide details on your most pressing housing repair needs:

Roofing/leaks:

Structural (i.e., walls, floors, door, windows):

Plumbing (repairs only):

Electrical (repairs only):

ADA Assistance (i.e., ramps, Aging in Place):

Heating/Cooling (i.e., woodstove inspection/firewood):

Other:

Applicant must provide proof of land and/or homeownership by submitting one of the following:

- Home Site Lease Agreement or Land Assignment
- Letter from the Tribe attesting to the ownership of the home.
- Letter from the Tribe's Housing Authority attesting to the ownership of the home.
- Other documentation from Chapter House, Former Bennet Freeze Area Board
- If renting, please complete the Property Owner Rental Agreement (available upon request).
- If proof is unavailable, please contact our office to discuss options.

INCOME VERIFICATION

Please provide the following information for ALL household members who are 16 years of age and up.

First and Last Name	Age	Source of Income	Income for the past 12 months
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
Total occupants living in the home		Total gross annual income for household:	\$

Acceptable forms of “Proof of Income”

- Copies of the last 3 consecutive months of paystubs, wages, and salaries before deductions
- Self-Employment-most recent tax return and/or self-declaration of weekly/monthly income signed and dated.
- Social Security, Supplemental Security Income (SSI), Social Security Disability Income (SSDI). You can request a copy by calling 1-800-772-1213
- SNAP/TANIF/ADC
- Veteran’s benefits
- Retirement/Pension/Annuities
- Unemployment/Workman’s Comp
- No Income: A Certification of Zero Income form can be requested by contacting the Red Feather office

*Updated 6/2022

UTILITY INFORMATION RELEASE- APS Customer Only

Applicants must provide a copy of their most recent utility (APS) bill if they are interested in qualifying for our APS Home Weatherization Program.

I hereby authorize Arizona Power Service to release all utility bills and other information concerning or relating to energy consumption at the account address listed below to the Red Feather Development Group
This release is granted in connection with the determination of my eligibility for and/or my participation in the home weatherization for low-income households (the “**Program**”) and applies to all historical and future utility bills and energy consumption information for the account address listed below. I further understand that the utility bills and consumption information released hereunder may be compiled and analyzed (both on an individual household and aggregate basis) to determine energy cost savings realized through the Program, as well as to support future requests for additional Program funding (the “**Purpose**”). The utility bills and consumption information released hereunder, as well as any statistical or other analysis derived therefrom, may be further released to third parties in furtherance of the Purpose described above, *provided that* no information released hereunder shall be made public in such a manner that my dwelling or its occupants can be identified.

APS electrical account # _____

Application Signature _____ Date _____

Some but not all of Red Feather’s programs have income qualifications. Amounts are listed here for informational purposes. Applicants are encouraged to apply regardless of their household income level.

APS Low-Income Weatherization Program 200% FPL	
# of Household members	Income
1	\$ 27,180
2	\$ 31,900
3	\$ 46,060
4	\$ 55,500
5	\$ 64,940
6	\$ 74,380
7	\$ 83,820
8	\$ 93,260
For each additional member, add:	\$ 9,440

USDA HPG Income Guidelines

# of household members	Very Low-Income Coconino County	Low-Income Coconino County	Very Low-Income Navajo County	Low-Income Coconino County
1	\$ 42,950	\$ 68,700	\$ 27,700	\$ 44,300
2	\$ 42,950	\$ 68,700	\$ 27,700	\$ 44,300
3	\$ 42,950	\$ 68,700	\$ 27,700	\$ 44,300
4	\$ 42,950	\$ 68,700	\$ 27,700	\$ 44,300
5	\$ 56,700	\$ 90,700	\$ 36,600	\$ 58,500
6	\$ 56,700	\$ 90,700	\$ 36,600	\$ 58,500
7	\$ 56,700	\$ 90,700	\$ 36,600	\$ 58,500
8	\$ 56,700	\$ 90,700	\$ 36,600	\$ 58,500

ADD 8% OF 4 PERSON LIMIT FOR EACH PERSON ABOVE 8 PERSONS

Photo and Video Release:

Red Feather relies on outlets like Facebook, Instagram, and our website and newsletters to share projects with individuals and groups that may be interested in our work. Providing the public with a personal connection to our work helps us solicit resources that are used to help assist individuals in need like you. It is not required that you provide consent, nor will it disqualify you from receiving help if you decline but is helpful to our work and deeply appreciated.

Please indicate whether you are willing to give Red Feather consent to document your project and use it as needed in support of our programs and services:

YES

NO

Signature _____ Date _____

Reciprocity and Project Contribution

Applicants requesting help under our Native Home Resource Network are encouraged to participate in their project actively. Since our work is provided to the homeowner for free, we see this as a way of showing appreciation for the services provided. However, choosing not to contribute to your project will not impact our decision to help you. Listed below are some suggested ways that you can help.

- Tell us a personal story we can share with our supporters
- Donate art for a raffle or a gift to donors
- Host a volunteer or group interested in learning more about your community
- Contribute labor with construction skills to your project
- Provide meals for volunteers working on-site on your project
- Contribute building materials to your project

Race and Ethnicity For Head of Household

The following information is voluntary. There is no penalty for those who choose not to provide ethnic and racial data.

Ethnic Categories	Choose One
Hispanic or Latino	<input type="checkbox"/>
Non-Hispanic or Latino	<input type="checkbox"/>
Racial Categories	Select All That Apply
American Indian or Alaskan Native	<input type="checkbox"/>
Asian	<input type="checkbox"/>
Black or African American	<input type="checkbox"/>
Native Hawaiian or other Pacific Islander	<input type="checkbox"/>
White	<input type="checkbox"/>
Other	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>

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