MY APPLICATION



SUBMISSION FORM

GENERAL INFORMATION

NC REALTORS® APPLICATION FOR DISASTER RELIEF ASSISTANCE

First

James

Last

Gross

Email Address:

Street Address of Damaged Property:

105 Atkins Avenue, Miami, NE 66131

County:

Test Value

Please retype the street address of damaged residence/property:

Mobile Phone:

US/Canada
Other Country

Other Phone:

+1 (823) 992-0850

Type of Dwelling:

• Single-Family

Untitled Step

PROPERTY INFORMATION/DESCRIPTION OF LOSS

Describe damage/loss relating to your primary residence:

Test Value

Total Cost of Damage:

Test Value

Total Uninsured Loss to Primary Residence:

Test Value

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 #1 **Test Value Description of Assistance Test Value**

Amount Received

Test Value

Provider #2

Test Value

Description of Assistance

Test Value

Amount Received

Test Value

Provider #3

Test Value

Description of Assistance

Test Value

Amount Received

Test Value

Untitled Step

Please indicate type of assistance sought.

• Mortgage Payment (primary residence)

Amount of monthly housing obligation:

Mortgage:

Test Value

Name of lender/mortgage servicer:

Test Value

Website address:

Test Value

Telephone:

Test Value

Mortgage Loan Account #:

Test Value

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

Full Name:

Test Value

Email Address:

Test Value

Current Address

105 Atkins Avenue, Miami, NE 66131

Untitled Step

ATTACHMENT CHECKLIST

REQUIRED FOR ALL APPLICANTS

Photo Identification to Show Proof of Residency [i.e. driver's license or other governmental documentation evidencing residency]

(none)

Copy of Mortgage Statement or New Lease Agreement or Hotel Receipt. (none)

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

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

Upload Here:

(none)

Additional documents can be uploaded here:

NAME	CREATED DATE	
No Data		

DECLARATION

Declaration

Test Value