

Emergency Home Repair Certification | MHTF – Disaster Relief

Date: _____

Homeowner(s) Name: _____

Homeowner Address: _____

City: _____ County: _____ Zip: _____

Agency Name: _____

This form certifies that a repair deemed to be life-threatening in nature has been identified at the property listed above. Due to the urgency of emergency repairs, the collection of bids, proof of insurance denial, and the filing of a Regulatory Agreement will not be required.

Please select all eligible Emergency Home Repair activities that apply:

- | | |
|--|--|
| <input type="checkbox"/> Propane, natural, or methane gas detected | <input type="checkbox"/> Exposed Wires or open electrical panels |
| <input type="checkbox"/> Water leaks on or near electrical equipment | <input type="checkbox"/> Blocked or unusable emergency or fire exits |
| <input type="checkbox"/> Blocked fire escapes or ladders | <input type="checkbox"/> Missing gas-fired hot water heater/HVAC |
| <input type="checkbox"/> Misaligned chimney | <input type="checkbox"/> Window security bars preventing exit |
| <input type="checkbox"/> Expired fire extinguishers | <input type="checkbox"/> Inoperative/missing smoke detectors |

Emergency Home Repair Eligibility:

Please note that if emergency home repairs are performed on anything other than what is listed above, they will not be considered eligible.

Emergency Home Repair is reserved for assisting homeowners that are uninsured or underinsured. Homeowners must be at or below 75 percent AMI and the repair must be performed on eligible owner-occupied, single-family properties. The Emergency Home Repair must not exceed \$5,000 in cost.

[Signatures required on page 2]

AGENCY REPRESENTATIVE OR INSPECTOR: The undersigned Agency Representative or Inspector certifies that he/she personally performed the initial inspection of the premises and that the foregoing is his/her true assessment that the Home Repair was life-threatening in nature and an Emergency Home Repair was required.

Representative/Inspector Signature: _____

Representative/Inspector Printed Name: _____ Date: _____

HOMEOWNER:

The undersigned homeowner certifies that they have been made aware of the necessary Emergency Home Repairs, and that the eligible Emergency Home Repairs listed above have been completed.

The undersigned homeowner acknowledges and agrees that if any of the above Emergency Home Repair is fully covered by their homeowner insurance, they will be responsible for repayment to MHDC.

Homeowner Signature: _____

Homeowner Printed Name: _____ Date: _____

Homeowner Signature: _____

Homeowner Printed Name: _____ Date: _____