

Provider Agencies

CENTRAL MA

RCAP Solutions Financial Services, Inc.
Loretta Chisom
lchisom@rcapsolutions.org
978-630-6725
www.rcapsolutions.org
TTY/TDD: 978-630-6754

METROPOLITAN BOSTON

Metro Housing | Boston
Jennifer Shaw
jennifer.shaw@metrohousingboston.org
617-425-6637
www.metrohousingboston.org
Mass Relay Available: Dial 711
(fax) 617-532-7539

METROWEST MA

South Middlesex Opportunity Council, Inc.
Linda Hochen
lhochen@smoc.org
508-620-2682
www.smoc.org
TTY/TDD: 508-872-4853

NORTHEAST/NORTH SHORE MA

Community Teamwork, Inc.
Alan Trebat
atrebat@commteam.org
978-654-5741
www.commteam.org
Mass Relay Available: Dial 711

SOUTHEASTERN MA/CAPE/ISLANDS

South Middlesex Opportunity Council, Inc.
Amy Allen
aallen@smoc.org
508-202-5919
www.smoc.org
TTY/TDD: 508-872-4853

WESTERN MA

Way Finders
(Agawam, Chicopee, Holyoke, Northampton, Springfield,
W. Springfield and Westfield)
Araceli Rivera
arivera@wayfindersma.org
413-233-1615
www.wayfindersma.org
TTY/TDD: 413-233-1699
Pioneer Valley Planning Commission
(all other Hampden, Hampshire, Franklin and
Berkshire county communities)
Shirley Stephens
ssteephens@pvpc.org
413-781-6045
www.pvpc.org
TTY/TDD: 413-781-7168

HMLP

Home Modification Loan Program

Home Modification Loan Program (HMLP) is a state-funded lending program that provides loans to homeowners and small landlords to fund necessary changes to keep disabled or elderly family members in their own homes and communities.

This is not a home repair program and is not a resource to repair roofs, windows, or heating and septic systems. Work must be completed by contractors who are licensed and insured.

Loan Information

- \$1,000 to \$50,000 loans to property owners
- 0% interest
- No monthly payments or interest
- Repayment is required when property is sold or transferred
- \$1,000 to \$30,000 loans to owners of manufactured or mobile homes
- Landlords with fewer than 10 units may be eligible for a 3% loan for a tenant

Possible Modifications:

- Bathroom & kitchen modifications
- Ramps
- Stair-lifts, and/or platform lifts
- Sensory or therapy spaces
- Hard-wired alarm systems
- Fences
- Accessory dwelling units

Eligibility is based on:

- Income
- Documentation of need from professional
- Proposed modification

2019 Income Guidelines	
Household Size	Eligible with Gross Income up to:
1	\$166,000
2	\$189,800
3	\$213,400
4	\$237,000
5	\$256,000
6	\$275,000
7	\$294,000
8	\$313,000



HMLP is a MRC program in collaboration with CEDAC

For more Information

contact Jennifer Shaw:

jennifer.shaw@metrohousingboston.org

617-425-6637

or visit cedac.org/hmlp



Home Modification Loan Program (HMLP)

Application Guide

Thank you for your interest in the Home Modification Loan Program. HMLP is a lending program that provides loan funds to homeowners to modify or adapt their homes for a household member of any age with a professionally documented limitation or disability. HMLP lends, from \$1,000 to \$50,000 to property owners. A promissory note and a mortgage that is recorded as a lien against your property secure these loans. HMLP also lends from \$1,000 to \$30,000 to owners of manufactured or mobile homes. A promissory note and security agreement secure these loans.

Please read the Brochure and other information carefully before completing this application.

HMLP does not reimburse for completed work.

If you have any questions, or need assistance completing any part of the application, please do not hesitate to contact your provider agency.

- **All of the information and documents requested in this application are necessary to determine your eligibility.** Your chosen contractor must complete the Home Modification Loan Program Bid Form and Scope of Work (Bid Form). This form is necessary to determine your project eligibility.
- **Review the checklist on page 7 to make sure your application is complete.**
- **For your loan application to move forward your Bid Form must be submitted and have the required detail.**
- ***This program cannot assist with a home repair, roof, window, septic or heating system replacement.*** The modifications funded by HMLP must relate to the beneficiary's ability to function on a daily basis.
- **Income guidelines for eligibility** are included with this application in the section entitled *Frequently Asked Questions*. The program uses gross income when calculating income eligibility.
- **If you are an employee or a relative of an employee of the provider agency** who sent you this application call your local provider agency. Your application will be assigned to another provider agency.
- **Reasonable accommodations** will be provided as needed by the provider agency. If you need any assistance with the application please let your provider agency know how they can be of assistance.

Provider Agencies

Your completed application should be sent directly to the agency serving your community. If you are unsure of where to send your application, please call 1-866-500-5599 (toll free in MA only) or 617-727-5944.

Western, MA Regions

Way Finders
322 Main Street
Springfield, MA 01105
Contact: Araceli Rivera
413-233-1615

arivera@wayfindersma.org

*Serving: Agawam, Chicopee, Holyoke,
Northampton, Springfield, West Springfield and
Westfield*

Pioneer Valley Planning Commission (PVPC)
60 Congress Street
Springfield, MA 01104
Contact: Shirley Stephens
413-781-6045

sstephens@pvpc.org

Serving: all other Western MA communities

Central, MA Region

RCAP Solutions, Inc. (RCAP)
205 School Street
Gardner, MA 01440
Contact: Lovette Chislom
978-630-6725

Lchislom@rcapsolutions.org

Metrowest, MA Region

South Middlesex Opportunity Council (SMOC)
7 Bishop Street
Framingham, MA 01702
Contact: Linda Hochen
508-620-2682

lhochen@smoc.org

Northeast/North Shore, MA Region

Community Teamwork, Inc. (CTI)
155 Merrimack Street
Lowell, MA 01852
Contact: Alan Trebat
978-654-5741

atrebat@commteam.org

Southeastern, MA/Cape/Islands Region

South Middlesex Opportunity Council (SMOC)
HMLP-SMOC
P.O. Box 1140
Plymouth, MA 02362
Contact: Amy Allen
508-202-5919

aallen@smoc.org

Metro Boston Region

Metro Housing Boston
1411 Tremont Street
Boston, MA 02120
Contact: Jennifer Shaw
617-425-6637

Jennifer.shaw@metrohousingboston.org

Home Modification Loan Program

www.cedac.org/hmlp

Frequently Asked Questions

What is the Home Modification Loan Program?

The HOME MODIFICATION LOAN PROGRAM (HMLP) established by the Massachusetts legislature is a state-funded lending program. The program provides funds to homeowners or landlords for necessary housing adaptations or modifications to improve accessibility for seniors and individuals with disabilities. The program is state-bond funded and most loans are secured by a mortgage in order to make sure the loan is repaid. Repaid loan funds will be given as loans to other similar borrowers in the future.

