

HOME ACCESSIBILITY AND REPAIR PROGRAM (HARP)  
**CERTIFICATE OF FINAL INSPECTION**

**Agency (CAA):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Technician Name: \_\_\_\_\_  
Technician Phone: \_\_\_\_\_  
Technician Email: \_\_\_\_\_

<b>Applicant:</b> _____	<b>Co-Applicant:</b> _____
<b>Property:</b> _____ _____	<b>Contractor:</b> _____ <b>Contract Date:</b> _____

I, the undersigned, hereby certify that the Contractor has satisfactorily completed the work, including all change orders, 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.
3. The Applicant(s)/Owner(s) acknowledge that he/she received a Client Satisfaction Survey card which provides an opportunity to provide MaineHousing with information about his/her experience with the Home Accessibility and Repair Program Assistance Program.

Furthermore, by checking the box below, the CAA Technician certifies that the home meets applicable rehabilitation standards.

I certify that the house meets applicable rehabilitation standards.

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date