

SINGLE-FAMILY HOME REPAIR ELIGIBILITY PROGRAMS (SFHREP) EMERGENCY MANAGEMENT DISASTER PREPAREDNESS ACKNOWLEDGMENT FORM



NOTE: ONLY REQUIRED FOR THOSE WHO LIVE IN A FLOOD ZONE.

					Application ID #			
Program Selection:	Home Repair Program (HRP)		Disaster Recovery 21 (DR21) Pathway:			Reimbursement:	Repairs:	
	Disaster Recovery 2024 (DR24)		Other:					
Applicant Name:			Co-Applicant Name:					
Is this form being completed for a listed household member:			Yes	No	If YES, list HH Name:			
Home Address		City	State		Zip Code			

EMERGENCY MANAGEMENT DISASTER PREPAREDNESS STATEMENT

The City of Houston Housing & Community Development Department (HCD) has an interest in Rehabilitation, Reconstruction, or New Construction of your (applicant/occupant/homeowner) property cited above (located in 100 year floodplain), HCD is now required to provide you with the information on Hurricane and Disaster Preparedness thus you can be prepared/able to handle the effects of natural and/or man made disasters. In addition, we recommend that you register with the Emergency Notification System (ENS) and the State of Texas Emergency Assistance Registry (STEAR) should additional assistance become available.

APPLICANT/OCCUPANT/HOMEOWNER ACKNOWLEDGMENT

I/we have read and understood the Emergency Management Disaster Preparedness Statement and HCD's Obligation.

I/we have received the booklet Disaster Preparedness Guide.

APPLICANT/OCCUPANT/HOMEOWNER ACKNOWLEDGMENT

I/we have registered with the Emergency Notification System (ENS) on <https://houstonemergency.org>.

I/we have registered (Individual Resident or Facility) with the State of Texas Emergency Assistance Registry (STEAR) online, called 2-1-1, or visited <https://stear.texas.gov>.

RELATIONSHIP MANAGER/ELIGIBILITY SPECIALIST ACKNOWLEDGMENT

I/we have informed the applicant/occupant/homeowner (client) about HCD's obligation and client(s) is/are aware of the said responsibility.

CERTIFICATION OF ACCURACY

This is to certify that I/we have been presented with and reviewed the information listed above, and hereby, state to the best of my/our knowledge, the information provided is true and accurate.

Applicant/Occupant/Homeowner	Date	Eligibility Specialist/City Employee	Date
Applicant/Occupant/Homeowner	Date		