

Certificate of Eligibility

File number

To obtain a subsidy from the Société d'habitation du Québec

Confirmation of eligibility

As a partner of the Société d'habitation du Québec (hereinafter referred to as the "Société"), I confirm the eligibility of the following owner :

Name of owner(s) _____

for financial assistance in the context of the Residential Adaptation Program for the residence located at :

Number _____ Street _____ Municipality _____ Postal code _____

Consequently, this owner is eligible for financial assistance not to exceed :

_____ (_____ \$).
Amount (Please print)

If applicable, the owner will advise the partner if there is a change of contractor, as this could result in the amount of financial aid being modified.

The partner may cancel their commitment to provide financial assistance if the work is not completed within the twelve-month period following the issuance of this eligibility certificate.

In the event that authorized work cannot be completed due to an event of force majeure duly approved by the "Société", the partner shall pay a portion of the amount indicated in this certificate, prorated to the amount of work completed, upon presentation of invoices.

The contractors' invoices must be sent to the partner upon completion of work.

The financial assistance will be paid when all the work set out in the Detailed Quotation is carried out in accordance with the requirements of the "Société".

The partner may pay the financial assistance to the owner by means of a cheque made out to the latter's name and that of a third party if the owner gives their agreement in writing.

The costs of the Residential Adaptation Assistance Program are borne by the Société d'habitation du Québec. The Canada Mortgage and Housing Corporation may participate in the funding of the program for assistance to low-income households.

Municipal partner

Name (Please print) _____

Partner's authorized representative

Name (Please print) _____

Signature _____

Year _____

Month _____

Day _____

Area code _____

Phone number _____

Extension _____