

HOME REPAIR NETWORK

- Program Rule: to help low income households with health and safety repairs. Repair or replace siding, roofing, windows, septic systems, water wells. Work must be of a necessary nature, not improvements that are on a wish list.
- Applicants must OWN the home and it must be where they reside. Second or third party members listed on the deed that are not members of the household will prohibit the applicant from participating in the program.
- Single family dwellings only. No duplexes, apartments, or condos are allowed. Mobile homes that are owned by the applicant are eligible. Proof of ownership required consists of age, make, serial number, UCC or Bill of Sale will be requested.
- Applicants must have lived in the dwelling for more than one year.
- No liens against the property are allowed. This includes tax, sewer, or any other type of collection including mechanics liens. Properties that have a mortgage must be current and up to date on mortgage payments.
- Properties that have already received program funds from the Home Repair Network or Fix-Me programs are not eligible to receive benefits.
- If you have \$5k or more in available liquid assets accessible to you (Ex: CD's, savings, checking) then you are NOT eligible unless the applicant is 62 years old or older. Applicants 62 years old or older are allowed to have liquid assets up to a maximum of \$50k.
- Applicants will be required to provide at time of actual application the following documents: deed, most recent tax bill, proof of assets (checking & savings statement), income documentation (pay stubs and or income tax documents).
- Income guidelines for Waldo County are listed below.

Household Size	1	2	3	4	5	6	7	8
Annual Income	\$40,400	\$46,200	\$51,950	\$57,700	\$62,350	\$66,950	\$71,550	\$76,200

*** Funding and types of funding availability can change at any time. This PRELIMINARY application DOES NOT GUARANTEE ASSISTANCE.

Return screening worksheets to:

J. Amann

WCAP Home Repair

PO Box 130

Belfast, ME 04915

Monthly Household Income

Total monthly household income includes combined income of ALL household members, excluding dependents under age 18 or attending school on a full time basis

Fill in name of Household member				
Wages/Salary (Enter gross amount)	\$	\$	\$	\$
Overtime/Commissions	\$	\$	\$	\$
VA Benefits	\$	\$	\$	\$
Pension	\$	\$	\$	\$
Annuity	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
Disability Benefits	\$	\$	\$	\$
TANF/General Assistance/Other	\$	\$	\$	\$
Unemployment Benefit	\$	\$	\$	\$
Child Support/Alimony	\$	\$	\$	\$
Other(specify)	\$	\$	\$	\$

Assets

List all cash, checking, savings, CD & money Market Accounts

Name of Financial Institution	Type of Account	Account Balance
		\$
		\$
		\$
		\$
		\$

List all Real Estate (including any property jointly owned)

Address of Property	Assessed Value	Mortgage Amount
	\$	\$
	\$	\$
	\$	\$

Please describe the repairs and/or modifications you are requesting in detail:

Water Source: Private Public Do you have an arsenic abatement system? Yes No

Has your water been tested for arsenic within the past 12 months? Yes No

If Yes, date of test? _____ Were the arsenic levels greater than 10 ug/L? Yes No

Is your septic system malfunctioning (backing up into home or yard)? Yes No

Does your water source provide adequate and safe water? Yes No