

Applicant Name

FEMA Registration #44-1234567

Disaster Code (Ex. DR-4559-LA)

Disaster Name (Ex. Hurricane Laura)

Date of Appeal (Ex. January 1, 2021)

FEMA,

I, **Applicant Name**, am appealing the Home Repairs Assistance monies that I received and requesting an additional home inspection. I cannot live in my home due to health, habitability, and safety reasons. I did not have insurance at the time of the disaster. The total cost of repairs to my home is \$**[Enter amount listed in contractor estimate]**, which is significantly more than the \$**[Enter amount received from FEMA]** I have already received from FEMA. Please reconsider me for additional housing assistance monies.

I hereby declare under penalty of perjury that the foregoing is true and correct.

Signed,

Applicant Name

Applicant Address

Applicant Birthday

Applicant City of Birth

Attachments:

- Signed Statement of No Homeowner's Insurance
- Contractor Estimates
- Release of Information Form