What kinds of projects are eligible?

The program is NOT a general home repair program. In order to be eligible for an HMLP loan the requested modifications must relate to the professionally documented disability or functional limitation of a household member of any age. Some examples of projects funded through this program include ramps and lifts, hardwired alarm systems, fencing, sensory spaces, accessory dwelling units, as well as accessible bathrooms and kitchens.

Projects that do not directly relate to the beneficiary's ability to function on a day-to-day basis and would benefit anyone living in the home are not eligible for financing under the HMLP program. Please speak with your provider agency if you have questions on the eligibility of your project.

What types of loans are available?

Loans for property owners are made available from \$1,000 up to \$50,000. Loans for owners of manufactured or mobile homes are made available from \$1,000 to \$30,000. All applicants are eligible for a one-time per-property loan.

All applicants receive a **0% interest, deferred payment loan**. Some landlords may be eligible for a 3% interest, amortizing loan for a tenant.

What are the income guidelines?

HMLP serves households with gross income up to 200% area median income (AMI) for the Boston area, published by U.S. Department of Housing and Urban Development. HMLP applies these income guidelines to all applicants in cities and towns in Massachusetts. Income guidelines are updated annually.

2019 Income Guidelines

Household Size	Eligible with Gross Income up to:
1	\$166,000
2	\$189,600
3	\$213,400
4	\$237,000
5	\$256,000
6	\$275,000
7	\$294,000
8	\$313,000

What are the loan terms?

All applicants with a total gross household income of up to 200% area median income (AMI) qualify for a 0% interest, deferred payment loan. Monthly payments are not required on the deferred payment loan. Payment of the HMLP loan will be required when the property is sold or the property title is transferred to someone else or into a Trust. Repayment could also be required if any condition of the loan agreement is not met.

How do I apply?

There are six (6) agencies, serving seven (7) regions, throughout the Commonwealth. These agencies work directly with HMLP applicants. To find the provider serving your community, visit our website www.cedac.org/hmlp or contact Susan Gillam at 1-866-500-5599 (toll free, valid in MA only) or 617-727-5944.

If you need help or reasonable accommodations during your application process, please let your local provider know.

Can a landlord apply for a loan to modify a rental unit?

A landlord who has an identified tenant with a disability may apply for the loan. The modifications made must be documented by a professional and must relate to the tenant's (beneficiary) functional needs. A landlord owning fewer than 10 units in the building may apply for a Home Modification loan at 3% interest.

NOTE: Any landlord with a unit in a building of 10 or more units is required to make modifications under MGL Paragraph 7A, Chapter 151B Section 4 and is **NOT** eligible for the Home Modification Loan Program unless the landlord can prove hardship through litigation under this statute.

What is the loan application process?

Please visit www.cedac.org/hmlp to watch a short video on the loan application process.

The Home Modification Loan Program does not refund applicants for completed construction projects. Applications are taken anytime and reviewed on a first-come, first-served basis. The application includes an *Application Checklist* on page 7. Your loan application cannot move forward until all the fields on the application are complete and the documents listed on the checklist are submitted.

If you are unsure of the status of your application, contact your provider agency. The provider can also answer any questions about the program requirements.

Once the provider agency has a complete application, including the *Home Modification Loan Program Bid, Scope of Work and Contract Form* (Bid Form), a program construction monitor will come to the home and perform an initial inspection. Please see the handout, *HMLP and Contractors*, for more information.

Once the inspection report is finalized, the provider agency will draw-up the HMLP loan documents for your review and signature. The mortgage document will be recorded at a Registry of Deeds/Registry District of the Land Court or a UCC-1 will be filed with Massachusetts Secretary of State. Applicants are responsible for the fees to record a mortgage and file a UCC-1. These fees may be included in your loan or you may pay these fee(s) directly.

Once the mortgage is recorded or UCC-1 is filed, the provider agency will be able to request funds for your project. Then your loans funds can be disbursed according to the agreed upon payment schedule between you and your chosen contractor. Your loan disbursement schedule can also be found in your Loan Agreement. **Please note that it can take up to 4 – 6 weeks after your**

inspection until the first loan disbursement can be made.

If the contractor is requesting money before any work starts, the first invoice cannot be more than 1/3 of the total contract price. The contractor also cannot include labor costs in this first invoice. All loan disbursements are made after the homeowner submits receipts or invoices from their chosen contractor. It is the responsibility of the homeowner to verify the work milestone listed on the bid and invoice and that the work has been completed and done to your satisfaction. Homeowners should never pre-sign invoices from their chosen contractor.

The construction monitor conducts a final inspection only when your project is totally finished and done to your satisfaction. The final payment (at minimum 10% of the total contract price) is released after the final inspection has been performed. The contractor must also sign a lien waiver.

What happens if my application is determined not eligible?

You will be notified by phone or in writing by the provider agency. The provider will attempt to provide you appropriate referrals to other programs or sources of funding.

What if my project will cost more than my available loan amount?

It will be your responsibility to find additional funds in order to complete your project. HMLP funds can only be used after all other sources of funding are spent on the project. Information on organizations or other programs that may have funds available can be found on our website or your provider can provide you with a handout with this information.

Who will do the actual work to modify the home?

You will hire the designer and/or contractor of your choice to complete your project. All construction professionals hired by HMLP homeowners must be licensed and insured in the state of Massachusetts. Your provider can give you resource materials on choosing and hiring architectural, design, and contracting professionals. **HMLP and your provider cannot recommend contractors.**

What should I expect during construction?

Your provider cannot get involved directly with your chosen contractor. You should review the handout, *The Home Modification Loan Program & Contractors*, for more information on working with contractors and HMLP. Homeowners are responsible for overseeing their chosen contractor. You should keep a copy of your construction contract near-by and refer to it often. If something is not going the way you feel it should or if you have questions, you need to speak to your chosen contractor. You should also notify the provider, who can advise you on possible next steps.

What if I have a dispute with my contractor?

HMLP, your provider and the construction monitor cannot be involved in disputes regarding the legally binding contract you entered into with your chosen contractor. More information about consumer protections and how to file a complaint can be found at the state's Consumer Affairs department, www.mass.gov/ocabr/consumer/home-improvement-contract or call this toll-free hotline at (888) 283-3757. The website provides a consumer guide to home improvement contractor complaints. There are four different programs that handle complaints against residential home improvement contractors and the Office of Consumer Affairs can assist you.

May I do any of the work myself?

Borrowers who are a licensed contractor may be allowed to do the work themselves. Please be aware your loan funds can be used to pay for the cost of materials only. You will not be allowed to use loan funds to pay for the labor costs of yourself or your immediate family member(s).

