

VOLUNTARY WITHDRAWAL REQUEST FORM

Purpose: By submitting this form, the Applicant and Co-Applicant, if applicable, formally request that their application be withdrawn from the Strategic Buyout Program.

Instructions: The Applicant and Co-Applicant should provide their full legal name, their application ID number and the complete damaged property address. They should indicate the reason(s) for their withdrawal, and sign and date the form before returning it to NCORR to begin the withdrawal process.

Warning: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States government.

Applicant Name:	Application ID Number:	
Co-Applicant Name:		
Damaged Property Address:		
Please indicate why you are requesting (select all that apply:	to withdraw your application from the S	Strategic Buyout Program
☐ I want to stay in my current locati	on.	
$\hfill \hfill \hfill$ I have been unable to find good a	Iternative housing options if I move.	
$\hfill \hfill $	e.	
$\hfill \hfill $	se price offered for my property.	
$\ \square$ I am unable to provide a clean titl	e for this property.	
$\hfill\Box$ I no longer own this property.		
$\ \square$ I no longer want to participate in	the Strategic Buyout Program.	
☐ Other, please explain:		
I hereby declare my intent to withdraw rethat I will not be eligible to receive any that withdrawal does not preclude me fraccepting applications. Upon submission will be voided. If I have been previously expended funds back to the program.	assistance from the program upon with rom re-entering the program if the prog n of this form, any agreements betweel	ndrawal. I also understand gram remains open and is n myself and the program
Applicant Print Name	Applicant Signature	Date
Co-Applicant Print Name	Co-Applicant Signature	Date

