

# ARIZONA PIONEERS' HOME



## Qualifying Documents Miner Qualifying Financially

THE MISSION OF THE ARIZONA PIONEERS' HOME IS TO PROVIDE A HOME FOR ARIZONA PIONEERS AND DISABLED MINERS THAT DELIVERS THE OPTIMAL PHYSICAL, EMOTIONAL, AND SPIRITUAL CARE IN A HOMELIKE AND COMPASSIONATE ENVIRONMENT. QUALITY CARE IS PROVIDED IN A PROFESSIONAL MANNER, PROTECTING DIGNITY AND HONORING THE PERSONAL DIRECTIVES OF EACH RESIDENT, WHILE CONSIDERING THE UNIQUENESS OF EACH INDIVIDUAL

300 S McCormick St. Prescott, AZ 86303

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Main: (928) 445-2181 FAX (928) 778-1148

Hello,

This is the Qualifying Documents packet for Miners Qualifying Financially. These documents help our staff to determine if you meet the requirements of residency as stated in the Arizona Revised Statute 41-942 .

- Affidavit for Mining Employment
- Miner's Financial Attestation

Once you have these completed, please fill out the packet entitled Application for Admission.

As always, feel free to contact us with any questions.

Thank you,

Jeanette Means  
Administrative Services  
Arizona Pioneers' Home  
928-277-2721  
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# AFFIDAVIT OF MINING EMPLOYMENT

**A.R.S. 41-942. Qualifications for admission to hospital; definitions**

- A. A person, under the order of the Governor, may be admitted to the Hospital for Disabled Miners who:
  - 1. Has been a resident while in the occupation of mining in this state.
  - 2. Is a citizen or legal resident of the United States.
  - 3. Has reached the age of sixty years or more, and is financially unable to support himself, or has suffered incapacitating injuries arising from and in the course of mining.
- B. Based on available space and funding, the governor may approve a person for admission to the hospital for miners with disabilities who has not yet reached the age of sixty years but otherwise qualifies for admission under subsection A.
- C. For the purposes of this section:
  - 1. "Claim" has the same meaning prescribed in section 27-301.
  - 2. "Mine" has the same meaning prescribed in section 27-301.
  - 3. "Mining":
    - a. Has the same meaning prescribed in section 27-301.
    - b. Does not include performing executive, administrative, support or clerical functions for the owner or operator of a mine, unless a person who performs executive, administrative, support or clerical functions for the owner or operator of the mine had significant environmental exposure to mining activities that could be detrimental to a person's health.
    - c. Does not include activities performed by an owner of a private mining claim who did not actually work the claim.

"Incapacitating injuries" shall be defined as such injury that renders the person unable to perform one or more of the following activities of daily living: ambulation, bathing, toileting, grooming, eating or getting in or out of bed or a chair by oneself.

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last
First
Middle Initial

Address: \_\_\_\_\_  
Street
City
Zip

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

References: (List names and addresses of friends or relatives who can verify that you have been in the occupation of mining and have lived in Arizona as required by State law.)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

FULL Address/Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

FULL Address/Phone: \_\_\_\_\_

**AFFIDAVIT OF MINING EMPLOYMENT (continued)**

When applying to the Arizona Hospital for Disabled Miners, an applicant must provide information about working in the occupation of mining, showing that they meet the State requirements for admission. Please provide the following:

**Mining Employment History**

Dates	Company	Job Title	City
Dates	Company	Job Title	City
Dates	Company	Job Title	City

Total Number of years worked in the mining industry: \_\_\_\_\_

List any other information that will substantiate and verify you worked in the occupation of mining:

\_\_\_\_\_

\_\_\_\_\_

I understand the Arizona Pioneers' Home may require documentation to verify mining employment.

**Certification**

I certify that, to the best of my knowledge, I meet the qualifications for admission to the Arizona Hospital for Disabled Miners at the Arizona Pioneers' Home. (Check appropriate box)

- I have been a resident of the State of Arizona while in the occupation of mining.
- I physically participated in mining activities to develop or extract materials from a mine, or I performed executive, administrative, support or clerical functions for the owner or operator of a mine *in which there was significant environmental exposure to mining activities*, that could be detrimental to a person's health.
- I am a citizen or legal resident of the United States.
- I have reached the age of sixty (60) or more years.
- I am under sixty (60) years of age and request exception based on A.R.S. 41-492-B.
- I have suffered an incapacitating injury (or illness) arising from the occupation of mining.
- I am financially unable to support myself.

