

COVID-19 Water/Sewer Assistance Program

I. PURPOSE

To provide Siletz Tribal households experiencing negative impacts due to the COVID-19 pandemic with water/sewer assistance. Funding for the COVID-19 Water/Sewer Assistance Program is based on a first come, first served basis. Services are available throughout the United States of America. This program will open July 1, 2020 and will remain open until funding is exhausted.

II. ELIGIBILITY

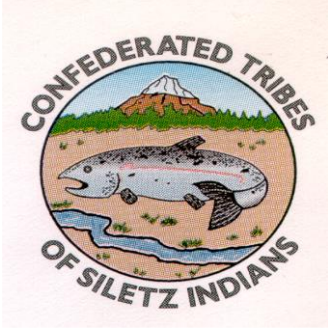
1. Tribal households negatively impacted due to COVID-19. To be considered a tribal household, the head of household, spouse, or a minor child (ren) must be an enrolled Siletz tribal member.
2. Impact must be due to circumstances directly related to COVID-19 (i.e. loss of income due to lay-off, inability to work due to government shut-down, loss of income due to quarantine, household composition changes, etc.)

III. USES

COVID-19 water/sewer assistance is meant to address unmet needs. Household may be eligible for water/sewer assistance. The base is \$250.00 with a limit up to \$500.00 per household. Funding is made available through the CTSI U.S. Treasury CARES Act fund. Payments will be made directly to water/sewer providers.

IV. PROCEDURE

1. The applicant must complete the COVID-19 Water/Sewer Assistance Application and provided the following: names of all household members, roll number, proof of tribal enrollment, date of birth, address, for all household members. Applicant must document how COVID-19 has impacted their household and need for water/sewer assistance. Applicant must sign the release of information and attached current Water/Sewer bill.
2. Applications will be processed by the 477-Self Sufficiency Program (477-SSP).
3. Once eligibility is determined, a receipt letter or email will be provided to the applicant 2 business days from the date the application is received by the CTSI. The applicant will be given ten (10) days from the receipt letter date to respond and correct any deficiencies. Other efforts to communicate with the applicant, to assist with completion of the application will occur as needed.



CONFEDERATED TRIBES OF SILETZ INDIANS
 2468 W. 11th Ave. Eugene, OR 97402
 1-800-922-1399 ext. 1755 or 1756 * 541-484-4234 * FAX: 541-484-4583

COVID-19 Water/Sewer APPLICATION

Date: _____

Head of the Household: _____ Tribal Roll#: _____
Tribal Member

Mailing Address: _____
City State Zip

Residence Address: _____
City State Zip

Home #: _____ Cell #: _____ Email Address: _____

HOUSEHOLD COMPOSITION

List all members currently in your household.

Names of Adults 1 st then Children (Legal names)	Sex	Date Of Birth	Relationship To Head of the Household
			SELF

Water/Sewer Company/Agency

List all contact information below for company providing water/sewer services

Name of Water/Sewer Company	Address of Water/Sewer Company	Account Number	Company Phone Number

The Confederated Tribes of Siletz Indians requires that you must sign the Authorization of Release Form attached to be eligible for any program service.

I/we know that cooperation requires supplying all information needed to determine my eligibility. I/we understand that supplying false, incomplete or inaccurate information is punishable under Federal, State, and Tribal laws.

By signing below, I authorize the Confederated Tribes of Siletz Indians to verify information relevant to determining household eligibility.

This authorization is effective for one year from the date of signature.

Head of Household _____ Date _____

Spouse/Other Adult _____ Date _____

Other Adult _____ Date _____

Mail completed application to:
Confederated Tribes of Siletz Indians - EAO
Attn: 477-SSP
2468 W. 11th Ave.
Eugene, OR 97402

Email to: 477SSP@ctsi.nsn.us
Subject: Water/Sewer Assistance Program

Fax: (541) 484-4583