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by deadline.



Facility Emergency Repair and Replacement Funding Application Questionnaire

Page 1

Name of Church or Facility: _____

Address: _____

City: _____ ZIP: _____

Applicant (or Responsible Party) Name: _____

Phone: _____

Email Address: _____

1. What unexpected or suddenly-occurring event happened?

2. Description of damage or destruction:

3. Date of incident.

4. What will it take to fix the problem?

5. How do you plan to fix the problem?

6. Do you have insurance to cover this? YES NO
If yes, have you called your agent? YES NO

7. Will this grant/loan conflict with any provisions of your insurance claim? YES NO

8. What is the estimated cost of the repairs? Please provide supporting documentation, such as, material list, labor costs, freight, etc.

9. Amount requested? (Maximum allowed is \$10,000)

10. What was the Average Sunday Attendance (ASA) reported on your most recent Parochial Report?

11. If loan, please select payback schedule.

2 years 5 years 10 years

ASA of 75 or fewer qualifies for a grant; 76 or greater qualifies for a loan.

Notes:

For Internal Use Only:

Signature of Interviewer: _____ Date: _____

Application must be received within 60 days of incident or event.