

mend

rebuilding lee county one life at a time

Survivor Assistance Form

Survivor Name(s) (required): _____

Contact Telephone (required): _____

Address of Property Damage: _____

Current Address: _____

Contact Email: _____

Survivor Representative: I'm a family member I'm assisting a survivor

Name & relationship to survivor: _____

Contact Telephone Number: _____

Housing/Land Information or Additional Needs

Personal Property Damage (home, car, etc.): Yes or No

Description of Property Damage: _____

Home: Own or Rent Land: Own or Rent

Number of Family Members in Household? _____

Please Provide a Description of Needs (property, vehicle, medical, clean-up assistance, etc.):

Applied with FEMA: Not Registered Denied Pending Accepted

If Accepted FEMA, Resource/Payment Received _____

FEMA Registration Number: _____

Insurance Status: Yes or No | If yes, has claim been filed Yes No or Denied

****Insurance must be filed before additional assistance will be offered by FEMA. Also, need to have a letter from insurance company stating what is not covered to receive additional assistance from FEMA and appeal denial.***

Please Select Additional Resources Applied for:

Applied for Red Cross Yes or No | Resources Received _____

Applied for SBA Loan Yes or No | Resources/Payment Received _____

****Applying for SBA loan is necessary to be considered for additional disaster assistance***

If you need community assistance, call or email Mend:

Telephone: 334-528-MEND (6363)

Email: mend@eamc.org