By submitting this affidavit, I certify and swear that I meet the above qualifications and am submitting this application so that I may become a resident of the Arizona Miners Hospital if it appears that I possess all of the qualifications.

Signature of Resident/Resident's Representative \_\_\_\_\_ Date: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ A.D., 20\_\_\_\_\_.

My commission expires \_\_\_\_\_ Notary Public: \_\_\_\_\_

# Miner's Financial Attestation

In order to come to the Arizona Pioneers' Home as a Miner Qualifying Financially, we need a completed Miner's Financial Attestation form and the required accompanying documentation.

A complete list of required documentation begins on page eight (8) of this packet. If you need help with getting copies made, just bring your documents to my office and I will copy them for you.

- **Only FULL statements will be accepted.** Please do not turn in partial statements, just the 1st page of a statement, screenshots of transactions, or photos of all or parts of the statements. *Anything other than full statements will not be accepted.* For auditing purposes, if the statement says "1 of 6 pages", we must have all 6 pages.
- If you don't have the bank statements for whatever reason, there are two ways to get new copies of statements.
  - You can either call the bank and ask them to send them to you (or the Pioneers' Home).
  - **Or**
  - If you do online banking, you can download them and then email them to our office.
- Some things on the list won't apply to you. That's okay...don't worry about those!
- Account numbers on bank statements can be blacked out... if you do so, *please leave the last 4 numbers visible.*

I am available for questions if you have them, so please don't hesitate to ask. Thanks!

Jeanette Means  
Administrative Services  
Room 216  
928-277-2721  
[jeanette.means@aph.az.gov](mailto:jeanette.means@aph.az.gov)

The following sources of income are considered:

INCOME
Social Security/SSI payments
Wages
Income/profit from owning a business
Pensions
Annuities
Dividends
RMD (mandatory deduction from investments)
Rental property income
Federal/State income tax refunds
Gifts/winnings/prizes
Sick/injury/accident payments
Interest earned: Checking/savings/credit union account
Interest earned: Money market accounts
Interest earned: owned house/property
Interest earned: sale of house/property

- ▶ **Income sources:** We will need bank/financial statements for the most recent three (3) months prior to the date of the Application for Admission, and tax documents showing any income (monthly or annual), and documentation from any of the sources listed below.
- ▶ **Social Security Benefit Letter:** The Social Security Administration sends out a Benefit Letter every December which will show the new amount the applicant will receive for the new year.

## MINER'S FINANCIAL ATTESTATION FORM

- The Miner's Financial Attestation form is required upon admission for any miner requesting residency at Home based on financial need.
- Please fill in as much detail as you can and return the Attestation form with supporting documentation.
  - The documentation referred to is the bank/financial statements that are listed beginning on page eight (8). They include bank (checking/savings/money market) statements, the Social Security Benefit Letter, etc.
  - The list of documents you are saving should match the information you list on this form.
- *For every entry you put on the Attestation form, a financial statement/document is required to go with it.* Please sort through the statements before turning them in and make sure they match what was filled in on the Miner's Financial Attestation.
- This form must be filled out and signed by either the applicant or the applicant's representative



## REQUIRED DOCUMENTATION

A statement for each of the following is required:

### INCOME:

- ❑ **BANK ACCOUNTS:** Bank/financial statements for the most recent three (3) months prior to the date of the Application for Admission.
- ❑ **TRUST FUNDS:** We require copies of legal documents declaring what assets/accounts are contained within, who the trustee is and who the beneficiaries are.
- ❑ **SOCIAL SECURITY:** The Social Security Benefit Letter was sent out in December to everyone by the Social Security Administration.
- ❑ **IF YOU HAVE A JOB:** All wages are considered income. We need copies of your last three (3) paychecks.
- ❑ **IF YOU OWN A BUSINESS:** All profit generated by a business is considered income. You will need to turn in the most recent three months of all checking, savings, money market accounts, and any other financial accounts related to your business. We also require a copy of the previous year's State and Federal taxes for your business. We need a copy of the FULL return for both. Only the entire return will be accepted.
- ❑ **PENSION:** If you receive one or more pensions, a statement showing your monthly pension earnings for each account is required.
- ❑ **ANNUITIES and/or DIVIDENDS:** Statements showing the amount earned, the dates and the name of the company/financial institution are required.
- ❑ **RETIREMENT PLAN AND IRA REQUIRED MINIMUM DISTRIBUTIONS:** Required minimum distributions (RMDs) are the minimum amounts you must withdraw from your retirement accounts each year. We will need a copy of the statement from the retirement plan or IRA that shows the RMD for the year 2024.
- ❑ **RENTAL PROPERTY INCOME:** If you receive rental property from a house or property, submit a copy of the rental agreement and the last three (3) months of statements for the account the income is deposited into.
- ❑ **FEDERAL/STATE TAX RETURNS:** If you filed State or Federal taxes for the previous year, we need a copy of the FULL return for both, even if you did not receive a refund. Only the entire

return will be accepted.

