Mille Lacs Band of Ojibwe Housing Department Home Loan Program Application

APPLICANT

Last Name:	First Name, MI:
Address:	Home Phone:(
CityStateZip	Cell: ()
Band Member Y / N Enrollment #	Work Phone: ()
Social Security #:	
<u>Co-A</u>	<u>pplicant</u>
Last Name:	_ First Name, MI:
Address:	
CityStateZip	Cell: ()
Band Member Y / N Enrollment #	Work Phone: ()
Social Security #:	
<u>Certi</u>	fication
Signature(s) on this application and acknowledge my/our misrepresentation(s) of the information contained in this a penalties including, but not limited to fine or imprisonment Code, Section 101, et. Seq. and liability for monetary dam and any other person who may suffer any loss due to reliat this application. I also agree that I am hereby applying for	pplication may result in civil liability and/or criminal
Borrower's Signature:	Date:
Co-Borrower's Signature:	Date:
Return completed application to:	nt

Return completed application to:
Mille Lacs Band of Ojibwe Community Development
43408 Oodena Drive, Onamia, MN 56359