

Application # _____

APPLICATION COVER SHEET

BREEZY POINT DISASTER RELIEF FUND, INC.

The Breezy Point Disaster Relief Fund, Inc. has been established to aid our community members in the greatest financial need in the wake of Hurricane Sandy. Please fill out the information below as accurately and honestly as possible. Documentation of information provided (including tax returns) may be requested upon review of this application. Once submitted the cover sheet will be removed so our process will be as anonymous as possible. Please complete form and mail to the address below. This form may also be dropped off in person:

Breezy Point Disaster Relief Fund Inc.
C/O The Law Office of Lee and Kane
2175 Flatbush Ave
Brooklyn, NY 11234

NAME OF APPLICANT(S): _____

PHONE NUMBER: _____

E-MAIL ADDRESS (optional): _____

CURRENT/DISPLACED ADDRESS:

BREEZY POINT/ROCKAWAY POINT/ROXBURY ADDRESS:

FOR B.P.D.R.F. USE ONLY

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COLOR DESIGNATION FROM THE DEPARTMENT OF BUILDINGS:

RED

YELLOW

GREEN

ESTIMATED TOTAL COST FOR REPAIRS & DISPLACEMENT:

IS BREEZY POINT/ROCKAWAY POINT/ROXBURY YOUR PRIMARY RESIDENCE?

YES NO

IF YES, PLEASE NOTE NUMBER OF FULL TIME HOUSEHOLD MEMBERS _____

HAVE YOU FILED A CLAIM WITH YOUR HOMEOWNER'S INSURANCE? YES NO

DO YOU HAVE FLOOD INSURANCE? YES NO

IF YES, HAVE YOU FILED A CLAIM WITH YOUR FLOOD INSURANCE? YES NO

HAVE YOU REGISTERED FOR FEMA? YES NO

PLEASE NOTE WE STRONGLY RECOMMEND YOU CONTACT THESE PARTIES PRIOR TO SUBMITTING THIS FORM

HAVE YOU APPLIED FOR FUNDS FROM ANY ORGANIZATION OTHER THAN THOSE MENTIONED ABOVE? YES NO

IF YES, PLEASE LIST WHICH ORGANIZATIONS: _____

PLEASE ESTIMATE THE TOTAL AMOUNT OF FUNDS YOU EXPECT TO RECEIVE FROM INSURANCE, FEMA AND OTHER GRANTS: _____

FINANCIAL INFORMATION

ANNUAL GROSS HOUSEHOLD INCOME: _____

MONTHLY MORTGAGE PAYMENTS: _____

OTHER NOTEWORTHY FINANCIAL OBLIGATIONS: _____

ESTIMATED NET WORTH EXCLUDING BREEZY POINT HOME _____

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ADDITIONAL COMMENTS OR RELEVANT INFORMATION:

Thank you for completing this application. Your request will be reviewed shortly. For further information regarding this form please contact breezypointdisasterrelief@gmail.com. Please note, you may re-apply to this fund if your circumstances change.

FOR B.P.D.R.F. USE ONLY

AMOUNT TO BE ISSUED TO APPLICANT: _____