



Montgomery County
Homeland Security and Emergency Management
 Duplication of Benefits (DOB) Verification Form

Project Information				
Subrecipient: Montgomery County	Contract #	Applicant ID:		
Applicant's Name:		Co-Applicant's Name:		
Physical Address (Damaged Home):				
City:	State: Texas	Zip Code:		
Did the property owner receive any form of assistance for the repair and/or replacement of the home after the event? <input type="checkbox"/> YES <input type="checkbox"/> NO <ul style="list-style-type: none"> Stop here if checked NO, sign and date form. If YES, enter the amount of previous assistance received and complete the checklist below 				
Part A: Receipts Provided: <input type="checkbox"/> YES <input type="checkbox"/> NO (If NO, Continue with Part B)				
Do all receipts provided document the full amount of the housing repair and/or replacement assistance previously received <input type="checkbox"/> Yes <input type="checkbox"/> No <i>check one</i>				
Are receipts dated after the time of the event?			Yes No	
Have items not related to eligible housing repair been removed?			Yes No	
Have temporary housing receipts been removed?			Yes No	
<i>If any of the boxes above are checked No, Obtain necessary documentation</i>				
Part B: Documentation Provided in Lieu of Receipts <input type="checkbox"/> YES <input type="checkbox"/> NO				
Does the self-certification confirm all funds used for home repair?		Yes	No	NA
Did contractor fraud occur? A copy of a report from an entity that has the authority to act on allegations of contractor fraud should be provided (i.e. Office of the Attorney General, Policy Department, HUD Office of Inspector General, etc.) <i>**This is a rare occurrence and must be approved by the grant manager to be accepted.</i>		Yes	No	NA
Does the amount of the contractor fraud cover all Duplication of Benefit (DOB) proceeds? Provide any documentation to support.		Yes	No	NA
Did a forced mortgage payoff occur? Provide any documentation to support (i.e. letter and payoff notice.) <i>**This is a rare occurrence and must be approved by the grant manager to be accepted.</i>		Yes	No	NA
Does the amount of the forced mortgage payoff cover all DOB proceeds		Yes	No	NA



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Signatures	
Under penalties of perjury, I/we certify that the information presented in this Affidavit is true and accurate to the best of my knowledge and belief. I/We further; understand that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in my ineligibility to participate in this program or any other programs that will accept this Affidavit. Warning: Any person who knowingly makes a false claim or statement to HUD/FEMA may be subject to civil or criminal penalties under 18 U.S.C. 287, 1001 and 31 U.S.C. 3729.	
Applicant Printed Name:	Date:
Applicant Signature:	
Co-Applciant Printed Name:	Date:
Co-Applciant Signature:	
Subrecipient (Montgomery County) Printed Name:	Date:
Subrecipient (Montgomery County) Signature:	

Disclaimer: *Montgomery County has made every effort to ensure the information contained on this form is accurate and in compliance with the most up-to-date Texas General Land Office CDBG-DR and/or CDBG-MIT federal rules and regulations, as applicable. It should be noted that Montgomery County assumes no liability or responsibility for any error or omission on this form that may result from the interim period between the publication of amended and/or revised federal rules and regulations and the Texas General Land Office's standard review and update schedule.*