

UNIT # \_\_\_\_\_

AMI \_\_\_\_\_

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

**TENANT APPLICATION**

**Community Action Agency (CAA):**

**Questions should be directed to:**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_

CAA Contact Name: \_\_\_\_\_  
CAA Contact Title: \_\_\_\_\_  
CAA Rep Phone: \_\_\_\_\_  
CAA Rep Email: \_\_\_\_\_

**INSTRUCTIONS:** Return completed and signed Application and Applicant Information Form to the above-named CAA.

Date \_\_\_\_\_

Project Type  Single-Family Rental  Multi-Family

**I. PROPERTY INFORMATION**

Address: \_\_\_\_\_ Apartment # \_\_\_\_\_  
\_\_\_\_\_ #Bedrooms: \_\_\_\_\_  
\_\_\_\_\_ Rent Amount: \_\_\_\_\_

**II. HOUSEHOLD INFORMATION**

Tenant Name: \_\_\_\_\_ Co-Tenant Name: \_\_\_\_\_  
First MI Last First MI Last  
Date of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Telephone: \_\_\_\_\_

Total number in house (including you) \_\_\_\_\_  No dependent children under six years of age reside in the home.

Name(s) of dependent children	Birthdate	Ages	Blood Lead Levels VEBL ug/dl

Does your home serve as a child care location? Meaning, does a child other than your dependent, under six years of age spend at least three hours per day, on two separate days per week (at least 60 hours or more per year) in the home?  Yes  No

If yes, have any of the children who received services been determined to have lead poisoning?  Yes  No

**III. HOUSEHOLD INCOME AND ASSETS**

Occupants must provide the employment information requested below to be considered for enrollment in the Program.

**Tenant Employment:**

Self-Employed:  Yes  No *If yes, provide 2 years tax returns, including all Schedules.*  
Employer Name \_\_\_\_\_ Employer Telephone \_\_\_\_\_  
Employer Address \_\_\_\_\_ Position \_\_\_\_\_  
\_\_\_\_\_ No. of Years \_\_\_\_\_

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**Co-Tenant Employment:**

Self-Employed:  Yes  No *If yes, provide 2 years tax returns, including all Schedules.*

Employer Name \_\_\_\_\_ Employer Telephone \_\_\_\_\_

Employer Address \_\_\_\_\_ Position \_\_\_\_\_

\_\_\_\_\_ No. of Years \_\_\_\_\_

**Head of Household Employment:**

Self-Employed:  Yes  No *If yes, provide 2 years tax returns, including all Schedules.*

Employer Name \_\_\_\_\_ Employer Telephone \_\_\_\_\_

Employer Address \_\_\_\_\_ Position \_\_\_\_\_

\_\_\_\_\_ No. of Years \_\_\_\_\_

*Occupants must provide gross income information and verification to be considered for enrollment in the Program.*

GROSS AMOUNT	A TENANT	B CO-TENANT	C) Head of Household
<b>a.</b> Wages (gross monthly) from Employment	_____	_____	_____
<b>b.</b> Additional Monthly Income From:			
1. Overtime	_____	_____	_____
2. Part-Time Employment	_____	_____	_____
3. Pensions	_____	_____	_____
4. Veteran's Administration Compensation	_____	_____	_____
5. Net Rental Income	_____	_____	_____
6. Self Employment*	_____	_____	_____
7. Child Support	_____	_____	_____
8. Public Assistance (TANF/WIC/GA)	_____	_____	_____
9. Social Security Benefits	_____	_____	_____
10. Unemployment Compensation	_____	_____	_____
<b>c.</b> Other**	_____	_____	_____
<b>d.</b> Gross Monthly Income (Total A, B & C)	_____	_____	_____
<b>e.</b> Total (Line D Multiplied by 12)	_____	_____	_____
<b>f.</b> Gross Household Income (Total e(A)+e(B)+e(C):			_____

\*If self-employer, please provide most recent 2 years of completed tax returns including Schedule C.

\*\* Includes bonuses, dividends, interest, royalties, alimony, sick pay, disability, retirement, income from trusts, income from business activities or investments.

**IV. HOUSEHOLD INCOME AND ASSETS**

I certify that ALL the information I have provided on this form is **TRUE** and **CORRECT** and I acknowledge the CAAs right to verify. I further certify that I have received a copy of and agree to the responsibilities and information contained in the *Tenant Information*.

I/We, acknowledge that I/we have received a copy of the United States Environmental Protection Agency pamphlet entitled *Protect Your Family From Lead in Your Home* in connection with our apartment unit.

**Signed by all Tenants of the property**

Signature of Tenant (Occupant) \_\_\_\_\_ Date \_\_\_\_\_

Signature of Co-Tenant (Co-Occupant) \_\_\_\_\_ Date \_\_\_\_\_

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### Applicant Demographic Profile

The following information is required by the Federal Government for certain types of loans related to a dwelling or order to monitor the lender's compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish the information, under federal regulations the lender is required to note race or national origin and sex on the basis of visual observation or surname. If you do not wish to furnish the information, please check below.

