

SHANDAKEN ROTARY/SHARP HURRICANE IRENE RELIEF FUND
Emergency Loan Application

Name _____

Phone# _____ E-Mail _____

Mailing Address _____

Have you been displaced by the storm? Yes _____ No _____

If yes, what was your address before the storm? _____

Where are you located now? _____

Are you currently covered by flood or content insurance? Yes _____ No _____

Have you received an insurance award for this loss? Yes _____ No _____

Are you sheltering displaced persons? Yes _____ No _____ # of persons _____

How many persons in your household? Adults _____ Children _____

Are you currently employed? Monthly income _____

Amount of grant requested? _____

Describe what the grant will be used for-include how this is specifically a result of the storm:

Is this your primary residence? Yes _____ No _____

ASSURANCES

I agree to submit all receipts documenting that this grant was used for the purpose described to the Grant Committee.

Signature of Applicant _____

Amount of Grant Approved \$ _____ Denied _____ Date of Disbursement _____

Signature of Grant Committee Representative _____

SHARP COMMITTEE, INC.
PO BOX 362
PHOENICIA, NY 12464
845-688-5777