

Maine State Housing Authority (MaineHousing)  
LEAD HAZARD REDUCTION DEMONSTRATION GRANT PROGRAM

**MAINEHOUSING INVOICE**

Applicant (Owner):	CAA:
Property Address:	Number of Units:
	Invoice Date:

<b>1st PHASE</b>	
Lead Inspection and Risk Assessment (\$600)	\$
Lead Design (\$500)	\$
Abatement amount and Merchant Fee	\$
Approved change order	\$
Healthy Home intervention	\$
Dust wipes for units occupied by children under 6	\$
Water test for units occupied by children under 6	\$
Soil test for units occupied by children under 6	\$

<b>INTERIM PHASE</b>	
Approved change order	\$

<b>FINAL PHASE</b>	
Relocation, must include copies of invoices & receipts*	\$
Travel reimbursement for projects over 50 miles from office (must include amount of mileage and how many trips)	\$
Origination Fee (s) up to \$1,300 per unit (standard fee)	\$
Final Dust wipes _____ swipes @ _____	\$
Miles _____ # of site visits _____	\$

<b>TOTAL PROJECT AMOUNT</b>	<b>\$</b>
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\*Must include copies of invoices, receipts, mileage to receive any reimbursement for Relocation & Travel