



Tom McCasland
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CONFLICT OF INTEREST FORM

The purpose of this questionnaire is to comply with the HUD regulations regarding possible conflict of interest (24 Code of Federal Regulations Sec.93.356 and 570.611) and City Ordinances [Section 18-3, Ethics Requirements for City Officials; Section 14-183, Ethics Requirements for City Employees; and Section 15-1, Prohibited Interest in City Contracts.

NOTE: IMMEDIATE FAMILY MAY INCLUDE BUT IS NOT LIMITED TO ONE'S: SPOUSE, PARENTS, STEP PARENTS, SIBLINGS, CHILDREN, STEP CHILDREN, FOSTER CHILDREN, IN-LAWS, GRANDPARENTS AND GRANDCHILD ETC.

A. ARE YOU OR AN IMMEDIATE FAMILY MEMBER:	Yes/ No	Initial	Initial
1. An employee of the City:			
2. An agent of the City:			
3. Consultant for the City:			
4. Officer for the City:			
5. Elected official of the City:			
6. Appointed official of the City:			
7. A public agency/nonprofit organization selected by the City to administer a HCDD Program on the behalf of the City:			
8. Submitting this application during your tenure in any position listed above or 1 year thereafter:			
B. ARE YOU OR AN IMMEDIATE FAMILY MEMBER:	Yes/ No	Initial	Initial
1. Currently exercising any HCDD Program functions or responsibilities or did so in the past (1) year:			
2. Currently in a decision, making position related to any HCDD Program or within the past (1) year:			
3. Able to obtain inside information regarding HCDD Program activity:			
4. Involved in any business ties or contracts with the City or HCDD Program			

NOTE: IF YOU ANSWERED "YES" TO SECTION A. #4, #5 OR #6 ABOVE, YOU ARE INELIGIBLE TO RECEIVE HOMEBUYER ASSISTANCE PURSUANT TO ARTICLE VII, SECTION 4, OF THE HOUSTON CITY CHARTER. I UNDERSTAND THAT A FALSE STATEMENT ON THIS QUESTION MAY BE GROUNDS FOR REJECTION OF MY APPLICATION FOR ASSISTANCE. IN ADDITION, A FALSE STATEMENT MAY RESULT IN A FINE OR IMPRISONMENT PURSUANT TO 18 U.S.C SEC. 1001.

CONSENT TO DISCLOSURE

I UNDERSTAND THAT IF IT IS DETERMINED THAT MY APPLICATION FOR ASSISTANCE CONSTITUTES AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST UNDER APPLICABLE FEDERAL, STATE AND LOCAL REGULATIONS, MY APPLICATION MAY BE CONSIDERED FOR AN EXCEPTION, IN WHICH CASE MY APPLICATION WILL BE PUBLICLY DISCLOSED PURSUANT TO PROCEDURES ADOPTED BY THE CITY AND WHEN APPLICABLE APPROVED BY HUD. BY MY FURTHER SIGNATURE BELOW, I HEREBY EXPRESSLY CONSENT TO SUCH PUBLIC DISCLOSURE.



_____ Applicant/ Head of Household Signature Date

_____ Co-Applicant Signature Date

Council Members: Brenda Stardig Jerry Davis Ellen R. Cohen Dwight A. Boykins Dave Martin Steve Le Greg Travis Karla Cisneros
 Robert Gallegos Mike Laster Martha Castex-Tatum Mike Knox David W. Robinson Michael Kubosh Amanda Edwards Jack Christie
 Controller: Chris Brown