What happens if I need to refinance my primary mortgage in the future?

Contact your provider agency before you refinance to request a subordination of your HMLP mortgage lien. Your provider will need to review a copy of your loan application, a copy of your home's appraisal, your credit report(s) and see proof you are current on your real estate taxes, to determine if they will subordinate their HMLP loan. The review process will be more extensive and take longer if the value of all your mortgaged debt in relation to the value of your home is high. In most cases, the subordination will be allowed.

Is a Mortgage Protection Plan a requirement of the program?

No. Some borrowers have received notices in the mail about a mortgage protection plan after they had a HMLP mortgage placed on their property. These notices are not from your provider or HMLP. You should consult a lawyer, insurance agent or other trusted advisor for information on mortgage protection plans.

My home is in a Trust, am I eligible?

A Trust does not disqualify you from being eligible for an HMLP loan. Your provider will require copies of your trust documents for review by the program's legal counsel. This review is so your provider can correctly document your loan.

I bought my home using an affordable home ownership program, am I eligible?

This does not automatically disqualify you for a HMLP loan. These home ownership programs have rules that will require you to seek approval for any construction on your home. They often also require permission to enter into a mortgage so the resale price of your home remains affordable to the next homeowner.

Please provide your provide agency copies of any affordable housing restrictions/covenants attached to your deed for review by the program's legal counsel. It is helpful if you inform your provider of this restriction early in the application process.

Home Modification Loan Program

Application Checklist

Applicant Name: _____

Your application should be mailed directly to the provider agency serving your community. Review this checklist carefully and be sure to submit the full, signed, application, and the required additional documents to the provider agency serving your community.

Sections of the Application:

- ☐ **Applicant or Homeowner Information (page 8)**
- ☐ **Household Income Information (page 9)**
- ☐ **Beneficiary Information and Home Modification Project Information (page 10)**
- ☐ **Documentation of Need from Professional Form (page 11).** *Your selected professional MUST complete the entire form*
- ☐ **Release of Information Form (page 12)**
- ☐ **Property Information (page 13)**
- ☐ **Signed PENALTY FOR FALSE OR FRAUDULENT STATEMENT (page 14)**
- ☐ **Landlord Form (if applicable, ask your provider agency for a copy)**

Required Application Documentation:

- ☐ **Proof you are up-to-date on real estate taxes** (a letter from your town, or an escrow account statement from your mortgage holder)
- ☐ **MA Income Tax Return** (or proof you are up-to-date on your state income taxes) (If taxes were owed, you must include proof of payment)
- ☐ **Household Income Documentation** (state or federal tax returns, benefit statements, 1099, W-2s or current paystubs) **note in most cases providing a copy of your state income taxes satisfies both income documentation and proof you are up to date on state income taxes.*
- ☐ **Copy of Current Deed for Property to be modified or a copy of the Bill of Sale for Mobile Homes**
- ☐ **HMLP Bid, Scope of Work & Contract Form** all parts of this form *MUST* be completed by your selected contractor
- ☐ For projects over \$50,000 or \$30,000 (your loan max.), proof of funds to complete the project (personal funds, lines of credit or loans, grants, gifts)
- ☐ Trust, Power of Attorney, or Deed Rider documents, if applicable

Home Modification Loan Program Application

Applicant or Homeowner Information

The applicant is the individual or individuals who own the property to be modified. Landlord applicants must complete a *Landlord Form*; please ask your provider agency for a copy.

Please Print Clearly

Name (Last, First, MI): _____

Mailing address:

Number	Street	Unit #
City	State	Zip Code

Telephone: Home: _____ Work and/or Cell: _____

Fax: _____ TTY/TTD: _____ E-Mail: _____

Address of Property to be Modified (if different from above):

Number	Street	Unit #
City	State	Zip Code

Is any person listed in this application (including all property owners or beneficiary) an employee or a relative of an employee of the Provider agency administering the Home Modification Loan Program?

Yes ☐ No ☐

Has any person listed in this application (including all property owners or beneficiary) received a Home Modification Loan from this or any other HMLP Provider agency? Yes ☐ No ☐ If yes, has it been repaid?

Yes ☐ No ☐ Please list agency _____

Ethnic Background (Optional) please circle which apply

Native American White Hispanic Black Asian Other _____

How Did You Learn About the Home Modification Loan Program?

- ☐ Internet Search ☐ Radio/TV/Print Advertisement ☐ Informational Poster
☐ Friend or Relative ☐ Senior Center/Council on Aging ☐ Independent Living Center
☐ Community or Housing Organization ☐ Municipal Office ☐ Regional MRC office
☐ Other State Agency (DDS, DPH, DMH, MCB, MCDHH) ☐ Disability Organization
☐ Healthcare Agency (home health, skilled nursing facility, doctor's office or hospital) ☐ contractor
Other _____

Income Information

Applicant or Homeowner Name: _____

☐ If Applicant is a landlord renting to a family member, list all individuals in both the beneficiary's household and the property owner's household.

☐ If Applicant is a landlord renting to a non-family member, list all individuals in the tenant's household.

Please list all persons in household (attach additional sheet if needed):

1. NAME: _____ Date of Birth _____ SOCIAL SECURITY NO. _____

Insurance: Private ☐ Medicare ☐ Medicaid ☐ None ☐

2. NAME: _____ Date of Birth _____ SOCIAL SECURITY NO. _____

Insurance: Private ☐ Medicare ☐ Medicaid ☐ None ☐

3. NAME: _____ Date of Birth _____ SOCIAL SECURITY NO. _____

Insurance: Private ☐ Medicare ☐ Medicaid ☐ None ☐

4. NAME: _____ Date of Birth _____ SOCIAL SECURITY NO. _____

Insurance: Private ☐ Medicare ☐ Medicaid ☐ None ☐

5. NAME: _____ Date of Birth _____ SOCIAL SECURITY NO. _____

Insurance: Private ☐ Medicare ☐ Medicaid ☐ None ☐

Indicate in the table below all income for each individual in the household listed above.

Name (# From above)	Source of Income	Documentation	Income/Month	Income/Week	Annualized

Please DO NOT fill out the section below the dotted line. This is for Provider Use Only:

Total # Persons in Household: _____ **Total Annual Household Income:** \$ _____

20__ Income Limit for family size listed above: \$ _____ ☐ 100% ☐ 125% ☐ 200%

Loan Product Eligibility: ☐ yes ☐ no

Verified By: _____ Date: _____

Beneficiary Information

The beneficiary is the individual(s) in the household with the professionally documented limitation(s) and the person(s) who will benefit from the modifications (if additional space is needed, please include on a separate sheet):

(1) Name: _____ Age: _____
 Last First MI
Relationship to Homeowner/Landlord (i.e. child, niece, brother, friend, tenant): _____
Is the property listed above the Primary Permanent Address of this person: ____ yes ____ no

(2) Name: _____ Age: _____
 Last First MI
Relationship to Homeowner/Landlord (i.e. child, niece, brother, friend, tenant): _____
Is the property listed above the Primary Permanent Address of this person: ____ yes ____ no

Home Modification Project

Explain your need for home modifications as it relates to the individual(s) with a documented limitation(s) in your household. Attach additional pages as needed. Include an *estimated* amount of the cost of the project if possible. Please provide as much detail as possible.

