

PROGRESS REPORT

Property Information

First Nation Name		Report No.	
Address		CMHC Account No.	Phase
Province	City	Date of Site Visit	

Stage of construction: (for administrative purposes only)

<input type="checkbox"/> Prior to backfill	<input type="checkbox"/> Prior to drywall	<input type="checkbox"/> Final	<input type="checkbox"/> Other
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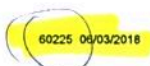
Project Id (For example: Name, Block #, Phase #, Unit #) :

	%	Actual %
Excavation, Foundation	9	
Dampproof, Drain, Backfill	2	
Frame, Sheathing, Roof	20	
Doors, Windows	6	
Rough Electrical	4	
Rough Plumbing	3	
Insulation, Air-Vapour Barrier	5	
Basement Floor	2	
Exterior Finish	12	
Interior Wall / Ceiling Finish	9	
Heat Equipment	3	
Complete Electrical	1	
Complete Plumbing	4	
Kitchen Cabinets, Vanity	6	
Finish Carpentry	5	
Interior Painting	2	
Flooring	4	
Site Works, Improvements	3	
TOTAL PERCENTAGE COMPLETE	100	

NOTE: This report has been prepared solely for Canada Mortgage and Housing Corporation's internal purposes as a guide estimating the level of completion of the above referenced property for loan advance purposes. It does not constitute a report of a technical inspection of the subject property to ensure compliance with any building or property standards and is not to be interpreted as such. CMHC does not assume any responsibility for any loss or damage to the present or any future owner of the subject property as a result of the preparation of this report.

Comments		
Signature	Position Title	Date

60225 Form



On-Reserve Renovation Programs—Work Description

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☐ **Estimate**
☐ **Invitation to bid**

Protected when completed

First Nation Name			CMHC Account No.	
Applicant Name (First Nation Name or Owner-Occupant Names)			Related CMHC Account No.	
Property Address		City	Reviewing Organization	
Province / Territory	Contact – primary contact name	Telephone Number	No. of units	No. of beds

Dwelling Type

- ☐ 001 - Single
 ☐ 002 - Semi-detached
 ☐ 003 - Duplex
 ☐ 004 - Row
 ☐ 005 - Apartment
☐ 006 - Mobile home
 ☐ 008 - Triplex
 ☐ 009 - Other:

Mandatory repairs that also address the following environmental concerns:

- ☐ Moisture and mould
 ☐ Asbestos
 ☐ Lead based paint
 ☐ Flood protection measures
☐ Contamination

The following items identify the work to be funded under the specified program:

Work Item No.	Program Section Reference No.	Work Category (Q, M)	Work Description	Estimated Cost of Labour	Estimated Cost of Materials	Total Cost of Work Item
TOTAL ►						

<input type="checkbox"/> Original <input type="checkbox"/> Amended	Site Visit Date	Reviewer's Name (Please Print)	Reviewer's Signature
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69071 FORM

69071 03/11/2017

Canada Mortgage and Housing Corporation is subject to the *Privacy Act*. Individuals have a right of access to CMHC-controlled information about themselves.

Canada



DISCLAIMER

This form is for estimating and/or bidding purposes only and is used by CMHC to evaluate the Applicant's eligibility for funding under the renovation program. In reviewing this form, CMHC makes no representation or warranty as to:

- (a) The condition of the Property.
- (b) Whether the work being performed on the Property or whether the Property itself is in compliance with applicable laws and regulations, including but not limited to any municipal, provincial, building, fire, environmental, or property codes and standards or regulations,
- (c) Whether the contractor(s) being engaged by the Applicant have the necessary skills and expertise to perform the work, or qualifications in accordance with applicable laws, regulations, or professional standards, including but not limited to any municipal, provincial requirements, and
- (d) Whether the Property's plans, dimensions or quantities provided by the Applicant under this form are accurate.

The Applicant is responsible for ensuring that all the conditions set out in items (a) to (d) have been met. CMHC assumes no responsibility for any loss or damage to the present or subsequent owners of the Property nor any tenants/occupants or other person that may result from the work being performed on the Property by the Applicant's retained contractor(s). CMHC is not a regulatory agency and does not perform a regulatory or compliance function in relation to renovations or housing construction.

Contractor - Supplier Information

Name	Address	Date
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APPLICANT DECLARATION

Please accept this bid from my/our preferred contractor. Based on this Work Description for the proposed renovations, I/we have verified our responses to the two *Canadian Environmental Assessment Act* (CEAA) questions and accept responsibility for ensuring that all the conditions set out in items (a) to (d) of the Disclaimer have been met.

CANADIAN ENVIRONMENTAL ASSESSMENT ACT (CEAA)

The proposed renovations only involve maintenance or repair and will occur within the same footprint as the existing building.

☐ Yes ☐ No

The proposed renovations include an expansion or demolition of an existing building: within 30 m of a water body; within 250 m of an environmentally sensitive area; or, that may release a polluting substance into a water body.

☐ Yes ☐ No

Applicant Name (Print)	Applicant Name (Signature)	Date
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On-Reserve Renovation Programs—Report

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☐ **Progress**

☐ **Final**

Protected when completed

First Nation Name			CMHC Account No.	
Applicant Name (First Nation Name or Owner-Occupant Names)			Related CMHC Account No.	
Property Address		City	Reviewing Organization	
Province / Territory	Contact – primary contact name	Telephone Number	No. of units	No. of beds

*The following items identify the work approved for funding under specified housing program:
Refer to the On-Reserve Renovation Programs Work Description for detailed descriptions.*

Work Item No.	Program Section Reference No.	Work Description	Approved Item Cost	Work Completed (%)	Work Completed (\$)*	Comments
					\$0.00	

TOTAL ►

(Rounded)

* May be subject to verification

The Reviewer acknowledges that all work has been completed as outlined above.

Site Visit Date	Reviewer's Name (Please Print)	Reviewer's Signature
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69086 FORM

**Physical Condition Review
Single Family Dwelling Form**

CMHC Account:	Phase:	Unit Identifier:
Number of Bedrooms in Unit:	Year Built:	Occupant's Name:

	P	M / RR	Cost	Notes/Description (Problem Cause and Recommended Action - If consultant is required, so indicate)
Exterior / Site				
Grade (Around Foundation)				
Foundation (Above Grade)				
Water storage / Septic tanks / Oil Tank				
Wall Finish				
Painted surfaces				
Caulking (Windows / Doors / Wall Finish)				
Flashing (Windows / Doors / Siding / Wall Finish)				
Glass				
Window Screens				
Soffits & Fascia				
Mold Observed				
Eavestroughing / Downspouts / Splashpads				
Attic ventilation				
Roof Surface				
Roof Flashings				
Chimney				
Steps / Landings				
Hand / Guard rails				
Balcony Deck				
Walkways				
Driveways / Parking				
Entrance Doors & Storm Doors				
Storage Shed				
Mold Observed				
Other				
Crawlspace / Basement				
Stairs / Handrails				
Basement / Crawl Space Floor				
Perimeter Insulation				

	P	M / RR	Cost	Notes/Description (Problem Cause and Recommended Action - If consultant is required, so indicate)
Foundation Walls / Grade beam				
Columns / Beams / Joists				
Basement Stairs / Entrance				
Ventilation				
Windows				
Evidence of Water / Moisture Infiltration				
Other				
Systems (Heat / Ventilation)				
Primary Heat Source				
Date Last Serviced (if known)				
Heat Distribution System				
HRV				
Air Exchanger				
Clearance to Combustibles				
Range Hood				
Mold Observed				
Other				
Systems (Plumbing / Sump)				
Sump Pump / Pit				
Water / Sewage pumps				
Hot Water Tank				
Drain / Supply lines				
Exterior Hose Bib				
Laundry Tub				
Washer / Dryer				
Other				
Mold Observed				
Systems (Electrical)				
Fixtures				
Switches / Receptacles				
Smoke Detector / Heat Detector				
CO Detector				
Electrical Panel				
Mold Observed				
Other				
Kitchen				
Cabinets				

	P	M / RR	Cost	Notes/Description (Problem Cause and Recommended Action - If consultant is required, so indicate)
Countertops / Backsplash				
Sink / Faucets / Stopper				
Fridge / Range				
Range Hood				
Flooring				
Wall Finish				
Ceiling Finish				
Mold Observed				
Other				
Bathroom(s)				
Vanity				
Sink / Faucet / Stopper				
Medicine Cabinet / Mirror				
GFCI Plug				
Towel Bar / TP Dispenser				
Water Closet				
Tub / Shower / Faucets				
Tub Surround / Enclosure				
Wall Finish				
Ceiling Finish				
Exhaust Fan				
Flooring				
Mold Observed				
Other				
Interior of Unit (general)				
Interior Doors (Swinging)				
Interior Doors (Bi-fold / Pass)				
Hardware				
Windows				
Stairs / Handrails				
Ceiling Finish				
Wall Finish				
Painting				
Flooring (Other than Bathroom, Kitchen and Bedrooms)				
Built-in Closets / Shelves				
Wood Work				
Storage				

	P	M / RR	Cost	Notes/Description (Problem Cause and Recommended Action - If consultant is required, so indicate)
Other				
Mold Observed				
Bedrooms				
Floor Finish				
Wall Finish				
Ceiling Finish				
Interior Doors				
Window				
Closet / Shelving				
Mold Observed				
Other				

Comments:

P: Priority Urgent: Immediate ST: Short Term, within 1 year MT: Medium Term, from 1 to 3 years
 LT: Long Term, from 3 to 5 years

M / RR: Maintenance: correction would be paid from project's annual maintenance budget.
 Replacement Reserve: correction would be paid from project's replacement reserve.

The information provided in this report is for the sole use of CMHC and is the opinion of the author as to the visual condition on the date inspected. There is no representation or warranty as to the present or future condition or value of the property, or that the property is in conformance with any building or property standards or codes and nothing in this report shall be construed as such. The review was of a non-invasive nature, no structural inspection was undertaken. Neither CMHC nor the author assumes any responsibility for any loss or damage to the present or subsequent owners of the property as a result of the preparation of this report.

