

**HOME ACCESSIBILITY AND REPAIR PROGRAM (HARP)  
NOTICE OF PRELIMINARY APPROVAL**

**Agency (CAA):** \_\_\_\_\_ Technician Name: \_\_\_\_\_  
 \_\_\_\_\_ Technician Phone: \_\_\_\_\_  
 \_\_\_\_\_ Technician Email: \_\_\_\_\_

<b>Applicant:</b> _____	<b>Co-Applicant:</b> _____
<b>Address:</b> _____	<b>Address:</b> _____
_____	_____
<b>Property:</b> _____	<b>Grant Amount:</b> _____
_____	_____

Your Application for a grant from the Home Accessibility and Repair Program (Program) with the above-referenced CAA has been reviewed and approved for the following:

Program Grants	
Home Repair	\$ _____
Elderly Home Repair	\$ _____
Emergency Home Repair	\$ _____
Emergency Manufactured Home Repair	\$ _____
Accessibility	\$ _____
Supplemental Weatherization	\$ _____

The CAA will provide a total of \$\_\_\_\_\_ to the Applicant(s) from the Program funded by the MaineHousing.

You will need to bring the following documents with you to the Closing:	
1	_____
2	_____
3	_____

Your Closing is scheduled on:	
Date	_____ (mm/dd/yyyy)
Time	_____
Place	_____
	_____

It is important that you bring the above-mentioned items (if applicable) to Closing to avoid any delays. If you have any questions, please contact your CAA Representative prior to your Closing date.

\_\_\_\_\_  
CAA Representative Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
CAA Representative Name

\_\_\_\_\_  
CAA Representative Telephone

\_\_\_\_\_  
CAA Representative Email