



**THE AMERICAN LEGION
DEPARTMENT OF FLORIDA**

SAL DISASTER RELIEF

INSTRUCTIONS & APPLICATION

For assistance in completing this application, or for contact information, contact Department HQ at Relief@floridalegion.org.

FLORIDA AMERICAN LEGION, DEPARTMENT GRANT (Application – Page 3): An individual grant may provide immediate emergency assistance to current members of Sons of The American Legion, Detachment of Florida (SAL) in areas devastated by a declared natural disaster, such as floods, tornadoes, hurricanes, earthquakes, and related adverse weather events. The applicant must have been displaced because of damage to the primary residence - or evacuated due to official government order and unable to return to the residence because of unsafe conditions or damage - and had out-of-pocket expenses for food, clothing, and shelter. The Disaster Relief grant is not designed to replace items covered by insurance or to cover losses from a business, structures such as barns and storage sheds, equipment, landscaping and/or vehicles. Only one grant is available per household for each disaster and cannot exceed \$3,000. Members should also apply for assistance from federal or state disaster relief programs by visiting www.disasterassistance.gov.

REQUIRED APPLICATION INFORMATION: The application must be filled out completely and accurately to prevent delay in processing. The Department Headquarters must have enough documented information to justify and approve the grant. Attach all supporting documents such as photographs, copies of receipts, work estimates and government agency statements. Grant requests must be submitted through the Department Headquarters within 90 days of the date of the disaster. Receipts for food, fuel, clothing, shelter and other expenses dated more than 30 days after the disaster are not emergency related but may be considered with an appropriate explanation and documentation.

SUBMITTING APPLICATION: The applicant will forward the application and all supporting documentation to the Department Headquarters for processing. All grant requests must be reviewed and signed by the Department Headquarters officer. Please be sure to retain a copy for your records.

Mail: The American Legion Department of Florida
ATTN: Disaster Relief
P.O. Box 547859
Orlando, FL 32854

Email: Relief@legionmail.org

AFTER APPLICATION IS SUBMITTED: Upon review by Department Headquarters, if additional information or required supporting documents are needed the Department Headquarters will contact the applicant. If the application is properly completed the Department Headquarters officer will endorse the application and recommend an appropriate amount. Once approved by the Disaster Preparedness/Recovery Team, a check will be issued and mailed to the applicant.

If any additional information or supporting documents are needed, the application will be held at Department Headquarters for up to 90 days from the date of disaster. Applicants will be notified of any application not approved along with reasons for disapproval. In some cases, a partial payment may be approved, and additional funds may be granted (not to exceed \$3,000.00) if complete documentation is later provided within 90 days of the disaster.

Grants and amounts of grants are based on available funding through donations to this program. Although membership is required, you need not have donated to be eligible for funding.

ADDITIONAL INSTRUCTIONS:

1. This form provides for one application for The Sons of the American Legion, Detachment of Florida current members. Page **three** is to be used by an individual (member) grant applicant.
2. Written statements from post officers, a service officer or FEMA/local authority officials are valuable for the member applications.
3. Disaster Relief is strictly for the basic needs of members immediately after a natural disaster, including shelter, utilities, food, clothing and other expenses related to immediate health and safety. Receipts for food, fuel, clothing, shelter and other expenses dated more than 30 days after the disaster are not emergency related but may be considered with appropriate explanation and documentation. Mandatory evacuation orders to identified places of safety (such as school shelters or county/city storm shelters) are also not considered to be emergencies unless damage to the home precludes a safe return after the weather emergency.
4. Disaster Relief does not take the place of homeowners/rental insurance or auto insurance.

Disaster Relief will not pay for landscaping, insurance deductibles, loss of business, loss of inventory, internet services, insurance, taxes, transportation (except during evacuation and recovery), previous debt or any expense that does not contribute to the immediate emergency needs of the applicant.

5. The following documents and attachments will speed the NEF application process:
 - ▶ Receipts and other supporting documentation of emergency expenses immediately following the disaster. Bank and/or credit card statements are acceptable if receipts cannot be provided.
 - ▶ Photographs and documentation of damages sustained, especially if forced to find temporary shelter.
 - ▶ All expenses and documents that you may wish to be considered.
6. Ensure all sections of the application are complete and sign and date where required.
Mail: The American Legion Department of Florida
ATTN: Disaster Relief
P.O. Box 547859
Orlando, FL 32854
Email: Relief@legionmail.org
7. Applications must be sent to the Department Headquarters for approval. Before sending a Disaster Relief application to the Department Headquarters, did you:
 - ☐ Pay your current SAL membership before the date of the disaster and before the date of the application.
 - ☐ Complete all sections of the application and attach all required documents.
 - ☐ Sign and date the application.
 - ☐ Make a copy for your records, including all receipts and forms.

Other forms of assistance are available. For state, local and federal assistance programs go to <https://www.floridalegion.org/resources/hurricane-relief/resources/>.



This form may be reproduced as needed
Department of Florida Disaster Relief Application

**THE AMERICAN LEGION
 DEPARTMENT OF FLORIDA
 DISASTER RELIEF**

Dept. HQ Use ONLY

Date Rec'd _____

Last Year Paid _____

SONS OF THE AMERICAN LEGION GRANT APPLICATION

Member Information:

DATE OF DISASTER: _____ **TYPE OF DISASTER:** _____ **COUNTY:** _____

Last Name: _____ First Name: _____ * SAL Membership No. _____
 (*Must be current at date of disaster and application)

City: _____ State: _____ Zip: _____ Phone: _____ Email: _____

*In order to be considered for a Disaster Relief grant, the applicant's membership must be current as of BOTH the date of disaster and of this application. The Hurricane/Tropical Storm must have been named under a federal, state or city/county disaster proclamation by appropriate civil authority.

Attach supporting documentation such as receipts, photographs, repair estimates and/or FEMA statements.

Describe damage to primary residence:	
List dates and location while displaced:	Provide dates, location and address.
Damaged address from which displaced:	Street address of damaged home (NO PO BOX).
Emergency out-of-pocket expenses. List amounts separately and provide receipts.	Food \$ _____ Lodging \$ _____ Clothing \$ _____ Fuel \$ _____ Other \$ _____ Total: \$ _____
Reimbursements expected. See http://www.disasterassistance.gov and enter your zip code.	FEMA \$ _____ State or local disaster assistance \$ _____ Homeowner/Renter's Insurance \$ _____ Other \$ _____ Estimated total relief expected: \$ _____
Household members and their ages:	ADULTS: Age 18-69 _____ Age 70 and Older _____ MINORS: Age 17 and Younger _____ (See TFA Information, page 2)
Other information:	

Upon Signature, this form must be sent the Department Headquarters

Applicant Signature: _____ **Date:** _____

NOTICE: If you are a recipient of a Disaster Relief grant and would like to be contacted by staff from The American Legion Department Headquarters to publicly share your story of how The Department of Florida assisted you, please sign below. Your testimonial will be used in print and online by The Department of Florida. Personal stories promote the Department of Florida's Disaster Relief Fundraising efforts, through which grants are made possible, and how donations to the fund support ongoing assistance for American Legion SAL members and their families in need.

(Optional) Applicant Signature _____ Date _____

NOTE: DECLINING TO PROVIDE YOUR SIGNATURE WILL IN NO WAY ADVERSELY AFFECT THE EVALUATION OF YOUR GRANT APPLICATION.

FOR DEPARTMENT USE ONLY:

DEPARTMENT OFFICER: _____ **Approve or Disapprove** _____ **Recommended Amount: \$** _____

Signature: _____ **Title:** _____ **Date:** _____