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 the Flood Disaster or; 2) Rental cost due to displacement from the primary residence resulting from the Flood Disaster or; 3) Hotel reimbursement due to displacement from the primary residence resulting from the Flood Disaster. Relief assistance is limited to a maximum of $2,000 per household. Deadline for application submission is October 2, 2024. Please note this assistance is for housing relief only; other expenses including second mortgages (home equity lines or loans), clothing, appliances, equipment, vehicle purchase, rental or repair, and 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.

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

Attachment Checklist

Required for All Applicants
1. Photo Identification to Show Proof of Residency [i.e. driver's license or other governmental documentation evidencing residency]
2. Copy of Mortgage Statement or New Rental Lease Agreement or Hotel Receipt.

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.

***REQUIRED: GENERAL INFORMATION**

Please complete all information to be considered for assistance					
Full Name:					
Email Address:					
Street Address of Damaged Property:					
Unit #:					
City:		**State:**		**Zip Code:**	
Mobile Phone:		**Other Phone:**			
Type of Dwelling:	☐ **Single-Family**	☐ **Condo/Townhouse**			
	☐ **Other (Specify):**				

***REQUIRED: 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**	**Amt Received**
		$
		$
		$

***REQUIRED - Please indicate type of assistance sought.**	☐ **Mortgage Payment (primary residence)**		
	☐ **Rental cost (temporary housing)**		
	☐ **Hotel Reimbursement (temporary housing)**		
Hotel Expense Reimbursement:			
Hotel Charge:	$		
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 THAN ADDRESS PROVIDED ON PAGE 1.

Full Name:					
Email Address:					
Street Address:					
Unit #:					
City:		**State:**		**Zip Code**	

DECLARATION (REQUIRED)

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:	

Mail or email application with attachments to the attention of:

Contact Info:
REALTOR® Association of the Sioux Empire
ATTN: Disaster Relief Assistance
2415 W 57th Street
Sioux Falls, SD 57108

For Inquiries: 605-334-4752

Email: rase@rase-inc.org

REALTOR® Association of the Sioux Empire Use Only:

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

Recommended Amt:	**$**	☐ ***Mortgage***	☐ ***Rent***	☐ ***Hotel***
Signature of CEO:				
Special Notes:				