



Housing Authority of the Cherokee Nation
1500 Hensley Drive
P.O. Box 1007
Tahlequah, OK 74465-1007
Phone 918-456-5482

Statement of Understanding
Replacement Home

I (Print Participant Name) _____ understand the replacement home offered to me by the Housing Authority of the Cherokee Nation – Housing Rehab Dept. is an **ALL-ELECTRIC** home.

My current home uses the Energy Source listed and marked below. ***Please check all that apply.***

- _____ Electric Kitchen Stove/Oven
- _____ Electric Hot Water Heater
- _____ Electric Furnace
- ☒ Propane/ Natural Gas Kitchen Stove/Oven
- ☒ Propane/ Natural Gas Hot Water Heater
- ☒ Propane/ Natural Gas Furnace

☐ I want an ALL-ELECTRIC replacement home.

☒ I **DO NOT** want an ALL-ELECTRIC replacement home.

Printed Name of Participant

8.13.26
Date
8-13-26

Participant Signature

Date

[Signature]
HACN Staff Signature

8/13/26
Date