

NCORR REQUEST FOR APPEAL FORM

Purpose: By submitting this form, the applicant or tenant formally submits their request to appeal a ReBuild NC determination.

Instructions to Applicants: This form should be completed by an applicant who would like to appeal a determination by the ReBuild NC Homeowner Recovery Program (HRP) or Strategic Buyout Program (SBP). A complete appeal request must include a detailed letter explaining the reason for the appeal, this form, and can include supporting documents related to the appeal. Appeals should be submitted in writing within **thirty (30)** calendar days of their determination letter. An appeal may include more than one issue for consideration yet must be submitted as one appeal. NCORR will provide a written response acknowledging receipt of the written appeal to the applicant within **fifteen (15)** working days. See below for submission methods.

Instructions to Tenants: This form can be completed by a tenant who would like to appeal a determination for ReBuild NC Uniform Relocation Assistance (URA) but is not required to constitute a complete appeal. A complete appeal request must include a written statement explaining the reason for the appeal and can include supporting documents related to the appeal. Appeals should be submitted in writing within **sixty (60)** calendar days of a URA notice. An appeal may include more than one issue for consideration yet must be submitted as one appeal. NCORR will provide a written response acknowledging receipt of the written appeal to the applicant within **fifteen (15)** working days. See below for submission methods.

An appeal may be submitted at a ReBuild NC Center or through one of the following methods below:

Mailing Address:

ReBuild NC Appeals Team
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:
Program:	Date:
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, Strategic Buyout Program, or Uniform Relocation Assistance. 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
- ☐ The requirement to rebuild my home
- ☐ Appraisal or purchase offer price of my home
- ☐ Determination of a URA benefit
- ☐ Other (list): _____

Attached are the following documents (if applicable):

Attachment 1:

Attachment 2:

Attachment 3:

Applicant Signature

Applicant Printed Name

Date