

Grayson County Residential Safe Room Rebate Program Application

Home Owner Information

Name(s) _____

Current Address _____

City _____ ST _____ Zip Code _____ County _____

Home Phone # _____ Work Phone # _____

Mobile/Cell # _____ Fax # _____

Property Location-Legal Description

Subdivision or Survey Name _____

Acreage _____ Lot _____ Block _____

Abstract _____ In A Floodplain _____ Historically Designated Home _____

Property Address

Address _____

City _____ State _____ Zip Code _____

Date the home was built _____

Safe Room Information--(Please Answer The Following, If Known At This Time)

Date of Installation _____ Safe Room Type: In-Ground _____ In-Residence _____

Exact Location for Safe Room _____

Name of Contractor _____

Please Complete And Sign The Following

(Prior to reimbursement, the following information must be completed):

911 Address _____

Latitude _____ Longitude _____ "Latitude/Longitude as required by FEMA"

I hereby authorize the release of the safe room information to the local emergency first responders including but not limited to the fire department, police department, and emergency medical services providers to assist in location and rescue efforts.

(Signature of Owner-Applicant/

(Date/

Please Read the Following:

- This form does not guarantee that your safe room application will be funded.
- If funded, this program provides a 50% rebate (up to \$3,000 to eligible participants who install safe rooms).
- Qualifying safe rooms must be built/ installed, and certified by a builder or installer.
- I certify that my property is not located in a floodplain or a Coastal Surge Zone (V Zone).
- I understand that my participation in this program is completely voluntary.
- I, understand, have carefully reviewed this form and understand all the information herein. To the best of my knowledge, the answers hereto are true and correct.

(Signature of Owner)

(Date)