Estimated Cost (if available) \$ _____

If the project exceeds \$50,000 or \$30,000 (your loan max), you must provide evidence of other funds to complete your home modification project. The HMLP loan will be disbursed only *after* all other funds have been used. If your other funding source(s) have this same requirement, please contact your provider agency. Documentation of this funding will be required prior to completing the loan process.

Documentation of Need from Professional

Please have a chosen professional complete all sections of the form on the next page. This person must be someone whom the beneficiary has a professional relationship, such as a doctor, physical therapist, occupational therapist, social worker, case manager, or other relevant professional. Please consider the expertise of the professional carefully when selecting the individual, if the documentation provided is inadequate or insufficient, additional information will be required.

DOCUMENTATION OF NEED FROM PROFESSIONAL FORM

Your selected professional must complete all section of this form and sign it for it to be considered valid.

The Home Modification Loan Program provides funding for necessary home modifications or adaptations, which are required because the individual's ability to function on a daily basis is limited by the configuration of their home. When completing this form, please be specific and identify the functional aspects of the individual's limitation(s) that directly relates to a need for improved accessibility and/or safety.

1. Name of Individual: _____ Age: _____

2. What is the individual's primary impairment? _____

What is the individual's secondary impairment? _____

List any additional impairments: _____

3. What types of functional limitations does the individual's impairment(s) involve? (Please check all that apply):

☐ Mobility (uses wheelchair)

☐ Mobility (uses walker/other mobility device)

☐ Mobility (currently uses no mobility device)

☐ Dexterity

☐ Difficulty breathing/shortness of breath

☐ Emotional or behavioral

☐ other – Please specify _____

☐ Sensory

☐ Sight

☐ Hearing

☐ Chemical sensitivity

☐ Developmental

☐ Cognitive

☐ Limited safety awareness

4. List the necessary permanent home modifications or the changes to the current configuration of the home, which directly relate to improving the individual's day-to-day function or will allow the person to live independently in the community. *For example, Sally has gait issues and is unable to safely get in and out of her current shower. She would benefit from a barrier-free shower.*

Signature of Professional

Print Name

Phone #

Mailing Address

Release of Information

I hereby give authorization to _____ (*Provider agency*) to make inquiries for the Home Modification Loan Program as needed regarding information and documentation supplied by me to verify:

_____ Household income

_____ Unsafe conditions noted at time of inspection

_____ My need for modifications as documented by _____, (*a professional with whom I have a client history*)

Address of the residence to be modified is:

Number	street	city/town	zip
--------	--------	-----------	-----

Phone	e-mail
-------	--------

This information is in regard to my request for a Home Modification Loan.

Signature: _____ Date _____

This authorization is valid until my loan has been closed and all modification work completed.

Property Information

I, the undersigned Borrower/Property Owner for the Home Modification Loan Program, affirm and attest that the following is true of the property to be modified under this program at

_____, _____, _____
Address Town Zip

1. Type of property: ☐ Single Family ☐ Multi-family ☐ Mobile Home ☐ Condominium

If multi-family: number of units: _____ How many units are occupied? _____

2. **Owner(s) of record of the property to be modified:** (those listed on the property's deed)

1. _____ 2. _____
3. _____ 4. _____

You must include a copy of your property's current deed with your application. *If you need help obtaining a copy of your deed, please contact your Provider agency for assistance.*

Please verify by Book: _____ Page: _____ of deed at the Registry of Deeds in the County of Residence.

If you are a manufactured or mobile home owner, you must provide a copy of your mobile home's Bill of Sale.

3. **Lead Paint Verification** I understand that it is my responsibility to comply with all applicable laws and regulations regarding the presence of lead paint in my home. The provider agency and HMLP are not responsible for lead paint abatement in my home.

YES NO
☐ ☐ (1) The home was built before 1978.
☐ ☐ (2) The property is subject to an emergency lead management plan and letter of interim control.

4. **Historic Certification**

☐ My property is **NOT** listed in, or located within or near another home or historic district listed in the Historic Register.

☐ My property **IS** listed in, or located within or near another home or historic district listed in the Historic Register

5. Is your home owned by a **Trust**? ☐ Yes ☐ No If yes, attach the Declaration of Trust and Schedule of Beneficiaries (there are additional recording fees; ask your provider agency for more information).

6. Do you or the beneficiary have a **Power of Attorney**? ☐ Yes ☐ No If yes, attach a copy (there are additional recording fees, ask your provider agency for more information).

7. Does your property have a **Deed Rider** or affordability restriction through your town or state (example an LIP unit or 40B project)? ☐ Yes ☐ No A deed rider may affect our ability to offer you an HMLP loan.

8. Are you currently filing or planning on filing for **bankruptcy**? ☐ Yes ☐ No

PENALTY FOR FALSE OR FRAUDULENT STATEMENT

The applicant(s) certifies that all information provided herein, and all information in support of this application, is given for obtaining assistance from the Home Modification Loan Program.

I/We hereby certify that all of the above statements are true, accurate, and complete to the best of my/our knowledge and belief.

I hereby consent to the verification of any information given in this application. I understand that the information will be used to determine eligibility for this program and is subject to the requirements of HMLP Program Guidelines. The applicant(s) agree(s) to abide by the HMLP requirements in connection with any assistance received pursuant to this application.

I understand that HMLP may deny my application if I am currently filing for bankruptcy and/or have a bankruptcy case pending. I will notify the Provider agency of any current, pending, or future bankruptcy or foreclosure action against me.

All information generated as a part of this program is confidential between the program applicants and program administrators.

Signature(s) of Property Owner/Borrowers: *The signatories below acknowledge that this document is signed under pains of penalties of perjury.*

All persons listed on the deed must sign below.

