

MOBILE HOME REPLACEMENT PROGRAM
PRE-APPROVAL BUDGET FORM

APPLICANT:

First Name MI Last Name

Mailing Address

City State Zip

CO-APPLICANT:

First Name MI Last Name

Mailing Address

City State Zip

PROPERTY:

Property Street

Property City Property State Property Zip

COMMUNITY ACTION AGENCY (CAA):

CAA Name

Number of Bedrooms: _____

EXPENSES

Construction Cost <i>(include demolition and removal of the old mobile home, site work, utility connection, water and sewer)</i>	\$ _____
Mortgage Payoff Amount <i>(pre-existing, not to exceed \$10,000)</i>	\$ _____
Homeowner Education <i>(maximum of \$1,000 per project)</i>	\$ _____
Temporary Relocation <i>(MaineHousing will review all requests)</i>	\$ _____
Merchants Fee	\$ _____
Registry Filing Fees	\$ _____
TOTAL EXPENSES	\$ _____

FUNDING

MaineHousing Funding Total	\$ _____
10% Administration Fee <i>(project administration fees will not exceed 10% of the MaineHousing Funding Total for each project)</i>	\$ _____
TOTAL FUNDED BY MAINEHOUSING	\$ _____
Other Project Match Funds	\$ _____
TOTAL PROJECT FUNDING	\$ _____