



REALTORS[®] RELIEF FOUNDATION

APPLICATION FOR DISASTER RELIEF ASSISTANCE

TYPE OF ASSISTANCE

Assistance is available to qualified applicants towards one of the following options:
1) Monthly mortgage expense for the primary residence that was damaged by Spring 2019 flooding or tornadoes on May 22, 2019 or; 2) Monthly rental expense for primary residence damaged by flooding or tornadoes. Relief assistance is limited to a maximum of \$1,000 per household. Deadline for application submission is July 31, 2019. Please note this assistance is for housing relief only: other expenses including second mortgage/home equity lines of credit, vehicle purchase, rental, repair or mileage are ineligible for reimbursement under this program.

ELIGIBILITY

Recipient must be a full-time resident and U.S. citizen or legally admitted for residence in the United States. Applications will be reviewed without knowledge of the identity of the applicant.

CONFIDENTIALITY

All information provided on this form will remain confidential and will be available only to those who need to confirm eligibility for assistance and to those who process the assistance to be provided. This includes providing a copy of this application to the applicant's lender or landlord, if requested. It will not be shared with other parties for any other purpose.

DISBURSEMENT OF FUNDS

In order to provide for a reasonable and equitable distribution of funds, assistance will be provided on a first come, first serve basis. All grants are contingent upon the availability of funds. **Grants will be jointly payable to applicant and mortgage lender or landlord.**

ATTACHMENT CHECKLIST

Required for All Applicants

1. Proof of Residency [i.e. driver's license or other governmental documentation evidencing residency]
2. Copy of Mortgage Statement or Mortgage Payment Coupon or Rent Statement or Lease Agreement

One of the Following is Required to Show Proof of Damage to your Primary Residence:

- a. Photos of Damage
- b. Insurance Estimate
- c. Copies of Written Claims, Settlement Proceeds or Claim Status Reports
- d. Copies of Repair Estimates from Contractors or authorized source

GENERAL INFORMATION

Please complete all information to be considered for assistance.

Full Name: _____

Email Address: _____

Address of Damaged Property: _____

City: _____ State: _____ Zip: _____

Cell Phone : _____ Other Phone: _____

Type of Dwelling: Single Family Condo/Townhouse

Other (Specify): _____

PROPERTY INFORMATION/DESCRIPTION OF LOSS

Describe damage/loss relating to your primary residence:

Total Cost of Damage: \$ _____

Total Uninsured Loss to Primary Residence: \$ _____

If displaced from your primary residence, when do you expect to be able to return to your home? _____

Please detail any financial assistance you have received from other sources:

Provider	Description of Assistance	Amount Received
		\$
		\$
		\$

Please indicate type of assistance sought:

Mortgage payment (primary residence)

Rental cost (primary residence)

Amount of monthly housing obligation:

Mortgage: \$ _____

Rent: \$ _____

Name of lender/mortgage servicer: _____

Website address: _____ Telephone: _____

Mortgage Loan Account #: _____

Name of landlord: _____ Telephone: _____

IMPORTANT: PLEASE COMPLETE THIS SECTION IF CURRENT MAILING ADDRESS IS DIFFERENT FROM ADDRESS PROVIDED ON PAGE 1.

Full Name: _____

Current Address : _____

City: _____ State: _____ Zip: _____

DECLARATION

By signing this application, I verify that all the information presented herein is true and correct to the best of my knowledge. I agree that the lender/service provider or landlord listed above may be contacted to verify information contained in this application. I also provided all supplemental documents as required.

Print Name of Applicant: _____

Signature of Applicant: _____ Date: _____

All applications should be submitted to your Local Board/Association of REALTORS®.

Local Board/Association of REALTORS®: _____
1906 Bubba Lane, Jefferson City, MO; or contact@jcabor.com

For Local Board/Association of REALTORS® Use Only:

Recommended Amount: \$ _____ ___ Mortgage ___ Rent

Signature of Designated Staff: _____

Special Notes:

For MISSOURI REALTORS® Relief Fund Trustees Use Only:

We have reviewed the attached MISSOURI REALTORS® Disaster Relief funding application and recommend to MISSOURI REALTORS® Accounting staff that it be considered for funding.

Recommended Amount: \$ _____ ___ Mortgage ___ Rent

Signature of Designated Staff: _____

Special Notes:

For MISSOURI REALTORS® Accounting Office Use Only:

Date Received from Relief Fund Trustees: _____

Reviewed by: _____

Amount Approved/Processed for Grant Funding: \$ _____

Special Notes: