



REQUEST FOR APPEAL FORM

Purpose: By submitting this form, the Primary Applicant formally submits their request to appeal the ReBuild NC Homeowner Recovery Program's determination about their eligibility or assistance determination.

Instructions: This form should be completed by any Primary Applicant who would like to appeal their eligibility or assistance determination by the ReBuild NC Homeowner Recovery Program. Appeals must be submitted in writing within **thirty (30)** calendar days of their eligibility or assistance determination letter. The appeal must include a detailed letter explaining the reason for the appeal and any supporting documents related to the appeal. An appeal may include more than one issue for consideration yet must be submitted as one appeal. The Homeowner Recovery Program will provide a written response acknowledging receipt of the written appeal to the applicant within **fifteen (15)** working days.

If an applicant would like to submit an appeal to the Program, the appeal may be submitted at a ReBuild NC Center, or through one of the following methods below:

Mailing Address:

ReBuild NC Appeals Team
ATTN: Homeowner Recovery Program
North Carolina Office of Recovery and Resiliency
PO Box 110465
Durham, North Carolina 27709

Email:

Appeals@rebuild.nc.gov

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 Information	
Primary Applicant Name:	Application ID Number:
Damaged Property Address:	
Mailing Address (if different):	
Phone Number:	Email:

Appeal Request

Please accept my request for appeal to the ReBuild NC Homeowner Recovery Program. I would like the Program to review my case regarding the following:

- Denial of my application based on eligibility requirements
- The repairs (scope of work) listed in my inspection reports
- The amount of my award for reimbursement, rehabilitation, elevation, reconstruction, or replacement of my home
- Requirement to rebuild my home
- Escrow amount owed to the Program
- Other (list): _____

Attached are the following documents (if applicable):

Attachment 1:

Attachment 2:

Attachment 3:

Primary Applicant Signature

Primary Applicant Print Name

Date