

**APPLICATION FOR REPAIRS TO NUNATSIAVUT GOVERNMENT**

Date of Application: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Applicant's Age: \_\_\_\_\_

Applicant's spouse's name: \_\_\_\_\_

Home community: \_\_\_\_\_

Street address: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Number of bedrooms in the house: \_\_\_\_\_

Age of the House: \_\_\_\_\_

Others staying in the home:

1. (Name) \_\_\_\_\_ (Age) \_\_\_\_\_

(Relation) \_\_\_\_\_ short term resident / permanent (circle one)

2. (Name) \_\_\_\_\_ (Age) \_\_\_\_\_

(Relation) \_\_\_\_\_ short term resident / permanent (circle one)

3. (Name) \_\_\_\_\_ (Age) \_\_\_\_\_

(Relation) \_\_\_\_\_ short term resident / permanent (circle one)

4. (Name) \_\_\_\_\_ (Age) \_\_\_\_\_

(Relation) \_\_\_\_\_ short term resident / permanent (circle one)

5. (Name) \_\_\_\_\_ (Age) \_\_\_\_\_

(Relation) \_\_\_\_\_ short term resident / permanent (circle one)

6. (Name) \_\_\_\_\_ (Age) \_\_\_\_\_

(Relation) \_\_\_\_\_ short term resident / permanent (circle one)

7. (Name) \_\_\_\_\_ (Age) \_\_\_\_\_

(Relation) \_\_\_\_\_ short term resident / permanent (circle one)

8. (Name) \_\_\_\_\_ (Age) \_\_\_\_\_

(Relation) \_\_\_\_\_ short term resident / permanent (circle one)

9. (Name) \_\_\_\_\_ (Age) \_\_\_\_\_



Will you be receiving a new home or repair assistance from TRHA or NLHC this year?  
Yes / No (circle one)

Have you received housing repair assistance/funding in the past? Yes / No (circle one)

If Yes, what year? \_\_\_\_\_

If Yes, what repairs did you receive assistance for?

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Are you willing to participate in a pilot energy efficiency project to make your attic more energy efficient and conserve heat for your house? This would involve increases in attic insulation levels, the use of different insulation materials and installation techniques, and improvements to the air tightness of the house. It would also involve testing to confirm the air tightness and energy efficiency improvements in each house.

Yes / No (circle one)

To take part in this program, you must be willing to have an inspection team visit your house to determine the specific repairs that are needed. Are you willing to have an inspection team visit your house?

Yes / No (circle one)

To the best of your belief, is all of the information in this application true?:

Yes / No (circle one)

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\*\*Applications must be accompanied by proof of annual income\*\*\*\***

**\*\*\*\*Please note that due to limited funds, not all applicants will be able to have repair work completed on their house through this program. We apologize in advance for this reality\*\*\*\***