

Lanark County offers financial assistance to allow homeowners to pay for modifications to make their property more accessible to persons with disabilities. These modifications are intended to eliminate physical barriers, imminent safety risks and improve the ability to meet the demands of daily living within the home.

WHO CAN APPLY?

- Homeowners with household incomes below **\$70,000.00**;
- House must be primary residence, valued at less than **\$305,372.00**
- Mortgage, Property Tax & Insurance coverage must be up to date.
- Maximum Value of Assets **\$200,000.00** subject to Housing Services Act – Regulation 367/11 Section 35

ELIGIBLE MODIFICATIONS

The property must not have major deficiencies to the structure and the building systems. Modifications must be related to housing and reasonably related to the occupant’s disability. Examples of eligible modifications include, but are not limited to: ramps, handrails, chair lifts, bath lifts, height adjustments to countertops and cues for doorbells/fire alarms.

DOCUMENTS TO INCLUDE WITH APPLICATION

The below documents must be included with the application:

- 2018 or 2019 Notices of Assessment for all adults in the home **(If required call CRA at 1-800-959-8281)**
- Photo ID for all adults in the home **(Driver’s Licence, Passport)**
- Verification mortgage payments are up to date **(Proof from Financial Institution)**
- Verification property taxes are up to date **(Proof of Municipal Tax Bill)**
- Verification home insurance payments are up to date **(Proof from Insurance Provider)**
- Verification of Asset Value – 3 months (90 days) of bank statements **(Proof from Financial Institution or Insurance Company)**
- MPAC Assessment **(If required call 1-866-296-6722)**
- 3 quotes from qualified contractors
- Documentation of disability and why the need for modifications from Health Care Professional

FINANCIAL ASSISTANCE

Funding for accessibility repairs made to a home and/or a unit, up to maximum of \$5,000 is in the form of a onetime grant and does not require repayment. Annual funding is limited. Applications are being accepted now until all funds are allocated.

FOR MORE INFORMATION CONTACT:

Lanark County Housing Services
 Phone: (613) 267-4200, Ext 2404
 Toll free: 1-888-952-6275
 E-mail: housingapplications@lanarkcounty.ca



APPLICATIONS ARE NOW BEING ACCEPTED

HOMEOWNER - Accessibility Modification Application Form

A. HOMEOWNER INFORMATION				
Homeowner(s) Name(s):				
Address:				
PLEASE ATTACH PHOTO I.D. FOR ALL HOUSEHOLD MEMBERS				
Telephone # (Incl. Area Code & Ext.)	Fax # (incl. Area Code)	Email Address		
Annual Household Income	Household Type			
\$	<input type="checkbox"/> Single <input type="checkbox"/> Family # of Members _____			
Household Information				
How many persons live in the unit?				
Are there persons living in the unit who are considered a couple? If yes, how many couples?				
B. PROJECT INFORMATION				
Has this project received previous Government funding? (i.e., IAH/RRAP/AHP/OPHI)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, what work was completed on your home?				
Have you received funding from any other source for the requested project?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please provide details:				
Property Description				
<input type="checkbox"/> Apartment	<input type="checkbox"/> Semi-Detached	<input type="checkbox"/> Detached	<input type="checkbox"/> Townhouse/ Row House	<input type="checkbox"/> Other
Age of House:	Approx Value of House: \$			

REQUIRED DOCUMENTS		
Insurance payments up to date? (***Attach Verification***)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Property taxes up to date? (***Attach Verification***)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
House value under \$305,372.00? (***Attach MPAC Statement***)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Mortgage payments up to date? (***Attach Verification***)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Income tax up to date? (***Attach 2018 or 2019 Notice of Assessment for all adults in the home)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Photo ID (For all adults in home)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Bank Statements (90-days of transactions and any asset statements, eg RRSPs)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
C. DECLARATION OF ASSETS	APPLICANT'S VALUE	CO-APPLICANT'S VALUE
Bank, Trust Company, Credit Union (savings and chequing accounts)		
Stocks, Bonds, Term Deposits Etc.		
RRSP's, Annuities		
Other Assets		
D. ACCESIBILITY INFORMATION		
Describe the disability and special modifications required to the home to enable the household member to continue to live independently.		

E. SCOPE OF WORK

Please provide **3 price quotes** from qualified contractors, including a detailed description of the work to be done and the materials to be supplied. **** Attach all price quotes ****

Quote #1:

Contractor's Name:

Contractor's Phone #:

Contractor's Address:

Description of Work and
Materials Required:

Will there be apprentices on the job? ___No ___ If Yes, # of apprentices _____

QUOTE #2

Contractor's Name:

Contractor's Phone #:

Contractor's Address:

Description of Work and
Materials Required:

Will there be apprentices on the job? ___No ___ If Yes, # of apprentices _____

QUOTE #3

Contractor's Name:

Contractor's Phone #:

Contractor's Address:

Description of Work and
Materials Required:

Will there be apprentices on the job? ___No ___ If Yes, # of apprentices _____

F. APPLICANT DECLARATION

I / we confirm that I / we are the owners of the house and property located at:

Address:

and that no other person is an owner.

- I / we hereby grant permission to Lanark County Social Services to make any necessary inquiries to verify my / our income, assets, liabilities and credit information.
- I / we hereby acknowledge that if my / our funding application is accepted it will not apply to work completed prior to issuance of confirmation letter.
- I / we hereby acknowledge that if my / our funding is accepted I / we cannot claim the repairs for any Provincial tax rebate program.
- I / we hereby certify that all information contained in this application, including income, is true and complete in every respect.
- I / we acknowledge that if a false declaration is knowingly made the County of Lanark shall have the right to cancel the approval and recover paid funds.

Print Name

Signature

Date

Print Name

Signature

Date

Please submit application and all required document to:

Lanark County Social Housing
52 Abbott Street N
Smiths Falls, ON, K7A 1W3

Phone: 613-267-4200 ext 2404

Email: housingapplications@lanarkcounty.ca