



HOOPA DEVELOPMENT FUND

An Entity of the Hoopa Valley Tribe
PO Box 1307, Hoopa CA 95546 PHONE:530-625-5565 FAX:530-625-5181
www.hoopadevelopmentfund.com

SHORT TERM LOAN APPLICATION

Dear Applicant,

Thank you for applying for a Short Term Loan, offered through the Hoopa Development Fund, emerging CDFI fund. A complete loan package is required to process your loan; Incomplete packets will not be accepted. Please submit the following documents:

- Loan Application (attached)
- Copy of valid state issued ID (Driver's License or ID)
- Last 2 Paystubs (or other documentation to support income)
- Proof of Tribal enrollment
- Authorization of Release of Information (co-applicant must sign a separate form)
- Monthly Budget Tracking Sheet (attached)
- \$15 Application fee

****FULL DISCLOSURE STATEMENT:**

When you request a loan from Hoopa Development Fund, please be aware that there is a possibility that you will not be eligible for the amount you are requesting, or you may be ineligible for a loan without a qualified local co-signer. This will be determined by evaluating your income source, your credit report, and your history with the Hoopa Development Fund.

If your last account with Hoopa Development Fund had a delinquency, you have been automatically placed in a 1-year minimum penalty period. The penalty period begins from the date you pay off your loan. You are ineligible to apply until your penalty period is over.

The Short Term Loan is designed to help you improve your financial condition. The Short Term Loans can be used to pay off collections, consolidate debt, and reduce interest rates which will result in improved credit and provide an increase in your monthly discretionary funds.

Loan Approval Requirements – If your loan is approved, there are additional requirements to close your loan. These requirements include:

- \$25.00 Loan Fee – Your loan check will not be given until this fee is paid. This fee is used to pay for the processing of your loan.
- Stipulations – The Hoopa Development Fund Committee may place additional requirements on your approval such as obtaining a qualified, local co-signer or obtaining credit counseling. You will not be given your loan check until all of these stipulations are agreed to and met.
- Signed Loan Documents – Your loan documents must be signed before we release your loan check. A Hoopa Development Fund employee must witness you sign your loan documents, or your loan documents will need to be notarized.



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If your loan is approved, there will be follow up phone surveys, the first one occurring six months after the loan closing date. Your input will let us know what works and what needs improvement within our organization. Participation in the follow up surveys are a requirement of our loan programs. By initialing below, you are agreeing to follow up surveys throughout the duration of the loan with HDF staff and/or technical assistance partners to determine progress and identify issues that may arise.

Initial here: _____

APPLICANT INFORMATION	
Full Name:	
Social Security #:	Tribal Enrollment #:
Physical Address:	# of years at this address:
City/State/Zip:	County:
Mailing Address (if different):	
Telephone:	Email:
Date of Birth:	

EMPLOYMENT AND INCOME		
FULL DISCLOSURE: Some income sources are riskier to loan to than others. If the Hoopa Development Fund Committee determines that your income source is too risky, you may need a co-signer or you may be determined ineligible due to not meeting credit criteria.		
Present employer:	Position:	# of years there:
Employer Address:	City/State/Zip:	Ph.:
Present Salary: (gross) \$ /month	(net) \$ /month	
Other income:	Source:	
Do you receive public assistance? Yes No	Food Stamps: Yes No	Other:

CO-APPLICANT EMPLOYMENT AND INCOME		
Present employer:	Position:	# of years there:
Employer Address:	City/State/Zip:	Ph.:
Present Salary: (gross) \$ /month	(net) \$ /month	

Other income:	Source:	
Do you receive public assistance? Yes No	Food Stamps: Yes No	Other:

LOAN AMOUNT REQUESTED (up to \$2000) : \$	
USE OF LOAN: (Please list who you want to pay, and the amount owed)	
CREDITOR	AMOUNT
1.	\$
2.	\$
3.	\$
4.	\$
5.	\$
6.	\$
TOTAL:	\$ _____

COLLATERAL: List your collateral		
Authority to apply Tribal Per Capita Dividends	Agree	<input type="checkbox"/>
Council/Committee/Contracts	Agree	<input type="checkbox"/>
Payroll Deduction	Agree	<input type="checkbox"/>

DATA INFORMATION:

The following information is requested by the Federal Government in order to maintain compliance with Federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but we encourage you to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race and ethnicity of applicants on the basis of visual observation or surname. If you do not wish to furnish the information below, please check the appropriate box:

I do NOT wish to furnish gender, ethnicity or race information. Initial: _____

I will furnish the information. (Please complete section below)

GENDER: Female Male

ETHNICITY: Hispanic Non-Hispanic

RACE: (Mark all that apply): Native American Caucasian Pacific Islander

Asian African American Other

Data information was provided by: Applicant HDF Staff

PERSONAL FINANCIAL STATEMENT: List ALL accounts and bills

TYPE OF ACCOUNT	INSTITUTION	ACCOUNT #	BALANCE
Checking			
Savings			
Other			
Total Cash from accounts:			\$

LIABILITIES:

CREDIT ACCOUNTS	CREDITOR	ADDRESS	MONTHLY PYMT	ACCOUNT #	BALANCE
Car Loan					
Bank Loan					
Visa					
MasterCard					
Other					
Other					
TOTAL MONTHLY PAYMENTS:				TOTAL OUTSTANDING:	

INCOME	AMOUNT	MONTHLY EXPENSES	AMOUNT
Borrower's Salary		Rent/Mortgage	
Spouse's Salary		Utilities	
Bonus/Commissions		Sewer/Water	
Alimony/Child Support		Food/Groceries/take out	
Investment income		Child Care	
Real Estate		Insurance	
TANF/Cash Aid		Internet/phone/cell phone	
Per Cap		Cable/satellite	

Social Security		Subscriptions (Netflix, Hulu)	
Other		Alimony/Child Support	
		Gas	
		Grooming	
		Miscellaneous	
TOTAL INCOME:		TOTAL EXPENSES:	

Have you ever filed for bankruptcy? YES NO

Are there any outstanding judgements against you? YES NO

Are you currently a party to a lawsuit? YES NO

BORROWER'S ACKNOWLEDGEMENT:

I certify that all responses provided on this application and attachments are true and correct. By signing below, I am giving authorization for HDF staff to check my credit and employment history. I understand that HDF is relying on the information I have provided to make a decision regarding the extension of credit.

Applicant's Signature

Date

QUESTIONNAIRE FOR SHORT TERM LOAN APPLICANTS

Please complete the required questionnaire and submit with your application.

1. Why are you applying for a Short Term loan? (Circle all that apply)

I want to purchase something. If you selected this, tell us what you want to purchase:

I want to improve my credit.

I need help paying my bills.

I need to pay off an old debt.

Other: _____

2. How do you usually pay your bills?

Personal check/debit

Check cashing store

Money orders

Cash

Credit cards

Online banking

Other: _____

3. How often are you able to put money into savings?

Regularly; Monthly / Weekly (circle one)

On occasion

Never

4. Where do you put money that you save?

Savings account

Checking account

Savings Bond

Hidden in my house

Retirement Account

I don't save money

Other: _____

5. Do you have a monthly spending budget?

Yes

No

If you answered yes, how well do you follow your budget?

Very closely

Somewhat closely

Not at all

6. Which statement best describes how you pay your bills, rent, and other expenses?

I always pay on time

I usually pay on time

I sometimes pay on time

I almost never pay on time

7. In the past 12 months, have you seen your credit report from a credit-reporting agency such as

Experian, Equifax, or TransUnion?

- a. Yes
- b. No
- c. I don't know

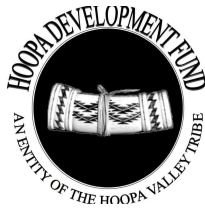
8. If you did see your credit report, how easy or difficult was it for you to understand it?

- Very easy
- Somewhat easy
- Somewhat difficult
- Very difficult

9. Do you have financial goals you are working toward? If so, what are your goals?

10. Our goal is for our loan program to help you. To do so, we want to understand how you feel about the control you have of your money. Please circle the statement that best describes you:

- I have complete control of my money
- I have some control of my money
- I have little control of my money
- I have no control of my money



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AUTHORIZATION TO RELEASE INFORMATION

I, _____, have applied for or obtained a loan from Hoopa Development Fund (HDF). As part of the process, HDF may verify or seek information necessary to processing my application, and other documents required in connection with my request.

I authorize you to provide to HDF, for verification purposes, the following applicable information:

- Past and Present employment or income records
- Bank accounts, stock holding, any other asset balances
- Past and present landlord references
- Other consumer credit references

If the request is for a new loan, I further authorize HDF to order a consumer credit report and verify other credit information.

The information HDF obtains is only to be used in the process of my request for assistance.

A copy of this authorization may be accepted as an original.

Full Legal Name

Social Security Number

Date of Birth

Signature

Date