- **GIFTS/WINNINGS/PRIZES:** Any monetary gifts, winnings or prizes are considered countable. Provide any documentation received.
- **CDs/INTEREST BEARING ACCOUNTS:** The most recent statement showing the interest earned for all accounts is required.
- **LOAN PAYMENTS OR RECEIVABLE PAYMENTS FROM OTHERS:** Documentation showing the amount earned, the dates and the name of the individual/company/financial institution is required.
- **HOUSE/PROPERTY VALUE:** Put the address on the Miner's Financial Attestation form please.
  - **If the applicant owns/sold a house/property independently:**
    - ◆ Current ownership: The Arizona Pioneers' Home will assess the Fair Market Value of the house and charge interest of 100% of the value and add this to the monthly income of the resident.
    - ◆ Sale of house/property: Any profits from the sale of a house or property (before or after admission to the Arizona Pioneers' Home), will not be considered as income. If/when the house is sold (two years before or after admission), the interest earned on the monies from the sale of the house will be considered as income for two years after admission to the Home (whether or not the resident keeps the money).
  - **If the house was jointly owned/sold between the applicant and any other person:**
    - ◆ Current ownership: The Arizona Pioneers' Home will assess the Fair Market Value of the house and charge interest of 50% of the value and add this to the monthly income of the resident.
    - ◆ Sale of house/property: Any profits from the sale of a house or property (before or after admission to the Arizona Pioneers' Home), will not be considered as income. If/when the house is sold (two years before or after admission), the interest earned on the monies from the sale of the house will be considered as income for two years after admission to the Home (whether or not the resident keeps the money).
- **ASSETS:** Have you disposed of any assets with a value greater than \$1000, (property or money) in the past 24 months? If yes, documentation from the individual/company/financial institution involved is required.
- **ACCOUNTS OR INCOME NOT LISTED ABOVE:** Statements showing the amount earned, the dates and the name of the company/financial institution are required.

- **CREDIT REPORT:** Per Arizona Pioneers' Home policy, prior to admission an applicant is required to furnish the Arizona Pioneers' Home with a credit history report. This report will be compared to the completed Residential Financial Disclosure to determine if there are additional debts.
  - There are several ways to obtain a credit report. You only need to do ONE of these.
    - Online  
at <https://www.annualcreditreport.com/requestReport/requestForm.action>.
    - Call ONE of the three reporting companies. We only need ONE report.
      - Equifax 1 (888) 548-7878
      - Experian 1 (888) 397-3742
      - TransUnion 1 (800) 916-8800

## MINER'S FINANCIAL ATTESTATION

Applicant's name: \_\_\_\_\_ DOB: \_\_\_\_\_

Name of person completing the form (for follow-up if needed): \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

*\*\* Please write additional information on a separate page\*\**

### ACCOUNT SUMMARY

Type of Account	Name of Financial Institution	Current Balance	Interest Rate
Checking		\$	%
Savings		\$	%
Money Market		\$	%
Other:		\$	%

### INCOME

Source	Name of Financial Institution/Company or Individual	Net Amount	Received Monthly, Quarterly or Annually?
Social Security/SSI	Social Security Administration	\$	
Wages		\$	
Income/profit from owning a business		\$	
Pensions		\$	
Annuities		\$	
Dividends		\$	
Mandatory deductions (RMD, etc.)		\$	
Rental property income		\$	
Federal/State income tax refunds		\$	
Gifts/winnings/prizes		\$	
Other:		\$	
Other:		\$	

MINER'S FINANCIAL ATTESTATION

Applicant's name: \_\_\_\_\_ DOB: \_\_\_\_\_

**EXPENSES**

CREDIT CARD/LOAN PAYMENTS			
Name of Financial Institution/Company or Individual	Current Balance	Monthly Payment	Paid with which Account
	\$		
	\$		
	\$		
	\$		

**HOUSE/PROPERTY**

In the last 2 years I have sold  **OR** currently own  - the house or property at the following address:

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

\_\_\_\_\_  
Signature of Applicant/Applicant's Representative Date

\_\_\_\_\_  
Signature of Superintendent Date