

HOME RETRO PROGRAM

BUNDLE COVER SHEET FOR TENANT APPLICANTS

- INSTRUCTIONS:**
1. Save this bundle to your agency's computer/server before populating the Cover Sheet. The web browser is not designed to retain data.
 2. Adobe bookmarks serves as a table of contents for the bundle and allows the user to navigate through the forms as needed to edit and/or provide any missing information.
 3. Print documents for signatures. The Phase 1 Document Checklist specifies which documents need to be electronically transmitted to MaineHousing through ShareFile.

This Bundle contains the documents identified below.

Phase 1 Document Checklist	Construction Escrow Agreement
Tenant Application	Construction Contract
Tenant Grant Agreement	Job Specifications – cover page
Property Owner Application	Home Retro Invoice
Property Owner Grant Agreement	

These documents are not included in the Bundle. Click on the form name to download the pdf writable form.

- Job Specifications – Appendix A
- Waiver Request
- Change Order

Provide the following data and documents will auto-populate:

APPLICANT (TENANT)

First Name _____ MI _____

Last Name _____

Mailing Address _____

City _____

State _____ Zip _____

Telephone _____

Email _____

CO- APPLICANT (TENANT)

First Name _____ MI _____

Last Name _____

Mailing Address _____

City _____

State _____ Zip _____

Telephone _____

Email _____

PROPERTY OWNER (LANDLORD)

First Name _____ MI _____

Last Name _____

Company Name _____

Mailing Address _____

City _____

State _____ Zip _____

Telephone _____

Email _____

CO-PROPERTY OWNER (LANDLORD)

First Name _____ MI _____

Last Name _____

Company Name _____

Mailing Address _____

City _____

State _____ Zip _____

Telephone _____

Email _____

PROPERTY LOCATION

Property Street _____

Property City _____

Property State _____ Zip _____

ALPHA ONE (ESCROW AGENT)

Mailing Address _____

City _____

State _____ Zip _____

Intake Name _____

Intake Telephone _____

Intake Email _____

Representative Name _____

Rep Telephone _____

Rep Email _____

Technician Name _____

Technician Telephone _____

Technician Email _____

FUNDING

Home Retro Grant \$ _____

Owner Contribution \$ _____

TOTAL FUNDS \$ _____

CONTRACT

Contract Price \$ _____

Contract Date _____

Project Start Date _____

Project Completion Date _____

CONTRACTOR

Contractor Name _____

Mailing Address _____

City _____

State _____ Zip _____

Telephone _____

Contractor Rep Name _____

Contractor Rep Email _____

HOME RETRO PROGRAM
**PHASE 2 - DOCUMENT CHECKLIST
 FOR TENANT APPLICANTS**

Tenant: _____
 Property Owner: _____
 Property: _____

	Copies to MSHA	Reviewed by MSHA Date/Initial	Notes
FILE SECTION 2 (Invoices, Checklists, Waivers)			
Phase 2 Home Retro Invoice	X		
Phase 2 Document Checklist	X		
Waivers	X		
FILE SECTION 3 (Contractor Documents)			
Change Order	X		
Contractors Payment Request <i>(with Contractor invoices)</i>	X		
Certificate and Release of Liens	X		
Certificate of Final Inspection	X		
Construction Progress Reports	X		
Copy of Building Permit <i>(if applicable)</i>	X		
FILE SECTION 6 (Photos, Correspondence, Misc.)			
Digital color photographs	X		
Notes, Correspondence	X		

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

_____ Date _____
 Alpha One Representative Signature

_____ Date _____
 Alpha One Representative Name

EXHIBIT H
HOME RETRO PROGRAM
CERTIFICATE AND RELEASE OF LIENS

ALPHA ONE 127 Main Street South Portland, ME 04106 (800) 640-7200	Technician Name: _____ Technician Telephone: _____ Technician Email: _____
---	--

APPLICANT:

First Name MI Last Name

PROPERTY:

Property Street

Property City Property State Property Zip

CO-APPLICANT:

First Name MI Last Name

CONTRACTOR:

Contractor Name

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

HOME RERRO PROGRAM
CERTIFICATION OF FINAL INSPECTION

ALPHA ONE 127 Main Street South Portland, ME 04106 (800) 640-7200	Technician Name: _____ Technician Telephone: _____ Technician Email: _____
---	--

APPLICANT:

First Name MI Last Name

PROPERTY:

Property Street

Property City Property State Property Zip

CO-APPLICANT:

First Name MI Last Name

CONTRACTOR:

Contractor Name

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 Alpha One 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.

Alpha One Technician Signature

Date

Applicant/Owner Signature

Date

Co-Applicant/co-Owner Signature

Date

EXHIBIT K
HOME RETRO PROGRAM
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:

Property Street Property City Property State Property 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 attached.

Contractor Representative Signature

Date

Contractor Representative Name

ALPHA ONE 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 \$ _____.

Alpha One Technician Signature

Date

Alpha One 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.

Applicant/Owner Signature

Date

co-Applicant/co-Owner Signature

Date

Landlord Signature

Date

HOME RETRO PROGRAM
MAINEHOUSING INVOICE

Instructions: Return the completed Invoice and Document Checklist to MaineHousing for processing.

APPLICANT: _____
First MI Last

PROPERTY: _____
Property Street Property City Property State Property Zip

PHASE 1

Original Funding

<i>Total Original Funding</i>	\$ _____
Phase 1 Administrative Fee	\$ _____

INITIAL PAYMENT \$ _____

Change Order

Additional Funding

<i>Total Additional Funding</i>	\$ _____
Phase 1 Additional Administrative Fee	\$ _____

ADDITIONAL PAYMENT \$ _____

PHASE 2

Final Funding

<i>Total Funding</i>	\$ _____
Phase 2 Administrative Fee	\$ _____

FINAL PAYMENT \$ _____

TOTAL PROJECT AMOUNT \$ _____

ALPHA ONE SIGNATURE:

 Alpha One Representative Signature

 Date

 Alpha One Representative Name