

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 _____

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

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, Kuujuaq QC J0M 1C0

OR

Email your application form

with all relevant documents to
col@krg.ca.