

## DEPOSITS & REPAIRS GRANTS

Removing economic barriers to safe housing in times of crisis

## Grant Application All fields are required

es:	
State:	Zip:
State:	Zip:
	(Please select or circle one). document necessary
	es:State:

Please describe how this grant will bring relief to your situation: Please detail any financial assistance you have received, or are applying to receive, from other organizations (Red Cross, Salvation Army, etc.):\_\_\_\_\_ Please list any insurance policies you may have to cover your losses, the specifics of what the policies cover and the status of any claims, if filed: Insurance Company What does it cover? Claim Status 1)\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ 2)\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_

List any additional coverage on separate piece of paper.

Total UNINSURED financial loss due to crisis: \$\_\_\_\_\_

I attest that I have answered these questions and completed this form truthfully and to the best of my ability.

Applicant Signature:	Date:

## Required REALTOR® Verification:

Printed Name:	
Company:	Contact Phone:()
Contact Email:	
I certify that this application accurately reflect	ts the basis for this claim.
REALTOR® Signature:	Date:

Please allow up to five business days for the review of the grant. A member of the Oklahoma Housing Foundation will contact you through your co-signing REALTOR® within this timeframe if you are eligible.

Please send completed application with necessary attachments to <u>info@okhousingfoundation.com</u> Oklahoma Housing Foundation 9807 Broadway Ext Oklahoma City, OK 73114