**Physical Condition Review
Building Features Form
Single and Multiple Projects**

CMHC Account:	Phase:	Applicant:
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Building Identifier (Address, Building name or Number)			Number of Units:	Year Built:
Dwelling Type	Exterior Finish	Roofing	Heating System	Fuel Type
<input type="checkbox"/> Single Detached	<input type="checkbox"/> Brick	<input type="checkbox"/> Asphalt Shingle	<input type="checkbox"/> Forced air	<input type="checkbox"/> Gas
<input type="checkbox"/> Semi - Detached	<input type="checkbox"/> Vinyl	<input type="checkbox"/> Asphalt Shingle	<input type="checkbox"/> Electric / baseboard radiation	<input type="checkbox"/> Propane
<input type="checkbox"/> Duplex	<input type="checkbox"/> Aluminum	<input type="checkbox"/> Asphalt Shingle	<input type="checkbox"/> Electric / flr / ceiling radiation	<input type="checkbox"/> Oil
<input type="checkbox"/> Row	<input type="checkbox"/> Stucco	<input type="checkbox"/> Asphalt Shingle	<input type="checkbox"/> Electric / panel radiation	<input type="checkbox"/> Oil / wood
<input type="checkbox"/> Apartment	<input type="checkbox"/> Wood	<input type="checkbox"/> Asphalt Shingle	<input type="checkbox"/> Electric	<input type="checkbox"/> Electricity
<input type="checkbox"/> Mobile Home	<input type="checkbox"/> Stone		<input type="checkbox"/> Stove / space heater / open firepl	<input type="checkbox"/> Wood / electric
<input type="checkbox"/> Hostel / Rooming House	<input type="checkbox"/> Log Home		<input type="checkbox"/> Hotwater	<input type="checkbox"/> Wood / gas
<input type="checkbox"/> Triplex	<input type="checkbox"/> Hardboard		<input type="checkbox"/> Hotwater / radiator	<input type="checkbox"/> Wood
<input type="checkbox"/> Stacked	<input type="checkbox"/> Concrete		<input type="checkbox"/> Hotwater / baseboard radiation	<input type="checkbox"/> Solar
<input type="checkbox"/> Garden Suites	<input type="checkbox"/> Engineered System		<input type="checkbox"/> Steam	<input type="checkbox"/> Solar / electricity
<input type="checkbox"/> Portable Units			<input type="checkbox"/> Steam / radiator	<input type="checkbox"/> Solar / other
<input type="checkbox"/> Other			<input type="checkbox"/> Steam / baseboard radiation	<input type="checkbox"/> Coal
			<input type="checkbox"/> Pipeless furnace	<input type="checkbox"/> Other
			<input type="checkbox"/> Other	

Utilities
<input type="checkbox"/> Fully Serviced (water, sewer, hydro)
<input type="checkbox"/> Unserviced or Partialy Serviced

Physical Condition Review
Building Features Form
Single and Multiple Projects

CMHC Account:	Phase:	Applicant:
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Number of Stories	Foundation	Windows	Heat Recovery Ventilator
<input type="checkbox"/> 1	<input type="checkbox"/> Concrete	<input type="checkbox"/> Sealed Units	<input type="checkbox"/> Yes
<input type="checkbox"/> 1.5	<input type="checkbox"/> PWF	<input type="checkbox"/> Wood	<input type="checkbox"/> No
<input type="checkbox"/> 2	<input type="checkbox"/> Concrete Block	<input type="checkbox"/> Aluminum	
<input type="checkbox"/> 3	<input type="checkbox"/> Gravel Pad	<input type="checkbox"/> Vinyl	
<input type="checkbox"/> 4	<input type="checkbox"/> Slab on Ground	<input type="checkbox"/> Sliding	
<input type="checkbox"/> 5	<input type="checkbox"/> Concrete Piers	<input type="checkbox"/> Casement	
<input type="checkbox"/> 6	<input type="checkbox"/> Engineered	<input type="checkbox"/> Awning	
<input type="checkbox"/> 6+	<input type="checkbox"/> Stone		
	<input type="checkbox"/> ICF		
	<input type="checkbox"/> SIP		

Neighbourhood Rating	Relationship to Surrounding Use	Adjacent Land Use
<input type="checkbox"/> Improving	<input type="checkbox"/> Superior	<input type="checkbox"/> Residential
<input type="checkbox"/> Stable	<input type="checkbox"/> Similar	<input type="checkbox"/> Commercial or Industrial
<input type="checkbox"/> Declining	<input type="checkbox"/> Inferior	<input type="checkbox"/> Mixed

Evidence of Damage as a result of Fire or Flood	
<input type="checkbox"/> None	<input type="checkbox"/> Flooding as a Result of Plumbing System Failure
<input type="checkbox"/> Fire	<input type="checkbox"/> Flooding as a Result of Surface Water Management
<input type="checkbox"/> Overland Flooding	

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