



APPLICATION FOR HURRICANE IDA RELIEF FUND

Full Name:

Current Address:

Town: _____

Zip: _____

Former Address since Hurricane Ida if Different from Above:

Phone: _____

E-Mail: _____

Monthly Income for Household: _____

Number of Adults/Children in Household: _____



Reason for Request:

Rent _____

Mortgage _____

Utilities _____

Housing _____

Auto _____

Security Deposit _____

Other: _____

Briefly describe loss from Hurricane Ida:

Briefly describe reason for request and amount:



Please check all programs you have submitted applications to.

- FEMA _____
- City of Lambertville (Bambi Kuhl) _____
- Red Cross _____
- Saint John's Outreach Ministry _____
- Go Fund Me _____
- Other _____

* Submission to other agencies does not disqualify you from making this application.

I give permission to share my application with other agencies (City of Lambertville, Lotsa Helping Hands, etc.)

Signature

Documents to prove identity, residence, and need may be requested.

_____ ***I will not share the details or amount of funds granted.***

Signature: _____

Date: _____

* Submission of this application does not guaranteed eligibility for funding.