



## STEP-BY-STEP APPLICATION USER GUIDE

The Hurricane Ian Rebuild Florida Housing Repair and Replacement Program is a state program launched with federal funding to repair, rebuild, or replace eligible homes with remaining damage from Hurricane Ian. Rebuild Florida is currently accepting applications. Priority will be given to homeowners with a low income and households that include children under 18, seniors over the age of 62, or individuals with disabilities.

### Do you Qualify?

- You must have owned and occupied the property at the time of Hurricane Ian;
- You must still own the property;
- Have a qualifying household income and;
- Have documented and unrepaired damages caused by Hurricane Ian.

### Ways to Apply Below:

Visit any Rebuild Florida Service Center at the addresses below. All service centers are open Monday through Friday from 8 a.m. to 5 p.m. EST. and from April 1, 2024 to May 31, 2024, on Saturdays from 8 a.m. to 5 p.m. EST.

#### **DeSoto:**

921 E. Oak St.  
Arcadia, FL 34266

#### **Seminole:**

237 S. Westmonte Dr., Suite 312  
Altamonte Springs, FL 32714

#### **Hillsborough:**

2901 West Busch Blvd., Suite 701  
Tampa, FL 33618

#### **Polk:**

2405 EF Griffin Rd., Suites 6 & 7  
Bartow, FL 33830

#### **Putnam:**

902 S. State Road 19, Suite 3  
Palatka, FL 32177

#### **Charlotte:**

1032 Tamiami Tr., Unit 4  
Port Charlotte, FL 33953

#### **Osceola:**

1108 N. John Young Pkwy.  
Kissimmee, FL 34741

- Speak to a customer service representative: 1-800-915-6803
- Apply online at: [Ian.RebuildFlorida.gov](http://Ian.RebuildFlorida.gov)
- Download the Rebuild Florida mobile app from the Google Play Store or the Apple App Store.

### Need further assistance:

If you need help completing your application, please contact us at 1-800-915-6803 during business hours, Monday through Friday from 8 a.m. to 5 p.m. EST.



**Let's get started:**

Start your application using one of the methods listed above.

If you choose to apply electronically using the website or mobile app, please follow the instructions provided.

1. The home screen will allow you to create an account and apply or visit this page to log in to your application.



**The Rebuild Florida application process for Hurricane Ian is meant to determine your eligibility and to collect the required information to make any determinations. Please note that only properties that sustained damage from Hurricane Ian in September of 2022 are eligible to apply.**

**Upon completion of your application, a FloridaCommerce representative will contact you regarding your program status and provide details on next steps.**

**For more information regarding the Program and eligibility criteria or if you have questions about your application, please visit our [website](#), or give us a call at [1-800-915-6803](tel:1-800-915-6803).**

**If you do not already have an account, please create one below. To continue filling out your application, please log in to your account below.**

**CREATE AN ACCOUNT AND APPLY**

**LOG IN TO YOUR ACCOUNT**



2. Select "Register" to create an account.

FLCOMMERCE English v

Sign in to your account

Email

Password

[Forgot Password?](#)

Or sign in with

Google

Facebook

New user? [Register](#)

Please email [ian@rebuildflorida.gov](mailto:ian@rebuildflorida.gov) if you would like your account information to be deleted.

3. Complete all fields and select the blue "Register" button.

FLCOMMERCE English v

Register

First name

Last name

Email

Password

Confirm password

[« Back to Login](#)

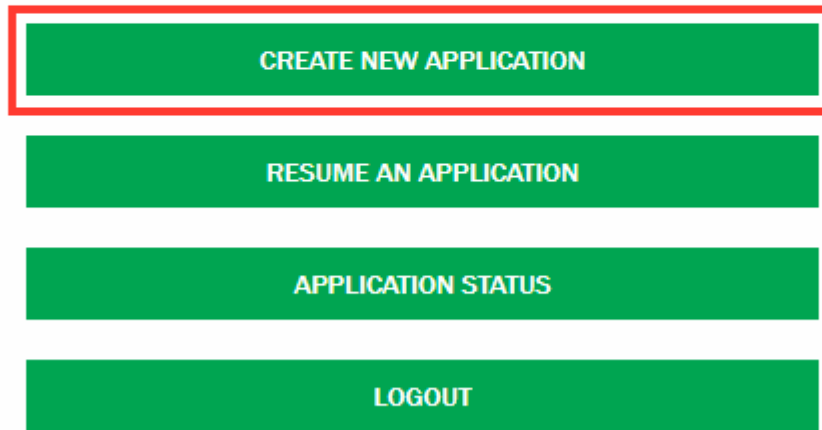


4. Once your account has been created, log in to your account, and select the option to “Create New Application”.

**The Rebuild Florida application process for Hurricane Ian is meant to determine your eligibility and to collect the required information to make any determinations. Please note that only properties that sustained damage from Hurricane Ian in September of 2022 are eligible to apply.**

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English | Spanish | Haitian Creole

- a. The electronic application will allow you to save your progress and return to complete the application later. Click on “Resume an application” to continue working on the application you created.
- b. Once the application has been submitted, you can view the status by selecting, “Application Status”.



