



Letter of Interest – DHCD Housing Rehab Advisory Committee

Name

Organization

Address

Phone

Email

Role in the Organization

Which DHCD Program do you/your organization work with?

What localities do you/your organization serve?

How long have you been involved in DHCD's housing rehab programs?

Why are you interested in being part of the DHCD Housing Rehab Advisory Committee?

Please submit by **12/20/19 for consideration. Thank you for your interest!**