



Hurricane Financial Relief - Individual Financial Assistance Application

Name _____

Address _____

City _____, State _____ Zip _____

Phone _____ Email _____

Name of employer _____

Dates employed _____

Dates business was closed due to Helene & Milton _____

Reopen date _____

Employer name and phone number _____

Is your home condemned? _____

Is your home damaged? If so, what needs to be fixed? _____

What is the cost of repair/replacement? _____

Do you have insurance? _____

If yes, what is your deductible? _____

Is your car damaged? If so, what needs to be fixed _____

If yes, what is the cost of repair/replacement? _____

Do you have insurance? _____

If yes, what is your deductible? _____

Why do you need financial assistance/What will the funds be used for? _____

What is the dollar amount of financial support requested? _____

What is your monthly rent/mortgage? _____

What is your monthly utilities cost? _____

What is your monthly childcare cost? _____

What is the number of family members in your household?

What is your monthly transportation cost? _____

What are any other expenses? _____

Additional Information _____

Signature

Date

Please email completed application to Doug.Izzo@EnglewoodChamber.com or drop off in person at the Englewood Chamber – 601 S. Indiana Avenue.