



TEXAS DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS

Notice of Restoration

Development Owner
Development Name
CMTS Number

The duly authorized representative of the Development Owner certifies that:

1. All common areas, BIN's and units affected by the casualty loss event on Date Picker have been restored as of Date Picker.
2. Attached is documentation supporting full restoration in the form of Certificate of Occupancy Certified professional Invoices Photographs Work Orders Other.

This certification is made by the **Development Owner** and is signed by a duly authorized representative within the organizational structure of Development Owner, who is so authorized by reason of his/her position as the: [text box]

All the foregoing statements, as well as the date, signature and identifying information of the signer and the Development Owner that follows are HEREBY CERTIFIED as true and accurate as of [date picker].

Development Owner:

By: Signature: _____
Print Name:
Title:

Please upload the certification, completed in full, to the Electronic Document Attachment system through the property's Compliance Monitoring and Tracking System (CMTS) account. For instructions on how to use the attachment system, please see [Attaching Documents to CMTS](#) found on the Department's website.