Maine State Housing Authority (MaineHousing)
2016 HOME REPAIR PROGRAM

SITE VISIT SUMMARY

APPLICANT (OWNER):

First Name MI Last Name

CONTRACTOR:

Contractor Name

PROPERTY:

Property Street

City State Zip

COMMUNITY ACTION AGENCY (CAA):

CAA Name

CAA Technician Name

PROJECT TYPE: ☐ Home Repair ☐ Home Repair Emergency

FINDINGS:

Prepared by: **Date:**

Title: