



2026 IHBG Program Introduction and Application

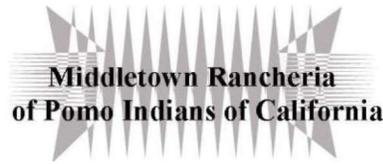
2026 Program Year Indian Housing Block Grant (IHBG) Program Participation and Application

Dear Tribal Member,

Thank you for your interest in the Indian Housing Block Grant (IHBG) programs offered by the Middletown Rancheria Housing Department. Below, you will find a description of the programs available for 2026. If you have questions or need further information about the programs, please contact the housing director.

- **New Construction of Home Buyer Unit**
Middletown Rancheria Plans to construct one new manufactured home on the Rancheria to expand housing opportunities for eligible low-income tribal members. This program will provide safe and affordable housing to support tribal members in achieving stable, long-term homeownership and help address housing insecurity.
- **Home Buyer Assistance Program (Low-Income)**
Middletown Rancheria will provide assistance to eligible low-income homebuyers to purchase a home. Home Buyer Assistance funds may be used to provide down payment and/or closing costs assistance.
- **Home Buyer Assistance Program (Non Low-Income)**
Middletown Rancheria will provide assistance to eligible low-income homebuyers to purchase a home. Home Buyer Assistance funds may be used to provide down payment and or closing costs assistance.
- **Mortgage Principal Reduction Program**
Middletown Rancheria will assist eligible low-income homeowners in reducing their current mortgage principal to support long-term housing stability and prevent homelessness.
- **Housing Rehabilitation Assistance Program**
Middletown Rancheria will assist eligible low-income families for essential housing rehabilitation, energy efficiency upgrades, and accessibility modification for owner-occupied residences. This program addresses all improvements to substandard dwelling located both on and off the Rancheria.

Program Funding and Administration



These programs are funded through the Indian Housing Block Grant (IHBG) and are provided at no cost to eligible applicants. Funding for each program is limited and applications are generally processed on a first-come, first-served basis, subject to priority ranking. All programs are administered in accordance with the Tribe's Annual Indian Housing Plan and HUD guidelines.

Submission of fraudulent information or failure to comply with program requirements will result in permanent ineligibility for Middletown Rancheria Housing Programs.

Once applicants have been confirmed to meet all eligibility requirements, applications will be prioritized and ranked based on the following criteria:

1. Age
2. Disability
3. Household Size
4. Level of Need

Program Highlights & Frequently Asked Questions

- All programs are guided by the Tribe's Mission Statement and are designed to enhance the quality of life and housing standards for tribal members.
- Applications must be determined eligible before program funds may be awarded.
- Applicants may apply for one or more programs, depending on eligibility.
- Applicants may be limited to one award per program within a designated time period.
- Applicants may be required to repay funds if it is determined that program assistance was misused.

Program Eligibility

All programs are available to eligible Middletown Rancheria Tribal Members. Most programs require applicants to meet low-income eligibility criteria as defined by the U.S. Department of Housing and Urban Development (HUD) for Lake County, California.

The Non-Low-Income Homebuyer Assistance Program is the sole exception and is available to eligible tribal members regardless of income level. Applicants must also meet any additional program-specific requirements outlined in each program description.

Application Prescreening

Step 1: Identify the maximum allowable income for your State and County: (huduser.gov/portal/datasets/il.html)

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Lake County, CA Median Income Limits					
1-Person	2-Person	3-Person	4- Person	5- Person	6-Person
\$65,750	\$75,100	\$84,500	\$93,900	\$101,400	\$108,900

For a different state and county income limits please call the Housing Department (707) 987-1328

Step 2: Determine if you meet the low-income eligibility requirements.

To qualify for the program, your household's annual income must be at or below 80% of the area's median family income (AMI).

