



# Delaware Nation

## S/G American Rescue Plan Act General Welfare

### Heating/Air Unit Repair or Replacement Assistance

- **PURPOSE AND AMOUNT OF ASSISTANCE:** This Self-Governance ARPA Program is a **one-time submission** to provide nation-wide tribal housing improvement for Heating/Air Unit repair or replacement **up to \$5,000.00 while funding is available.**
- **APPLICATION PROCESS:**

Eligible tribal citizens 18 years and over who have proof of home ownership for their primary residence must complete the attached application to qualify for this assistance. If proof of home ownership cannot be provided, the applicant will not be eligible for the assistance, **no exceptions**. Once the application and required documents are received the vendors will have to be added to the Delaware Nation's approved vendor list before payment can be processed.
- **REQUIRED DOCUMENTATION FOR PROCESSING:**

A completed application with the following documentation:

  1. Copy of CDIB card
  2. Proof of Homeownership (i.e., deed, title status report, legal document showing life time use)
  3. A current utility bill in the tribal citizen's name with the home's address
  4. One Invoice or one quote from a licensed HVAC vendor for amount of repair or replacement
  5. W-9 from the vendor
- **START & DEADLINE DATES:** This funding will be provided from June 1, 2021 and will remain open until funding is expended.
- **QUOTES:** Quotes for new units or repairs totaling more than the \$5,000.00 limit will require the tribal citizen to pay the overage prior to Delaware Nation's payment.
- **REIMBURSEMENTS:** Reimbursements for purchases from June 1, 2021 will be accepted with appropriate documentation (**an invoice showing paid-in-full**).
- **APPLICATION SUBMISSION:** Applications can be obtained on the Delaware Nation website or by calling **405-480-2220**. The tribal citizen's application with documentation may be submitted through one of the following:

Email: [sdutton@delawarenation-nsn.gov](mailto:sdutton@delawarenation-nsn.gov) (Please submit to this email only)  
Fax: **405-480-2223**  
Mail: **Delaware Nation Housing**  
**904 West Petree Road**  
**Anadarko, OK 73005**



## Delaware Nation

# Self-Governance American Rescue Plan Act

## Heating/Air Unit Repair or Replacement Assistance

**APPLICATION:** Please print the information below.

**Citizen Roll #:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City, State & Zip Code:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_

**Alternate Contact Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Self-Certification: (Check all that apply)**

☐ Reduced weekly hours or furloughed due to COVID-19

☐ Unemployed due to COVID-19 and currently looking for employment

☐ Higher cost of living due to COVID-19.

**By signing this application, I certify under penalty of law that all information submitted in this form is true and accurate. I further certify that any misuse of funds will result in ineligibility of future participation in any Delaware Nation Assistance Program until funds are reimbursed. I accept the Terms and Conditions and agree to use these funds for the intended purpose stated within this application.**

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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### For Office Use Only:

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Approved Vendor: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

Check Number: \_\_\_\_\_ Date Check Mailed: \_\_\_\_\_