NORTH CAROLINA HOUSING FINANCE AGENCY Essential Single-Family Rehabilitation Loan Pool – Disaster Recovery

Owner Certificate of Satisfaction

Owner(s):			
Address:			
Prime/Gen	eral Contractor:		
Date of Co	ntract:		

CERTIFICATIONS:

I hereby certify that I have inspected the repairs or modifications made to my home and that the construction work has been satisfactorily completed in accordance with the construction contract.

I understand that the assistance that I have received under the Essential Single-Family Rehabilitation Loan Pool – Disaster Recovery Program was intended only to achieve the following goals:

- to alleviate housing conditions which pose an imminent threat to the life or safety of low- and very low-income homeowners with special needs; and/or
- to provide accessibility modifications and other repairs necessary to prevent displacement of very low- and low-income homeowners with special housing needs, such as frail elderly and persons with disabilities.

I also hereby certify that neither ______(coordinating agency) nor the North Carolina Housing Finance Agency is obligated to make the home conform to any local, state or federal housing quality standards.

Owner's Signature

Date

Co-owner's Signature Date