

Maine State Housing Authority (MaineHousing)  
2016 HOME REPAIR PROGRAM

**PHASE 2 DOCUMENTS - BUNDLE COVER SHEET**

The "Bundle" contains the documents identified below. Complete this Cover Sheet and the forms will auto-populate. Click on the document name to go the document in the Bundle to edit and/or provide any missing information. Print completed documents for signatures.

- Phase 2 Document Checklist
- Certificate and Release of Liens
- Certificate of Final Inspection
- Contractors Payment Request
- Summary of Lead Hazard Activity (if applicable)
- Lead Paint Hazard Information Receipt (if applicable)

The following documents are not included in the Bundle. You may find these documents on the CAA Portal.

- MaineHousing Invoice
- Site Visit Summary

**Provide the following data and documents will auto-populate:**

**APPLICANT (OWNER - GRANTEE)**

First Name \_\_\_\_\_ MI \_\_\_\_\_  
 Last Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_  
 Daytime Telephone \_\_\_\_\_  
 Evening Telephone \_\_\_\_\_  
 Email \_\_\_\_\_

**PROPERTY**

Property Street \_\_\_\_\_  
 Property City \_\_\_\_\_  
 Property State \_\_\_\_\_ Zip \_\_\_\_\_

**FUNDS**

Home Repair Grant	\$
Elderly Set-Aside	\$
Emergency Set-Aside	\$
Emergency Drought	\$
Lead Abatement	\$
Weatherization	\$
Owner Contribution	\$

**CONTRACT**

**Contract Price** \$ \_\_\_\_\_  
**Contract Date** \$ \_\_\_\_\_  
 Project Start Date \_\_\_\_\_  
 Project Completion Date \_\_\_\_\_

**CO-APPLICANT**

First Name \_\_\_\_\_ MI \_\_\_\_\_  
 Last Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_  
 Daytime Telephone \_\_\_\_\_  
 Evening Telephone \_\_\_\_\_  
 Email \_\_\_\_\_

**CAA (ESCROW AGENT)**

CAA Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Rep Name \_\_\_\_\_  
 Rep Telephone \_\_\_\_\_  
 Rep Email \_\_\_\_\_  
 Technician Name \_\_\_\_\_  
 Technician Telephone \_\_\_\_\_  
 Technician Email \_\_\_\_\_

**CONTRACTOR**

Contractor Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Contractor Rep Name \_\_\_\_\_  
 Contractor Rep Email \_\_\_\_\_

Maine State Housing Authority (MaineHousing)  
2016 HOME REPAIR PROGRAM  
**PHASE 2 - DOCUMENT CHECKLIST**

**Applicant/Owner**

: \_\_\_\_\_ **CAA:** \_\_\_\_\_  
First MI Last CAA Name

**Property:**

\_\_\_\_\_ Street City State Zip

**Project Type:**

Home Repair                      Elderly Set-Aside                      Emergency Set-Aside  
 Weatherization                      Lead Abatement                      Emergency Drought

File Section	Copies to MSHA	Retain Originals in File	Reviewed by MSHA Date/Initial	NOTES
<b>FILE SECTION 1</b> (Applicant/Property Documents)				
NA				
<b>FILE SECTION 2</b> (Invoices, Checklists, Waivers)				
Phase 2 MaineHousing Invoice	X	X		
Phase 2 Document Checklist	X	X		
Waivers	X	X		
<b>FILE SECTION 3</b> (Contractor Documents)				
Change Order	X	X		
Contractors Payment Request (with invoices)	X	X		
Certificate and Release of Liens	X	X		
Certificate of Final Inspection	X	X		
Final Septic Inspection and Sign-off by Code Enforcement (if	X	X		
<b>FILE SECTION 4</b> (Estimates, Bids, Reports, Designs)				
Summary & Lead Paint Hazard Info Form	X	X		
<b>FILE SECTION 5</b> (Federal & State Compliance)				
Lead Dust Wipe sample report (if applicable)	X	X		
<b>FILE SECTION 6</b> (Photos, Correspondence, Misc.)				
Digital color photographs (multiple of interior and exterior)	X	X		
Correspondence				

**CAA certifies that it has retained and organized the above-referenced documents in a file for auditing by MaineHousing.**

\_\_\_\_\_  
 CAA Representative Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 CAA Representative Name

Maine State Housing Authority (MaineHousing)  
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**CERTIFICATE AND RELEASE OF LIENS**

**APPLICANT:**

\_\_\_\_\_  
First Name                      MI                      Last Name

**PROPERTY:**

\_\_\_\_\_  
Property Street

\_\_\_\_\_  
Property City                      Property State                      Property Zip

**CONTRACTOR:**

\_\_\_\_\_  
Contractor Name

**COMMUNITY ACTION AGENCY (CAA):**

\_\_\_\_\_  
CAA Name

**CAA Technician:**

Technician Name: \_\_\_\_\_

Technician Telephone: \_\_\_\_\_

Technician Email: \_\_\_\_\_

**Contract Date:** \_\_\_\_\_

Regarding the Construction Contract entered into between the Applicant/Owner and Contractor identified above, for work performed on the above-referenced property in accordance with the agreed upon project specifications, the Contractor certifies/states as follows:

1. There is due from and payable by the Applicant/Owner to the Contractor, the amount of \$ \_\_\_\_\_ pursuant to the Construction Contract and duly approved Change Orders and modifications.
2. All work invoiced under the Construction Contract has been performed in accordance with the terms thereof, and that there are no unpaid claims for materials, supplies or equipment and no claims of laborers or mechanics for unpaid wages arising out of the performance of the Construction Contract.
3. That upon receipt of the payment stated in Paragraph 1 hereof, the Contractor does hereby release the Applicant/Owner from any and all claims arising under or by virtue of this invoiced amount; provided, however, that if for any reason the Applicant/Owner does not pay in full the amount stated in Paragraph 1 hereof, the unpaid amount will become the amount which the Contractor has not released.