- 5. Tell us about yourself: Add the Applicant's Information.
  - a. Add the applicant's name, date of birth, and select "Next".

**Applicant Information**



First Name \*

This field is required

Middle Name

Last Name \*

This field is required

Date Of Birth \*

This is required.

- b. How can we reach you: Add the applicant's contact information.

**Applicant Information**



Primary Phone Number \*

Phone number is required

Secondary Phone Number

Email Address \*

Email is required

Preferred Contact Method

Preferred Contact Time

Preferred Language



c. Where can we send correspondence: Provide the applicant's mailing address.  
Applicant Information



Street Address \*

powered by Google ✕

This field is required

City \*

This field is required

County \*

State \*

Florida ▼

Zipcode \*

This field is required

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d. Confirm the damaged property address:  
Applicant Information



Street Address \*

City

County \*

State \*

Florida ▼

Zipcode \*

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e. Tell us about yourself: Provide the applicant's demographic information.

Applicant Information



**Please select your ethnicity:**

- Non-Hispanic/Latino
- Hispanic/Latino

**Please select your race:**

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White
- Other
- Prefer not to answer

**Please select your gender:**

- Female
- Male
- Prefer not to answer

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f. Tell us about your income sources: Provide the applicant's income information.

Applicant Information



**Do you receive income payments from any source? (For example: a pay check from a job, retirement, social security, annuity/settlement or VA benefits, or cash payments from odd jobs)**

- Yes
- No

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6. Tell us about your Co-Applicant:  
**Co-Applicant Information**

**Is there a Co-Applicant?**

Yes

No

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- a. If you select “Yes”, a screen will appear to complete their information.  
**Co-Applicant Information**



Info



Contact



Demographic



Income

First Name \*

Middle Name

Last Name \*

Date Of Birth \*

MM/DD/YYYY

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- b. If you select “No”, proceed to step 7.





7. Important Decisions: The next two questions address whether you have a Power of Attorney in place and if there is a designated person who will respond on your behalf to questions/concerns regarding your application with HRRP.

## Power Of Attorney

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**Would you like to designate a Power of Attorney to act on your behalf with regard to your application?**

Power of Attorney is a person legally authorized to act on your behalf.

Yes

No

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- a. If you select “Yes”, a screen will appear to complete their information. Please know, Power of Attorney documentation will be required to confirm legal authorization to act on the applicant’s behalf.

## Power Of Attorney

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First Name \*

Middle Name

Last Name \*

Primary Phone Number \*

Secondary Phone Number

Email Address

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## Communication Designee

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**Would you like to designate a Communication Designee?**

A communication designee is a person who is authorized to communicate with the program about your application. A communication designee cannot make decisions on your behalf.

Yes

No

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- b. If you select “Yes”, a screen will appear to complete their information.  
**Communication Designee**
- 

First Name \*

Middle Name

Last Name \*

Primary Phone Number \*

Secondary Phone Number

Email Address

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8. Tell us about your property damage: Add the Damage Property information.  
a. Use the drop-down arrow to select the "Property Type" and click "Next".

### Damaged Property

**What type of property is the storm damaged property?**

Property Type \*

--Select--

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- b. Confirm the property sustained damage from Hurricane Ian.

**Did the property sustain damage from Hurricane Ian?**

Yes

No

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- c. Confirm Ownership of the damaged property.

**Did you own the storm-damaged property at the time of Hurricane Ian?**

Yes

No

**Do you currently own the storm-damaged property?**

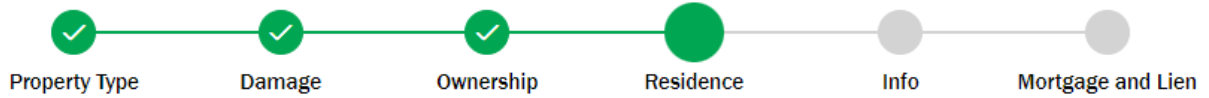
Yes

No

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d. Confirm the damaged property was your primary residence at the time of the storm.



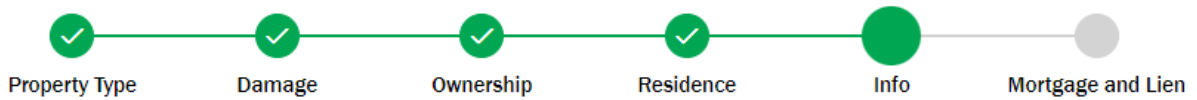
**Was the storm-impacted property your primary residence at the time of Hurricane Ian?**

- Yes
- No

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e. Provide additional property information.



