



## HURRICANE MICHAEL HOUSING ASSISTANCE

ReHouse Bay is designed to support long-term affordable housing solutions for individuals impacted by Hurricane Michael in Bay County, Florida. ReHouse Bay offers programs to repair or rebuild homes damaged by Hurricane Michael, support impacted residents purchase new homes, and develop affordable housing options for residents.

All applications to ReHouse Bay are subject to eligibility review. Submission of an application **does not guarantee** the Applicant will qualify for or receive assistance from ReHouse Bay. Program eligibility requirements are available at [ReHouseBay.org](http://ReHouseBay.org)

### GENERAL INSTRUCTIONS

1. Please complete the following form to the best of your ability. All answers must be truthful and will be verified by ReHouse Bay staff during the application and intake process. Intentionally false information will result in the rejection of this application and may result in legal action.
2. Submit an original signed copy of this form to:

**City of Panama City Community Development Office  
City Hall – Second Floor, Room 206  
501 Harrison Avenue  
Panama City, Florida 32401**

Or, submit the application using the online form at [ReHouseBay.org](http://ReHouseBay.org)

3. Submission of this form starts the application process. Please keep a copy for your records.
4. You will receive information regarding your application from the ReHouse Bay staff. If preliminarily qualified, you will be contacted to schedule an in-person meeting to complete a full application and submit additional required documentation to ReHouse Bay staff.

If you have any questions throughout the process, the ReHouse Bay staff is here to help. Please contact our office at **850 – 872 – 7230** or at [ReHouseBay@pcgov.org](mailto:ReHouseBay@pcgov.org) For additional information about ReHouse Bay, please visit [ReHouseBay.org](http://ReHouseBay.org).

## SECTION 1: APPLICANT INFORMATION

PREFIX	FIRST NAME	LAST NAME			SUFFIX
DATE OF BIRTH	MONTH	DAY	YEAR		
RACE/ETHNICITY <i>(CIRCLE ONE)</i>	WHITE	BLACK	HISPANIC	ASIAN	AMERICAN INDIAN OTHER
PHONE NUMBER	SECONDARY PHONE NUMBER				
EMAIL ADDRESS					
MAILING ADDRESS			CITY	ZIP CODE	
ARE YOU WORKING WITH A DISASTER CASE MANAGER?	YES	NO	DISASTER CASE MANAGER NAME		

**CONTINUE TO SECTION 2**

## SECTION 2: HOUSEHOLD INFORMATION

HOW MANY INDIVIDUALS LIVE IN YOUR HOME? <i>(Circle One)</i>	1	2	3	4	5	6	7	8	9	10
HOW MANY INDIVIDUALS LIVING IN YOUR HOME ARE 18 YEARS OR OLDER?										
WHAT IS THE ESTIMATED ANNUAL GROSS INCOME FOR YOUR HOUSEHOLD?										
<i>NOTE: Annual gross income includes ALL pre-tax income for individuals 18 years or older living in your home, including full-time, part-time, or overtime salary, social security or disability income, pension(s), VA benefits, child support, etc. This information will be verified by ReHouse Bay staff when reviewing this application.</i>										
ARE ANY OF THE FOLLOWING TRUE OF ANY MEMBER OF YOUR HOUSEHOLD? <i>(Select all that apply)</i>	Developmentally Disabled									
	Physically Disabled or Handicapped									
	Elderly (Aged 62 or Older)									
	Survivor of Domestic Abuse									
	Homeless									

**CONTINUE TO SECTION 3**

## SECTION 3: WHAT TYPE OF HOUSING ASSISTANCE ARE YOU SEEKING?

*Please SELECT ONE that best fits your housing needs. This will help us match you with the most appropriate ReHouse Bay program.*

My home was damaged during Hurricane Michael, and I need help repairing or reconstructing my home.	COMPLETE SECTION 4 QUESTIONS ON PAGE 3.
I am constructing a new home and am looking for assistance with impact fees or construction costs.	COMPLETE SECTION 5 QUESTIONS ON PAGE 4.
I am interested in becoming a first-time homebuyer and purchasing a home in Bay County and need help with down payment or closing costs.	COMPLETE SECTION 6 QUESTIONS ON PAGE 4.
I need help with my mortgage payments to prevent foreclosure.	COMPLETE SECTION 7 QUESTIONS ON PAGE 4.
I am trying to get into affordable rental housing and need help with security and/or utility deposits.	COMPLETE SECTION 8 QUESTIONS ON PAGE 5.
I am looking for other housing assistance. <i>Please describe below or call the ReHouse Bay office at 850-872-7230 for assistance.</i>	