\_\_\_\_\_  
Contractor Representative Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Contractor Representative Name

**Acknowledged by:**

\_\_\_\_\_  
Applicant/Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant/Co-Owner Signature

\_\_\_\_\_  
Date

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**CERTIFICATION OF FINAL INSPECTION**

**APPLICANT:**

\_\_\_\_\_  
First Name            MI            Last Name

**PROPERTY:**

\_\_\_\_\_  
Property Street

\_\_\_\_\_  
Property City                      Property State            Property Zip

**CONTRACTOR:**

\_\_\_\_\_  
Contractor Name

**COMMUNITY ACTION AGENCY (CAA):**

\_\_\_\_\_  
CAA Name

**CAA Technician:**

Technician Name: \_\_\_\_\_

Technician Telephone: \_\_\_\_\_

Technician Email: \_\_\_\_\_

**Contract Date:** \_\_\_\_\_

I, the undersigned, hereby certify that the Contractor has satisfactorily completed the work, including all change orders, as outlined in the Construction Contract, and final cleaning that passed HUD lead dust wipe clearance standards (if applicable) as outlined in the Construction Contract between the Applicant(s)/Owner(s) and the Contractor.

By signing this Certificate of Final Inspection,

1. The CAA Technician and Applicant(s)/Owner(s) certifies that the completed work is satisfactory and is in accordance with the agreed upon project specifications; and
2. The Applicant(s)/Owner(s) certify that he/she received all product warranty information from the Contractor and/or manufacturer.

Furthermore, by checking the box below, I certify that the home meets Warm, Safe, Dry Standards.

I certify that the house meeting Warm, Safe, Dry Standards.

\_\_\_\_\_  
CAA Technician Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant/Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant/Co-Owner Signature

\_\_\_\_\_  
Date

Maine State Housing Authority (MaineHousing)  
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**CONTRACTOR PAYMENT REQUEST**

**APPLICANT (Owner):**

\_\_\_\_\_  
First Name                      MI                      Last Name  
\_\_\_\_\_  
Mailing Address  
\_\_\_\_\_  
City                                      State                      Zip

**CONTRACTOR:**

\_\_\_\_\_  
Contractor Name  
\_\_\_\_\_  
Contractor Mailing Address  
\_\_\_\_\_  
City                                      State                      Zip

**PROPERTY:**

\_\_\_\_\_  
Street                                      City                                      State                      Zip

**CONTRACT PRICE:** \$ \_\_\_\_\_                      **CONTRACT DATE:** \_\_\_\_\_

**TYPE OF PAYMENT:**              Final              Progress              \_\_\_\_\_% of work completed as outlined in the Contract.

**CONTRACTOR:**

I hereby request an inspection to receive payment # \_\_\_\_\_ for the amount of \$ \_\_\_\_\_. I certify that I have satisfactorily completed the necessary work to justify this request. Cost breakdown/invoice(s) attached.

\_\_\_\_\_  
Contractor Representative Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Contractor Representative Name

**CAA INSPECTOR:**

I hereby certify that all work is completed as indicated on the Contractor's payment request/invoice and in accordance with all applicable specifications and standards. I hereby recommend approval of the payment to the contractor in the amount of \$ \_\_\_\_\_

\_\_\_\_\_  
CAA Technician Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
CAA Technician Name

**APPLICANT/OWNER:**

Your signature on this Payment Request form means that you understand and agree with the following:

- The materials being billed for this project have been installed in/on your home.
- The work being billed for this project phase has actually occurred.
- You are satisfied with the work that the contractor has performed.
- You are requesting payment to the contractor for the above work and materials.
- You agree that this information has been explained to you and you understand this payment request process.

**If you have concerns about the work being done to your home, you should discuss them with the Community Action Agency before signing this form.**

\_\_\_\_\_  
Applicant/Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant/Co-Owner Signature

\_\_\_\_\_  
Date

Maine State Housing Authority (MaineHousing)  
HOME REPAIR PROGRAM

**LEAD PAINT HAZARD INFORMATION RECEIPT**

(IF APPLICABLE)

**Single Family Home**

**Multi-Family Home**

**APPLICANT (OWNER):**

**COMMUNITY ACTION AGENCY (CAA):**

\_\_\_\_\_  
First Name                      MI                      Last Name

\_\_\_\_\_  
CAA Name

**PROPERTY:**

\_\_\_\_\_  
Property Street                                      Property City                      Property State                      Property Zip

I received the pamphlet "*Renovate Right: Important Lead Hazard Information for Families, Childcare Providers, and Schools*", and understand that it explains the hazards associated with lead-based paint.

**Signed by all owners of the property:**

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Co-Applicant

\_\_\_\_\_  
Date



EXTERIOR AREAS	SURFACES CONTAINING LEAD	TREATMENT

It is important to understand that not all surfaces containing lead-based paint are hazardous. Generally, those surfaces containing lead based paint that are chipping or peeling or are a friction or impact surface such as windows and doors represent the most significant lead hazards. Wall, ceiling, and trim surfaces containing lead-based paint in good condition are generally not hazardous unless they are sanded, scraped, or otherwise disturbed through renovations or remodeling.

**Contact person for more information about this summary report:**

\_\_\_\_\_  
Signature of CAA Representative

\_\_\_\_\_  
CAA Representative Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
CAA Representative Telephone Number

\_\_\_\_\_  
CAA Representative Email