**What year was the storm-damaged property built?**

Year \*

**Does the property have any of the following?**

- Septic Tank
- Water Well
- Underground Storage Tank

**Is there a gas or fuel storage tank connected to this property that is in use for heating or cooking?**

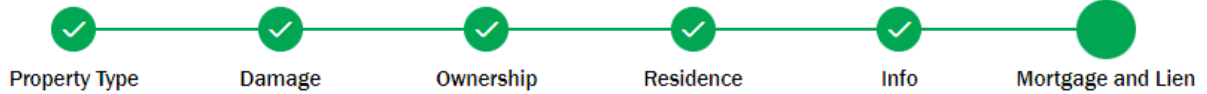
- Yes
- No

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f. Tell us about your mortgage: Provide any applicable mortgage and lien information.



**Is there a mortgage on the property?**

- Yes
- No

**Are there any liens other than a mortgage on the property?**

- Yes
- No

**Property taxes must be paid in full, or you must be on a payment plan in good standing.**

- Yes - My property taxes are paid in full
- Yes - I am on a payment plan in good standing for my property taxes
- No - My property taxes are delinquent

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9. Tell us about your household members:  
**Household Members Information**

**Are there additional household members in your home?**

Household members include all persons, including minor children and adults, whose current primary residence is the hurricane-impacted property or whose primary residence was the hurricane-damaged property at the time of the disaster.\*

- Yes
- No

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- a. If you select “Yes”, a screen will appear to complete their information.  
**Household Members Information**

First Name \*

Last Name \*

Date Of Birth \*

Gender

Female

Male

Prefer not to answer

CANCEL



SAVE

- b. To add additional household members, select “Add another household member”. Continue until all household members are listed. Once complete, select “Next”.

### Household Members Information

**Are there additional household members in your home?**

Household members include all persons, including minor children and adults, whose current primary residence is the hurricane-impacted property or whose primary residence was the hurricane-damaged property at the time of the disaster.\*

Name:	John Doe		
Date Of Birth:	12/30/1990		

ADD ANOTHER HOUSEHOLD MEMBER

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10. Does a household member have a disability?

## Disability

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**Is anyone in your household disabled?**

Yes

No

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11. Tell us about your tenants:

## Tenant Information

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**Please provide information on any tenants that have lived at the damaged property address at the time of the disaster or since the disaster. A tenant is a person who is granted temporary legal right, usually through a lease agreement and payment of rent, to occupy property owned by another.**

At the time of the storm, were there tenant(s) renting space in your owner-occupied, storm-impacted home?

Yes

No

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**Please provide information on any tenants that have lived at the damaged property address at the time of the disaster or since the disaster. A tenant is a person who is granted temporary legal right, usually through a lease agreement and payment of rent, to occupy property owned by another.**

Does a tenant(s) currently occupy your storm-impacted home?

Yes

No

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12. Tell us about your homeowner's insurance:

## Insurance and Funding

---

**Did you have insurance on the property at the time of the storm?**

Yes

No

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## Insurance and Funding

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Provider \*

Policy Number \*

Insurance Type:

Flood

Wind

Homeowner's

Renter's

Other

Was a claim filed in relation to damages sustained from Hurricane Ian?

Yes

No

**If you had additional types of insurance coverage at the time of Hurricane Ian, you will be prompted to add that information on the following screen.**

CANCEL

SAVE





13. Tell us about any additional funding for your property: Please provide the source of your funding.

## Other Fundings

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**Did you receive funds from a source other than insurance for damages sustained at your property as a result of Hurricane Ian?**

Yes

No

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## Other Fundings

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What type of assistance did you receive?

Type of Fund \*

--Select--



CANCEL

SAVE



14. Upload supporting documentation.  
**Upload Documents**

### Supporting Documents

To upload your required program documentation, click the different boxes below to be prompted to upload the correct document for each category. These documents are required in order to become eligible to receive assistance from the program.

<p style="text-align: center;"><b>Applicant</b></p> <p style="text-align: center;">Press Here to Upload Supporting Documents</p> <p>Angela Lynch</p> <p>0/3 Documents</p> <p>Uploaded</p>	<p style="text-align: center;"><b>Damaged Property</b></p> <p style="text-align: center;">Press Here to Upload Supporting Documents</p> <p style="text-align: center;"><b>Multiple documents may be required for proof of primary residence.</b></p> <p>0/4 Documents</p> <p>Uploaded</p>	<p style="text-align: center;"><b>Household Member</b></p> <p style="text-align: center;">Press Here to Upload Supporting Documents</p> <p>John Doe</p> <p>0/1 Documents</p> <p>Uploaded</p>
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- a. Select any of the boxes in red above to be prompted to upload the correct document for each category.

