

LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead)  
 MAINE LEAD PAINT HAZARD ABATEMENT PROGRAM (State Lead)

**NOTICE OF GRANT PRE-APPROVAL**

**Project Funding:**    State Lead    Federal Lead    Healthy Homes

**Project Type:**    Single-Family    Multi-Family

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

Technician Name: \_\_\_\_\_  
 Technician Phone: \_\_\_\_\_  
 Technician Email: \_\_\_\_\_

<p><b>Applicant (Owner):</b> _____</p> <p><b>Address:</b> _____                  _____</p> <p><b>Property:</b> _____                  _____</p>	<p><b>Co-Applicant:</b> _____</p> <p><b>Address:</b> _____                  _____</p> <p><b>Grant Amount:</b>   \$ _____</p>
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Your application for one or more of the following Lead Program Grants with the above-named CAA has been reviewed and approved as follows:

<b>LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead)</b>	
Federal Lead Grant	\$
Federal Lead Additional Project Costs ( <i>Owner Assumed Obligation</i> )	\$
<b>MAINE LEAD PAINT HAZARD ABATEMENT PROGRAM (State Lead)</b>	
State Lead Grant	\$
State Lead Owner Match	\$
State Lead Additional Project Costs ( <i>Owner Assumed Obligation</i> )	\$
<b>HEALTHY HOMES INTERVENTION PROGRAM (Healthy Homes)</b>	
Healthy Homes Grant	\$
<b>TOTAL PROJECT FUNDS</b>	
	\$

You will need to bring the following documents with you to the Closing (if applicable):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**Your Closing is scheduled on:**

**Date:** \_\_\_\_\_      **Place:** \_\_\_\_\_  
**Time:** \_\_\_\_\_

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

Signature of CAA Representative	CAA Representative Name
Date	CAA Representative Phone
	CAA Representative Email