

**WARF**  
**Hurricane Irene Relief Fund**  
61 State Route 296  
Windham, NY 12496

**Windham Chapter - (Relief Fund)**  
**of the Catskill Mountain Foundation**  
PO Box 600  
Windham, NY 12496

**Application for Assistance to Businesses**

**SECTION A: BUSINESS AND CONTACT INFORMATION**

**Applicant Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Name of Business:** \_\_\_\_\_

**Please describe the nature of your business** (e.g. products and/or services offered, customer base/clientele etc):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**How long have you been in business in the Windham Area?** \_\_\_\_\_

**Social Security #:** \_\_\_\_\_ **Business Federal I.D #:** \_\_\_\_\_

**Physical Address of Business:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Rent /Own** (circle)

**Property Tax Map ID#:** \_\_\_\_\_

**Business Mailing Address** (if different from above): \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Rent /Own** (circle)

**Home Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone (home):** \_\_\_\_\_ **(business):** \_\_\_\_\_ **(cell):** \_\_\_\_\_

**Email:** \_\_\_\_\_

**SECTION B: DAMAGE DESCRIPTION (Please submit photos and estimates/receipts of damage as part of your application)**

**1) How Hurricane Irene Affected the Property (Please check all that apply):**

**Foundation** \_\_\_\_\_ **Building** \_\_\_\_\_ **Heating System** \_\_\_\_\_ **Grounds/Parking Lot** \_\_\_\_\_

**2) How high was the water in the building? (Basement/First Floor?)** \_\_\_\_\_

3) Briefly describe the damage to the building: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4) Please state the estimated repair costs for the damages to your building: \$ \_\_\_\_\_

5) Please list/describe equipment loss: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6) Please state the estimated repair costs for equipment loss: \$ \_\_\_\_\_

7) Please state the estimated replacement value of your lost inventory: \$ \_\_\_\_\_

8) Please describe the damage to the grounds/parking area: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9) Did you get an estimate for repair to the grounds/parking area? Yes/No (circle)

9a) If so, what was the estimate? \$ \_\_\_\_\_

10) Please describe any other business damage not described above: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

11) Please state the estimated costs for other damage: \$ \_\_\_\_\_

12) TOTAL ESTIMATED COSTS FOR ALL DAMAGES AND LOSS: \$ \_\_\_\_\_

**SECTION C: MEANS OF SUPPORT TO RECOVER/REBUILD**

1) Did you apply for a CWC grant with the Town of Windham? Yes/No (circle)  
1a) Were you awarded a grant? Yes/No (circle) 1b) If so, what was the dollar amount? \$ \_\_\_\_\_

2) Did you apply for a SBA loan? Yes/No (circle)  
2a) If so, how much did you (or do you expect to) receive? \$ \_\_\_\_\_

3) Did you apply for a Greene County no-interest loan? Yes/No (circle)  
3a) If so, how much did you (or do you expect to) receive? \$ \_\_\_\_\_

4) Did you apply for Disaster Unemployment Assistance through NYS Office of Emergency Management? Yes/No (circle)

5) Did you apply for a Sales Tax Exemption through the Greene County IDA? Yes/No (circle)

6) Have you (or do you expect to) received any other monetary relief for your business losses? Yes/No (circle)  
6a) If yes, please list source(s) of funds and dollar amounts: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7) Are you insured for any of the following?  
Building Structure: Yes / No (circle) If yes, how much do you expect to receive? \$ \_\_\_\_\_  
Equipment: Yes / No (circle) If yes, how much do you expect to receive? \$ \_\_\_\_\_  
Inventory: Yes / No (circle) If yes, how much do you expect to receive? \$ \_\_\_\_\_  
Grounds and Parking: Yes / No (circle) If yes, how much do you expect to receive? \$ \_\_\_\_\_

8) What business and personal resources do you have to repair the damage to your business and replace losses?  
\_\_\_\_\_  
\_\_\_\_\_

9) Will your business continue to suffer as a result of the Hurricane Irene damage? Yes / No (circle)  
9a) Please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION D: USE OF GRANT FUNDS**

1) How much WARF/Windham Chapter funding is requested? \$ \_\_\_\_\_

2) Please briefly describe what you intend to do with any grant money awarded to you by WARF and/or the Windham Chapter of the Catskill Mountain Foundation:

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**APPLICANT STATEMENT**

- I certify that I have suffered the damage to my residence as stated in this application.
- I warrant that the information contained in this application is accurate and complete.
- I understand that a fraudulent representation or omission of any information requested is grounds for immediate refusal of assistance or demand of reimbursement of funds, under this program.
- I understand that the granting of assistance under this program is neither a right nor an entitlement and that the Boards of WARF and the Windham Chapter of the Catskill Mountain Foundation shall have sole discretion in making an award determination.
- I understand that I am not eligible for benefits under this program if I have received insurance payments and/or assistance from other programs the total of which reimbursed me for 100% of my damages.
- I understand that I will be responsible for providing proof of expenditures in the form of documentation and photographs for funds awarded under this program.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Completed applications should be returned to:*

**WARF/Windham Chapter of CMF Hurricane Irene Relief Funds**  
c/o Windham Mountain Outfitters  
61 State Route 296  
Windham, NY 12496

*and must be RECEIVED by October 24, 2011*