

ATTENTION BAND MEMBERS

House Lottery

244 Jack Pine Drive, Cloquet



The Fond du Lac Development Corporation will be having a Lottery for the home located at 244 Jack Pine Drive, Cloquet. Applications from qualified band members will be accepted until 4:00 p.m. September 27, 2018, (applications received after 4:00 p.m. on 9/27/2018 will be rejected). Applications are available at the Tribal Center Front Desk, in the Operations Division, and online at fdlrez.com.

This home is a Split level, 3 bedroom, 2 bath, with a detached garage, and will be sold **“as is”** for the amount of \$120,000.00.

To qualify you must be an enrolled member of the Fond du Lac Band, be eligible as determined by a background check per FDL Policy #02-09, and provide verification of continuous income for the past 12 months by means of check stubs or an income report. The monthly house payment will be \$452.00 which includes 300 monthly payments plus 13% for insurance costs. The house payment cannot exceed 20% of gross monthly income.

Therefore minimum gross monthly income must be \$2260.00 or greater.

The Open house is scheduled for Thursday, September 13th. 9 a.m. - 12 p.m. and 3 p.m. - 6 p.m.

Applications must be turned into the Operations Division for verification.

Drawing for qualified applicants will be held in the RBC Chambers on Friday, September 28th, 2018 at 4:00 p.m.

Contact Jack Bassett at 218-878-8043, jackbassett@fdlrez.com, Raelea Skow at 218-878-2610, raeleaskow@fdlrez.com, or Toni Petite at 218-878-2620, tonipetite@fdlrez.com for more information about the home and application instructions.

FOND DU LAC PROPERTY MANAGEMENT
HOUSING VERIFICATION FORM

NUMBER: _____
DATE RECEIVED: _____
TIME: _____
RECEIVED BY (INT.): _____

NAME: _____
ADDRESS: _____
PHONE NUMBER: _____
DATE OF BIRTH: _____

FDL ENROLLMENT NO# _____ VERIFICATION RECEIVED _____
(PROVIDE VERIFICATION)

INFORMATION ON THOSE WHO WILL OCCUPY THE HOME:

NAME	RELATION	DATE OF BIRTH	FDL MEMBER	COMPLIANCE WITH FDL POLICY #02-09

SOURCES OF INCOME FOR ALL INCOME THAT WILL SUPPORT THE MONTHLY PAYMENT: (INCLUDE VERIFICATION OF ALL INCOME FOR THE PAST 12 MONTHS BY MEANS COPIES OF CHECK STUBS OR INCOME REPORTS).

NAME OF RECIPIENT	SOURCE	MONTHLY AMOUNT	VERIFICATION RECEIVED

QUALIFIES FOR HOME: YES: _____ NO: _____

FOND DU LAC BAND OF LAKE SUPERIOR CHIPPEWA CONSENT TO CRIMINAL HISTORY INVESTIGATION FOR HOUSING SERVICES

I CONSENT TO ALLOW THE FOND DU LAC BAND OF LAKE SUPERIOR CHIPPEWA TO REQUEST AND OBTAIN INFORMATION PERTAINING TO MY CRIMINAL HISTORY FROM ANY LEGALLY AVAILABLE SOURCES FOR THE PURPOSE OF VERIFYING MY ELIGIBILITY FOR HOUSING SERVICES FROM THE FOND DU LAC BAND OF LAKE SUPERIOR CHIPPEWA IN ACCORDANCE WITH FOND DU LAC ORDINANCE #02/09. THE CONSENT EXPIRES 15 MONTHS AFTER AUTHORIZED

Head of Household / Applicant

Last First Middle Alias's

Date of Birth SSN Signature Date

Other Household Member

Last First Middle Alias's

Date of Birth SSN Signature Date

Other Household Member

Last First Middle Alias's

Date of Birth SSN Signature Date

Other Household Member

Last First Middle Alias's

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