



PEI Home Renovation Programs Application



Privacy Statement

Personal information on this form is collected under the *Freedom of Information and Protection of Privacy Act*, section 31 (c) and is needed to approve your application. If you have any questions about the collection of your personal information call the department of Family and Human Services at 1-855-374-7366.

Property ID number (identified on your property tax bill): _____

Property Address: _____

Civic Address: _____

City: _____ **Postal Code:** _____

Telephone # - daytime: _____ **Telephone # - other:** _____

Mailing Address: (if different from above) _____

Address: _____

City: _____ **Postal Code:** _____

List all home owners that live in the home & any other primary occupants over 18, excluding dependents and students.

First Name	Middle Name	Last Name	Date of Birth	Provincial Health Number	Social Insurance Number
PRIMARY APPLICANT	PRIMARY APPLICANT	PRIMARY APPLICANT	YYYY/MMM/DD	PRIMARY APPLICANT	PRIMARY APPLICANT
			YYYY/MMM/DD		
			YYYY/MMM/DD		
			YYYY/MMM/DD		
			YYYY/MMM/DD		

Marital status of Primary Applicant:

- Married / Common-Law**
 Single
 Widowed
 Divorced / Separated

Total number of occupants in the home: _____

I/We have dependents living in the home: **Yes** **No**

Clearly describe renovations to be considered for funding and which program you are applying to:

Renovation Program - Identify renovations required within the home:

Renovation Program for Persons with Disabilities - Identify the individual and the renovations required to accommodate the individual's disability within the home:

Name: _____

Description of Disability: _____

Description of Renovation: _____

I/We consent to the Department of Family and Human Services sharing my application information with the Department of Transportation, Infrastructure and Energy for the purposes of efficiencyPEI's Home Comfort Program.

PEI Home Renovation Programs (PEIHRP) Declaration:

I/We declare that:

1. The property that is the subject of this application is registered with the Taxation and Property Records Division of the PEI Department of Finance in my/our name(s).
2. My/Our Non-Commercial, Residential property is valued at \$200,000 or less (as per Taxation and Property Records market value assessment).
3. The property that is the subject of this application is my/our principal residence and it is not a seasonal property. I/We reside in this property at least six months plus one day per calendar year.
4. I am a/We are Canadian citizen(s), or landed immigrant(s), and permanent resident(s) of PEI.
5. Our combined annual income is \$50,000 or less according to line 236 of my/our most recent Canada Revenue Agency Notice of Assessment(s). I/We understand that the definition of combined annual income includes the net income for all home owners that reside in the property that is the subject of this application, and any other primary occupants over 18 years old, excluding dependents and students.

I/We declare and agree that:

6. All renovation work must be approved in writing by the PEIHRP prior to any work commencing. Any renovations started or completed prior to the issuance of an Approval Letter by the PEIHRP will not be eligible for the grant.
7. The eligibility of specific renovation costs shall be determined by the PEIHRP. Only renovations included in the application will be considered for the grant.
8. I am/We are required to continue to own the property that is the subject of this application for three years after receiving a grant from the PEIHRP. Should ownership of this property change within three years of receiving the PEIHRP grant, I/we agree to immediately notify PEIHRP of the ownership change and understand that a portion of the grant shall be repaid to PEIHRP.
9. PEIHRP may complete a home inspection prior to grant approval and after renovation completion to ensure all program criteria have been met.
10. I/We may re-apply to the PEIHRP more than once until my/our maximum grant is received.
11. I/We have 90 days from the date of the Approval Letter to complete the renovation and submit final invoice(s) for payment. Extensions to this deadline will only be considered in exceptional circumstances.
12. I am/we are not eligible for a PEIHRP grant within 15 years of receipt of my/our last maximum PEIHRP grant.
13. I am/We are completely responsible for the quality and adequacy of any renovations approved for a PEIHRP grant, which includes responsibility for ensuring compliance with any and all industry standards, applicable regulatory requirements, including any building code, electrical code, safety code, municipal bylaw or provincial or federal regulation or statute, and I/we agree that in no event shall the Government of Prince Edward Island be liable

to anyone in whole or in part for the renovations or any part of the renovations, including any loss or claim by anyone that may result from the renovations.

14. Funding is provided as a PEIHRP grant for approved costs of renovations if the program criteria has been met. In the event that any program criteria of the PEIHRP are not met, or that a false declaration is knowingly made in this application, the PEIHRP shall have the right to cancel the approval and recover any paid funds and additional costs.

I/We confirm that I/we have read and understand all program criteria included in the PEI Home Renovation Programs Policy obtained from the PEIHRP or on-line:
www.princeedwardisland.ca

I/We hereby declare that the information provided in this application is complete and accurate. I/We confirm that I am/we are in agreement with the terms and conditions set out in this application, and the program criteria, and that on approval of this application by PEIHRP. I/we understand and agree that this is a legally binding agreement with PEIHRP and the Government of PEI.

I am/We are aware that PEIHRP may carry out the necessary inquiries for the purpose of confirming the information provided in this application

All applicants are required to sign below.

Print Name	X Signature	Date
Print Name	X Signature	Date
Print Name	X Signature	Date
Print Name	X Signature	Date
Print Name	X Signature	Date

Canada Revenue Agency Statement of Consent

I/we hereby consent to the release, by the Canada Revenue Agency to an official of the Department of Family and Human Services, of Line #236 (my net income) from my/our income tax return(s).

This consent is provided on condition that this information will be used solely for the purpose of determining and verifying my/our eligibility for the PEI Home Renovation Programs under the *Social Assistance Act and Regulations*, and that it will not be disclosed to any other person or organization without my/our written approval.

This authorization is valid for the current and prior taxation year.

I/we understand that if I/we wish to withdraw this consent, I/we may do so at any time by writing to Director, Housing Services, Department of Family and Human Services, 11 Kent Street, P.O. Box 2000, Charlottetown, PE C1A 7N8.

_____	_____	_____
Date	Applicant (Print)	Applicant (Signature)

_____	_____	_____
Date	Co-Applicant (Print)	Co-Applicant (Signature)

_____	_____	_____
Date	Co-Applicant (Print)	Co-Applicant (Signature)

_____	_____	_____
Date	Co-Applicant (Print)	Co-Applicant (Signature)

_____	_____	_____
Date	Co-Applicant (Print)	Co-Applicant (Signature)