

Emergency Minor Home Repair Assistance Program For Persons at Risk of Being Homeless Fact Sheet and Application

Emergency Minor Home Repair Assistance Program is open to low-income homeowners who require minor home repairs that will allow for continued safe occupancy of their home. This grant is available for eligible homeowners who are at risk of being homeless.

The household income must not exceed \$60,000 and the Municipal Property Assessment Corporation Tax Assessment (MPAC) value of the home must be at or below \$175,000. Homeowners who have previously received Emergency Minor Home Repair or Ontario Renovates Program will not be eligible for Emergency Minor Home Repair.

The Emergency Minor Home Repair Assistance Program is provided in the form of a one-time grant up to the amount of \$5,000. Approved projects will be paid directly to the contractor.

Where a trade requires a professional designation, and/or licensing or certification, the homeowner must ensure that quotes are provided only by contractors qualified to complete the work (i.e. Heating, or electrical). Funding will be denied if contractor is not sufficiently certified to complete the work requested.

Participants must plan to remain in their home for at least five years and must be able to confirm they have exhausted all other funding sources available for home repairs.

Incomplete applications will not be considered for program funding. Program funding is limited and is based on first come first serve.

Eligible Emergency Minor Home Repairs

- Repairs to furnace or oil tank not covered under the Homelessness Prevention Program
- Furnace and/or oil tank replacements on case by case basis
- Water and sewer pumps
- Electrical repairs if ordered by the Electrical Safety Authority
- Modifications to support home safety and health such as bath rails, tub to shower conversion, wheelchair ramp
- Roof repairs
- Chimney repairs and installation
- Health and safety issues that must be completed in order for the resident to remain safely in their permanent accommodation
- Labour
- Applicable taxes
- Building permits

- Consideration will be given to items requiring emergency repair not covered by the Housing Prevention Program

The following are not eligible for the Emergency Minor Home Repair Assistance Program

- Previous recipients of Emergency Minor Home Repair or Ontario Renovates
- Anything over \$5,000 even if homeowner pays difference
- Any repairs or modifications carried out on property prior to approval.
- Full roof replacement
- Windows
- Doors
- Betterment to the building envelope
- Preventative maintenance
- Foundation repairs

You will need to supply the following information to support your application

- Gross income for all members of your household/homeowners
- Proof of ownership insurance coverage for your home
- Proof that municipal taxes, municipal water/sewer, utilities and mortgage are paid in full and up to date
- Municipal Property Assessment Corporation Property Tax Assessment (MPAC)
- Current notice of income tax assessment
- Most recent bank statement (last 30 days)
- Two quotes for work to be completed
- Photo identification for everyone on application
- Photos of repair needed/red tag/insurance order or ESA order

Upon Completion of work the following documents will be required before payment will be issued

- Job completion Form (For furnace, or electrical you must use a licensed, insured contractor)
- Invoice from Contractor including HST # if HST is charged
- Photos of completed work

For more information on program criteria or to apply for Emergency Minor Home Repair Assistance Program funding, please contact Jackie Agnew, Program Coordinator:

Renfrew County Housing Corporation

450 O'Brien Road, Suite 105

Renfrew, Ontario

K7V 3Z2

613-432-3679

1-855-432-6450



RENFREW COUNTY HOUSING CORPORATION

Emergency Minor Home Repair Assistance Program

APPLICATION FORM

APPLICANT			
First Name	Last Name	Date of birth (D/M/Y)	Gender
Address		Municipality	
Postal Code	Telephone		Marital Status
CO-APPLICANT			
First Name	Last Name	Date of Birth (D/M/Y)	Gender
CO-APPLICANT			
First Name	Last Name	Date of Birth D/M/Y)	Relationship to Applicant
HOUSEHOLD/HOMEOWNER INCOME			
Name	Source	Monthly	Annually
Repair Amount Requested:			
Repair Required and Reason for Application:			
<p>Have you or anyone in your household received Emergency Minor Home Repair or Ontario Renovates Funding in the past? YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Verification provided that the applicant's emergency minor home repairs put them at risk of being homeless? YES <input type="checkbox"/> NO <input type="checkbox"/> Type of Document and copy for file YES <input type="checkbox"/> NO <input type="checkbox"/></p>			

Required Documents	Enclosed	Comments
Photo Identification for all applicants	YES <input type="checkbox"/> NO <input type="checkbox"/>	Copy for file
Household income less than \$60,000 (includes everyone listed on title) Verification of income ie. year to date pay stub, benefit statement etc.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Copy for file
Notice of Income Tax Assessment(s)	YES <input type="checkbox"/> NO <input type="checkbox"/>	Copy for file
Most Recent Bank statement (30 days)	YES <input type="checkbox"/> NO <input type="checkbox"/>	Copy for file
Less than \$5,000 in liquid assets? (combined everyone listed on title)	YES <input type="checkbox"/> NO <input type="checkbox"/>	List assets:
House is appraised at or below \$175,000. MPAC Property Tax Assessment	YES <input type="checkbox"/> NO <input type="checkbox"/>	Copy for file
Verification that Municipal Water/Sewer/Property taxes paid in full and up to date	YES <input type="checkbox"/> NO <input type="checkbox"/>	Copy for file
Current utility bills showing utilities are paid and up to date.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Copy for file
Proof of insurance coverage	YES <input type="checkbox"/> NO <input type="checkbox"/>	Copy for file
Verification that mortgage is paid and up to date	YES <input type="checkbox"/> NO <input type="checkbox"/>	Copy for file
Two quotes for work to be completed	YES <input type="checkbox"/> NO <input type="checkbox"/>	Copy for file
Red Tag, Insurance order or ESA order for electrical, or furnace/oil tank repairs	YES <input type="checkbox"/> NO <input type="checkbox"/>	Copy for file
Photos of repair to be completed	YES <input type="checkbox"/> NO <input type="checkbox"/>	Copy for file
Doctors letter for accessibility upgrades	YES <input type="checkbox"/> NO <input type="checkbox"/>	Copy for file

I, THE UNDERSIGNED, STATE THE INFORMATION PROVIDED IS TRUE. I ACKNOWLEDGE THAT SHOULD ANY INFORMATION PROVIDED BE FOUND NOT TO BE TRUE, I WILL NOT BE ELIGIBLE. I UNDERSTAND THAT PAYMENT OF FUNDS IS NOT GUARANTEED, EVEN IF PRELIMINARY APPROVAL IS GRANTED.

Date

Signature of Applicant

Signature of Co-Applicant(s)

Date

Signature of Program Coordinator

Approved YES NO