



200 West 5th Avenue
 P.O. Box 1090
 Nome, AK 99762
 Phone: (907)443-2246
 Fax: (907)443-9144
 www.necalaska.org

Disaster Relief Program Application

NEC offers a one-time relief assistance of up to \$600 in applicable expenses related to disaster relief for NEC Tribal Members who reside in the Nome service area and experienced loss of property due to Typhoon Merbok.

Due to limited funding, reimbursement is only available to one member per household on a first come, first serve basis. Payments will be made directly to the Tribal Member.

Photographic proof of loss must be attached to qualify for reimbursement of \$600. Please allow 14 days for processing. Completed applications can be emailed to information@necalaska.org or placed in the locked mailbox outside NEC's office building.

Applicant Name		Multiple family household? Circle one: Y N	
NEC Enrollment Number	IF unknown, leave Blank.	Date of Birth:	
Mailing Address	City	State	Zip code
Email Address		Home phone #	Cell phone #
Total Number of people who reside in your household: _____			
Please provide a list of names on the back of this form.			
Payment will be made directly to the Applicant after photos and tribal enrollment is verified. Please allow 14 days for processing.			
Make check payable to: _____			
Mailing address: _____			

Please submit completed application to Nome Eskimo Community, Attn: Shelby Sinnok for processing.			

How have you been affected by Typhoon Merbok? Please check all of the boxes that apply.

- | | |
|--|---|
| <input type="checkbox"/> Loss of personal belongings | <input type="checkbox"/> Loss of camp |
| <input type="checkbox"/> Loss of potable water | <input type="checkbox"/> Loss of subsistence gear |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Property or vehicle damage |

Please attach photograph(s) of loss.

I, the applicant, certify that I am a Nome Eskimo Community member. I understand disaster relief is only available for disaster caused by Typhoon Merbok related costs. I agree to provide photographic evidence of loss of property and acknowledge that funding is available on a first come first serve basis. I am also aware payment is not automatic and may take up to 14 days to process.

Applicant's Signature

Date

Please provide a list of household members. This information will only be used to limit reimbursement once per household. Eligibility will not be affected if other household members are not NEC tribal members.

For office use only:

Authorizing Official Approval _____ Date: _____

Amount approved \$ _____ Funding Source Code: 20-21-19-6050-01

Denied _____ Reason: _____
Date