

STATE OF NEW MEXICO
COUNTY OF _____

**TAXPAYER SWORN STATEMENT
HOME FIRE RECOVERY INCOME TAX CREDIT
Construction Industries Division
Manufactured Housing Division**

TAXPAYER:

Name: _____
Address: _____
Phone: _____
Email: _____

CONTRACTOR/BUILDER/MANUFACTURED HOUSING DEALER/INSTALLER:

Name: _____
Address: _____
License Number: _____
Phone: _____
Email: _____

I, _____, do hereby declare under oath that:

1. I am the owner of the property located at:

_____.

2. On _____, my home/business was destroyed by a wildfire and expenditures to replace my home/business qualifies for the tax income credit under the Home Fire Recovery Income Tax Credit Act.

3. I have entered into a contractual agreement with _____ for the construction work or installation of a manufactured home described as follows:

4. On _____, repairs/rebuild to my home/building were completed.

5. The cost for repairs/rebuild was \$ _____.



6. As of the date of this sworn statement, I have made payments to the _____
totaling \$_____.

7. I acknowledge and confirm that the work performed to date has been completed in
accordance with the terms of our agreement and to my satisfaction.

8. I received compensation related to home/building construction, manufacture or repair costs
received pursuant to the federal Hermit's Peak/Calf Canyon Fire Assistance Act or from insurance or
other source of compensation. Total compensation received from other sources (if any) was
\$_____ (attach evidence of payment(s)).

9. I understand that this sworn statement is made for the purpose of Home Fire Recovery
Income Tax Credit Application.

I affirm that the information provided in this sworn statement is true and accurate to the best of my
knowledge and belief.

Print Name-Homeowner

_____,
Sign

This Affidavit was subscribed and sworn to before me on

_____, 202____, by _____.

Notary Public

My commission expires: _____

