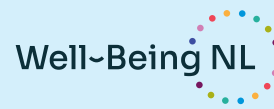


Aging Well at Home Grant

Application Form



Program Details

The Aging Well at Home Grant provides financial assistance to low-income adults over the age of 65 who live in their own home to help with the costs of household and health care services. Eligible households will receive \$400. Only one person per household may apply for the supplement.

Who can apply for the grant?

Eligible individuals must:

- Be 65 years of age or older as of March 31, 2024;
- Have an annual household net income of \$49,000 or less for couples or \$32,000 or less for single households ("Net Income" is the income identified on Line 23600 of the Federal Income Tax Return or in the Notice of Assessment provided by the Canada Revenue Agency);
- Live in a home or apartment that you own or rent. Only one person can apply from each household;
- Be a resident of Newfoundland and Labrador; and,
- Have paid, or will pay, for household and health care services between April 1, 2024, and March 31, 2025.

What services are eligible?

Funding can be used for the following services that help you stay in your home including:

- Cooking and meal preparation (excluding the cost of food);
- Grocery and meal delivery (excluding the cost of food);
- Health care services – such as eye exams, dental work, mental health supports, physical therapy, occupational therapy, massage therapy, foot care, dietitians, audiology, and speech language pathologists;
- Home cleaning, laundry, organization, and help with downsizing or moving;
- Medication and prescription delivery (excluding cost of medication and prescription);
- Outdoor work – such as driveway maintenance, landscaping, lawn care, snow removal, stacking wood, and tree removal;
- Small home repairs – such as windows, doors, roof, plumbing, electrical, decks, fencing, siding, and painting; and,
- Transportation – such as taxis, ride shares, shuttles, and other methods of transportation to get to appointments.

How to apply

Submit completed application form and supporting documentation online to:

Aging.Well@nlhealthservices.ca

or by mail to:

NL Health Services-Central Zone

3 Bell Place, Level 3

Gander, NL A1V 2T4

- Supporting documentation to submit with the application to determine eligibility includes:
 - Copies of an individual's Notice of Assessment and spouse's Notice of Assessment (if applicable) from tax year 2023;
 - Proof of address (proof of address can include a copy of a utility bill, mortgage document, lease/rental agreement, or property tax assessment in the applicant's name);
 - Copy of MCP card;
- Applications will be processed in the order they are received. Once funds are fully allocated, the program will no longer accept applications;
- The deadline to apply is February 28, 2025; and,
- If you need help completing your application call 709.651.6273.

Receipts

- Keep a copy of your receipts for household and health care services for your records. You only need to provide receipts if you are asked to provide receipts.

Acceptable documents include receipts:

- on a piece of paper or in a notebook (written or signed by the service provider);
- in a receipt book (written or signed by the person or business providing the service); or,
- from a business.

Receipts need to include:

- name of the person receiving the service;
- type of service received;
- cost of the service;
- date of the service; and,
- name and address of the person or business providing the service.

Applicant's Name: _____

Date of Birth: _____ **Marital Status:** _____

Spouse's Name (if applicable): _____

Mailing Address: _____

Physical Address (if different than mailing address): _____

Phone number: _____

Email: _____

2023 net income (Line 23600 of the Federal Income Tax Return or in the Notice of Assessment provided by the Canada Revenue Agency)

List family income (for couple applicants): _____

List individual income (for single applicants): _____

Will you have expenses for household or health care services between April 1, 2024, and March 31, 2025?

Yes No

Do you live in a home that you own or rent?

Yes No

Required Documentation

I have enclosed a copy of my Notice of Assessment and my spouse's Notice of Assessment (if applicable) from tax year 2023

I have enclosed proof of address.

I have enclosed a copy of my MCP card.

The Aging Well at Home Grant is in the amount of \$400 for expenses related to service costs incurred between April 1, 2024, and March 31, 2025. You may be asked to provide receipts for the full amount at a later date. Important: An application can only be made once per program year.

Certification

I declare that the information provided on this application form is true to the best of my knowledge.

I agree to keep receipts for services purchased with the Aging Well at Home Grant.

Signature: _____ **Date:** _____