

PLEASE PRINT OUT, COMPLETE AND FAX TO 859-255-1134



# Catholic Charities USA Emergency Funding Assistance

Administered by Catholic Charities of the Diocese of Lexington for Disaster  
Recovery flooding that occurred May 2, 2010 - May 3, 2010

## APPLICATION FOR SERVICES

First and Last Names, MI	Relationship	Social Security #	Date of Birth	Monthly Income/Source
	Head of Household	- -	/ /	
			/ /	
			/ /	
			/ /	
			/ /	
			/ /	
			/ /	
			/ /	

### Contact Information:

Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ County: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

How can CCDL best help you?

\_\_\_ Power washer and/or sump pump (circle)

\_\_\_ Building supplies (specify) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_ Bill (specify) \_\_\_\_\_  
\_\_\_\_\_

\_\_\_ Appliance (specify) \_\_\_\_\_  
\_\_\_\_\_

\_\_\_ Other (specify): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Check all that apply:

- I have applied for help through FEMA.  
My FEMA ID # is \_\_\_\_\_ .
  
- I have received individual assistance from FEMA in the amount of  
\$ \_\_\_\_\_ for rent, \$ \_\_\_\_\_ home repair, \$ \_\_\_\_\_ for  
personal property, and \$ \_\_\_\_\_ for \_\_\_\_\_ (specify).
  
- I have submitted an application for a loan from SBA.
  
- I have not submitted an application for a loan from SBA.  
Reason: \_\_\_\_\_
  
- I have received a loan from SBA for \$ \_\_\_\_\_. My monthly  
payment is \$ \_\_\_\_\_ for \_\_\_\_\_ years.
  
- I have refused a loan from SBA because \_\_\_\_\_  
\_\_\_\_\_.
  
- I have attached a letter which describes damages and includes a detailed  
explanation of my need for assistance.
  
- I have attached verification of all household income from the last two months  
(paycheck stubs, benefit award letters, verifications signed by employer, etc.).
  
- I have attached any other documents that would be beneficial in the  
completion of services to my household, i.e. bill, insurance info, estimates, etc.
  
- I understand that funding is limited and applying for assistance through  
CCDL does not guarantee that I will receive it.

**I certify that the above information is true and correct. I agree to provide verification of income and FEMA/flood insurance awards. I consent to the release of any pertinent information to and from social service agencies, churches or businesses as necessary to complete services to my household, to provide statistics on emergency assistance, or to guard against duplication of assistance.**

\_\_\_\_\_  
Signature of Head of Household

\_\_\_\_\_  
Signature of Spouse

\_\_\_\_\_  
Signature of CCDL worker  
or referring worker

\_\_\_\_\_  
Organization

\_\_\_\_\_  
Date