

Maine State Housing Authority (MaineHousing)
2019 HOME ACCESSIBILITY and REPAIR PROGRAM (HARP)
CERTIFICATION OF FINAL INSPECTION

APPLICANT (OWNER):

First Name MI Last Name

PROPERTY:

Property Street

Property City Property State Property Zip

CONTRACTOR:

Contractor Name

COMMUNITY ACTION AGENCY (CAA):

CAA Name

CAA Technician:

Technician Name: _____

Technician Telephone: _____

Technician Email: _____

Contract Date: _____

I, the undersigned, hereby certify that the Contractor has satisfactorily completed the work, including all change orders, as outlined in the Construction Contract, and between the Applicant(s)/Owner(s) and the Contractor.

By signing this Certificate of Final Inspection,

1. The CAA Technician and Applicant(s)/Owner(s) certifies that the completed work is satisfactory and is in accordance with the agreed upon project specifications; and
2. The Applicant(s)/Owner(s) certify that he/she received all product warranty information from the Contractor and/or manufacturer.

Furthermore, by checking the box below, I certify that the home meets applicable grant standards.

I certify that the house meets applicable grant standards.

CAA Technician Signature

Date

Applicant/Owner Signature

Date

Co-Applicant/Co-Owner Signature

Date