

Nisga'a URN Home Renovation Grant Program

APPLICATION

Application Date: Month/Day/Year ____/____/____

Applicant's Name:	
Address:	
Mailing Address:	
Telephone: (Day)	
Email:	
Nisga'a Citizenship No.	

PROJECT DESCRIPTION

ESTIMATED COST OF PROJECT: \$ _____

AMOUNT BEING APPLIED FOR: \$ _____ maximum \$25,000

1. Number of people permanently residing in home

Infant – 2 years _____, 3 – 9 years _____, 10 – 17 years _____, 18 – 29 years _____,
30 – 40 years _____, 40 – 60 years _____, 60+ years _____

2. Approximate age of house _____ yrs

3. Is the home primarily used as a rental property for the applicant? YES – NO

4. Is the applicant the registered owner/co-owner of the home? YES – NO

5. How long has applicant owned the home? _____

FAX, EMAIL OR MAIL COMPLETED APPLICATION ALONG WITH SUPPORTING DOCUMENTAION

TO: Capital Administrator - Nisga'a Lisims Government PO Box 231 New Aiyansh BC V0J 1A0,

Fax 250-633-2367 Email housing@nisgaanation.ca

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6. Is health and safety a primary reason for doing this project? YES – NO
7. Will this project directly benefit a handicapped resident of the home? YES - NO
8. Has other funding been applied for to do this work? YES – NO (if yes, specify).

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9. What is the approximate combined annual household income? (check one)

Under \$25,000 _____, \$25 - \$50,000 _____, \$50 - \$100,000 _____, Over \$100,000 _____
Only the income from the registered homeowners, not children, in-laws or other persons living in home.

10. Is the applicant on fixed income, example; Pension, Disability etc? YES - NO

****Detailed breakdown of the work and costs of any repairs ****

Attach separate sheet if more room is needed, and copies of any other supporting documentation.