

LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead)
MAINE LEAD PAINT HAZARD ABATEMENT PROGRAM (State Lead)

HEALTHY HOMES ASSESSMENT AND INTERVENTION COMPLIANCE AGREEMENT

Project Funding: ☐ Federal Lead ☐ Healthy Homes Healthy Homes Production **Project Type:** ☐ Single-Family Rental ☐ Multi-Family

Agency (CAA): _____ CAA Rep Name: _____
_____ CAA Rep Title: _____
_____ CAA Rep Phone: _____
_____ CAA Rep Email: _____

Applicant: _____ **Co-Applicant:** _____

Property: _____ **Contractor:** _____

Healthy Homes Intervention Amount: \$ _____

Contract Date: _____ **HHI Radon Amount:** \$ _____

Healthy Homes Production Amount: \$ _____

HHP Radon Amount: \$ _____

I have been informed of the Healthy Homes Assessment and Intervention Program.

☐ I CHOOSE NOT TO PARTICIPATE.

Signature of Applicant Date Signature of Co-Applicant Date

☐ I CHOOSE TO PARTICIPATE.

By choosing to participate in the Healthy Homes Program(s), I agree to the following:

1. The CAA will conduct a Healthy Homes Assessment.
2. I understand that this work will be bid upon and completed by licensed contractors, in conjunction with the lead paint abatement work that will be performed on my property. A list of certified contractors will be provided to me from the CAA.
3. I further understand that the Healthy Homes Intervention and Healthy Homes Production work will be paid for under the supplemental Healthy Homes grant and the Healthy Homes Production grant respectively, separate from the Lead Hazard Reduction Grant Program.
4. I agree it is my responsibility to remove any and all items in the basement, outdoor area, or any other location that may need to be cleared in order to accommodate for the Healthy Homes work.

Signature of Applicant Date Signature of Co-Applicant Date