Signature:

Date:

List of Contractors

This List of Contractors is compiled as an informal service to Borrowers under the Home Modification Loan Program (HMLP). The contractors listed below have been hired by other HMLP Borrowers. Neither the HMLP nor **Metro Housing|Boston** has any liability for, nor endorses, nor assumes any responsibility for, any of the contractors on the list. All Borrowers are encouraged to follow good consumer protection procedures when hiring a contractor:

- Obtain multiple bids
- Obtain references or referrals from previous clients of the contractor
- Check the contractor's complaint record with the Local Consumer Program ("LCP") in your area (<https://www.mass.gov/service-details/local-consumer-programs-of-the-attorney-generals-office>) or the Better Business Bureau <https://www.bbb.org/us/ma>
- Verify that the contractor has the required state contractor's license

GENERAL & PLUMBING CONTRACTORS

GMC Construction

Gabriel McColgan-general contractor
Quincy, MA
Cell: 617-821-5440
Email: gmcconst17@gmail.com

Hala Deleading and Replacement

Khalil Hachem
15 Birch Street
Dedham
MA 02026-2501
Phone: 617-872-5518
Email: KhalilHachem59@hotmail.com

New England Accessibility

Certified Aging in Place Specialist

Bill Macmillan
355 Thacher Street
Milton, MA 02186
Phone: 617-966-3404
Email: Bill@ne-access.com
Website: <http://ne-access.com/>

Operation Independence, LLC-ACCESSIBLE BATHROOM, STAIR CHAIR, RAMP SPECIALISTS

Certified Aging in Place Specialist

Rick Castino

325 School Street

Watertown, MA 02472

Office Phone: 617-923-4545

Cell: 617-201-2685

Email: rickcastino@comcast.net

Website: operationindependence.net

Tronca Plumbing & Heating

Mario Tronca

225 Plymouth Ave.

Quincy, MA 02169

Phone: 617-293-6426

Email: troncaplumbing@comcast.net

Wood Wise Construction Inc. dba

Accessible Solutions

Jim & Debbie Chesbrough

P. O Box 1330

Leominster, MA 01453

Phone: 978-534-9211

Email: debbie@MakeYourHomeAccessible.com

Website: www.MakeYourHomeAccessible.com

Field Code Changed

RAMPS, LIFTS & BATHROOMS

101 Mobility

289 Elm Street

Marlborough, MA 01752

Contact: Cheryl Watson

Email: cwatson@101Mobility.com

Office: 508.449.9126

Cell: 860.426.1111

Website: www.101Mobility.com

Acorn Stairlifts -Manufacturer, install, and service stairlifts

7001 Lake Ellenor Drive

Orlando, FL 32809

Contact: Donna Strickland dstrickland@acornstairlifts.com

Phone: 407-650-0216 ext. 1614

Fax: 407-650-1764

Website: <http://www.acornstairlifts.com>

AmRamp - *Specializing in ramps and other home modifications*

Justin Gordon
202 West First St.
South Boston, MA 02127
Toll Free: 800-649-5215
Email: justin.gordon@amramp.com
Website: www.amramp.com

Bay State Kitchen and Bath

Jennifer Bylo
55 B Corporate Park Dr.
Pembroke, MA 02359
Phone: 781-826-4141
Fax: 781-826-2333
Email: jbylo@baystatekb.com
Website: www.baystatekb.com

Living Free Home -*Ramps, Lifts and Bathrooms*

George Kay
401 VFW Drive
Rockland, MA 02370
Office Phone: 781 261-9901
Cell: 617 797-5146
Email: georgelfh@verizon.net
Website: www.livingfreehome.com

Stairlift Headquarters

Access & Mobility Solutions, LLC
13 Columbia Dr. Unit 3
Amherst, NH 03031
Phone: 603-249-8893
E-mail: info@stairliftheadquarters.com
Website: <http://www.stairliftheadquarters.com/>

Stannah Stairlifts

Tony Cardarelli
20 Liberty Way, Suite A
Franklin, MA 02038
Phone: 508-520-7878
Email: tony_cardarelli@stannah.com
Website: www.stairliftma.com

Home Modification Loan Program **Guide and Bid, Scope of Work and Contract Form**

PART I: Guide and General Terms and Conditions

The Home Modification Loan Program (HMLP) provides funding for necessary home modification or adaptations which are required because an individual(s) in the household's ability to function on a daily basis is limited by the configuration of their home. The homeowner is directly responsible for finding, hiring and managing the contractor to complete their modification project.

This form consists of two parts: Part I is a Guide and General Terms and Conditions; Part II is a combined Bid and Contract Form.

Before completing this form, we recommend you review "Frequently Asked Questions Regarding Contractors and HMLP".

Borrower's Name must be printed legibly in the space provided at the bottom of each page of this Form.

Part II of this form must be completed by a licensed and insured contractor (the "Contractor") and signed by both the Contractor and the homeowner in order for a homeowner to receive funds from the program. The homeowner needs to submit the completed and signed Part II of this form with their application in order for eligibility to be determined. Please make sure that the Contractor reads this entire form and fills out Part II of this form with as much detail as possible to avoid multiple revisions and delays to the project start date. The fully completed and fully signed copy of Part II of this form will – upon approval by the program's provider agency – constitutes the approved construction contract for the project described therein and is referred to in this form as the "Contract."

Please take note of the following HMLP policies:

- Up-front payment before work starts is permitted but can be for materials only, when a detailed invoice is submitted and can only be for up to 30% of total project cost.
- HMLP only pays up-front for materials in the first invoice; all other invoices should be submitted when the work is complete.
- A copy of the building permit will be required before any payments are made to a contractor, including up-front payments for materials.
- Change Orders are required:
 - Any deviations in the agreed upon project scope outlined in the Contract must be submitted and approved by the owner and reviewed by the provider agency for eligibility, prior to commencing said work
 - Any change to cost or project duration should be noted
- HMLP does not pay subcontractors directly
- HMLP uses construction monitors to conduct an initial inspection prior to the start of construction work. The inspection is to review the project's scope of work with both the Contractor and homeowner. Once construction work is complete, the construction monitor will conduct a final inspection before the last disbursement.

Release of Liens:

The Contractor's application for final payment shall include a statement of release of any liens by subcontractors, laborers, or material suppliers and all other liens arising out of the work performed under this contract.

Provision of Utilities:

The homeowner agrees to furnish all necessary utilities, including water and power, at no charge to the Contractor during the construction period. This shall also include access to a telephone for receipt of messages and the placing of outgoing, local calls.

Compliance with the Law:

It is the Contractor's obligation to obtain all applicable local permits. For building construction projects, if the homeowner obtains the permits, the homeowner will not be entitled to obtain any benefit from the Guaranty Fund established under Massachusetts General Laws Chapter 142A.

The Contractor must have a current Massachusetts construction supervisor license in accordance with the Massachusetts Building Regulations. All subcontractors must meet Massachusetts licensing requirements according to their trade.

