

HOME ACCESSIBILITY AND REPAIR PROGRAM (HARP)

WAIVER REQUEST

Agency (CAA): _____	CAA Technician Name: _____
CAA Address: _____ (Street, City, State, Zip)	CAA Technician Phone: _____
Applicant Name: _____	CAA Technician Email: _____
Property: _____ (Street, City, State, Zip)	Co-Applicant Name: _____
	Contractor: _____

Program Grant	Additional Funding Requested
<i>EMERGENCY HOME REPAIR</i>	<i>\$2,000.00</i>
Policy Deviating from: <i>HARP Guide, Section A2.C.1: Emergency funds up to \$15,000 for Emergency Home Repairs.</i> Reason/Explanation: <i>The location of the leach field requires the build of a temporary path to allow equipment access.</i>	

EXAMPLE

Program Grant	Additional Funding Requested
	\$
Policy Deviating from: Reason/Explanation:	

Program Grant	Additional Funding Requested
	\$
Policy Deviating from: Reason/Explanation:	

ADDITIONAL FUNDING REQUESTED: _____ **PROJECT TOTAL** _____

CAA Representative Signature _____ Date _____

COMPLETED BY MAINEHOUSING

APPROVED

DENIED

MaineHousing Representative Signature _____ Date _____ MaineHousing Representative Signature _____ Date _____

MaineHousing Notes: