



Texas General Land Office
Community Development and Revitalization
Reimbursement Signing Meeting Verification

Program Information		
Program:	Disaster:	
Case Manager Name:	Vendor:	
Project Information		
Applicant Name(s):		
Project ID:		
Project Physical Address:		
City:	State:	ZIP Code:
Builder Information		
Builder:	Builder Representative Name:	
Required Reimbursement Signing Meeting Documents		
Did the applicant review and sign the Unsecured Forgivable Promissory Note?	Yes	No
Does the applicant understand that they must continue to hold an ownership interest in the home for the duration of the one-year affordability period?	Yes	No
Does the applicant understand that they must live in the home as their primary residence for the duration of the one-year affordability period?	Yes	No
Does the applicant understand that they must hold insurance coverage for the insurance types identified below on the home for the duration of the one-year affordability period? <input type="checkbox"/> Homeowners <input type="checkbox"/> Flood <input type="checkbox"/> Windstorm <input type="checkbox"/> Fire	Yes	No
Does the applicant understand that they must stay up to date on their property tax payments for the duration of the one-year affordability period?	Yes	No
Does the applicant understand that they must not take out an unapproved loan against the home at any time during the one-year affordability period?	Yes	No
Did the applicant review and sign the Subrogation Agreement?	Yes	No
Does the applicant understand that they must report any future funds received for housing repair relating to damages from the Disaster?	Yes	No
Does the applicant understand that they will be responsible for repayment of any Duplication of Benefits (DOB) accrued due to the acceptance of future funds for housing repair relating to damages from the Disaster?	Yes	No
Accommodation Information		
If applicable, did the applicant complete the Construction Modifications portion of a signed Form 14.27 Verification of Disability?	Yes	No
If applicable, does the applicant understand that any ADA accommodation requests made after the Reimbursement Signing Meeting may be denied due to programmatic constraints?	Yes	No
Federal Flood Risk Management Standard (FFRMS) Floodplain Information		
Was the applicant informed the residence is located in a FFRMS floodplain? (If no, proceed to the next section of the form.)	Yes	No
Was applicant notified of their FFRMS floodplain status? Applicant's FFRMS floodplain status:	Yes	No
Does the applicant understand that flood insurance is required for the home?	Yes	No
Does the applicant understand that elevation is required for the home?	Yes	No

Is the applicant aware of any flood-related infrastructure impacting the site (dams, levees, etc.)? List of flood-related infrastructure impacting the site:	Yes	No
Was the applicant provided with a map of the closest ingress and egress or evacuation routes?	Yes	No
Was the applicant notified of all previous FEMA flood insurance claims on the property?	Yes	No
Was the applicant provided with information on emergency notification resources?	Yes	No

Applicant Verification

By my signature below, I verify that the information in this form was discussed with me. I understand the information provided and verify my responses were true and correct. I understand that providing false representations herein constitutes an act of fraud and that submitting false, misleading, or incomplete information may result in my household's ineligibility to participate in the Program.

Warning: Any person who knowingly makes a false claim or statement to HUD or causes another to do so may be subject to civil or criminal penalties under 18 U.S.C. 287, 1001 and 31 U.S.C. 3729.

Signatures

Applicant Printed Name:	Date:
Applicant Signature:	
Applicant Printed Name:	Date:
Applicant Signature:	
Builder Printed Name:	Date:
Builder Signature:	
Case Manager Printed Name:	Date:
Case Manager Signature:	