





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 \$1,000 per household. Deadline for application submission is August 15, 2025. 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 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 Da						
Unit #:						
City:		State:		Zip Code:		
Mobile Phone:		Other Phone:				
Type of Dwelling:	☐ Single-Family	☐ Condo/Townhouse				
	Other (Specify):					

${\bf *REQUIRED: PROPERTY\ INFORMATION/DESCRIPTION\ OF\ LOSS}$

Describe damage/loss relating to your primary residence:							
Describe damage/1055 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?							
P							
Please detail any financial assistance you have received from other sources:							
Provider	Description of Assistance				Amt Received		
				\$			
				\$			
			\$				
*REQUIRED - Please indicate type of Mortgage Payment (primary residence))	
assistance sought.	type of	— Kentai cost (temporary nousing)					
☐ Hotel Reimbursement (temporary housing)							
Hotel Expense Reimburseme	ent:						
Hotel Charge: Amount of monthly housing	ohligation	\$					
Mortgage:	obligation:	\$		Rent:		\$	
- Tor Gugor		Ψ		1101101		T T	

Name of lender/mor	rtgage servicer:						
Website address:							
Telephone:							
Mortgage Loan Acco	unt #:						
Name of Landlord:							
Telephone:							
		<u>'</u>					
IMPORTANT: PLI ADDRESS PROVIDED		THIS SECTION IF C	URRENT MAILING	G ADDRESS IS DIFF	ERENT THAN		
Full Name:							
Email Address:							
Street Address:							
Unit #:							
City:		State:		Zip Code			
				_			
		DECLARATION	(REQUIRED)				
By signing this appli		t all the informati	on presented here				
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 Applic		nication. I also pro	vided all supplein	ientai documents a	is required.		
Signature of Applica	IIC:						
Date:							
Courte et Iufe	Mail or email ap	oplication with at	tachments to the	e attention of:			
Contact Info: Historic Highlands Association of REALTORS® For Inquiries: 301.777.8426							
ATTN: Disaster Relief Assistance							
208 Paca St Email: hharoutreach@gmail.com							
Suite A							
Cumberland, Maryland							
21502							
Historic Highlands Association of REALTORS® 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:	\$	☐ Mortgag	e 🗌 Ren	t	Hotel		
Signature of CEO:							
Special Notes:							