**CONTINUE TO APPROPRIATE PAGE AND SECTION.**



## SECTION 4: HOUSING REPAIR AND REHABILITATION

*Please complete the following questions regarding your property in need of repairs.*

IS THIS PROPERTY YOUR PRIMARY RESIDENCE?		YES	NO
ARE YOU THE SOLE DEED HOLDER OF THIS PROPERTY?		YES	NO
IF NO, PLEASE LIST OTHER DEED HOLDERS			
DAMAGED PROPERTY ADDRESS		CITY	ZIP CODE
WHAT TYPE OF STRUCTURE IS THIS PROPERTY? <small>(CIRCLE ONE)</small>	SINGLE FAMILY	MANUFACTURED HOUSING UNIT	MODULAR HOME
	DUPLEX or TOWNHOME	CONDOMINIUM	OTHER <small>Please Describe →</small>
WHAT YEAR WAS YOUR HOME BUILT?	DID YOU OCCUPY THE HOME DURING HURRICANE MICHAEL ON OCTOBER 10, 2018?		YES      NO
PLEASE BRIEFLY DESCRIBE DAMAGES TO YOUR HOME:			

*Assistance provided through the ReHouse Bay Program may not duplicate other financial or housing assistance received (insurance, local, state, federal, non-profit, etc.). Please note that this information will be verified by ReHouse Bay Staff.*

HAVE YOU APPLIED FOR AND/OR RECEIVED ANY HURRICANE MICHAEL RELATED ASSISTANCE FOR REPAIRS TO YOUR HOME? <small>(Circle One. If YES, Please Answer Questions Below)</small>			YES	NO
<b>FEMA</b>	DATE REQUESTED	DID YOU RECEIVE ASSISTANCE?	YES      NO	FEMA ASSISTANCE AWARDED (\$)
<b>SMALL BUSINESS ADMINISTRATION (SBA)</b>	DATE REQUESTED	DID YOU RECEIVE ASSISTANCE?	YES      NO	SBA ASSISTANCE AWARDED (\$)
<b>INSURANCE</b>	DID YOU HAVE HOMEOWNER'S INSURANCE AT THE TIME OF HURRICANE MICHAEL?			YES      NO
	INSURANCE CARRIER	DID YOU FILE A CLAIM?		YES      NO
	INSURANCE POLICY NUMBER	INSURANCE PROCEEDS		
<b>OTHER SOCIAL ASSISTANCE</b> <small>(Please Describe)</small>	DATE REQUESTED	DID YOU RECEIVE ASSISTANCE?	YES      NO	OTHER SOCIAL ASSISTANCE AWARDED (\$)

**CONTINUE TO PAGE 5, SECTION 9.**

**SECTION 5: NEW CONSTRUCTION AND/OR IMPACT FEE ASSISTANCE**

Please complete the following questions regarding your property in need of repairs.

IS THIS PROPERTY YOUR PRIMARY RESIDENCE?	YES	NO
ARE YOU THE SOLE DEED HOLDER OF THIS PROPERTY?	YES	NO
IF NO, PLEASE LIST OTHER DEED HOLDERS		
PROPERTY ADDRESS	CITY	ZIP CODE
PLEASE BRIEFLY DESCRIBE THE TYPE OF ASSISTANCE YOU ARE SEEKING:		

**CONTINUE TO PAGE 5, SECTION 9.**

**SECTION 6: PURCHASE ASSISTANCE**

Please complete the information below if you are interested in becoming a first-time homebuyer through ReHouse Bay. Note the maximum purchase price of a home purchased through ReHouse Bay is **\$283,000**.

