



**MODOC HOUSING**  
**AUTHORITY**

22 N Eight Tribes Trail  
MIAMI, OK 74354  
918-542-8175

**Modoc Home Improvement/Renters Appliance Grant**

Dear Modoc Member,

We are excited to inform you that the 2025 Home Improvement and Renters Appliance Grant is now available. Only one application per household. Please complete the appropriate attached application and return to:

Modoc Housing Authority  
22 N Eight Tribes Trail  
Miami, OK 74354  
Fax: 918-542-5415

Email: [modoc.housing@modocnation.com](mailto:modoc.housing@modocnation.com)

Modoc Housing will accept applications up to **DECEMBER 1, 2025**. If you haven't turned in any of your receipts you will need to do so before you can apply. All required documents must be turned in before your application can be processed. If you are emailing your application and supporting documents, please attach them as a PDF. If you should have any questions, please contact me at 918-542-8175. Office hours are Monday- Friday 8:00am - 4:30pm.

Sincerely,

Samantha Shamblin  
Executive Director

Phone: 918-542-8175 • Fax: 918-542-5415 • email: [modoc.housing@modocnation.com](mailto:modoc.housing@modocnation.com)

## HOME IMPROVEMENT/RENTERS CHECK LIST

- APPLICATION
- ACH FORM (If requesting direct deposit)
- VOIDED CHECK (If requesting direct deposit)
- ENROLLMENT CARD
- DEED/LEASE AGREEMENT
- PROPERTY TAX STATEMENT (only required for home owners)
- AGREEMENT
- W-9
- BID 2. (Must be on official business letterhead with contact info)
- MINOR MODOC MEMBER SUPPORTING DOCS.
  - Birth certificate
  - Copy of guardian/parents ID
  - Letter from school (shows proof of residence)
  - Child custody/legal guarding documents

APPLICATION **WILL NOT BE PROCESSED/APPROVED** WITHOUT ALL ITEMS LISTED ABOVE

# Application for 2025 Renters Appliance Grant

MODOC Housing Authority  
MODOC Nation  
22 N Eight Tribes Trail  
Miami, OK. 74354

Phone: 918-542-8175 / FAX: 918-542-5415/ Email: modoc.housing@modocnation.com

Date: \_\_\_\_\_ Grant: Modoc Appliance Grant

Modoc Applicants Name: \_\_\_\_\_ Roll # \_\_\_\_\_

**If Minor Parent or Legal Guardian:** \_\_\_\_\_

Street: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Payment Preference: CHECK: \_\_\_\_\_ ACH: \_\_\_\_\_ (will need to provide voided check and completed EFT)

The MODOC Tribe has funding available to MODOC Tribal Renter for the purpose of assisting renters with purchasing appliances up to the amount of **\$1,000**. Applicant must provide the following:

1. **BIDs** for the appliances the member wishes to purchase.
2. Copy of Lease Agreement. Modoc Member must be listed on the Lease.
3. Copy of Modoc Member Tribal Membership Card.
4. Supporting Documents if Applicant is a Minor.

**(Birth certificate, guardian ID, letter from school, or child custody/legal guardian documents to show child lives in the home)**

I understand that this program is for current renters only. I understand that I may not exchange or return any items purchased with Federal funding without approval of the Modoc Nation. I also state that the funds will be used towards our family home. We will not be moving from within the next 12 months.

\_\_\_\_\_  
(Initial here)

By signing this form, I verify that all the information is true & correct & that I will cooperate with Tribal & Federal Officials should my application or information become part of a quality control audit review. I understand that the program is federally funded and that penalty for providing false information shall not be more than \$10,000 fine or not more than 4 years imprisonment or both. I hereby authorize Tribal representative to make any necessary investigation of my application information or other information regarding my eligibility. I understand that I have a right to a fair hearing if I am not satisfied with the decision, action or any unreasonable delay in a decision notification.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

*\*Disclaimer: All Funding Subject to Final Approval*

FY25

ALL DOCUMENTATION DUE BY **DECEMBER 1, 2025** FOR REVIEW & APPROVAL  
APPLICATION **WILL NOT BE PROCESSED** WITHOUT RECEIPT ALL ITEMS **#1 through #4**



**Modoc  
Nation**

22 N. Eight Tribes Trail

Miami, OK 74354

(918) 542-1190

(918) 542-5415 Fax

## **DIRECT DEPOSIT AUTHORIZATION FORM**

Name on Account: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Name of Bank: \_\_\_\_\_

Account #: \_\_\_\_\_

9-Digit Routing #: \_\_\_\_\_

Type of Account: \_\_\_\_\_ (Checking or Savings)

Attach a voided check or Deposit Authorization from the bank account to which funds  
should be deposited.

