

### Application Form

This form is to be completed for furniture and household appliances purchased from a recognized retailer.

#### ► Applicant Information

Surname, given name \_\_\_\_\_

P.O. Box \_\_\_\_\_ Village \_\_\_\_\_

Postal code \_\_\_\_\_ Date of birth (YYYY/MM/DD) \_\_\_\_\_

#### ► Furniture or Appliance Information

Refrigerator  Kitchen table and chairs  Kitchen stove  Dryer  Freezer  Sewing machine

Dishwasher  Bed frame and mattress  Washing machine  Couch  Dresser

Make \_\_\_\_\_

Model \_\_\_\_\_

Retailer \_\_\_\_\_

Date of purchase (YYYY/MM/DD) \_\_\_\_\_

#### ► Applicant Contact Information and Signature

Name \_\_\_\_\_ Email \_\_\_\_\_

Telephone (day) \_\_\_\_\_ Telephone (evening) \_\_\_\_\_

I certify that the information entered on this form is complete and accurate.

Signature \_\_\_\_\_ Date \_\_\_\_\_

► Attestation of Residency (To be completed by your village's mayor or secretary-treasurer, or by the human resources department of your employer. On completion, this attestation of residency is valid for one year for all regional cost-of-living reduction measures requiring an attestation of residency.)

I hereby attest that \_\_\_\_\_ has been a resident of Nunavik for the past 12 consecutive months.

Name \_\_\_\_\_ Title \_\_\_\_\_ Northern village  
or employer \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

# Household Appliance and Harvesting Equipment Program

Household Appliances and Furniture

## Application Form Instructions

Because the cost of living in Nunavik is very high, the Kativik Regional Government (KRG), the Makivik Corporation and the Québec government have undertaken to offer assistance to Nunavimmiut. The household appliance and furniture component of the Program supports costs for new major household appliances and furniture.

### ► Who is eligible?

Anyone who is aged at least 18 as of January 1 of the application year and has been a resident of Nunavik for at least 12 consecutive months is eligible under the household appliance and furniture component of the Program. The sales receipt or invoice must indicate the name of the subsidy applicant.

### ► How long do I have to apply?

This form must be submitted to the KRG Finance Department no later than 120 days following the date of purchase.

### ► What items are covered?

- Refrigerator
- Kitchen stove
- Washing machine
- Dryer
- Freezer
- Dishwasher
- Sewing machine
- Kitchen table and chairs
- Bed frame and mattress
- Couch
- Dresser

Eligible purchases have no minimum purchase value and may include transportation.

### ► What is the amount of the subsidy?

The household appliance and furniture component of the Program provides a subsidy of 40% per eligible item to a maximum of \$400. The maximum annual cumulative amount payable per subsidy applicant is \$1750.

### ► How do I apply?

This application form must be completely and properly filled out and mailed to the KRG. Each application form must include copies of:

- your sales receipt or invoice;
- the shipping invoice to your community, if the item was purchased outside of Nunavik;
- valid personal identification indicating your date of birth;

### ► Attestation of residency – eligible employers

- Kativik Regional Government
- Kativik Municipal Housing Bureau
- Makivik Corporation
- Health centre (Ungava Tulattavik or Inuulitsivik)
- Nunavik Regional Board of Health and Social Services
- Federation of Cooperatives of Northern Québec
- Raglan Mine
- Northern village
- Landholding corporation
- Air Inuit
- First Air
- Kativik School Board
- Northern Stores
- Newviq'vi/Tullik
- Hydro Québec
- Childcare centre
- Bell
- Canada Post
- CIBC
- Taqramiut Nipingat Inc.
- Kuujjuaq Inn
- Nunavik Communications

This program may be modified or suspended at any time.

For further information, contact the KRG Finance Department at 1-877-964-2961.

### ► **IMPORTANT!**

Before mailing this document, make sure that you have:

- Completely and accurately filled out, signed and dated your application form.
- Completed the attestation of residency section on your application form, if necessary. (Attestations of residency completed for any regional cost-of-living program remain valid for one year.)
- Attached a copy of your sales receipt or invoice.
- Attached a copy of the shipping invoice (airfreight or sealift) to your community, if the item was purchased outside of Nunavik.
- Attached a copy of valid personal identification indicating your date of birth (health card, driver's licence or other).

### **Mail your application form to**

Household Appliance and Harvesting Equipment Program  
Finance Department  
KATIVIK REGIONAL GOVERNMENT  
P.O. Box 9, Kuujjuaq QC J0M 1C0

**OR**

**Email your application form**  
with all relevant documents to  
[col@krg.ca](mailto:col@krg.ca).