**PROGRAM INCOME EMERGENCY REPAIR**

**ACTIVITY CHECKLIST**

*Complete one Checklist per Project Address*

|  |  |
| --- | --- |
| Date |  |
| Program Income Program Year |  |
| Grantee |  |
| Homeowner |  |
| Address |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **DATE GRANTEE SENT** |  | **DOCUMENTS SUBMITTED TO MEDC** | **DATE APPROVED** |
|  | **1** | 05-S Lead-Based Paint Applicability and Compliance Worksheet |  |
|  | **2** | 15-G Program Income Exempt Project Determination |  |
| **DATE GRANTEE RECD** |  | **DOCUMENTS RETAINED IN GRANTEE FILE** | **DATE DOCUMENT IN FILE** |
|  | **1** | IRS Form 1040 Adjusted Gross Income Calculation |  |
|  | **2** | 04-P Contract and Subcontract Activity, HUD-2516 |  |
|  | **3** | 15-F Land Contract Subordination, if applicable |  |