

JUSTIFICATION FOR PROPOSED RECONSTRUCTION

Date: _____

Property Address: _____

Please check your method of justification to determine eligibility for reconstruction. Check one only.

- 1. The property has been condemned by a codes official with appropriate jurisdiction.
Please submit a copy of the signed notice of condemnation

- 2. Based on the scope of work write-up/independent cost estimate prepared by Grantee's Rehab Coordinator the property repairs will exceed 75% of the after rehabilitation value.
Please submit the Scope of Work HO-6A.

After Rehab Value based on the HO-22: _____

Estimated Cost to Rehab based on the HO-6A: _____

Percentage of cost to Rehab to After Rehab Value: _____

- 3. In the opinion of the Rehab Coordinator the structural integrity of the existing home is failing and is not affordable or cost effective to rehabilitate.
Please submit the completed HO-8

After Rehab Value based on the HO-22: _____

Estimated Cost to Rehab based on HO-8: _____

Percentage of cost to Rehab to After Rehab Value: _____

This statement certifies that I have received the initial property inspection and HO-6A or HO-8 for the above-referenced unit and hereby certify this reconstruction and demolition is in compliance with regulations of the HOME RECONSTRUCTION PROGRAM as outlined in the THDA HOME Program Operating Manual and Federal Register 24 CFR Part 92.

HOME Grant Administrator or Chief Elected Official

Date

All documentation must be submitted via the Community Programs EDT.