Determine if you Qualify as Low-Income	
Calculation:	Your Amount
Median Family Income(from annual income limits) × 80% = Low-Income Allowable Amount	\$
Add all household income (wages, self-employment, tribal distributions, etc.)	\$
Compare Total Household Income to Low-Income Allowable Amount	\$

Result:

- If Total Household Income ≤ Low-Income Allowable Amount → You **qualify** as a low-income participant.
- If Total Household Income > Low-Income Allowable Amount → You **do not qualify**.

Step 3: Confirm Your Eligibility

Do not rely solely on the results from **Step 2**. The calculation is provided only to help demonstrate the process. Always work directly with the Housing Department to confirm your eligibility.

Even if it appears that your income is above the low-income threshold, other factors may affect your eligibility. We encourage you to submit your application anyway—don't assume you won't qualify.

Note: If you have already completed a repair or renovation on a critical-need item, you may be eligible for reimbursement through program funds. Funding availability and award amounts vary depending on the program. The Tribe receives a set allocation for each program through the Indian Housing Block Grant (IHBG) as outlined in the Tribe's current Indian Housing Plan.

For Assistance: Please contact the Housing Department with any questions about the programs or if you need help calculating your household income for your county or state. We are here to help you determine which program is best suited for your needs.

APPLICATION INSTRUCTIONS & NOTES

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Applications will not be reviewed or processed until all required information has been submitted.

1. **Submit** the completed IHBG Program Application with all sections filled out and all required signatures provided.

2. **Provide copies of all required supporting documentation:**

Proof Residence

- Current Rental or Lease Agreement
- Loan pre-approval letter with lender information
- Copy of deed
- For homes on the Rancheria provide, house address.

Proof of Residency: Provide utility bills for the two most recent consecutive months, including any of the following:

- Electricity
- Water
- Sewer Garbage

Proof of Income

- Copy of most recent Federal Tax Return
- Pay Stubs or Wage Statements
- Bank statements from the three most recent consecutive months
- Tribal Distribution
- Other sources of household income (self employed, benefits, etc..)

Vendor Documentation (if applicable):

- Copies of vendor bids, estimates, or invoices
- Proof of payment for vendor expenses, such as:
 - Cancelled checks
 - Bank ICH/ACH statements
 - Receipts

3. **Submission Instructions:**

Submit your completed IHBG Program Application along with **all supporting documentation** to the Housing Department:

Email: Maldrich@middletownrancheria.com

Mail: PO Box 1035, Middletown, CA 95461

4. **Application Status:**

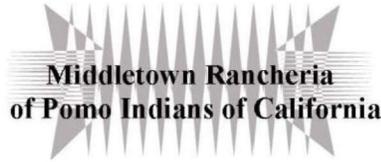
You will be contacted once your application is received and informed if any additional information is needed. Written notification will be provided to confirm if your application has been approved or denied.

PROGRAM APPLICATION

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Tribal Member Name: _____ MTR Tribal # _____

Co-Applicant's Name: _____ ()
 Spouse () Partner

Physical Address: _____

City/County/State/Zip _____

Mailing Address: _____

Email Address: _____

Phone: _____ Other Phone: _____

Co-Applicant Phone: _____

Program Screening:

1. Have you previously participated in a Middletown Rancheria Housing Program? Yes () No ()

If yes, please specify the program(s) and year(s) of participation

2. Are any residents of the household employed by the Middletown Rancheria? Yes () No ()

If yes, please list the employee(s) and their department(s)

3. Are any residents of the household a member of the Middletown Rancheria Tribal Council or an immediate family member of a Tribal Council Member? Yes () No ()

4. Do you plan to continue living in your home for the next five years or more? Yes () No ()

5. Do you expect changes to your household size within the next 12 months? Yes () No ()

6. Are any members of your household disabled? Yes () No ()

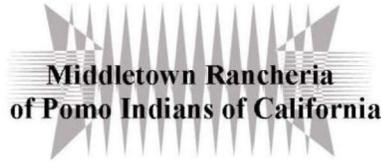
If yes, which member? _____

Household Occupants-Family information for Residence						
Full Name	Relationship to Applicant	Full or Part time occupant	Date of Birth	Age	Social Security #	MTR Tribal Member

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PROGRAM NEEDS AND REQUEST

1. **Are you seeking reimbursement for an expense? Yes () No ()**

Amount Requested: \$ _____

If yes, please provide supporting documentation:

- Copies of all invoices
- Work Estimates
- Proof of payment
- Before and After photos

2. **Are you requesting assistance through one of the IHBG programs? Yes () No ()**

Please select the assistance program for which you are applying.

