

HOME ACCESSIBILITY AND REPAIR PROGRAM (HARP)  
**PHASE 1 INVOICE**

Agency (CAA): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Submission Date \_\_\_\_\_  
Prepared by: \_\_\_\_\_

<b>Applicant:</b> _____	<b>Co-Applicant:</b> _____
<b>Property:</b> _____	

**Grant Funding**

Home Repair	\$	_____
Elderly Home Repair	\$	_____
Emergency Home Repair	\$	_____
Emergency Manufactured Home Repair	\$	_____
Accessibility	\$	_____
Supplemental Weatherization	\$	_____
<b>Total Grant</b>		\$ _____

**Expenses**

Water Test (\$50.00 for CCI, WMCA and YCCAC)	\$	_____
Water Test (\$70.00 for ACAP, DCP, KVCAP, PCAP and WCAP)	\$	_____
Walk Away Fee (\$150.00)	\$	_____
Septic Design Fee	\$	_____
<b>Total Expenses</b>		\$ _____

**Administration Fee**

Phase 1 Admin	\$	_____
Phase 1 Admin (Supplemental Wx)	\$	_____
<b>Total Admin Fee</b>		\$ _____

**INITIAL PAYMENT AMOUNT**

\$ _____
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**NOTE:** Invoices automatically calculate Administration Fees based on total Grant Funding amounts and eligible fees.

HOME ACCESSIBILITY AND REPAIR PROGRAM (HARP)  
**CHANGE ORDER INVOICE**

Agency (CAA): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Applicant: _____	Co-Applicant: _____
Property: _____	_____

**INSTRUCTIONS:** *Change Orders* requiring additional funding must be accompanied by this *Change Order Invoice* to be eligible for payment.

**CHANGE ORDER #1**

Submission Date \_\_\_\_\_ Prepared by \_\_\_\_\_

**Additional Grant Funding**

Home Repair	\$ _____
Elderly Home Repair	\$ _____
Emergency Home Repair	\$ _____
Emergency Manufactured Home Repair	\$ _____
Accessibility	\$ _____
Supplemental Weatherization	\$ _____
<b>Total Additional Grant Funding</b>	<b>\$ _____</b>

**Additional Expenses**

	\$ _____
	\$ _____
<b>Total Additional Expenses</b>	<b>\$ _____</b>
<b>Phase 1 Administration Fees</b>	
Home Repair	\$ _____
Supplemental Wx	\$ _____
<b>Total Phase 1 Admin Fees:</b>	<b>\$ _____</b>

**CHANGE ORDER #1 PAYMENT AMOUNT** \$

**CHANGE ORDER #2**

Submission Date \_\_\_\_\_ Prepared by \_\_\_\_\_

**Additional Grant Funding**

Home Repair	\$ _____
Elderly Home Repair	\$ _____
Emergency Repair	\$ _____
Emergency Manufactured Home Repair	\$ _____
Accessibility	\$ _____
Supplemental Weatherization	\$ _____
<b>Total Additional Grant Funding</b>	<b>\$ _____</b>

**Additional Expenses**

	\$ _____
	\$ _____
<b>Total Additional Expenses</b>	<b>\$ _____</b>
<b>Phase 1 Administration Fees</b>	
Home Repair	\$ _____
Supplemental Wx	\$ _____
<b>Total Phase 1 Admin Fees:</b>	<b>\$ _____</b>

**CHANGE ORDER #2 PAYMENT AMOUNT** \$

HOME ACCESSIBILITY AND REPAIR PROGRAM (HARP)  
**PHASE 2 INVOICE**

Agency (CAA): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Submission Date \_\_\_\_\_  
 Prepared by: \_\_\_\_\_

Applicant: _____	Co-Applicant: _____
Property: _____	_____

**INSTRUCTIONS:** Unpaid *Change Orders* must be accompanied by the *Change Order Invoice* to be eligible for payment and submitted prior to or along with the Phase 2 Invoice.

