

Texas Department of Housing and Community Affairs

MANUFACTURED HOUSING DIVISION

P. O. BOX 12489 Austin, Texas 78711-2489

(800) 500-7074, (512) 475-2200 FAX (512) 475-3506

Internet Address: www.tdhca.state.tx.us/mh/index.htm

Estimate for Reassigned Warranty Work

Part I – Labor and Materials:

For each item on the inspection report, provide the information requested.

1) Description of proposed correction: _____

Estimated time: _____ Hourly rate: _____

Itemized cost of materials: _____

2) Description of proposed correction: _____

Estimated time: _____ Hourly rate: _____

Itemized cost of materials: _____

3) Description of proposed correction: _____

Estimated time: _____ Hourly rate: _____

Itemized cost of materials: _____

Part II – Other Costs and Expenses

Block 1: Travel	
Starting location, which must be within the State of Texas and is to be the closer of the nearest office to the site of the re-assigned warranty work or the in-state service center for the licensee.	Starting location:
Mileage is reimbursable at the greater of the rate of \$0.35 per mile, not to exceed \$75.00 per day, or the State of Texas approved rates from time to time in effect for reimbursement of state employees' travel expenses.	Estimated round-trip mileage:
Itemized list of any other travel costs:	
Block 2: Lodging	
Reimbursement for overnight lodging is to include the actual room rate and any applicable taxes but does not include any long distance telephone calls, entertainment, food, or beverages. Reimbursement may not exceed the State of Texas approved rates for reimbursement of state employees' lodging.	Name, location, and rate:
Block 3: Meals	
Reimbursement for meals (receipts are required) shall not exceed the greater of \$25.00 per day or the State of Texas approved rate for reimbursement of state employees' meals while traveling. Alcoholic beverages are not subject to reimbursement.	Estimated cost of meals:
Block 4: Administrative and oversight costs	
Administrative services may not exceed 20% of the total estimate. Provide an explanation of the necessary administrative services, including the number of hours required and the hourly rate of each person providing such services:	

Part III – Certification

The undersigned represents that:

- (1) the actual costs for labor charged to the Texas Department of Housing and Community Affairs, Manufactured Housing Division and/or the Manufactured Homeowner's Recovery Trust Fund will not exceed the actual number of hours expended, rounded to the nearest quarter of an hour increment, times the hourly rate specified above;
- (2) the actual costs for materials charged to Texas Department of Housing and Community Affairs, Manufactured Housing Division and/or the Manufactured Homeowner's Recovery Trust Fund will not exceed the costs actually charged to the undersigned and such costs do not exceed the costs at which the undersigned is able to obtain such materials for its own account;
- (3) the hourly rate being charged by the undersigned does not exceed the normal hourly rate at which the specified individuals customarily provide their services; and
- (4) if the work to be performed involves any repair or alteration that would require DAPIA approval, such approval will be obtained and a copy of such approval, together with all DAPIA-approved drawings relating thereto, will be submitted when reimbursement is requested.

Name of Licensee: _____ This estimate executed this _____ day of _____,

License number: _____

Signature of licensee or duly authorized officer or representative

Printed name of licensee or duly authorized officer or representative