Upload Documents

Proof of Home Ownership

No documents uploaded. Please click the upload document button to upload a new document.

UPLOAD DOCUMENT

Proof of Property Taxes

No documents uploaded. Please click the upload document button to upload a new document.

UPLOAD DOCUMENT

Proof of Damage

No documents uploaded. Please click the upload document button to upload a new document.

UPLOAD DOCUMENT

Proof of Primary Residence

No documents uploaded. Please click the upload document button to upload a new document.

UPLOAD DOCUMENT

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- b. Uploading the required supporting documentation is not required to electronically apply. Your application is not complete until all required supporting documentation is provided.
15. Review and complete all program required documentation. Ensure all required fields are completed and filled out.
- a. Homeowner Rights and Responsibilities Acknowledgment
  - b. Conflict of Interest
  - c. Communication Designee Signature
  - d. No Income Signature, if applicable.
  - e. No Insurance Signature, if applicable.
  - f. Primary Residency Affidavit
  - g. Authorization for Release
16. Review and Submit.
- a. An application checklist will show a green checkbox for completed fields.

### **Applicant**

- Applicant Information
- Applicant Contact
- Applicant Mailing Address
- Applicant Damaged Property
- Applicant Demographic
- Applicant Income

### **Co-Applicant**

- Co-Applicant Information

- b. Any incomplete item will show a red "X".

### **Conflict of Interest**

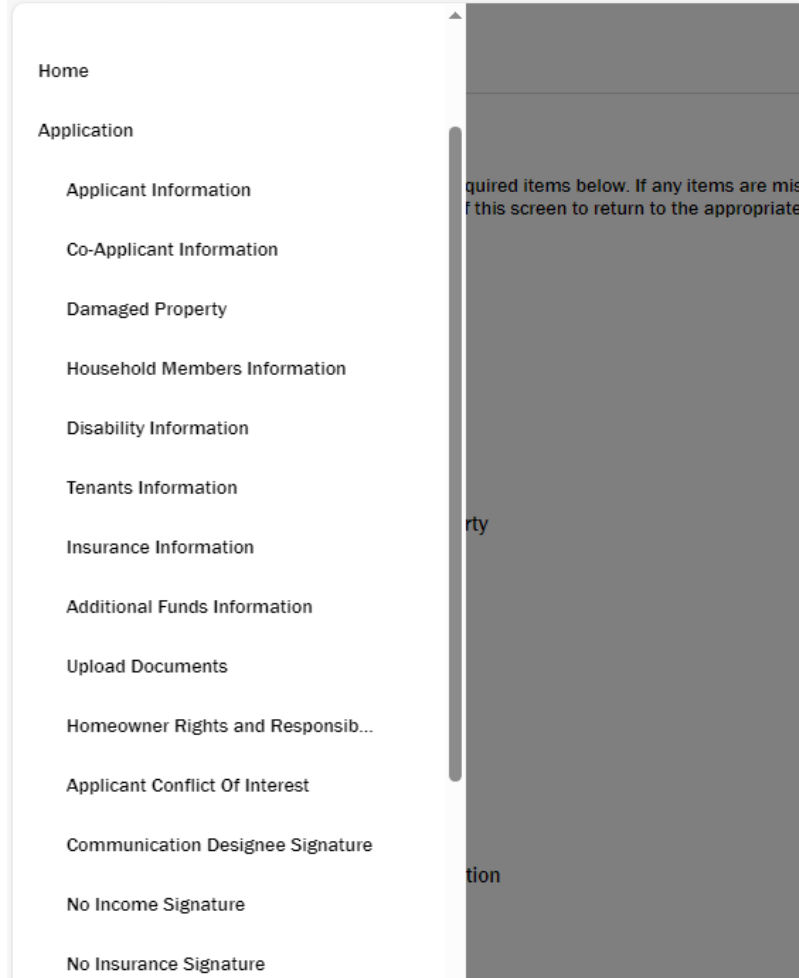
- Applicant Conflict Of Interest
- Applicant Conflict Of Interest Attachment

### **No Insurance Signature**

- No Insurance Signature



- i. For incomplete items, use the navigation menu on the left-hand side of the screen to return to the appropriate section of your application to complete the required field.



- c. Once all required items have been completed, select “Submit Application”.

**Next steps once application is submitted:**

Once the application is submitted you will be assigned a dedicated case manager. Your case manager will review the information we've received and reach out to you to collect any remaining intake information and documentation required to process your application.