HAS YOUR FAMILY OWNED A HOME IN THE PAST THREE (3) YEARS?	YES	NO		
HAVE YOU LOCATED A HOUSE ON THE MARKET THAT YOU ARE INTERESTED IN PURCHASING?	YES	NO		
ARE YOU INTERESTED IN PURCHASING A NEWLY CONSTRUCTED OR REHABILITATED HOME?	YES	NO	MAYBE	
WHERE ARE YOU INTERESTED IN PURCHASING? <i>(Circle One)</i> <i>Note: You may change your preference after your application has been submitted.</i>	PANAMA CITY PARKER BAYOU GEORGE	PANAMA CITY BEACH MEXICO BEACH FOUNTAIN	CALLAWAY SOUTHPORT UNINCORPORATED BAY COUNTY	SPRINGFIELD YOUNGSTOWN NOT SURE
DO YOU HAVE A MINIMUM OF \$1,500 TO APPLY TOWARDS A HOME PURCHASE?	YES	NO		
DO YOU BELIEVE YOU WILL BE ABLE TO OBTAIN FINANCING AND SECURE A MORTGAGE?	YES	NO	NOT SURE	
IF YES, HAVE YOU ALREADY BEEN PRE-APPROVED FOR A LOAN?	YES	NO		

**CONTINUE TO PAGE 5, SECTION 9.**

**SECTION 7: FORECLOSURE PREVENTION/MORTGAGE ASSISTANCE**

Please complete the following questions regarding the property where you are seeking temporary assistance to prevent foreclosure. ReHouse Bay may be able to provide one-time assistance in cases of extreme hardship.

IS THIS PROPERTY YOUR PRIMARY RESIDENCE?	YES	NO	
ARE YOU THE SOLE DEED HOLDER OF THIS PROPERTY?	YES	NO	If NO, please list other deed holders:
PROPERTY ADDRESS	CITY	ZIP CODE	
PLEASE BRIEFLY DESCRIBE THE HARDSHIP THAT MAY BE PREVENTING YOU FROM MAKING MORTGAGE PAYMENTS.			

**CONTINUE TO PAGE 5, SECTION 9.**



## SECTION 8: RENTAL, SECURITY, UTILITY DEPOSIT ASSISTANCE

*Please complete the following questions regarding the property where you are seeking temporary assistance. ReHouse Bay may be able to provide temporary assistance to secure new rental housing.*

HAVE YOU IDENTIFIED A PROPERTY TO RENT? <small>(Circle One)</small>	YES	NO	NOT YET
RENTAL PROPERTY ADDRESS	CITY	ZIP CODE	
LANDLORD/LEASING AGENCY			
MONTHLY RENT	SECURITY DEPOSIT		
UTILITY COMPANY			
MONTHLY BILL	UTILITY DEPOSIT		

**CONTINUE TO SECTION 9.**

## SECTION 9: APPLICANT RELEASE OF INFORMATION

*Please initial (1) of the boxes to accept release of information. Please read entirely before initialing and signing.*

APPLICANT INITIALS	<p>I understand that submissions to ReHouse Bay, Panama City Office of Community Development, and/or Bay County will be shared solely for the purposes of housing services and to meet the objectives of the ReHouse Bay program. Submission of this form constitutes a consent to authorize any statement or information contained in this form or any subsequent documentation submitted to ReHouse Bay. This completed form may be a public record pursuant to the Florida Public Records law (Chapter 119) and subject to disclosure upon request. Certain information, for example social security account numbers and bank account numbers, are protected and will not be disclosed.</p>
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— OR —

I am exempt from the policy above because I am one of the following *(Please initial the relevant statutory exemption)*:

	An active or former sworn or civilian law enforcement personnel §119.071(4)(d)2. a.
	A current or former firefighter certified in compliance with s. 633.408 §119.071(4)(d)2. d.
	A current or former justice of the Supreme Court, district court of appeal judge, circuit court judge or county judge. §v119.071(4)(d)2. e.
	A current or former state attorney, assistant state attorney, statewide prosecutor, or assistant statewide prosecutor. §v119.071(4)(d)2. f.
	Other <i>(Please Explain and Identify the Relevant Statutory Exemption)</i> :  

APPLICANT SIGNATURE		DATE	
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**STOP – APPLICATION READY TO SUBMIT**

PLEASE SUBMIT AN ORIGINAL SIGNED COPY OF THIS FORM TO:  
**City of Panama City Community Development Office**  
**City Hall – Second Floor, Room 206**  
**501 Harrison Avenue, Panama City, Florida 32401**

**FOR USE BY REHOUSE BAY STAFF ONLY**

RECEIVED DATE		RECEIVED BY		REVIEW DATE	
FORM COMPLETE	YES	BENEFICIARY ID	DATA RECORDED		
	NO		DATE		
PROGRAM OF INTEREST		LOCATION		CITY OF PANAMA CITY BAY COUNTY	

