

HOME ACCESSIBILITY AND REPAIR PROGRAM (HARP)
GRANT AGREEMENT

Agency (CAA): _____ Technician Name: _____
 _____ Technician Phone: _____
 _____ Technician Email: _____

Applicant: _____ Address: _____ _____ Property: _____ _____	Co-Applicant: _____ Address: _____ _____ Grant Amount: _____ Agreement Date: _____
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1. **PARTIES TO THIS AGREEMENT:** This Grant Agreement is between the above-named Applicant(s) (“Grantee”) and Community Action Agency (CAA).
2. **FUNDS:** CAA will provide the Grant Amount referenced herein to the Grantee from the Home Accessibility and Repair Program funded by the Maine State Housing Authority (Grant Funds), effective on the above-referenced Agreement Date, as follows:

Grant Funds	
Home Repair	\$
Elderly Home Repair	
Emergency Home Repair	\$
Emergency Home Emergency	\$
Accessibility Grant	\$
Weatherization Supplemental	\$
TOTAL	\$

3. **USE OF FUNDS:** The Grant Funds will be used to pay for the work described in the *Construction Contract* executed by the Grantee and a Contractor and approved by CAA. Any change to the work outlined in the *Construction Contract* requires a written *Change Order* approved by the Contractor, the Grantee, and CAA. Grantee acknowledges that the Grant Funds are to be used for necessary health and safety repairs including accessibility repairs and that these funds cannot be used for cosmetic or non-health and safety related repair.
4. **DISBURSEMENTS:** CAA will hold the Grant Funds in an escrow on behalf of Grantee and make payments to the contractor in accordance with the *Construction Escrow Agreement*.
5. **COOPERATION:** Grantee agrees to allow contractor and CAA reasonable access to the home to perform the work.

APPLICANT/OWNER (GRANTEE):

CAA:

Applicant/Owner Signature

Signature of Co-Applicant

Date

CAA Representative Signature

CAA Representative Name (*printed*)

Date