Modoc Nation is hereby authorized to deposit my pay to the account listed above directly. If necessary, Modoc Nation is hereby authorized to initiate debit entry adjustments for any credit entries in error to the account listed above. This authorization will remain until I modify or cancel it in writing.

Name (Please Print): \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

MODOC Nation  
MODOC Housing Authority  
22 N Eight Tribes Trail  
Miami, OK. 74354

Phone: 918-542-8175

## AGREEMENT

### Modoc 2025 Renters Appliance \$1,000 Grant

- I AGREE to read this entire document and to contact Modoc Housing Authority in advance if I do not understand the Agreement
- I AGREE this Award is for the purpose of Appliances for tribal renters.
- I AGREE this Award is for the purposes listed in the Grant Application or have Authorized Approval by Modoc Housing Authority made prior to this dated Agreement.
- I AGREE to spend the whole dollar amount for the Bids presented with the Application & or prior Authorized Approved Items
- I AGREE that ALL Receipts and/or Invoices, for total Award amount, **MUST** be returned to the Modoc Housing Authority no later than **DECEMBER 17, 2025**
  - I will send all receipts in at the same time and will not send them in separate pieces.
  - I will not have any purchases on the receipt except those directly pertaining to this program. I understand that if I submit a receipt with items not approved for the program that receipt will be returned to me unapproved
- I AGREE to fill out and sign a **W-9** Tax form (Modoc Member's Name or Adult Legal Guardian **if Modoc is a minor**), then return **W-9** with this Agreement.
- I Understand that this program is for **CURRENT RENTERS ONLY**. I understand that I may not exchange or return any items purchased with Federal funding without the express written approval of the Modoc Nation. I agree that the funds will be used towards our family home. We will not be moving from this home within the next 12 months.
- I Understand that violating any of the above agreements may cause me to be denied approval and potentially be suspended from further program assistance. I understand that failure to submit receipts **WILL CAUSE ME TO BE SUSPENDED FROM FUTURE SERVICES.**

By signing this form, I verify that all the information is true & correct & that I will cooperate with Tribal & Federal Officials should my application or information become part of a quality control audit review. I understand that the program is Federally funded and that penalty for providing false information shall not be more than \$10,000 fine or not more than 4 years imprisonment or both. I hereby authorize Tribal representative to make any necessary investigation of my application information or other information regarding my eligibility. I understand that I have a right to a fair hearing if I am not satisfied with the decision, action or any unreasonable delay in a decision notification.

\_\_\_\_\_  
Signature of Applicant

DATE: \_\_\_ / \_\_\_ / \_\_\_\_\_

**\*Checks made in Modoc Member's name after we receive; W-9, Application, & Agreement**

*Disclaimer: All Funding Subject to Final Tribal Approval*

**FY2025**

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p><b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p>	
	<p><b>2</b> Business name/disregarded entity name, if different from above</p>	
	<p><b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC      <input type="checkbox"/> C Corporation      <input type="checkbox"/> S Corporation      <input type="checkbox"/> Partnership      <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p><b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>
	<p><b>5</b> Address (number, street, and apt. or suite no.) See instructions.</p>	<p>Requester's name and address (optional)</p>
	<p><b>6</b> City, state, and ZIP code</p>	
	<p><b>7</b> List account number(s) here (optional)</p>	

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 2%; border: none;">-</td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 2%; border: none;">-</td> <td style="width: 46%; border: 1px solid black; height: 20px;"></td> </tr> </table>		-		-	
	-		-		
<b>or</b>					
<b>Employer identification number</b>					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 2%; border: none;">-</td> <td style="width: 73%; border: 1px solid black; height: 20px;"></td> </tr> </table>		-			
	-				

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
------------------	----------------------------	--------

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*