



**THE MUSCOGEE (CREEK) NATION**

Social Services /Department of Community and Human Services  
P.O. Box 580 | OKMULGEE, OK 74447  
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DAVID HILL  
PRINCIPAL CHIEF  
DEL BEAVER  
SECOND CHIEF

**Current Landlord Statement**

\_\_\_\_\_ is currently living in the \_\_\_\_\_ bedroom  
Name of Applicant/Family

House/mobile home/apartment/duplex, located at:

\_\_\_\_\_ City State and Zip  
Address

The property is currently being rented \$\_\_\_\_\_ for per month and is due\_\_\_\_\_.

The applicant is responsible for the following utilities:

- Electric  Gas  Water  All bills paid

Is the owner of this property an employee of the Muscogee (Creek) Nation?  Yes  No

Property/Name: \_\_\_\_\_

Manager/Landlord: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number and/or Email Address: \_\_\_\_\_

By signing below, I confirm/acknowledge:

- The unit is occupied by the applicant listed above.
- The completion of this form is to determine eligibility only.
- This form does not guarantee of payment from the MCN Human Services.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Property Manager/Landlord Signature

\_\_\_\_\_  
Date

If the landlord is an employee of Muscogee (Creek) Nation, client will not be eligible to receive rental/deposit assistance. By signing this as the landlord and tenant I swear all information is true and correct to the best of my knowledge and agree to all the terms and conditions.