

RESIDENTIAL REHABILITATION ASSISTANCE PROGRAM

APPLICATION FORM

This application is the first step in applying for an INAC renovation grant. The sheet is what the Housing Department and Council will use to determine your eligibility and from this information, will request the Maintenance Coordinator set up an inspection of your unit as per CMHC policies.

IDENTIFICATION

Applicants Name: _____

Applicants Band Number: _____

Co-Applicants Name: _____

Co-Applicants Band # _____

Address: _____

City: _____ Postal Code: _____

Phone Number: _____ Cell # _____

Work Phone: _____

Dependants: _____ Age: _____

_____ Age: _____

_____ Age: _____

_____ Age: _____

Beside the name of the dependant please indicate their relationship to the applicant.

DEBTS TO THE BAND

To complete this section you will need to contact Molly Marchand in Finance, Cindy Brewer in Social Development, and Glenda Bonneau in Education. They will issue letters to you that state whether or not you owe money to the Band.

Do you have any outstanding Band debts? (If yes, please explain)

Have you ever received housing assistance before? (this includes Social Housing, Individual Subsidy and any previous RRAP grants)

TECHNICAL DETAILS

Legal Description of your house lot. {Please state whether it is properly under a Certificate of Possession or Notice of Entitlement. You can contact the Lands Department for this information – Randy Marchand (250) 542-4328}

Describe labor contributions, if any, to be provided by yourselves.

By signing below I/We certify that the information contained herein is true and accurate to the best of our knowledge. I/We hereby give permission for this completed application to be forwarded to the Housing Committee for recommendation to Council. I/we fully understand that we are required to cost share 10% of the total cost of the project

APPLICANT

DATE

CO-APPLICANT

DATE

WITNESS

DATE