

2017 APPLICATION FOR HOUSING REPAIRS

The 2017 Housing Repair Program is being made available to all Beneficiaries of the Labrador Inuit Land Claims Agreement residing in the Inuit Communities of Nain, Hopedale, Postville, Makkovik and Rigolet.

1. What is the gross annual income of your household (include your income, your spouse's income and the income of others living in the household)? _____
Please note that your application must be accompanied by proof of annual income (as noted on Line 150 of your 2015 Notice of Assessment from Canada Revenue Agency)
2. Do you receive social assistance? (circle one) Yes / No
3. House type (check one): _____ TRHA _____ NLHC _____ Privately owned
4. If private, do you certify that you are the owners of the house and the lot for which you are seeking assistance? (circle one) Yes / No
5. If TRHA, has your home been inspected by TRHA? (circle one) Yes / No
6. If yes, in what year was your home inspected? _____
7. Will you be receiving a new home or repairs from TRHA or NLHC in 2017? (circle one) Yes / No
8. 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 home? (circle one) Yes / No

Applicant name: _____

This image shows a full page of blank white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page, providing a guide for writing. There are no margins, text, or other markings on the paper.

Please list your family members and any other residents that are staying in your home; we ask that you indicate whether each person is a short-term or permanent resident:

Name	Relation	Age	Permanent or short term resident? Please check one	
			Short Term	Permanent

Applicant name: _____

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: _____

To the best of your belief, is all of the information in this application true? (circle one) Yes / No

Applicants signature: _____ Date: _____

Please note that due to limited funds, not all applicants will be able to have repair work completed on their house through this program.

This application should be returned to your Community Liaison Officer by 4:00pm Tuesday March 21, 2017. Only fully completed applications will be considered and applications must be accompanied by proof of annual income.

