

Funding from Other

Sources

RENOVATE LANARK APPLICATION 2024



ONTARIO PRIORITIES HOUSING INITIATIVE						
ELIGIBILITY CRITERIA: Ensure that you meet the following guidelines before proceeding:						
 ☐ Have NOT participated in any previous IAH/OPHI (Renovate/Homeownership) ☐ Income (Household): Less than \$104,000 Gross Income (subject to change) ☐ Home Value (MPAC): Less than \$468,243 (subject to change) ☐ Assets (excluding home): Less than \$200,000 						
HOMEOWNER INFOR	HOMEOWNER INFORMATION					
Homeowner Name(s)						
Street Address			<u></u>			
Town & Province		ı	Pos	tal Code		
Phone Number(s)				T		
Email		Signature- To Use Em		X		
Alternate Contact Name & Phone #						
Total Annual Household Income	\$					
Household Type	☐ Single	☐ Fai	mily (1+ M	lembers)		
	☐ Homeless ☐ Indi	genous Pec	ples 🔲	Mental He	ealth/Addiction	
Target Group	☐ Disabilities ☐ Rac	cialized Gro	ups \square	Recent Ir	nmigrants	
	☐ Seniors ☐ Surv	vivors Dom	estic Viole	ence/Huma	an Trafficking	
	□ Veterans □ You	ing Adults		Other (eg "Mod	dest Income")	
PROPERTY DESCRIPTION						
	Detached	Townhouse	e/Rowhou	se		
Type of House	☐ Semi-Detached ☐ Apartment/Condo ☐ Other					
	Value of House (MPAC)		Number	of Bedroo	ms in House	
House Details	\$					
	Have you applied for/red	ceived any	If yes, ple	ease provi	ide details:	

other funding for this project?

☐ Yes

 \square No

Age of Home	years				
SCOPE OF WORK -	ONE PRIMARY PROJECT ONLY				
Description of Work a	and Required Materials:				
PROVIDE 1	TWO OR THREE QUOTES FROM QUALIFIED CONTRACTORS				
A	TTACH THE FULL QUOTES TO THIS APPLICATION				
PREFERRED CONTRACTOR					
Contractor Name					
Contractor Address					
Contractor Phone					
Quoted Price	\$				
Will there be apprent	ices on the job? NO YES If YES, # of Apprentices:				
REQUIRED DOCUMENTATION - MUST be attached for application to be assessed					
X Mark all attachmer	nts as included – please submit copies, originals will not be returned:				
Photo Identification	on - all household members				
2022 or 2023 Noti	ce(s) of Assessment - all household members with income				
Mortgage Verifica	tion - attach verification of mortgage information or proof that house is owned				
MPAC Statement	- house value under \$468,243.00 (Amount is under review)				
Property Taxes - a	attach recent tax bill or verification from municipal tax office				
Home Insurance -	attach verification of current policy				
Bank Information	- 90 days bank statement/history for all accounts, up to current date				
Asset Verification	- proof of other assets, such as RRSPs or investment statements				
Two or Three proj	ect quotes (Not Estimates)				

APPLICANT DECLARATION

I / We hereby confirm that I / we are the owners of the house and property located at the following address and that no other person is an owner:

Address

- I / We hereby grant permission to Lanark County Housing Services to make any necessary inquiries to verify my/our income, assets, liabilities, and credit information.
- I / We acknowledge that if my/our funding application is approved, it will not apply to work completed prior to the issuance of a confirmation letter.
- I / We hereby certify that all information contained in this application, including income and assets, is true and complete in every aspect.
- I / We acknowledge that in the event a false declaration is knowingly made, the County of Lanark shall have the right to cancel the approval and recover paid funds.

Applicant Print Name:	Applicant Signature:	Date:
	X	
Co- Applicant Print Name:	Co- Applicant Signature:	Date:
	x	

PLEASE SUBMIT PAPER COPIES OF APPLICATION AND ALL REQUIRED DOCUMENTATION IN PERSON OR BY MAIL TO:

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99 Christie Lake Road, Perth ON K7H 3C6 OR



★ 52 Abbott Street North, Unit 4, Smiths Falls ON K7A 1W3 OR

★ 33 Lansdowne Avenue, Unit 43C, Carleton Place ON – drop box only

ATTENTION: Lanark County Housing Services

Email any inquiries to: critchie@lanarkcounty.ca

Phone: 613-267-4200, Ext 2404 or 2402 or Toll Free: 1-888-952-6275, Ext 2404 or 2402

PLEASE NOTE THAT WE DO NOT ACCEPT EMAILED APPLICATIONS