

# RÉNO RÉGION PROGRAM (PRR)

## REGISTRATION FORM 2021-2022

\* Filling this form does not mean you are automatically eligible.  
An analysis of your information must be made in advance.

To qualify, you must :

- be the owner of the residence and occupy it full time ;
- be a Canadian citizen or permanent resident ;
- not have benefited of the RénoVillage program (RVI) or RénoRégion program (PRR) in the last 10 years, or the Emergency Repair program (PRU) in the last 5 years ;
- the residence for renovation must be single-family, semi-detached, duplex or mobile home on a foundation / piles ;
- the value of the building on the municipal tax bill **2020**, excluding land, must be less than or equal to the maximum value established by the MRC, who is **\$120,000**. You must provide a copy of the municipal tax bill ;
- the building must not be built in a flood zone 0-20 ans or in a landslide zone ;
- must have income, for all household members, below the maximum allowable income shown in the Table below. Refer to **line 15000** of the statement of Federal income. Add income of the owners and 25% of the income of other household members. Provide a complete copy of the Federal contribution notice and report of Federal income each household member living at home. Self-employed worker's incomes need to take into account the capital cost allowance on form T2125 :

Number of persons in the household	Couple or 1 person	2 to 3 persons	4 to 5 persons	6 to 7 persons
Allowable income	- \$ 31,000 (95%) Up to \$ 41,000 (94% to 20%)	- \$ 36,000 (95%) Up to \$ 46,000 (94% to 20%)	- \$ 43,000 (95%) Up to \$ 53,000 (94% to 20%)	- \$ 58,000 (95%) Up to \$ 68,000 (94% to 20%)

- you can have a financial assistance of up to \$ 12,000 maximum by the RénoRégion program. The aid rate may vary between 20% and 95%, depending on your income.

### OWNER(S) OCCUPANT(S)

Owner 1

Residence phone #	Office phone #	Mobile phone #	Email
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Owner 2

Residence phone #	Office phone #	Mobile phone #	Email
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### RESIDENCE

Adress	Municipality	Postal Code
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Building Type :  Individual / Paired    Duplex    Townhouse    Home condominium (maximum of 2 units)

Mobile home :    Landowner    Other (explain, list) :  
 Tenant of the land   \*Second home or cottage ineligible

Does the building include other areas than the eligible dwelling ? (eg. Commercial space, rental apartment, etc.) :  Yes  No

If it is a foster home or a rooming house, please indicate the number of available spaces or rooms available for rent :  
 Foster home : \_\_\_\_\_ places (9 maximum)    Room houses : \_\_\_\_\_ rooms (3 maximum)

Building value (excluding land value), according to the **2020** tax bill : \_\_\_\_\_ \$  
 Year of construction : \_\_\_\_\_ How long have you lived in this apartment as a primary residence ? \_\_\_\_\_

HOUSEHOLD COMPOSITION			
<b>Owner (s)</b>			
	Name	First name	Date of birth (YYYY/MM/DD)
1			/ /
2			/ /
<b>Spouse</b>			
1			/ /
<b>Other</b>			
1			/ /
2			/ /
3			/ /
<b>Total number of persons in the household :</b> _____		Are you of Aboriginal descent ? <input type="checkbox"/> Yes <input type="checkbox"/> No	

FUNDING ALREADY RECEIVED FROM ANOTHER SHQ PROGRAM	
Did you ever receive funding from RénoVillage program (RVI) over the past 10 years ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you ever receive funding from the Emergency Repair program (PRU) in the last 5 years ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you ever receive funding from the Logement abordable Québec program — Nord-du-Québec (LAQ-N) over the past 10 years ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you ever receive funding from the RénoRégion program (PRR) over the past 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No

WORK TO BE DONE	
<b>Indicate the major defects affecting your building</b>	
<b>Major defects</b>	
<input type="checkbox"/> 1) The outer walls (water infiltration, deteriorated exterior siding, chimney in poor condition, visible mold on interior walls) ; <input type="checkbox"/> 2) the openings (water and air infiltration to the door frames and windows) ; <input type="checkbox"/> 3) the projections (balconies and external stairs unsafe) ; <input type="checkbox"/> 4) the roof (water leakage, deterioration of the roofing felt) ; <input type="checkbox"/> 5) structure (water seepage in the foundation, sagging support elements) ; <input type="checkbox"/> 6) electricity (damaged wiring, SBP and insufficient electrical input) ; <input type="checkbox"/> 7) plumbing (plumbing deteriorated, contaminated wells / insufficient, deteriorated existing septic installation) ; <input type="checkbox"/> 8) heating (unit and damaged the existing heating system, unsafe or insufficient) ; <input type="checkbox"/> 9) heat insulation (roof and insulate foundations. Insulate walls only if there is already an intervention).	
Other eligible major defects :	
Overcrowding;	
Unfinished building – Date of beginning of work _____ / _____ / _____.	

The grant for your apartment can reach between 20% and 95 % of the cost recognized for the implementation of eligible projects, without exceeding \$ 12,000. The percentage of aid varies depending on household income. Your home must require eligible projects of at least \$ 2,000 \$ aiming to correct one or more major defects, which will be identified by the municipal partner during an inspection visit.

NOTE : Work carried out before the authorization of the municipal partner are not eligible for financial aid.

SENDING THE REGISTRATION FORM
Your request must be sent to : <b>MRC de Beauharnois-Salaberry</b> <b>2 rue Ellice</b> <b>Beauharnois, Qc. J6N 1W6</b> Or by email : <a href="mailto:pad-rr@hotmail.com">pad-rr@hotmail.com</a> For further information please contact <b>Véronique Bouchard</b> at <b>450-287-0136</b> <a href="http://www.habitation.gouv.qc.ca/programme/programme/renoregion.html">http://www.habitation.gouv.qc.ca/programme/programme/renoregion.html</a>

OWNER(S) SIGNATURE	
I certify that the following information is true and complete and I understand that any erroneous information could jeopardize my request.	
Signature	Year / Month / Day
Signature	Year / Month / Day
<b>(For use of the MRC) File No :</b>	<b>Received at the MRC</b> <small>(Year / Month / Day)</small>