



**HOME REHABILITATION PROGRAM
OWNER'S RIGHT TO PROCURE (SELECT)
HOME INVESTMENT PARTNERSHIP ACT**

Date: _____

Re: Home Rehabilitation Program; Owner's Right to Procure (Select) Contractor

Homeowner: _____

Property Address: _____

Contract Number: _____

Amount: \$ _____

I/We, the above referenced homeowner(s) acknowledge my/our right of procurement under the Home Rehabilitation Program and agree with the methods that will be used to procure the contractor for the rehabilitation of my/our home.

I/We understand that contractors must be qualified and meet minimum pre-determined requirements, including insurance, licensing, and other necessary credentials. Any eligible contractor who meets these minimum requirements may qualify by providing the Program Administrator with evidence of compliance. All qualified contractors are encouraged to participate in the bidding process.

I/We acknowledge that I/we will have the opportunity to be present throughout the procurement process and to review all eligible and feasible proposals from qualified contractors bidding on my/our home rehabilitation project based on the approved scope of work. I/We further understand that I/we have the right to select any bid from the presented proposals. However, the Program Administrator, at its sole discretion, may withhold bids deemed "unreasonable."

The pre-approved scope of work must be maintained throughout this process in accordance with U.S. Department of Housing and Urban Development (HUD) regulations. Any modifications to the scope of work due to unforeseen issues arising during construction must be submitted by the contractor to the Program Administrator for review. These change orders require approval from Housing New Mexico before proceeding.

IN WITNESS WHEREOF, Owner has executed this Agreement upon date of final signature acknowledging Owner's right to procure (select) a contractor.

Owner Signature

Date

Co- Owner Signature

Date