The Contractor and all subcontractors are required to be registered with the Massachusetts Board of Building Regulations and Standards, unless specifically exempt from registration. If the homeowner uses unregistered contractors, he/she will not be entitled to obtain any benefit from the Guaranty Fund established under MGL Chapter 142A. Inquiries concerning contractor registration can be made to:

**Office of Consumer Affairs and Business Regulation
Ten Park Plaza, Suite 5170
Boston, MA 02116
Phone: (617) 973-8700**

Insurance:

The Contractor shall carry or require that there be carried full and complete Workmen's Compensation Insurance for all of his/her employees and those of his/her subcontractors engaged in work on the Contract premises, in accordance with local and state laws governing the same. The amount and limits of General Liability insurance and other required insurance coverage referred to herein shall be subject to the approval of the homeowner, provided however, that the Contractor shall obtain Comprehensive General Liability Insurance Coverage protecting the homeowner in the event of bodily injury including death, and property damage arising out of the work performed by the Contractor. In addition, a certificate of Automobile Liability Insurance shall be obtained for all vehicles used in the performance of this Contract for bodily injury including death and property damage per accident.

Termination:

If at any time the homeowner concludes that the work or the actions of the Contractor are:

- * not in accordance with standard professional trade practices, or
- * not in compliance with the scope of work specifications, or
- * not in compliance with the material specified in the work specifications, or
- * in violation of Contract terms, or
- * a violation of applicable state and/or federal policies, regulations and laws,

Then the homeowner has the right to terminate this Contract, through a written notice of contract termination.

The Contractor may suspend or terminate this Contract by providing the homeowner with written notice for the following reasons:

- * Failure by the homeowner to pay the agreed upon fee.
- * Actions or inactions by the homeowner that seriously hinder the Contractor's ability to perform its obligations in accordance with this Agreement.
- * A reasonable determination by the Contractor that the satisfactory completion of one or more of the agreed upon activities is rendered improbable, infeasible, impossible or illegal, without fault of the Contractor, provided however that the Contractor shall first have;
 - A. advised the homeowner of the reasons for the determination, and
 - B. developed and proposed such solutions as appear feasible, and
 - C. sought to negotiate an amendment of the Contract with the homeowner and such efforts have not satisfactorily removed the impediment to completion.

In the event of suspension or termination, the homeowner shall pay the Contractor for completed, approved and satisfactory work.

Licenses:

The Contractor, and any approved subcontractors, shall procure and keep current any licenses, certifications, or permits required for any activity to be undertaken as part of this Agreement, as may be required by federal, state, or local laws or regulations.

Amendments:

The terms of this Agreement may be modified, amended, and/or extended only by written instrument executed by both the Homeowner and.

Severability:

If any provision of this Agreement is held invalid, the remainder of the Agreement shall not be affected thereby, and all other parts of this Agreement shall nevertheless, be in full force and effect.

If you have any questions or would like further information about the HMLP requirements for this bid form, please contact the regional provider agency working directly with the homeowner on their application.

Home Modification Loan Program **Guide and Bid, Scope of Work and Contract Form**

Part II: Bid, Scope of Work and Contract Form

This document is a Bid Form and Construction Contract (the "Contract") made effective this _____ day of _____, 20____, between _____ (the "Homeowner"), for work to be performed at _____ (the "Premises" or "home") and _____ (the "Contractor") having a principal place of business at _____.

Narrative description of work scope:

If the project includes any electrical work, list the home's current electrical circuit load capacity (i.e. 200 AMPS)

Please describe how the electrical will be effected by the work scope:

Required Permits (please check all that apply)

☐ Electrical ☐ Plumbing ☐ Gas ☐ Building (if the town/city requires plans, please include)

- The first 7 pages of this form are required for **all** HMLP funded projects.
- The remaining pages are divided into sub forms by type of modification. Please complete the forms which pertain to the project.
 - Please check all sub forms which apply to this project & will be included with the HMLP Bid, Scope of Work and Contract Form
 - ☐ **Form A:** Ramps, lifts or Elevators
 - ☐ **Form B:** Exterior Modifications
 - ☐ **Form C:** Bathroom Modifications (duplicate form for any work performed in a second bathroom)
 - ☐ **Form D:** Kitchen/Landry Modifications
 - ☐ **Form E:** Permanent Adaptive Design

TOTAL PROJECT COSTS (Subcontractor, Materials, Labor)

Work Item		Total Cost
Form A	Ramps, Lifts or Elevators	\$0.00
Form B	Exterior Modifications	\$0.00
Form C	Bathroom Modifications	\$0.00
Form D	Kitchen/Laundry	\$0.00
Form E	Permanent Adaptive Design	\$0.00
Permit(s)		
Disposal/Dumpster		
Total Project Cost		\$ 0.00

TOTAL COST COVERED BY HMLP (not to exceed \$50,000 or \$30,000): _____

ADDITIONAL ITEMS

Please provide the hourly labor rate for any additional work that may be required/requested.

General Contractor Rate

Other Rate

Other Rate

Timeline

Estimated Start Date: Estimated Completion Date:

Work may not begin until both parties have received a fully executed copy of the contract and the three day rescission period has expired.

It is agreed between the Contractor and Homeowner that the work shall be performed while the premises are occupied/vacant (*circle one*).

Payment Schedule Payments should reflect milestones or identifiable measures of progress, for example: completion of rough plumbing and framing:

Payment 1: *Borrower Contribution, if over \$50,000 or \$30,000 \$*

Payment 2: \$ Description: Loan Recording Fees (*range of \$200-\$500 exact amount supplied by the Provider Agency*)

Payment 3: \$ Description: purchase of up-front materials

Payment 4: \$ Description:
☐ rough city inspection ☐ demo complete
☐ installation of ☐ framing complete
☐ other:

Payment 5: \$ Description:
☐ installation of ☐ final city inspections
☐ other:

Final Payment (10%): \$ Description: After final inspection

As a part of any application for payment, the Homeowner may require the Contractor to furnish releases or receipts from any and all persons performing work or supplying materials or services to the contractor, or any subcontractors, for work performed under this contract, if this is deemed necessary to protect the Homeowner's interest.

Certification Statement

The quality of workmanship and finish shall be, consistent with a high quality of workmanship and finish in accordance with industry standards for like projects. The Contractor warrants a) that materials furnished pursuant to the proposal and will be of first class quality and new unless otherwise stipulated, b) that the work will conform to the requirements of all authorities having jurisdiction and, c) that the work will be free from defects and encumbrances. All work performed under the contract shall be warranted by the contractor to be free from defects in labor and materials for a period of one year following the final acceptance of the work or final payment for work under the contract.

Resolution of Disputes

If disputes between the Homeowner and Contractor cannot be mutually resolved, the Homeowner may initiate arbitration by right as allowed under the Home Improvement Contractor Law. If agreed to by the Homeowner, the Contractor may also resolve disputes through formal arbitration.