**Grant Funding**

Phase 1 - Grants (Home Repair) <sup>1</sup>	\$ _____
Phase 1 - Grant (Supplemental Wx)	\$ _____
Change Order - Additional Grant (Home Repair) <sup>2</sup>	_____
Change Order - Additional Grant (Supplemental Wx) <sup>2</sup>	\$ _____
<b>Total Grant Funding</b>	<b>\$ _____</b>

**Unpaid Additional Expenses<sup>3</sup>**

	\$ _____
	\$ _____

**Total Additional Expenses** \$ \_\_\_\_\_

**Phase 2 Home Repair Admin Fee** \$ \_\_\_\_\_

**Phase 2 Supplemental Wx Admin Fee** \$ \_\_\_\_\_

**PHASE 2 PAYMENT AMOUNT** \$ \_\_\_\_\_

<sup>1</sup>The initial Grant Funding amount entered on the Phase 1 submission.  
<sup>2</sup>The total of all additional Grant Funding amounts resulting from approved Change Orders.  
<sup>3</sup>Unpaid Additional Expenses means expenses not captured on Phase 1 or Change Order invoices.

**NOTE:** The Phase 2 Invoice automatically calculates Administration Fees based on the total Grant Funding and eligible fees entered on the Phase 1 Invoice and Additional Grant Funding amounts entered on the Change Order Invoices.

**MaineHousing Only**

Payment Adjustment	\$ _____	<b>TOTAL ADJUSTED PAYMENT</b>	\$ _____
Explanation			

HOME ACCESSIBILITY AND REPAIR PROGRAM (HARP)  
**INVOICE SUMMARY**

Applicant/Owner: \_\_\_\_\_

CAA \_\_\_\_\_

Property: \_\_\_\_\_

**PHASE 1**

Submission Date \_\_\_\_\_ Prepared by: \_\_\_\_\_

Payment Date \_\_\_\_\_

Original Grants (Home Repair) \$ \_\_\_\_\_

Phase 1 Admin Fee (Home Repair) \$ \_\_\_\_\_

Original Grant (Wx) \$ \_\_\_\_\_

Phase 1 Admin Fee (Wx) \$ \_\_\_\_\_

Additional Expenses \$ \_\_\_\_\_

**PHASE 1 – TOTAL FUNDED**

\$ \_\_\_\_\_

**CHANGE ORDERS**

**Change Order 1**

Submission Date \_\_\_\_\_

Prepared by \_\_\_\_\_

Payment Date \_\_\_\_\_

**Additional Grants**

**Phase 1 Admin Fees**

Home Repair \$ \_\_\_\_\_

Home Repair \$ \_\_\_\_\_

Supplemental Weatherization \$ \_\_\_\_\_

Supplemental Weatherization \$ \_\_\_\_\_

**Additional Expenses** \$ \_\_\_\_\_

**Change Order 1 – Total**

\$ \_\_\_\_\_

**Change Order 2**

Submission Date \_\_\_\_\_

Prepared by \_\_\_\_\_

Payment Date \_\_\_\_\_

**Additional Grants**

**Phase 1 Admin Fees**

Home Repair \$ \_\_\_\_\_

Home Repair \$ \_\_\_\_\_

Supplemental Weatherization \$ \_\_\_\_\_

Supplemental Weatherization \$ \_\_\_\_\_

**Additional Expenses** \$ \_\_\_\_\_

**Change Order 2 – Total**

\$ \_\_\_\_\_

**CHANGE ORDERS –TOTAL FUNDED**

\$ \_\_\_\_\_

**PHASE 2**

Submission Date \_\_\_\_\_

Prepared by: \_\_\_\_\_

Payment Date \_\_\_\_\_

Unpaid Expenses \$ \_\_\_\_\_

Phase 2 Admin Fee (Home Repair) \$ \_\_\_\_\_

Phase 2 Admin Fee (Wx) \$ \_\_\_\_\_

**PHASE 2 –TOTAL FUNDED**

\$ \_\_\_\_\_

**PROJECT TOTAL FUNDED**

\$ \_\_\_\_\_