- 2026 New Construction of Home Buyer Unit
- 2026 Housing Rehabilitation Assistance Program
- 2026 Home Buyer Assistance Program Low-Income
- 2026 Home Buyer Assistance Program Non-Low Income
- 2026 Mortgage Principal Reduction Program

Housing Rehabilitation Assistance

Heating, Ventilation and Air Conditioning Assistance.

Do you need assistance with any of the following? Heating () Air Conditioning ()

If yes please describe:

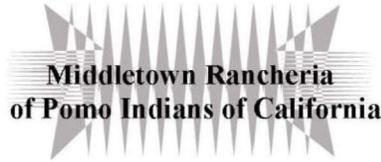
Drinking Water Assistance:

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Do you need assistance with any of the following? Well () Pump () Water Storage ()
If yes, please describe:

Fire and Safety Features:

Do you need assistance with any of the following?

- Fire Extinguisher
- Carbon Monoxide or Fire Alarms
- Fire clearing around your home

Disability/Elder Features:

Please list elder or disabled individual in your home: _____

Does this individual need assistance with any of the following:

- Ramp or Stairs needed or need repair
- Wheelchair access improvements
- Accessible Toilet or Shower

INCOME INFORMATION

Provide all sources of income for **ALL household residents 18 years or older**, including all EDD, Payroll, Tribal Distribution, Child Support, County Assistance, etc.

Person Receiving	Source of Income	Gross Amount	Monthly, Weekly, Annually
	Tribal Gaming Distribution		

Do you anticipate changes in household income in the next 12 months? Increase () Decrease () None ()

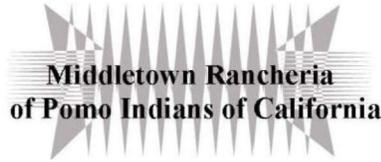
ASSET INFORMATION

Checking and Savings				
Account Holder(s)	Bank or Credit Union	Account No.	Type	Balance
			Checking _____ Savings _____	

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Checking and Savings				
			Checking _____ Savings _____	
			Checking _____ Savings _____	

List other assets (such as 401K, IRA, stocks/bonds, etc.)			
Family Member	Asset Description	Cash Value	Income from Assets

Do you have a whole life insurance policy? Yes No
Have you recently disposed of any assets for less than fair market value? Yes No
ACKNOWLEDGEMENT I/We certify that during the 1-year (12-month) period preceding the effective date of my certification for program participation, I/We have/ have not disposed of more than \$1,000 in asset(s) for less than fair market value.
Signature Required: _____ DATE: _____

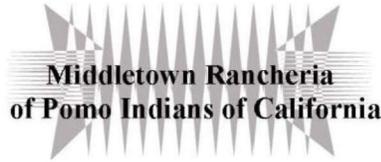
STAFF USE ONLY — APPLICATION RECEIPT & APPROVAL STATUS

Application Received / Case File Opened

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Printed Name: _____ Signature: _____ Date: _____

- Tribal Membership Verification Letter
- MTR Income Summary Completed

Application Status: APPROVED DENIED

Applicant Notified in Writing (copy attached)

Printed Name: _____ Signature: _____ Date: _____

Total Case File Expenses Accrued:

\$ _____ Program Billing Code: _____
\$ _____ Program Billing Code: _____
\$ _____ Program Billing Code: _____

Case File Completed / Case Closed

Printed Name: _____ Signature: _____ Date: _____

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