

# Neighbourhood Spruce Up Program

## Homeowner Application - Tufts Cove, Dartmouth



### 1. Read before completing application

**Note - All applications must be received by August 31, 2017**

This application must be completed and signed by all property owners. The program's maximum total gross annual household income limit is \$76,195. This maximum is based on Statistics Canada's 2011 Census data on the average household income for the Regional Municipality of Halifax.

The work carried out under this program must be completed and receipts and invoices submitted for payment on or before November 30, 2017. Payment of receipts and invoices received after this date will not be advanced.

### 2. Give your property owner information

Applicant 1 (Owner Applicant)

Applicant 2 (Co-owner)

First name: \_\_\_\_\_

First name: \_\_\_\_\_

Middle name: \_\_\_\_\_

Middle name: \_\_\_\_\_

Last name: \_\_\_\_\_

Last name: \_\_\_\_\_

Full legal name, if different: \_\_\_\_\_

Full legal name, if different: \_\_\_\_\_

Date of Birth (dd/mm/yyyy): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Date of Birth (dd/mm/yyyy): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Social Insurance Number: \_\_\_\_\_

Social Insurance Number: \_\_\_\_\_

Gender: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

### 3. Give your contact information

Mailing address (street number, street name, P.O. Box, or RR#): \_\_\_\_\_

City/Town/Community: \_\_\_\_\_ Postal code: \_\_\_\_\_

Phone number: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

E-mail (optional): \_\_\_\_\_

Contact person: \_\_\_\_\_ Phone number: \_\_\_\_\_

### 4. Give your property information

Civic address, if different from mailing address (street number and street name): \_\_\_\_\_

Town: \_\_\_\_\_ Postal code: \_\_\_\_\_

How long have you lived in your house (years)? \_\_\_\_\_ How old is your house (years)? \_\_\_\_\_

Is this your principal residence?  Yes  No

Are you the registered owner of the property?  Yes  No

Are there other registered owners of the property?  Yes  No If yes, how many other owners are there? \_\_\_\_\_

Please list the names, addresses, and phone numbers of any other owners of your property who do not live on the property:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are property taxes paid up to the current year?  Yes  No If not, what is the outstanding balance? \_\_\_\_\_

**Note: If there are liens or judgements against the property you are not eligible for this program. This does not include your mortgage.**

**5. Describe in detail the exterior improvements you wish to make to your property.**

(if you need more space please attach a separate sheet. See also the Spruce Up Program brochure for a description of eligible exterior improvements.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**6. Describe your household members 18 years of age or older**

In the following table:

- List the persons in your households, 18 years or older who earned income in 2016, except for dependent children up to the age of 25 who are in an educational institution recognized by the Province.
- Provide the social insurance number (SIN) for each of the listed persons.
- Provide gross income (income before taxes and other deductions) for 2016 for each listed person.

Name (first and last)	Relationship to Owner	SIN	Gross Income for 2016 <i>(From Canada Revenue Agency's Notice of Assessment / Reassessment)</i>
	<b>Total Household Gross Income</b>		

Attach a copy of the 2016 Notice of Assessment or Notice of Reassessment from the Canada Revenue Agency for each household member listed who earned income in 2016. You can get copies of these notices by calling Canada Revenue Agency toll free at 1-800-959-8281, for service in English, or 1-800-959-7383, for service in French. You can also request an Option C form for each household member listed in table.

## 7. Sign the application

**Note: All persons identified as owners of the property must read this consent and must sign the application form.**

- I certify and declare that all the information contained in this application, including income, is complete and accurate in every respect. I am aware that the discovery of any false statements made in the application may result in the cancellation of this application and I agree that such action by Housing Nova Scotia will be without penalty or liabilities for damages.
- I give permission to Housing Nova Scotia, or its authorized representatives or agents to obtain or confirm my income, property, and liabilities by carrying out any necessary inquiries to Canada Revenue Agency, other divisions of the Department of Community Services, the Halifax Regional Municipality, and the Nova Scotia Land Registry in order to determine my eligibility to receive program funding.
- I hereby authorize the inspection of this property as required, on the understanding that any inspections conducted by Housing Nova Scotia or its authorized representatives are for internal administrative purposes only, and provide no guarantee or assurance of compliance with any applicable building codes or standards.
- I hereby acknowledge that any work carried out before I receive written confirmation of approval is not eligible for assistance.
- I understand that all contractual arrangements will be between me and the contractor.
- I understand that I am solely responsible for any costs exceeding the approved amount.
- I understand that site visits may be carried out to ensure the work performed has been completed, but that Housing Nova Scotia does not guarantee any aspect of the work, including the materials and workmanship.
- I understand that this application does not obligate Housing Nova Scotia to approve program funding.
- I understand that Housing Nova Scotia will keep the information provided on this form confidential and will use it and disclose only according to the provisions of the *Freedom of Information and Protection of Privacy Act*.
- I understand that the work carried out under this program must be completed and receipts and invoices submitted for payment on or before November 30, 2017, and that payment of receipts and invoices received after this date will not be advanced.
- I understand that, in the event there is a breach of these terms and conditions or it becomes known to Housing Nova Scotia that the applicant has provided information that is known to be false at the time of the application, Housing Nova Scotia will have the right to declare the entire grant due and payable.

## 8. Sign the application

I have read, understood, and agree to the terms and conditions listed above.

Name - Applicant #1 (Please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name - Applicant #2 (Please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## 9. Review Checklist (Signatures & Attachments)

- Ensure that all owners of the property have signed the application form.
- Proof of income: Submit a copy of the 2016 Notice of Assessment or Notice of Reassessment from the Canada Revenue Agency for each occupant of the household except for dependent children up to the age of 25 who are in an educational institution recognized by the Province. These must be submitted with your application regardless of the income source. See Section 6 of the application on how to obtain copies of these Notices.
- Municipal taxes: Submit proof that your municipal taxes have been paid. Submit a copy of the most recent municipal property tax bill, or if your property taxes have not been paid in full, a letter from the municipality indicating that suitable arrangements to pay the taxes are in place.
- Photographs: Submit photographs of the property showing the current condition of the exterior property to be improved including a photograph showing the property's civic address. Electronic copies of the photographs may be sent to – [Tuftscovespruceup@novascotia.ca](mailto:Tuftscovespruceup@novascotia.ca) and please include reference to your civic address.
- Estimates for requested improvements: If the estimate is \$3,000 or less, one estimate is required. If the estimate is greater than \$3,000, two estimates are required.

## 10. Return the application to us:

Housing Nova Scotia  
Housing Services, Central Regional Office  
P.O. Box 2462  
Halifax, N.S. B3J 3E4

## 11. Program information - Questions

For any questions, you may reach Housing Services, Central Regional Office at:  
Office Telephone Number: 902-424-5110  
Toll-free: 800-774-5130  
Fax: 902-424-2091  
Email: [Tuftscovespruceup@novascotia.ca](mailto:Tuftscovespruceup@novascotia.ca)

**For Housing Nova Scotia Use Only – Neighbourhood Spruce Up Program**

Case #: \_\_\_\_\_

Ownership:  Yes  No      Liens or judgments:  Yes  No      Total household income: \_\_\_\_\_

Requested grant amount: \_\_\_\_\_ Recommended grant amount: \_\_\_\_\_

Any previous Housing Nova Scotia assistance: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by Program Manager or Designate – Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_