

**RESTORE LOUISIANA HOUSING ASSISTANCE PROGRAM
COMMUNICATION DESIGNEE FORM**

Applicants to the Restore Louisiana Homeowner Assistance Program (RLHAP) can designate a third party to obtain information about their program application. This third party is known as the **Communication Designee** and they will be authorized to make inquiries of the applicant's Program status either in person, via the phone, email, and/or mail. The person designated as the Communication Designee is not authorized to sign the Grant Agreement or any other documents or Affidavits on behalf of the applicant unless they also hold a valid Power of Attorney. The person designated as the Communication Designee is not authorized to make any decision on behalf of the applicant unless they also hold a valid Power of Attorney. You may designate an individual or a representative at an agency as your Communication Designee. Each applicant must sign an individual form.

I hereby certify and affirm that I, _____, am the applicant homeowner of the property located at :

_____.

My daytime phone number is _____. I do hereby authorize _____ to be my Communication Designee in connection with the Restore Louisiana Homeowner Assistance Program Account ID number _____.

In addition to providing the Account ID, the following code word will be used to ensure the identity of the Communication Designee: _____. My Communication Designee's address is: _____

_____, and daytime phone number is _____.

This Communication Designee assignment will be valid until _____ but in no instance, shall be longer than one year from the date of my signature below.

Applicant Signature

Communication Designee Signature

Applicant Printed Name

Communication Designee Printed Name

Signed ____ day of _____, 20__.

Signed ____ day of _____, 20__.