



Miami Tribe of Oklahoma
COVID-19
General Welfare Program
Utility/ Rental/Mortgage Assistance Grant
Confidential Grant Application

The Miami Tribe of Oklahoma has established the COVID-19 General Welfare Program Utility, Rental or Mortgage Assistance Grant. The grant is intended to assist low to moderate income tribal members who have been economically impacted by the pandemic. The funds will be paid to the utility company, landlord or mortgage company and will not be paid directly to tribal members.

The following guideline is being used to determine eligibility for this grant assistance. Grants will be made until allocated funds have been expended or until the federal funding deadline has expired.

The maximum grant assistance amount of \$800.00 paid to the utility company, landlord, or mortgage company if your household meets the income eligibility. **Please provide income verification for EVERY person over the age of 18 living in the household.** This can be in the form of a pay stub or unemployment verification.

Annual Maximum NET Allowable	Household Size	Monthly Maximum NET Allowable
\$22,926	1	\$1,910.50
\$29,980	2	\$2,498.33
\$37,034	3	\$3,086.17
\$44,088	4	\$3,674.00
\$51,142	5	\$4,261.83
\$58,196	6	\$4,849.67
\$65,184	7	\$5,432.00
\$72,231	8	\$6,019.26

This grant will provide funds (up to \$800.00) for utility, rental or mortgage assistance - **one grant per household** - as described above. In order to receive this welfare assistance grant, an applicant must demonstrate eligibility for the grant by providing required information in the application below. Please attach the following bills or disconnection notices to this application for which you are requesting assistance: internet, water, electric, gas, propane, rental, and or mortgage.

All information below is REQUIRED. The Form must be signed and postmarked by 12-1-2020 to be processed.

Household Address City, State and Zip code	Contact Phone Number	Email Address

Household Members Name(s) (Attach additional page if needed) NOTE: Must be enrolled as of December 1, 2020. LIST ALL Household Members Below	Birth Date	Enrollment Number

Is/are the child/ren subject to a court order regarding custody? Circle: Yes or No

I _____ certify by signing below that I have physical custody/or legal guardianship of the above listed minor child/children. In the event of a dispute the award will be made to the person demonstrating custodial rights by court order or other acceptable documentation. If I unlawfully claim the minor child/children, then I understand that I will be subject to prosecution.

Signature

Date

CERTIFICATION

I declare under penalty of perjury that the information in this application is true and correct. I am an enrolled member of the Miami Tribe of Oklahoma and meet the requirements for this grant.

Note: The Department of Treasury or the Miami Tribe at any time may require the recipient of these funds to produce receipts demonstrating appropriate expenditure of grant funds. **Receipts must be kept for a five-year period.**

Signature of Applicant:	Date:
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RETURN TO: Miami Tribe of Oklahoma **OR Email TO:** covidgrant@miamination.com
 Adult Services
 Utility / Rental /Mortgage Assistance Grant
 PO Box 1326
 Miami, Oklahoma 74355

MUST BE POST MARKED BY December 1, 2020 or application will not be considered. Please send only one application. Either by mail or email. Questions contact: Adult Services at 918-541-1389

Reviewer Notes:

Reviewed and Approved by:

Date:

Approved Amounts	Paid by	Amount	Date
	Check #:		
Total paid			
Total eligible			
Balance available			