



SNOW BELT HOUSING COMPANY, INC.

7500 SOUTH STATE STREET | LOWVILLE | NY 13367
PH: 315-376-2639 | NYS RELAY SERVICE NO. TTD: (800) 662-1220
E: information@snowbelt.org | FAX: 315-376-2518

FUTURE SERVICES – SEVERE WEATHER 2024

NAME		PHONE	EMAIL
STREET ADDRESS		YEAR BUILT	
CITY/TOWN	STATE	ZIP	
Please check all statements that apply?			
<input type="checkbox"/> I am a homeowner		<input type="checkbox"/> I am a landlord	
<input type="checkbox"/> I am a renter		<input type="checkbox"/> I have no steady place to sleep	
<input type="checkbox"/> I am staying in a temporary location		<input type="checkbox"/> I do not qualify for assistance	
Describe how you or your family were impacted by the recent severe weather:			
<input type="checkbox"/> Damage to interior of home		<input type="checkbox"/> Loss of electronics (phone/computer)	
<input type="checkbox"/> Damage to exterior of home		<input type="checkbox"/> Damage to car	
<input type="checkbox"/> Loss of perishable food		<input type="checkbox"/> Total loss of car	
<input type="checkbox"/> Health Issues		<input type="checkbox"/> Loss of Income	
<input type="checkbox"/> Loss of personal belongings (clothing/furniture/small appliances)			
<input type="checkbox"/> Unable to pay bill(s) due to repair/replacement costs (rent, utilities, food, etc.)			
Did you modify your home to reduce the risk of future flooding?			
<input type="checkbox"/> Elevated Utilities		<input type="checkbox"/> Installed Flood Barriers	<input type="checkbox"/> Improved Drainage System
<input type="checkbox"/> Used Flood Resistant Materials		<input type="checkbox"/> Other: _____	
Estimated cost of damages you still need assistance with: \$ _____			
Please explain the area of impact that you are still in need of assistance with: _____			
Total cost of repairs that were already completed: \$ _____			
Did you receive any assistance of support after the severe weather? <input type="radio"/> Yes <input type="radio"/> No			
If yes, what type: _____			
What was the severity of the impact that the severe weather had on you or your family?			
<input type="radio"/> Minor		<input type="radio"/> Moderate	<input type="radio"/> Severe
		<input type="radio"/> Catastrophic	





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Other reported challenges: _____

IF CONSTRUCTION RELATED, CHECK ALL ITEMS THAT ARE STILL IN NEED OF REPAIR:			
FOUNDATION <input type="checkbox"/>	ROOFING/SHINGLES <input type="checkbox"/>	MOLD REMEDIATION <input type="checkbox"/>	WATER HEATER <input type="checkbox"/>
SIDING/PAINT <input type="checkbox"/>	WINDOWS/DOORS <input type="checkbox"/>	HVAC/HEATING SYSTEM <input type="checkbox"/>	ELECTRICAL <input type="checkbox"/>
DEBRIS REMOVAL <input type="checkbox"/>	INSULATION <input type="checkbox"/>	ACCESSIBILITY/ENTRANCE <input type="checkbox"/>	DRAINAGE <input type="checkbox"/>
OTHER:			

TOTAL NUMBER OF PEOPLE LIVING IN HOUSEHOLD (CHILDREN AND ADULTS):		
LIST NAMES OF ALL HOUSEHOLD MEMBERS WHO ARE 18 AND OVER & INCOME DETAILS		
FIRST NAME	SOURCE OF INCOME	TOTAL MONTHLY INCOME
TOTAL MONTHLY HOUSEHOLD INCOME		

IS ANYONE IN YOUR HOUSEHOLD: 62 YEARS OLD OR OLDER
 DIAGNOSED WITH A DISABLING CONDITION
 ATTENDING SCHOOL

IS YOUR HOUSEHOLD CONSIDERED: FEMALE HEAD OF HOUSEHOLD
 SINGLE PARENT
 VETERAN

SIGNATURE:

DATE:





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Snow Belt Housing Co. Inc. is working with several potential funding sources that may be able to provide relief to local families who were impacted by the severe weather. Below is a list of documents that MAY be required when grant funding becomes available. Third party, eligibility documents vary depending on the requirements of the awarding agency.

1. Complete Application:

- Handbook and Application (complete and signed)
- Release of Information
- Homeowner Attestation

2. Income Eligibility:

- Federal Income Tax return, signed with any applicable schedules, W-2s, 1099s. (Current filing) Two (2) years for persons who are self-employed.
- Most recent payroll stubs (covering last 3 months) – showing year-to-date earnings*.
- Benefit Statement/Award Letter (complete, if applicable) including but not limited to: Social security, SSI, pensions, unemployment benefits, public assistance, child support, alimony, trusts etc.
- Two (2) Complete Bank statements for all checking, savings and trust accounts. Mini-Statements not acceptable.
- Asset Income: Performance Report including but not limited to: Stocks, bonds, IRA's, 401K's, CD's, extra checking accounts, extra savings accounts, trusts etc.)
- Award Letter for public assistance: Social Services (TANF, HEAP, SNAP) if applicable.
- A photo ID and SS card must be presented for all adults who reside in the household at the time of the application.
- Copies of birth certificates and social security cards for all children who reside in the home

3. Documentation of Ownership:

- Recorded deed to your property (complete). **Does not apply to renters who are in need of reimbursement for critical needs.*

4. Unit/Need Eligibility:

- Proof of damage (pictures or video if available)
- Estimates for repairs (2 or reasonable efforts to obtain 2 required)
- Receipts for reimbursements

5. Property Tax Payments:

- Property Tax Bills (complete)
- Paid receipts from collector (County/Town, School, and Village).

6. Homeowner's Insurance:

- Declaration page from Homeowner's Insurance and Statement of payment.
- Claim Submission and Claim Response



Information collected on this form is confidential, will only be used for the purpose of determining service or program eligibility.

Information will not be disclosed to third parties without your consent.

This is an Equal Opportunity Program. Discrimination is prohibited by Federal Law