**I do not wish to furnish this information**

Yes  No

**Head of Household** (check all that apply)

**Sex of Head of Household**

Male

Female

# of Household Members \_\_\_\_\_

- Single
- Married
- Elderly
- Single Parent with Children
- Two Parents with Children
- Other (specify) \_\_\_\_\_

**Race:**

White

Black/African American

American Indian/Alaska Native

Asian

Native Hawaiian/Other

Pacific Islander

American Indian/Alaskan Native & White

Asian & White

Black/African American & White

Other Multi-Racial

**Ethnicity:**

Hispanic or Latino

Not Hispanic or Latino:

Physically Disabled Head of Household  Yes  No

Displaced Homemaker\*  Yes  No

\*A displaced homemaker means an adult individual who: has not worked full-time, full-years in the labor force for a number of years but has, during such years, worked primarily without pay to care for the home and family and is employed or under employed and is experiencing difficulty in obtaining or upgrading employment.

### Office Use Only

The Gross Income as calculated pursuant to this Tenant Application has been verified by the CAA to be: \$ \_\_\_\_\_

Maximum Eligible Income for this Tenant/ is: \$ \_\_\_\_\_ Percentage of AMI: \_\_\_\_\_

\_\_\_\_\_  
CAA Representative Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
CAA Representative Name

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

This *Tenant Information* describes program requirements and provides a list of things that you need to know, and need to do before making a commitment for a Lead Hazard Reduction Grant Program (Federal Lead) and/or Maine Lead Paint Hazard Abatement Program Grant (State Lead) (collectively the "Lead Programs") from MaineHousing. Tenants should retain this *Tenant Information* with their records.

**1. HOW THE PROGRAM WORKS**

MaineHousing's Lead Programs are administered by Community Action Agencies (CAA). The CAA will take your application, perform all necessary eligibility verifications, and inspect the work as it is being performed. After you have signed all necessary documents and if all guidelines are met, MaineHousing will fund a Lead Program grant with funds being held on your behalf.

MaineHousing uses funds from the U.S. Department of Housing & Urban Development, Real Estate Transfer Tax and other state and federal funds to provide funding for the Lead Program.

**2. TEMPORARY RELOCATION**

- a. Property owners (Landlord) must advise tenants living in units that are enrolled into the Lead Program that they will have to be relocated during the work. Property Owners (Landlords) are strongly encouraged to seek vacant units for the temporary placement of families during the work. Tenants may be eligible for grants of up to \$1,250 to help with temporary relocation costs not to exceed ten days. It is the Landlord's responsibility to have the rental units vacant and ready for contractor work prior to commencement of work.
- b. Tenants may have to move furniture and belongings out of work areas so that the contractor can perform the work. Homeowners and tenants must find alternative housing for pets.

**3. OTHER REQUIREMENTS**

- a. During the work, the contractor will need to use water, electricity and other utilities. **The cost for the use of these utilities will be at the expense of the owner.**
- b. Staff from the CAA and MaineHousing will conduct site visits during the construction phase.

**4. RETURNING HOME**

Tenants cannot return home until all of the interior work is completed and the dust wipe clearance test passes. There may be additional work that needs to be completed on the exterior of the home. This can be done safely while tenants live in the home.

**5. ACKNOWLEDGEMENT OF LIMITED FUNDS**

Funds being provided under the Lead Program may not be sufficient to address all lead hazards in or around your apartment. The Owner(s) will be responsible for providing any additional funds that may be necessary to address all such hazards. MaineHousing reserves the right to deny any project if completion of project cannot be met under Lead Program funding guidelines. MaineHousing will review each project on a case-by-case basis.

**6. RESOLUTION OF DISPUTES**

MaineHousing uses a standard procedure for resolving disputes among the owner, the contractor, and the CAA concerning the rehabilitation of a home. The CAA is initially responsible for resolving disputes. If a dispute arises concerning the provisions of the signed contract or the performance by the parties, contact your CAA immediately and describe your complaint. If your CAA is unable to informally resolve your dispute, your CAA will assist you through the following process.

- a. ***Notice of Dispute.*** Within five business days of becoming aware of a dispute that is not readily resolved, the CAA will send MaineHousing a notice of the dispute with a copy of any written correspondence from the complainant. The CAA will also send a copy of the notice of dispute to the complainant. If MaineHousing learns of the dispute first, MaineHousing shall, within three working days send the CAA a notice of dispute along with any correspondence from the complainant. For the most efficient process, contact your CAA first, not MaineHousing.
- b. ***Informal Conference.*** The CAA will set up an informal conference to be held within fifteen days from when the CAA becomes aware of the dispute. The CAA will notify all parties of the date, time and place of the informal conference giving reasonable consideration to the schedules of all parties and the severity of the dispute. If the informal conference produces a resolution to the dispute, the CAA will prepare a document signed by all parties involved in the dispute that plainly states the agreed upon resolution.
- c. ***Binding Arbitration.*** The lead hazard construction contract and/or the general construction contract between the contractor and you will contain a binding arbitration clause. If the informal conference does not produce a resolution, the CAA will issue a document stating that no resolution was reached and that the parties will participate in a binding arbitration proceeding to be held as soon as possible after the informal conference. Unless the CAA, owner, and contractor otherwise agree, the arbitration shall be conducted in accordance with the construction industry arbitration rules of the American Arbitration Association. The decision of the arbitrator will be final.

**IF YOU DO NOT UNDERSTAND ALL OF THE INFORMATION CONTAINED IN THIS DOCUMENT,  
PLEASE CONTACT YOUR COMMUNITY ACTION AGENCY.**