

How do I add my home/business to the Destroyed Structures List?

If the structure was a habitable¹ residence or commercial business submit a [REQUEST FOR INCLUSION](#) form –or the information shown below, to Bastrop County at 806 Water Street, Bastrop, Texas 78602.

A signed and notarized document –printed in ink, which includes:

- 1) Your name, identification #, mailing address, and daytime telephone number (e-mail address optional)
- 2) Destroyed structure's address²
- 3) Relationship to the destroyed structure (owner or occupant)
- 4) Destroyed structure type (residential or commercial)
- 5) Destroyed structure classification (concrete (reinforced), insulated concrete form, light gauge metal, manufactured housing, masonry (reinforced), masonry (unreinforced/plain), metal building, mobile home, shear walls, tilt-up (concrete pre-cast), or wood frame)
- 6) Destroyed structure habitable area (square feet or dimension)
- 7) Bastrop Central Appraisal District property identification number and legal description
- 8) Date the destroyed structure was built or placed on the property and became habitable
- 9) The following statement: "I hereby request that the destroyed structure referenced in this document be included on the Bastrop County Destroyed Structures List. I declare under penalty of perjury that structure referenced in this document was destroyed by the Bastrop Complex fire. I hereby certify under penalty of perjury that the information provided on this document and all attached pages are true, correct and complete."
- 10) Documentation –Provide two of the following documents (must include the destroyed structure's address²):
 - a) Driver's license (residential documentation only)
 - b) Voter registration card (residential documentation only)
 - c) W-2 (residential documentation only)
 - d) Utility bill (water, electric or phone) –within 3 months prior to the fire
 - e) Insurance policy (homeowner, renter, commercial or business property)
 - f) Lease agreement or recent rent payment receipt –within 3 months prior to the fire
 - g) [DECLARATION OF OCCUPANCY](#) from the owner –printed in ink, sign, and notarized, which includes:
 - (i) Owner(s) name, mailing address and daytime phone number (e-mail address optional)
 - (ii) Tenant(s) name, mailing address and daytime phone number (e-mail address optional)
 - (iii) Destroyed structure's classification and address²
 - (iv) Date of occupancy
 - (v) The following statement: "I hereby declare under penalty of perjury that (insert tenant's name) occupied (insert destroyed structure's address²) since (insert date of occupancy). I hereby certify under penalty of perjury that the information on this document is true, correct and complete."
- 11) Additional information or documentation may be necessary to substantiate the claim.

¹ Habitable means the structure is safe and can be occupied in reasonable comfort. It should be closed against the weather, have heating and electricity, potable and hot water supplied through proper fixtures connected to acceptable plumbing and sewage systems, operational bathroom and toilet facilities.

² Complete physical address assigned by the local government agency (address #, street name, bldg/apt/unit #, city and zip code).

BASTROP COMPLEX FIRE - DESTROYED STRUCTURES LIST

REQUEST FOR INCLUSION

Name: First Name MI Last Name Suffix ID#: State Issued Driver's License or ID #

Mailing Address: Address # Street Name Bldg/ Apt/Unit# City State Zip Code

Daytime Telephone Number: (Area Code) Phone Number, Ext. e-mail: e-mail Address

Destroyed Structure's Address: As assigned by the local govt.: Address # Street Name Bldg/ Apt/Unit# City Zip Code

Relationship to the Destroyed Structure (check one) Owner Occupant
Destroyed Structure Classification (check one): Residential Commercial
Destroyed Structure Type (check one): Concrete, Reinforced Insulated Concrete Form Light Gauge Metal
Manufactured Housing Masonry, Reinforced Masonry, Unreinforced/Plain Metal Building
Mobile Home Shear Walls Tilt-Up (Concrete Pre-cast) Wood Frame

Destroyed Structure Habitable Area: square feet -or- feet by feet

Bastrop CAD Property ID and Legal Description:

Date the destroyed structure was built or placed on the property AND became habitable: Month Date Year

Documentation -Attach two of the following documents (must include the address^2 of the destroyed structure):

- Driver's license (residential documentation only)
Voter registration card (residential documentation only)
W-2 (residential documentation only)
Utility bill (water, electric or phone) -within 3 months prior to the fire
Insurance policy (homeowner, renter, commercial or business property)
Lease agreement or recent rent payment receipt -within 3 months prior to the fire
DECLARATION OF OCCUPANCY from the owner -printed in ink, sign, and notarized, which includes:
Owner(s) name, mailing address and daytime phone number (e-mail address optional)
Tenant(s) name, mailing address and daytime phone number (e-mail address optional)
Destroyed structure's classification and address^2
Date of occupancy
The following statement: "I hereby declare under penalty of perjury that (insert tenant's name) occupied (insert destroyed structure's address^2) since (insert date of occupancy). I hereby certify under penalty of perjury that the information on this document is true, correct and complete."

I hereby request that the destroyed structure referenced in this document be included on the Bastrop County Destroyed Structures List. I declare under penalty of perjury that the structure referenced in this document was destroyed by the Bastrop Complex fire. I hereby certify under penalty of perjury that the information provided on this document and all attached pages are true, correct and complete.

Signature Date

Acknowledgment

STATE OF TEXAS §
COUNTY OF BASTROP §

This instrument was acknowledged before me on the day of , 20 by

Notary Public, State of Texas
Notary's Name (printed):
Notary's Commission expires:

BASTROP COMPLEX FIRE - DESTROYED STRUCTURES LIST

DECLARATION OF OCCUPANCY

Owner Information

Name: First Name MI Last Name Suffix

Business Name: Business Name, if applicable

Mailing Address: Address # Street Name Bldg/ Apt/Unit# City State Zip Code

Daytime Telephone Number: Telephone Number with Area Code e-mail Address: e-mail Address (Optional)

Tenant Information

Name: First Name MI Last Name Suffix

Business Name: Business Name, if applicable

Mailing Address: Address # Street Name Bldg/ Apt/Unit# City State Zip Code

Daytime Telephone Number: Telephone Number with Area Code e-mail address: e-mail Address (Optional)

Structure Information (check one): Residential Commercial

Complete Physical Address (as assigned by the local government agency): Address # Street Name Bldg/ Apt/Unit# City Zip Code

Occupancy Date: From: Month Date Year To: Month Date Year

I hereby declare under penalty of perjury that Tenant's Name

occupied Structure's address, as assigned by the local govt.: Address # Street Name Bldg/ Apt/Unit# City Zip Code

from: Month Date Year to: Month Date Year

I hereby certify under penalty of perjury that the information on this document is true, correct and complete.

Owner's Signature Date

Acknowledgment

STATE OF TEXAS §
COUNTY OF BASTROP §

This instrument was acknowledged before me on the day of , 20 by

Notary Public, State of Texas
Notary's Name (printed):
Notary's Commission expires: