

**Texas Department of Housing and Community Affairs**

Notice of Property Restoration after a Declared Disaster

[Name of Development Owner] (the Development Owner), the owner of [Development Name], located in [COUNTY], [CMTS Number] (the Development), by and through its duly authorized representative identified below, hereby certifies that:

1. The following building exteriors and systems (by BIN #), common areas, and units that were affected by the Presidentially declared disaster DR-4781-TX that occurred between April 26, 2024 and June 05, 2024 are fully restored as of ENTER DATE for suitable occupancy.

Common:

BIN’s:

1. All buildings and units affected by the declared disaster have been fully restored and assessed by the individual or entity named above as in good repair and meeting decent, safe, and sanitary housing standard as defined by Texas Administrative Code Chapter 10 §10.621 and The 8823 Audit Guide Chapter 6. **The following items are attached for The Department’s review**:

 [ ]  Certificates of Occupancy provided by the City

**OR**

 [ ]  Acceptable evidence of correction is a certification from an appropriately licensed professional that the item now complies with the inspection standard or other documentation that will allow the Department to reasonably determine when the repair was made and whether the repair sufficiently corrected the violation(s). Acceptable documentation includes: copies of work orders (listing the deficiency, action taken or repairs made to correct the deficiency, date of corrective action, and signature of the person responsible for the correction), invoices (from vendors, etc.), or other proof of correction. Photographs are not required but may be submitted if labeled and only in support of a work order or invoice. The Department will determine if submitted materials satisfactorily document correction of noncompliance.

**OR**

 [ ]  A summary of restoration work required or insurance assessments

 The owner may be required to provide evidence that restoration work has been completed, such as a

 signed Schedule of Values or signed invoices

This certification is made by the Development Owner and is signed by a duly authorized representative of the Development Owner, who is so authorized by reason of his/her position as the: [State Fully the Relationship Between the Signer of the Certification and the Development Owner]

All the foregoing statements, as well as the date, signature and identifying information of the signer and the Development Owner that follows are HEREBY CERTIFIED as true and accurate this [Day] of [Month], [Year].

Development Owner:

By: Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Print Name:

 Title:

Please upload the certification, completed in full, to the Electronic Document Attachment system through the property’s Compliance Monitoring and Tracking System (CMTS) account to the attention of **Casualty Loss**. For instructions on how to use the attachment system, please see [*Attaching Documents to CMTS*](https://www.tdhca.texas.gov/sites/default/files/pmcdocs/CMTSUserGuide-AttachingDocs.pdf)*.* The Owner is responsible for ensuring that submissions are complete and accurately report the condition of the affected property.