



APPLICATION FOR ASSISTANCE

Please fill out this form to request assistance from the Elmore County Disaster Relief Fund and return to either City of Wetumpka Administrative Building, mail to PO Box 24, Wetumpka, AL 36092 or email to tornadorelief@cityofwetumpka.com.

The Elmore County Disaster Relief Fund Committee will contact you directly to discuss your situation.

Full Name _____ Date of Birth _____

Address Where Damage Occurred _____

Current Address _____

Contact Phone Number(s) _____

Email _____

Adults Living in Household _____ # Children Living in Household _____

Household Income \$ _____

Loss Covered by Insurance Completely Partially Not Covered

Insurance Amount \$ _____

Name and Contact Information for Family Member/Friend We May Contact

Briefly describe damage to your property

(continue on reverse if needed)

Did any members of your household incur injuries or loss of life? _____

What is your most immediate unmet need? _____

Applicant Signature _____ Date _____

ELMORE COUNTY DISASTER RELIEF FUND COMMITTEE USE ONLY

Comments

Recommendations

Approved By:

Printed Name

Signature

Date