Conayt Friendship Society

Application for Flood Damage Relief

Name	
Address	
Phone Number	
Email Address	
Number of family members	
Type of assistance requested **Example: Beds, furniture, appliances**	
Do you rent or own?	
Please provide a brief description of your loss.	
Are you in Phase 4?	
Are you covered by insurance?	

This assistance is to help relieve some of the financial burden due to the flood.

You will be contacted by Conayt staff for flow up questions if you meet the criteria.

Each application will be reviewed by the committee for approval.

Please provide a copy of your ID and proof of address

Signature:_____ Date:_____