



## Legislation Text

File #: 21-2585, Version: 1

**To:** Harris County Commissioners Court

**Through:** Adrienne M. Holloway, PH.D., Executive Director, Community Services

**Prepared By:** Madeline Santa, Executive Assistant, Disaster Recovery CSD

**Subject:** Disaster Recovery Owner Housing Program

**Project ID (If applicable):**

**Purpose and Request:**

Transmittal of a report on the Disaster Recovery Owner Housing programs through May 30, 2021.

**Background and Discussion:**

Pursuant to that request by Commissioner Ellis, we are transmitting the attached report providing updates on the Disaster Recovery Owner Housing Programs.

**Fiscal Impact:**

*[INSTRUCTIONS: A short description of the cost of the request and where you are requesting funding from. No more than 2 sentences. In addition please fill out the table below. This includes financial impact to the current fiscal year and subsequent fiscal years along with the source of funding (general fund, grant, etc.). If the amount is within the current budget, please indicate the amount from 'Existing Department Budget'. If all of or part of the request is a new expense, please indicate funding source in the space provided.]*

Fiscal Summary			
Expenditures	FY 20-21	FY 21-22 Projected	Future Years Projected [3 additional years]
<b>Service Impacted:</b> <i>[Please specify division where expenditures will be incurred]</i>			
Existing Budget			
Additional Appropriation Requested			
<b>Total Expenditures</b>			
<b>Funding Sources</b>			
Existing Department Budget			
Please Identify Funding Source (General Fund, Special Revenue, Grant, etc.)			
[INSERT FUNDING SOURCE]			
<b>Total Sources</b>			

**Alternatives:**

*[INSTRUCTIONS: In this section you should briefly discuss any viable alternatives, including the benefits and consequences of each. Include subtitles on the first line of each alternative to identify it. If appropriate, the financial impact of each alternative can be discussed. If taking no action is a viable alternative it should also be discussed, including any financial or other impacts that would result.]*

**Alignment with Strategic Objective:**

*[INSTRUCTIONS: Please write out the Department Strategic Objective impacted by this item.]*

**Attachments:**

*[INSTRUCTIONS: Please include a list of backup for this item with a short description of each if more than one.]*