



# "CO-SIGNER"

## Home Loan Application

### Credit Services Department

Amount Required  \$ _____	CO-SIGNING FOR (NAME OF APPLICANT(S)):  _____	BPA NO: _____  DATE: _____
---------------------------------	---	----------------------------------

#### SECTION A – APPLICANT(S) INFORMATION

Married <input type="checkbox"/>	Common Law <input type="checkbox"/>	Single <input type="checkbox"/>	No. of Dependents
----------------------------------	-------------------------------------	---------------------------------	-------------------

Name (Last, First, Middle)	Census No.	Social Security No. - - -	Date of Birth / /
Current Mailing Address (City, State, Zip Code)	How long at address?	Home Phone No. - - -	Cell Phone No. - - -
Explain directions to your home (Street, Apt. #, mile post #, etc.)			EMAIL:
Chapter Affiliation (Applicant)	Agency	Elected/Appointed Official?  Yes / No	If Yes, Position:  <i>(Need Ethical Certification Form filled out and notarized. Form will be furnished by Cr. Services)</i>

#### SECTION B – PRESENT EMPLOYMENT INFORMATION

Applicant's Employer & Address _____ _____	Date of Employment / /	Position or Title _____	Work Phone No. _____ (Direct Extension) _____
Spouse's Employer & Address _____ _____	Date of Employment / /	Position or Title _____	Work Phone No. _____ (Direct Extension) _____

#### SECTION C – MONTHLY INCOME INFORMATION

	Wages (Net)	Other	Total Monthly Income
Applicant's Monthly Income (Net)	\$ _____	\$ _____	\$ _____
Spouse's Monthly Income (Net)	\$ _____	\$ _____	\$ _____

#### SECTION D – REFERENCES

Name and Addresses	Relationship	Telephone Numbers	
1. _____	Immediate Relative	Home Phone No. _____-_____-_____	Work Phone No. _____-_____-_____
2. _____	Immediate Relative	Home Phone No. _____-_____-_____	Work Phone No. _____-_____-_____
3. _____	Immediate Relative	Home Phone No. _____-_____-_____	Work Phone No. _____-_____-_____





# EMPLOYMENT VERIFICATION FORM

Credit Services Department • PO Box 2405 • Window Rock, AZ 86515 • 928-871-6749

To Authorized Human Resources Representative:

The Navajo Nation Credit Services Department is requesting verification of employment for the individual who has authorized by their signature below to furnish the information.

Employer's Name & Address

Applicant's Name

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Social Security No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**(TO BE FILLED OUT BY THE EMPLOYER'S HUMAN RESOURCES DEPARTMENT)**

Name of Employer:						
Department:					Dept. No.:	
Date of Employment:		Position Title:				
Annual Salary:		\$				
Employment Status						
Regular Full Time	Regular Part Time	Temporary	Seasonal	Other	<i>If Other, specify</i>	

Remarks (optional):

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Signature)

Authorized Human Resources Representative

# MAP TO RESIDENCE & PLACE OF EMPLOYMENT

(Be specific and descriptive)

APPLICANT'S NAME: \_\_\_\_\_

Draw a detailed map (including rural address number, color of house, mile post number, etc.)



---

**Draw a detailed map to your place of employment.**



# "Co-Signer" Home Loan Program Requirement Checklist



## Eligibility Determination

- 18 years and older, must be an enrolled member of the Navajo Nation.
- Must be employed **Full Time** two (2) years or more.
- Applications and forms are available at the office or online at [nnooc.org](http://nnooc.org)
- Scan/Email complete application to: [creditdocuments@nnooc.org](mailto:creditdocuments@nnooc.org)

Please provide the following	Yes	No
1. Loan Application - Must be complete, filled out, signed, and dated by the applicant(s).		
2. Employment Verification Form(s) - Must be completed by the Employers Human Resources Department. Employment verification will not be accepted if <b>ALTERED</b> .		
3. References - All references must be nearest immediate relatives of applicant and/or spouse. <b>NO Co-workers or Friends</b> .		
4. Signed & Notarized Ethical Certification Form – Required only if applicant(s) is a Navajo Nation Elected Official, Political Appointee, Presiding Judge or Office of the Controller Staff (also applies to Co-signers). Forms are available in the office or online website.		

## Attach the following documents for the Co-Signer:

**Please provide clear copies**

a. Valid State Driver's License(s) or State Identification Card(s)		
b. Social Security Card (s)		
c. Four (4) most recent check stubs from each of the applicant(s) eight (8) check stubs if paid weekly, or current award letter if on fixed income.		
d. Income Tax Returns for the past year (If applicable).		
e. Certificate of Indian Blood (CIB) (applicant(s) only)		
f. Document with physical description of <b>CURRENT</b> residency (Utility statement, Chapter Verification etc. Physical address must be on the document).		

**ALL APPROVED LOANS WILL BE ASSESSED A LOAN CLOSING FEE ACCORDING TO THE LOAN CLOSING FEE SCHEDULE & WILL BE INCLUDED IN THE LOAN**

**NOTICE:** The Credit Services Department is not responsible for making any referrals to a Manufactured Home Dealership for purchases, nor a Contractor for new Home Constructions. The selection of a Manufacture Home Dealership or Contractor is solely at the discretion of the applicant(s).

Updated: 2024