**NO INSURANCE DECLARATION**

To: Virginia Department of Housing and Community Development, for my property located at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

*(Print Address)*

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Print Name)*

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Print Name)*

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Print Name)*

do hereby attest that I have not received funding from Federal or State relief for this property as a result of Tropical Storm Helene subject to a Major Disaster Declaration (FEMA-4831-DR) issued by the president on October 1, 2024; nor the storms occurring during the State of Emergency declared by Governor Youngkin on February 10, 2025 – Disaster Event.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(Signature) (Date)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(Signature) (Date)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(Signature) (Date)*

Witnessed By:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(Signature) (Date)*

In Virginia, County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_ *(Date)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Notary Signature

**NO TITLE/DEED DECLARATION**

To Virginia Department of Housing and Community Development, for my property located at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

*(Print Address)*

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Print Name)*

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Print Name)*

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Print Name)*

do hereby attest that the structure/home located at this property was indeed my property during Tropical Storm Helene subject to a Major Disaster Declaration (FEMA-4831-DR) issued by the president on October 1, 2024; or the storms occurring during the State of Emergency declared by Governor Youngkin on February 10, 2025 – Disaster Event and that my Deed/Title was destroyed during the flood, and I am unable to secure a copy of that Deed/Title.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(Signature) (Date)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(Signature) (Date)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(Signature) (Date)*

Witnessed By:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(Signature) (Date)*

In Virginia, County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_ *(Date)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Notary Signature

**PROOF OF OWNERSHIP DECLARATION**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Applicant(s) Name)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*{Print Physical Address(es}*

I do hereby attest that the address listed above is located on one parcel of land and that I have presented as my PROOF OF OWNERSHIP a DEED and/or TITLE for this application and I swear an oath that during Tropical Storm Helene subject to a Major Disaster Declaration (FEMA-4831-DR) issued by the president on October 1, 2024 or the storms occurring during the State of Emergency declared by Governor Youngkin on February 10, 2025 – Disaster Event, I owned the land, home, and/or business structure located at the above address(es) and that the home/business structure was inhabited/ occupied as a dwelling or operating as a business and was not abandoned or unoccupied. I furthermore declare that there are no other living persons/heirs, other than those listed (printed) above that have legal ownership or legal right to share in state compensation that may be awarded for this property because of this application. I attest that I am not withholding information or providing false information concerning my PROOF OF OWNERSHIP presented and I am hereby holding Tazewell County, Virginia and Virginia Department of Housing and Community Development (VADHCD) harmless in any matter that may arise concerning my application or award compensation based on my PROOF OF OWNERSHIP as presented or otherwise.

**DECLARATION OF OCCUPANCY**

I do hereby attest that, during Tropical Storm Helene subject to a Major Disaster Declaration (FEMA-4831-DR) issued by the president on October 1, 2024 or the storms occurring during the State of Emergency declared by Governor Youngkin on February 10, 2025 – Disaster Event the property located at the above address(es) for which I am applying for relief, was occupied by the individuals listed below - including multiple houses, structures, and family units. I attest that I am not withholding information or providing false information concerning my DECLARATION OF OCCUPANCY presented and I am hereby holding New River Valley Regional Commission and Virginia Department of Housing and Community Development (VADHCD) harmless in any matter that may arise concerning my application or award compensation based on my DECLARATION OF OCCUPANCY as presented or otherwise.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*{Name(s) of Occupant(s)}*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
*{Name(s) of Occupant(s)}*

*Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_*

*Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_*

 **NOTARY**

STATE OF VIRGINIA, in the County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On this, the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (month), 2025, the foregoing Instrument was subscribed, sworn to/affirmed, and acknowledged before me, whose identity is known or was proven to me by photographic evidence.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Notary

Commission No. \_\_\_\_\_\_\_\_\_\_\_\_\_ Commission Expires:\_\_\_\_\_\_\_\_\_\_\_

**FLOOD RELIEF PROGRAM – SWORN AFFIDAVITS**

As an applicant and/or compensation recipient of the Tropical Storm Helene subject to a Major Disaster Declaration (FEMA-4831-DR) issued by the president on October 1, 2024 or the storms occurring during the State of Emergency declared by Governor Youngkin on February 10, 2025 – Disaster Event (*This Program*) for the property located at:

(Print address)

I, hereby authorize, acknowledge, agree to, and affirm the following:

**NO RECOURSE AFFIDAVIT**

I shall not create or be deemed to create or permit any personal liability or obligation on the part of any direct or indirect employee of the New River Valley Regional Commission and/or Virginia Department of Housing and Community Development (DHCD), or any of the agencies respective officers, directors, employees, agents or representatives, and I hereby swear an oath to not bring or be party to any legal suit/action against any employee, direct or indirect, of New River Valley Regional Commission and/or DHCD, or any of the agencies’ respective officers, directors, employees, agents or representatives, and by my action of making application and/or receiving compensation funds from the Commonwealth of Virgina, I release both New River Valley Regional Commission and DHCD and hold them harmless.

**ACCURACY OF INFORMATION AFFIDAVIT**

I understand that all information and documentation submitted for my application, in all respects, including by not limited to Real Property percentages of ownership and legal standing to receive compensation for which I have applied, is accurate and true an that I have not withheld information for the purpose of receipt of financial benefit or to increase financial benefit, is illegal and considered fraudulent, thereby punishable by law, resulting in prosecution and may result in the Commonwealth of Virginia recovering any and all amounts exceeding that to which I am entitled.

**COMPENSATION AFFIDAVIT**

I agree to use compensation funds as intended by DHCD for replacement or repair of eligible damaged real property, and for the intended purposes of repairing or replacing (on the original site or a different site) property damaged by the Disaster Event, and or covering business or housing or related costs in the time since the Disaster Event and, by oath, agree to not misuse funds received as deemed approvable by DHCD.

**SHARE OF EVENT-RELATED INFORMATION**

For purposes of *This Program*, I authorize sharing of any and all event-related information, including but not limited to personal identifying information at any time since the Disaster Event, and all information collected from myself between New River Valley Regional Commission, DHCD, and other local, state, and federal entities, as well and non-profit and for-profit entities such as financial institutions and insurance companies.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

(Applicant 1 – Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

(Applicant 2 – Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

(Applicant 3 – Signature)

Witnessed by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature)

State/Commonwealth of Virginia, County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On this the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(month), 2025, the foregoing Instrument was subscribed, sworn to/affirmed, and acknowledged before me, whose identity is known or was proven to me by photographic evidence.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Notary Signature*

Commission No.\_\_\_\_\_\_\_\_\_\_\_ Commission Expires: \_\_\_\_\_\_\_\_\_