



“ROOMS of HOPE”

RELIEF & REBUILD APPLICATION FORM

“ROOMS of HOPE” RELIEF & REBUILD, through Fields of Grace Outreach’s Grace Assistance Program – “Bridging the GAP” Disaster Relief Fund, will supply applicants who qualify and are chosen with a voucher to pick up the needed supplies to assist in getting started with a 12' x 12' room in their home. The voucher will provide the following, with no substitutions:

- 10 - 4' x 8' sheets of mold and mildew resistant sheetrock
- 1 - 5 gal. pail of spackling
- 1 - 5 lb. box of sheet rock screws
- 1 - 250' roll of spackling tape

Though funding is not inexhaustible, more supply vouchers will be made available as funding permits. Applications not selected in one round will be rolled over to be reviewed in the following rounds. Qualifying applications will be chosen at random from the pool of eligible entries. Those chosen will be contacted regarding the status, and when and where the supplies will be distributed.

Name(s): _____

Physical Address: _____

City: _____, SCHOHARIE COUNTY, NY Zip: _____

Phone Number: _____ Cell Phone: _____

Email: _____ Other Contact Number: _____

Applicants must meet the following criteria:

1. **Must be the homeowner(s) and plan to rebuild, live in this home, and remain in the county.** (Homes sold within a year of receiving this grant/voucher will be asked to donate back to Fields of Grace Relief and Rebuild Fund, the current replacement cost of the materials voucher given.)
2. Will not be receiving from any outside source monies that will meet or exceed the cost of the damages to the structure.
3. Submit a before and after picture of the room in need of repair. (This request is primarily so that we may celebrate with you the joy of having the “Room of Hope”, and have a reminder of the needs in Schoharie County.) (optional)

Please answer the following questions:

1. Do you have flood insurance? Yes _____ No _____
 2. Have you received or plan to receive compensation from your flood insurance company or FEMA? Yes _____ No _____
 3. Briefly describe the damage to your home.
-
-

Fields of Grace Outreach – “Rooms of Hope” Relief & Rebuild Application Form

Please read the following and sign.

I, _____, agree that the provided information is true and all funds and/or materials that I may receive will be used to repair my home from the damages caused by the recent flooding disaster from Hurricane Irene. I plan on living in this said home and plan on remaining in Schoharie County for at least the next year.

(Signature of applicant)

(Signature of applicant)

(Date)

(Date)

Applicants must return this form by: NOVEMBER 15, 2011 – 5th round _____

NOVEMBER 30, 2011 – 6th round _____

DECEMBER 15, 2011 – 7th round _____

(ROUND DRAWINGS may be sooner as funds become available)

Before Photo attached (What it looks like now!): (optional)

(Photo can be uploaded via e-mail: peterdebartolo@thefieldsofgrace.org)

I give my permission for these photos to be used on the Fields of Grace Outreach website for viewing of the “Rooms of Hope” Relief & Rebuild project.

(Signature of applicant)

(Signature of applicant)

(Date)

(Date)

MAIL FORM TO: Fields of Grace Outreach
“Rooms of Hope” Fund
P. O. Box 48
Middleburgh, NY 12122

OR E-MAIL TO: (if possible)
peterdebartolo@thefieldsofgrace.org