



City of Miramar

Minor Home Repair Program

Pre-Screening Form



**** THIS IS NOT AN APPLICATION ****

Date: _____

PROPERTY OWNER(S): _____

ADDRESS: _____

PHONE NUMBER: _____ CELL: _____

EMAIL: _____

Household size: _____

Annual GROSS household income: _____ Is your mortgage current? _____

Are your property taxes current? _____ Do you own another property? _____

Do you have homeowners insurance? _____ Insurance Expiration date: _____

Have you ever filed a claim with your homeowners insurance? _____

Outcome of insurance claim: _____

Have you filed a claim with FEMA? _____

FEMA's Response: _____

SIGNATURE: _____

The information provided is true and complete to the best of my/our knowledge and belief.

I understand that this form will be used to screen for the Minor Home Repair Program application drawing and falsifying of information will result in disqualification.

Completed Pre-Screening Form is to be dropped off at:

Community Revitalization Affiliates, Inc.

6151 Miramar Parkway, Suite 202,

Miramar, FL 33023

Completed Pre-Screening Form must be submitted by 4:30 PM on NOVEMBER 14, 2022.

No forms will be accepted after this date.