



# FHR PROGRAM APPLICATION



## Homeowner's Information

Name(s): \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Family Size—number residing in the home: \_\_\_\_\_

Type of dwelling: Single Family \_\_\_\_\_ Duplex \_\_\_\_\_ Apartment \_\_\_\_\_ Condominium \_\_\_\_\_

Manufactured/Mobile Home \_\_\_\_\_ If a mobile home, do you also own the property? Yes \_\_\_\_\_

No \_\_\_\_\_

If you have a landlord, please provide name, address, and phone number

\_\_\_\_\_  
Mortgage Holder's name & address: \_\_\_\_\_

Does a household member have a disability which limits access to and use of the dwelling unit? Y \_\_\_\_\_ N \_\_\_\_\_

**2016 Total Household Income:** \_\_\_\_\_

### **TAX RETURN VERIFICATION**

We are required to visually verify your household income. Please provide us with the FY 2016 tax return for all wage earners residing in the household. Your tax documents will not be kept – but we are required to verify the total income for the home under the terms of the grant.

*I certify that the information I have provided is complete and true to the best of my knowledge. I understand that omission of pertinent information and willful or serious misrepresentation in the application procedure can result in my ineligibility for participation in the FHR program. I have listed above the total FY 2016 income received by all members of the household.*

APPLICANT/OWNER/TENANT: \_\_\_\_\_ DATE: \_\_\_\_\_

FHR PROGRAM MANAGER: \_\_\_\_\_ DATE: \_\_\_\_\_

**Property Information**

Municipality: \_\_\_\_\_

Location of Project (ADDRESS): \_\_\_\_\_

Post Office \_\_\_\_\_ Zip: \_\_\_\_\_

Is the property within the 100-year floodplain? Y / N / Not Sure

Was property damaged by Tropical Storm Lee (Sept 2011)? Y / N

Are your utilities above ground Y / N

Is there property damage evidence: Pictures \_\_\_\_\_ Videos \_\_\_\_\_ News Articles \_\_\_\_\_

Which of the following do you possess for the property?

Deed, Mortgage, Article of Agreement: \_\_\_\_\_ Rental Agreement \_\_\_\_\_

**I certify that this property is my principal residence. \*Please initial:** \_\_\_\_\_

*A principle residence is a property occupied at least 50% of the year.*

**Mitigation Project Requested:**

There are two mitigation available options. Please indicate if you are interested in one or both options. Only one option will be completed per property but please select both if interested.

1. Basement Fill/Evacuation Yes \_\_\_\_\_ No \_\_\_\_\_

- There are currently funds secured to perform this task. We anticipate accommodating the largest amount of projects under this task. The goal is to reduce the damage to your utilities and remove the risk of catastrophic foundation failure. This may not get you out of paying flood insurance, but it will reduce your premiums.

2. Structural Property Elevation Yes \_\_\_\_\_ No \_\_\_\_\_

- There are currently funds secured to perform this task. The selection process for this task will be more competitive and rigorous as funds are limited.
- This project will vastly reduce your flood insurance premiums, but the cost per project is much higher. The County will only be able to do a few of these with the money we have.

If a program becomes available for a property buy-out, would you be interested?

Yes \_\_\_\_\_ No \_\_\_\_\_