



Oneida Nation of Wisconsin

Division of Land Management

P.O. Box 365 • Oneida, Wisconsin 54155

<http://land.oneidanation.org>

(920) 869-1690

(920) 869-1689 Fax

(800) 684-1697 Toll Free



LOAN DEPARTMENT

TRIBAL LOAN APPLICATION

*The information contained in your application is used to make the loan approval determination.

*The application must be filled in accurately and completely.

*All of the documents requested must be attached to the application at the time it is submitted. If these are not attached, the application may be returned as incomplete.

*DREAM home applications MUST BE RECEIVED BY THE DEADLINE DATE STATED OR THEY WILL NOT BE ACCEPTED. Should your application be returned as incomplete, it is your responsibility to submit any missing information and/or documents prior to the deadline date if you still wish to be considered for a particular home.

*Please sign and date your application.

*Thank you for your cooperation!

VETERANS: PLEASE BE SURE TO INDICATE YOUR STATUS AS AN ENROLLED ONEIDA VETERAN ON THE LOAN APPLICATION.

1. Oneida Veteran's certificate of Eligibility
2. Certification Letter

When the application is submitted Division of Land Management will sign as receipt of application and make a copy of the back page. The applicant will be responsible to take this to the Veterans' office and get certification and bring back to the Division of Land Management Office.

"Caretakers of the Land"

Established 1977



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ONEIDA TRIBAL LOAN PROGRAM APPLICATION

TYPE OF LOAN REQUESTED:

Date of Application: _____

- DREAM
- THRIL
- TLC
- VETERAN'S TLC
- VETERAN'S THRIL

LOAN AMOUNT REQUESTED: \$ _____

PURPOSE OF LOAN: _____

PROPERTY ADDRESS: _____

Is this property located within the reservation boundaries? Yes No

APPLICANT INFORMATION

Marital Status: Married Legally Separated Unmarried (Single, divorced, or Widowed)

Please Print Name (Last, First, MI) _____

Present Street Address: _____

City/State/ Zip _____

Home Phone # () _____ ARE YOU AN ONEIDA VETERAN?

ARE YOU AN ENROLLED TRIBAL MEMBER? YES NO ENROLLMENT #: _____

Date of Birth: ____ / ____ / ____ Social Security # ____ / ____ / ____

Current monthly Rent or Mortgage payment: \$ _____

Current LANDLORD OR MORTGAGE HOLDER: _____

Address: _____

Phone #: () _____

Your previous address: (If living at present address less than two years) _____

Do you or the joint applicant own any property on or off the reservation? YES NO (If yes, please explain)

Do you or the joint applicant hold any type of tribal lease? YES NO (If yes, please specify)

Are you or the joint applicant indebted to any tribal program? YES NO (If yes, please state amount & program)

In what other names have you previously been extended credit? _____

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JOINT APPLICANT

Relationship to Applicant: _____

Please Print Name (Last, First, MI) _____

Present Street Address: _____

City/State/ Zip _____

Home Phone # () _____

ARE YOU AN ONEIDA VETERAN? _____

ARE YOU AN ENROLLED TRIBAL MEMBER? YES NO ENROLLMENT #: _____

Date of Birth: ____/____/____ Social Security # ____/____/____

Current monthly Rent or Mortgage payment: \$ _____

Current LANDLORD OR MORTGAGE HOLDER: _____

Address: _____

Phone #: () _____

Your previous address: (If living at present address less than two years) _____

In what other names have you previously been extended credit? _____

Are you currently renting from the Oneida Housing Authority? YES NO

Are you currently renting from the Division of Land Management? YES NO

Are you currently renting within the boundaries of the reservation at this time? YES NO

Is this your first time applying for a home? YES NO

If not, when was the last time? _____

Are any members of your family legally handicapped? If so, please explain below: _____

Dependents (Who will physically reside with you)

Name/Date of Birth: _____

EMPLOYMENT INFORMATION

Applicant:

Present Employer: _____ How Long? _____

Employer Address: _____

Position/Title: _____ From ____/____/____ To ____/____/____

Employer Phone #: () _____ Gross Monthly Income: \$ _____

(If with present employer less than 2 years or currently employed in more than one position.)

Previous employer: _____ How Long? _____

Employer Address: _____

Position/Title: _____ From ____/____/____ To ____/____/____

Employer Phone #: () _____ Gross Monthly Income: \$ _____

Other Income: \$ _____ Per _____ Please explain: _____

Joint Applicant:

Present Employer: _____ How Long? _____

Employer Address: _____

Position/Title: _____ From ____/____/____ To ____/____/____

Employer Phone #: () _____ Gross Monthly Income: \$ _____

(If with present employer less than 2 years or currently employed in more than one position.)

Previous employer: _____ How Long? _____

Employer Address: _____

Position/Title: _____ From ____/____/____ To ____/____/____

Employer Phone #: () _____ Gross Monthly Income: \$ _____

Other Income: \$ _____ Per _____ Please explain: _____

IF YOU ANSWER "YES" TO ANY QUESTIONS LISTED BELOW, PLEASE EXPLAIN ON A SEPARATE SHEET OF PAPER AND ATTACH TO THE APPLICATION. THANK YOU!!

	Applicant		Joint Applicant	
	Yes	No	Yes	No
A. Are there any outstanding judgments against you?	_____	_____	_____	_____
B. Have you declared bankruptcy within the past 2 years?	_____	_____	_____	_____
C. Have you had property foreclosed upon or given title or deed in lieu thereof in the past 7 years? (Please explain)	_____	_____	_____	_____
D. Are you a party to a lawsuit?	_____	_____	_____	_____
E. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgement?	_____	_____	_____	_____
F. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond or loan guarantee?	_____	_____	_____	_____
G. Are you obligated to pay alimony, child support, or separate maintenance?	_____	_____	_____	_____
H. Are you a co-maker or endorser on a note?	_____	_____	_____	_____
I. Do you intend to occupy the property as your primary residence?	_____	_____	_____	_____
J. Is your cash down payment borrowed? 1. If yes, from whom? _____	_____	_____	_____	_____
K. Do you currently have life Insurance? 1. Applicant: Amount? \$ _____ 2. Joint Applicant: Amount? \$ _____	_____	_____	_____	_____
L. Do you have disability Insurance?	_____	_____	_____	_____
M. With this purchase, will you be a first time home buyer?	_____	_____	_____	_____

PLEASE LIST THREE (3) BENEFICIARIES WHO ARE ENROLLED MEMBERS OF THE ONEIDA TRIBE OF INDIANS OF WISCONSIN:

Full Name	Address City, State & Zip	Date of Birth	Roll #

I UNDERSTAND THAT THIS IS NOT A CONTRACT AND DOES NOT BIND EITHER PARTY. THE ABOVE INFORMATION IS ALL TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I HAVE NO OBJECTIONS TO INQUIRIES BEING MADE FOR THE PURPOSES OF VERIFYING THE STATEMENTS MADE HEREIN.

APPLICANT SIGNATURE

JOINT APPLICANT SIGNATURE

