



City of Shreveport
Department of Community Development
EMERGENCY REPAIR REQUEST FOR SERVICE

Priority 1 – Emergency Repairs

An emergency is a situation or condition that occurred recently without warning, and is considered detrimental or one that poses a threat to life and/or the health and safety of occupants and requires immediate action. Emergency Repairs are limited to the following:

Please check all that apply to your situation.

- Sewer line breaks (visible raw sewage) or no connection
Fresh water line breaks (visible water leak)
Gas line break/leaks
Water heaters (inoperable or unsafe units)
Unsafe or inoperable heating systems



HOUSEHOLD DATA

Name: [text input field]

Address: [text input field]

Phone Number: [text input field]

E-mail Address: [text input field]

Marital Status: [text input field]

Female Head of Household? [checkbox] Yes [checkbox] No

How long have you lived at this address: [text input field]

Do you own other real estate property? [checkbox] Yes [checkbox] No
If "Yes" please list address:

Have you previously received services from the City of Shreveport for home repairs? [checkbox] Yes [checkbox] No

Race/Ethnicity:

Do you consider yourself to be Hispanic? [checkbox] Yes [checkbox] No

Please check one of the following which applies to you:

- American Indian/Alaskan Native
American Indian/Alaskan Native & Black
American Indian/Alaskan Native & White
Asian
Asian & White
Black/African American
Black/African American & White
Native Hawaiian/Pacific Islander
Other
White

LIST ALL PERSONS LIVING IN HOUSEHOLD:

	First Name	Last Name	Relationship	Age	Sex	Social Security #
1						
2						
3						
4						
5						

If additional persons reside in your household, please list on separate page.

SOURCE OF INCOME: WHAT ARE THE SOURCES OF YOUR INCOME?

Family Member	Employer or Income Source	Address of Employer	Telephone Number	Monthly Income	Additional Income & Source

CONSENT TO RELEASE INFORMATION

Signing below authorizes the release of information from your records to the City of Shreveport, Department of Community Development’s Neighborhood Revitalization Program. This authorization is made in connection with an application that has been made in order to obtain CDBG funds for home repair.

This release is specific to all organizations including FEMA.

Initials _____

APPLICANT CERTIFICATION

The applicant (whether one or more) certifies that all information in the application and all information furnished in support of this application, is given for the purpose of obtaining a Housing Rehabilitation grant from the City of Shreveport, Department of Community Development’s Neighborhood Revitalization Program, and is true and complete to the best of the applicant’s knowledge and belief. The applicant additionally certifies that the applicant is the OWNER AND OCCUPANT of the property to be repaired. The applicant consents to the verification of any of the information contained in this application.

I understand that the release of information does not guarantee that assistance will be provided, but without the information, assistance may not be available.

Initials _____

Signature of Applicant(s)

Applicant’s Signature:	Date:
Applicant’s Signature:	Date:

PENALTY FOR FALSE OR FRADULENT STATEMENT: U.S.C. Title 18, Section 1001, provides: “Whoever, in any matter within the jurisdiction of any department or agency of the United States, knowingly and willfully falsifies...or makes any false writing or document knowing the same to contain any false, fictitious, or fraudulent statement or entry shall be fined not more than \$10,000 or imprisoned not more than five years, or both.”