



## Housing Authority of the Choctaw Nation of Oklahoma

1005 South 5<sup>th</sup> Street \* PO Box G \* Hugo, Oklahoma 74743  
1-800-235-3087 \* 580-326-7521 \* Fax: 580-326-5021

### Choctaw Nation Storm Shelter Program

#### About the Program:

- The program provides a grant for storm shelters to Choctaw Tribal Members who live in Oklahoma, Texas, Kansas, Missouri, and Arkansas, which are states with a high risk of tornados.
- You must be 55 years old or older, or, you must have a documented ambulatory disability.
- The Storm Shelter Program is administered through the Housing Authority of the Choctaw Nation.

#### Definitions:

1. *Applicant*- An individual(s) who own(s) and occupy(ies) real property that is intended to be improved.
2. *Application for admission* - A written form to be signed and dated by an applicant which includes information the Housing Authority of the Choctaw Nation needs to determine whether the applicant can be admitted to the program. The form will be developed by the Housing Authority of the Choctaw Nation.
3. *Primary residence*- The dwelling in which the owner resides and to which he holds title. Title must be recorded for ownership. Applicants who are participating in the Mutual Help Program are eligible. An individual may only have one primary residence.
4. *Ambulatory disability*- Means a disability of which a person has a physical and permanent disability to such a degree that they require the use of a wheelchair; is not able to cross curbs because of paralysis or loss of function of the person's legs; is missing one or both legs; or has a permanently impaired or unsteady gait that makes it impossible or impractical to walk as a means of transportation.

#### Applicant Requirements:

- CDIB verification for applicant
- Verification of Choctaw Tribal Membership
- Social Security cards of all household members
- Copy of warranty deed
- All required application forms completed
- No accounts in default or delinquent status owed to the Housing Authority or to the Choctaw Nation
- Home must be the applicant's primary residence

#### Eligibility Requirements:

- There are 3 shelters that qualify for this program:
  - 6 X 8 Concrete In-Ground
- An in-ground shelter shall be installed within 100 feet of the home
  - 4 x 8 Steel or Concrete above ground Safe Room (Applicant must provide proof that an above ground shelter is the only option due to Ambulatory Disability)
- For above ground installations, a slab large enough for the shelter will be required, this can be in a house, garage, or a standalone slab.

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- You may have a storm shelter installed in a new or existing home.
- Storm shelters are awarded one time only
- The storm shelter must be installed at primary residences and must be installed on property owned by the applicant.
- Apartment complexes, duplexes, and other multi-family residences are not eligible for this program, as they are considered businesses.
- If you own two or more homes, you are only eligible for a storm shelter for your primary residence.
- Only one person may register per physical home address.
- Community or neighborhood storm shelters are not eligible for this program.
- If you live in a mobile home, you must own both the mobile home itself and the land it is located on to be eligible for the program.
- If you live in a rented house you are not eligible for this program. Only single-family residential homeowners are eligible for their primary residence.
- If you have already installed a storm shelter, or are having it installed now, that storm shelter is not eligible for this program.

### How the program works:

- Applications will be processed on a first come first serve basis.
- Choctaw Nation Storm Shelter Grant Program is dependent upon availability of funds. Storm shelters shall be provided as grants for eligible applicants who meet the qualifications. A grant in the amount of **\$2,500** for in-ground shelters and **\$4,200** for above ground shelters, with payment being made to the Contractor that installs the shelter.
- For above ground installations, the applicant must provide a slab large enough for the shelter. This can be in a house, garage, or a standalone slab.
- You will be notified by letter if your application is selected.
- If your application is selected, you will receive a voucher for the approved amount.
- Housing Authority of the Choctaw Nation is not responsible for any amount that exceeds the approved voucher amount.
- After completion of the installation of the storm shelter, you will need to submit signed and dated voucher and W-9 form to the contractor that installed the shelter.
- It is the contractors responsibility to submit voucher, W-9, invoice and proof of warranty to the Housing Authority of the Choctaw Nation for payment.

### Program Process:

Step 1: Complete application

Step 2: Applicant is notified that they have been selected

Step 3: Voucher is issued to Applicant for the approved amount

Step 4: Submit signed voucher and W-9 form to contractor after installation

Step 5: Issue payment to contractor after all documents are received

For additional information or for assistance with completing the application, please contact April Jefferson at (580) 326-7521 or (800) 235-3087 ext. 223

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## STORM SHELTER PROGRAM APPLICATION

Homeowner Information (can be only one (1) individual and SSN#)

Full Name \_\_\_\_\_ SS# \_\_\_\_\_ D.O.B \_\_\_\_\_ Age \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
City State Zip

Physical Address of Shelter \_\_\_\_\_

Phone# \_\_\_\_\_ Email Address: \_\_\_\_\_

Married \_\_\_\_\_ Single \_\_\_\_\_ Widow \_\_\_\_\_

Ambulatory Disability: Yes No  
Doctor Documentation Enclosed: Yes No

Choctaw Nation Tribal Member Yes No How many people in household: \_\_\_\_\_

- 1) Do you own your home? Yes No
- 2) Is it your primary residence? Yes No
- 3) Are you currently living at this residence? Yes No
- 4) Are you a participant in the Mutual Help Program? Yes No

- 5) Type of Installation (Check one):
- 6X8 Concrete In-ground Shelter
  - 4X8 Steel Above Ground Safe Room
  - 4X8 Concrete Above Ground Safe Room

**(Must provide documentation of physical capabilities that warrant an above ground safe room)**

**Doctor's note identifying the restriction or limitation**

**Example: use of a walker, cane, or wheelchair**

For additional information or for assistance with completing the application, please contact April Jefferson at the above listed numbers, ext. 223



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### **I understand the following:**

- A. I must provide a copy of my Choctaw Nation Tribal Membership card.**
- B. I must provide CDIB verification.**
- C. I must provide copies of Social Security cards for all members of my household.**
- D. I must live within Oklahoma, Texas, Kansas, Missouri, or Arkansas.**
- E. I must provide a copy of my warranty deed.**
- F. I must be 55 years old or older, or, I must have a documented ambulatory disability**
- G. I must not have any accounts in default or delinquent status owed to the Housing Authority or the Choctaw Nation.**
- H. The program is on a first come first serve basis and I am not guaranteed to be selected. My application will remain on the waiting list for the next funding cycle, if not selected.**
- I. I acknowledge any amount that exceeds the approved voucher amount is my responsibility.**
- J. I understand, if I qualify for an above ground shelter, it is my responsibility to provide the cement slab.**

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_