If the Homeowner agrees to an alternative dispute resolution process as initiated by the Contractor, the following must be signed by both parties:

The contractor and the homeowner hereby mutually agree in advance that in the event the contractor has a dispute concerning this contract, the contractor may submit the dispute to a private arbitration firm which has been approved by the Secretary of the Executive Office of Consumer Affairs and Business Regulation and the consumer shall be required to submit to such arbitration as provided in Massachusetts General Laws, Chapter 142A.

Homeowner's Signature

Contractor's Signature

Notice: The signatures of the parties above apply only to the agreement of the parties to alternative dispute resolution initiated by the Contractor. The Homeowner may initiate alternative dispute resolution even where this section is not separately signed by the parties.

Contract The Contract between the Homeowner and the Contractor described below consists of both Part I and Part II of this Home Modification Loan Program Scope of Work Guide and Bid and Contract Form.

CONTRACTOR

HOMEOWNER

Signature

Signature

Printed Name

Printed Name

Date

Date

General Information

Contractor

Firm Name:

Address (Street):

Address (Municipality, State, Zip Code):

Telephone Number:

Email address:

Homeowner

Address (Street):

Address (Municipality, State, Zip Code):

Telephone Number:

Contractor Registration

Name of License Holder: Construction Supervisor's
License #: Expiration Date:

Name of License Holder: Home Improvement Reg. #: Expiration Date:

Name of License Holder: Lead License: Expiration Date:

☐ if less than 6 sq ft. will be
disturbed

Name of Insured: Insurance Carrier: Policy #:

License
Verification

☐☐☐

Home Modification Loan Program
Part II: Bid, Scope of Work and Contract Form

Form A: Ramps, Lifts or Elevators

Ramp (if more than one will be built, please duplicate)

Location:

Description:

Rise per 1 Foot, Length and Width :

Material type: Footings:

Material Cost: Is this an allowance: ☐ Yes ☐ No

Ramp Hand Rail

Height: Diameter or width: Material type:

Material Cost: Is this an allowance: ☐ Yes ☐ No

All ramps require building department inspection.

Wheelchair Lift (interior or exterior)

Location:

Manufacturer: Model No.

Is electrical work required? ☐ Yes ☐ No Please describe

Material Cost: Electrical cost: \$0.00

Elevator Mechanics License (required)

Stairlift (interior or exterior) (if more than one will be installed, please duplicate)

Location:

Manufacturer: Model No.

Is electrical work required? ☐ Yes ☐ No Please describe

Material Cost: Electrical cost: \$0.00

Elevator

Location:

Manufacturer: Model No.

Is electrical work required? ☐ Yes ☐ No Please describe

Material Cost: Electrical cost: \$0.00

Elevator Mechanics License (required)

SUBTOTAL Ramp, Lift or Elevator

Subtotal Material Cost: \$0.00

Subtotal Labor Cost:

Subtotal Electrical Cost: \$0.00

Electrical work performed by subcontractor? ☐ Yes ☐ No

Subtotal Form A: \$0.00

Home Modification Loan Program
Part II: Bid, Scope of Work and Contract Form

Form B: Exterior Modifications

Exterior Doorway

Description of work:

Dimensions:

Describe any carpentry work required:

Location: Materials:

Material Cost: Is this an allowance? ☐ Yes ☐ No

Hardware Type:

Fence

Please describe & include location, approximate linear footage and height

Materials:

Material Cost: Is this an allowance? ☐ Yes ☐ No

Driveway Modifications

Please describe and include depth of gravel sub-base, depth of asphalt base, depth of asphalt finish coat and approximate area to be modified.

Location: Materials:

Material Cost: Is this an allowance? ☐ Yes ☐ No

Other Exterior Modifications

Please describe:

Location: Materials:

Material cost(s): Is this an allowance? ☐ Yes ☐ No

SUBTOTAL EXTERIOR MODIFICATIONS

Subtotal Material Cost: \$0.00

Subtotal Labor Cost:

Subtotal Electrical Cost:

Performed by subcontractor? ☐ Yes ☐ No

Subtotal Form B: \$0.00

Home Modification Loan Program
Part II: Bid, Scope of Work and Contract Form

Form C: Bathroom Modifications

Copy these pages if work is required in an additional bathroom

Please describe full extent of modification(s) :

Location: Room Dimensions:

- ☐ Plumbing, please describe
☐ Electrical/Lighting, please describe
☐ Demolition, please describe:
☐ Framing/Blocking, please describe:

Material Cost: Is this an allowance: ☐ Yes ☐ No

- ☐ Floor Joists, please describe:

Material Cost: Is this an allowance: ☐ Yes ☐ No

- ☐ Sub-flooring, please describe:

Material Cost: Is this an allowance: ☐ Yes ☐ No

- ☐ Insulation Quantity:

Material Cost: Is this an allowance: ☐ Yes ☐ No

- ☐ Sheetrock or Plaster Quantity:

Material Cost: Is this an allowance: ☐ Yes ☐ No

- ☐ Prep & Paint, please describe:

Material Cost: Is this an allowance: ☐ Yes ☐ No

Bathroom Door Modification

Description of work:

Dimensions:

Hardware Type:

Materials:

Material Cost: Is this an allowance? ☐ Yes ☐ No

Sink Manufacturer: Model No. Material Cost Is this an allowance? ☐ Yes ☐ No

Dimensions (height, depth, knee clearance, clear floor space):

Faucet Manufacturer Model No. Type: ☐ Lever-operated ☐ Push-type ☐ Touch-type

- ☐ Other (describe):

Anti-scalding device ☐ Yes ☐ No Other Materials:

Material Cost Is this an allowance? ☐ Yes ☐ No

Tub/Shower Surround Material(s)

Manufacturer: Model No.

Material Type:

Dimensions:

Material Cost (total) Is this an allowance? ☐ Yes ☐ No

Shower Drain

Manufacturer: Model No.

Drain Type:

Material Cost (total) Is this an allowance? ☐ Yes ☐ No**Tub/Shower Fixture***Handheld Shower*

Manufacturer: Model No.

Material Cost (total) Is this an allowance? ☐ Yes ☐ No*Shower Head*

Manufacturer: Model No.

Material Cost (total) Is this an allowance? ☐ Yes ☐ No**Toilet**

Manufacturer: Model No.

Dimensions (height, clear floor space):

Material Cost: Is this an allowance? ☐ Yes ☐ No**Grab Bars** (Please indicate where and how many grab bars will be installed)*Shower*

Quantity: Horizontal Vertical Height Length Diameter or width

Material Type:

Material Cost: Is this an allowance: ☐ Yes ☐ No*Toilet*

Quantity: Horizontal Vertical Height Length Diameter or width

Material Type:

Material Cost: Is this an allowance: ☐ Yes ☐ No

Other: Location

Quantity: Horizontal Vertical Height Length Diameter or width

Material Type:

Material Cost: Is this an allowance: ☐ Yes ☐ No**Flooring**

Material Type:

Manufacturer: Model No.

