



CWAT Alternative Shipping Assistance Application

Open to residents of Point Hope, Point Lay, Kaktovik
NSB Housing Department (907) 852-0203
HousingDevelopment@north-slope.org

DATE RECEIVED _____

REVIEWED BY _____

DATE _____

DEPARTMENT APPROVAL _____

DATE _____

☐ **Point Hope**

☐ **Point Lay**

☐ **Kaktovik**

Application Date:		Application Number:		Supplier number:	
Applicant Name:				Date of Birth:	
Physical Address:				Email Address:	
Mailing Address:				Phone Number:	
List Household Members and Relationship to Applicant:					
To qualify you must have been a resident for a minimum of 2 years. Provide 3 references to verify residency:					
Name:		Phone #:		Email:	

Please attach supporting documentation.

- 1) Copy of valid photo identification
- 2) Copy of shipping invoice that shows clearly what was shipped, and a receipt showing proof that it was paid.
- 3) Any additional documentation to show what was shipped and proof of payment for shipping.

NSB CWAT Alternative Shipping Assistance Program Information:

Applicants must be a resident of the North Slope for minimum of 2 years.

Allowable items for reimbursement: shipment of vehicles, food, furniture, home goods, fuel tanks, sewer tanks, lumber.

Maximum shipping assistance per family per calendar year is \$5,000. May be combined with NSB HSA Program.

Note: if you have a past due balance (utilities or property tax), it is NSB policy to apply the reimbursement to the past due balance before issuing a check for reimbursement.

By signing below, I agree that all the information provided in this application is true to best of my knowledge, and I understand that any attempt to mislead the NSB shall be cause for immediate termination of the application process. I HAVE READ AND UNDERSTAND THE PROGRAM HANDBOOK.

Applicant Printed Name

Applicant Signature

Date