Square Footage:

Material Cost (total) Is this an allowance? ☐ Yes ☐ No**Other Bathroom Modifications**

Please describe:

Materials:

Material cost: Is this an allowance? ☐ Yes ☐ No**SUBTOTAL BATHROOM(S)**

Subtotal Material Cost: \$0.00

Subtotal Labor Cost:

Subtotal Plumbing Cost: performed by subcontractor? ☐ Yes ☐ NoSubtotal Electrical Cost: performed by subcontractor? ☐ Yes ☐ No**Subtotal Form C: \$0.00**

Home Modification Loan Program
Part II: Bid, Scope of Work and Contract Form

Form D: KITCHEN/LAUNDRY

Please describe full extent of modification(s) :	
Location:	Room Dimensions:
<input type="checkbox"/> Plumbing, please describe: <input type="checkbox"/> Electrical/Lighting, please describe: <input type="checkbox"/> Demolition, please describe: <input type="checkbox"/> Framing/Blocking, please list materials: Material Cost: Is this an allowance: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Floor Joists quantity: Material Cost: Is this an allowance: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sub-flooring, please list materials: Material Cost: Is this an allowance: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Insulation Quantity: Material Cost: Is this an allowance: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sheetrock or Plaster Quantity: Material Cost: Is this an allowance: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prep & Paint, please describe: Material Cost: Is this an allowance: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<u>Flooring</u> Material Type: Manufacturer: Model No. Square Footage: Material Cost (total) Is this an allowance? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<u>Cabinets</u> Number of wall cabinets: Height of wall cabinets: Number of base cabinets: Height of base Cabinets: Manufacturer: Model #: Hardware: Material Cost (total) Is this an allowance? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<u>Counter Top</u> Dimensions: Material: Counter top height above finish floor: Total Material Cost: Is this an allowance: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<u>Kitchen Sink</u> Manufacturer: Model #: Sink Height: Sink Depth: Material Type: Material Cost Is this an allowance? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Kitchen Faucet Type:

☐ Lever-operated ☐ Push-type ☐ Touch-type ☐ Other:

Anti-scalding device ☐ Yes ☐ No

Manufacturer: Model No.

Material Cost: Is this an allowance? ☐ Yes ☐ No

Other Kitchen Safety Features

☐ Cabinet locks:

☐ Other (describe):

☐ Other (describe):

☐ Other (describe):

Material Cost (total) Is this an allowance? ☐ Yes ☐ No

Accessible Appliances

Appliance Type:

Manufacturer: Model No.

Material Cost (total) Is this an allowance? ☐ Yes ☐ No

Appliance Type:

Manufacturer: Model No.

Material Cost (total) Is this an allowance? ☐ Yes ☐ No

SUBTOTAL KITCHEN/LAUNDRY COST

Subtotal Material Cost: \$0.00

Subtotal Labor Cost:

Subtotal Plumbing Cost: Plumbing work performed by subcontractor? ☐ Yes ☐ No

Subtotal Electrical Cost: Electrical work performed by subcontractor? ☐ Yes ☐ No

Subtotal Form D: \$0.00

Home Modification Loan Program

Part II: Bid, Scope of Work and Contract Form

Form E: PERMANENT ADAPTIVE DESIGN

Interior Door Modification

Location(s):

Please describe:

Dimensions:

Door Material: Width:

Hardware Type

Material Cost per doorway: Total # of doorways to be modified:

Material Cost (total) Is this an allowance? ☐ Yes ☐ No

Central Air Conditioning

Please describe the full extent of work being performed (i.e. new ductwork, electrical upgrade, etc.):

Location (s): Materials:

Manufacturer: Model No.:

Material Cost:

Subtotal Electrical Cost: Performed by subcontractor? ☐ Yes ☐ No

Other Adaptive or Safety Design Modifications to Interior Living Space

Please describe the full extent of work being performed:

☐ **Window locks**

Quantity: Material Cost: Is this an allowance? ☐ Yes ☐ No

☐ **Specialized door locks**

Quantity: Material Cost: Is this an allowance? ☐ Yes ☐ No

☐ **Alarm system**

Quantity: Material Cost: Is this an allowance? ☐ Yes ☐ No

☐ **Security Lighting**

Quantity: Material Cost: Is this an allowance? ☐ Yes ☐ No

☐ Other (describe):

Material Cost: Is this an allowance? ☐ Yes ☐ No

☐ Other (describe):

Material Cost: Is this an allowance? ☐ Yes ☐ No

Addition to Dwelling (new bathroom, laundry & kitchen please use those dedicated sections.)

Please describe the full extent of work being performed:

Dimensions of new addition:

☐ Masonry work

Quantity: Material Cost:

☐ Carrying beam/lally column

Quantity: Material Cost:

☐ Insulation

Quantity: Material Cost:

<input type="checkbox"/> Roofing:	
Quantity:	Material Cost:
<input type="checkbox"/> Siding:	
Quantity:	Material Cost:
<input type="checkbox"/> Windows:	
Quantity:	Material Cost:
<input type="checkbox"/> Doors:	
Quantity:	Material Cost:
<input type="checkbox"/> Framing:	
Quantity:	Material Cost:
<input type="checkbox"/> Foundation/footings/slab:	
Quantity:	Material Cost:
<input type="checkbox"/> Electrical:	
Quantity:	Material Cost:
<input type="checkbox"/> Plumbing:	
Quantity:	Material Cost:
<input type="checkbox"/> Gas:	
Quantity:	Material Cost:
<input type="checkbox"/> Ductwork:	
Quantity:	Material Cost:
<input type="checkbox"/> Mechanicals:	
Quantity:	Material Cost:
<input type="checkbox"/> Finish Carpentry:	
Quantity:	Material Cost:
<input type="checkbox"/> Flooring:	
Quantity:	Material Cost:
<input type="checkbox"/> Other (describe):	
Quantity:	Material Cost:
<input type="checkbox"/> Other (describe):	
Quantity:	Material Cost:
<input type="checkbox"/> Other (describe):	
Quantity:	Material Cost:
SUBTOTAL PERMANENT ADAPTIVE DESIGN COST	
Subtotal Material Cost: \$0.00	
Subtotal Labor Cost:	
Subtotal Plumbing Cost:	Plumbing work performed by subcontractor? <input type="checkbox"/> Yes <input type="checkbox"/> No
Subtotal Electrical Cost:	Electrical work performed by subcontractor? <input type="checkbox"/> Yes <input type="checkbox"/> No
Subtotal Form E: \$0.00	