VILLAGE OF SOLOMON

MERBOK DISASTER APPLICATION

This application is to serve those tribal community members that had been negatively impacted by the Typhoon Merbok disaster in/around Nome or Solomon. Homes and/or subsistence cabins. VOS offers a one-time relief assistance in applicable expenses related to disaster relief for VOS 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 for reimbursable expenses with proof or directly to the vendor. Solomon prefers to make payment by check. This funding will not be considered income for state or federal public assistance programs if you are, or will be participating in those programs. This funding is not considered taxable income by the IRS.

Photographic proof of loss and estimate/quote must be attached to qualify for reimbursement. Please allow 14 days for processing. Completed applications can be emailed to deilah@villageofsolomon.org

Applicant Name		Provided any other assistance? Circle one: Y N	
VOS Enrollment Number	IF unknown, leave Blank.	Date of Birth:	
Mailing Address	City	State	Zip code
Email Address		Home phone #	Cell phone #

Please circle which properties were impacted: House   Cabin   Both

Please describe damage and costs/expenses for repairs/replacements_____
_____
_____
_____
_____
_____

TOTAL AMOUNT REQUESTING:$ _____

Payment will be made directly to the Applicant after photos and tribal enrollment is verified. Please allow 14 days for processing.
Please submit completed application to deilah@villageofsolomon.org

or placed in the locked mailbox at the VOS office building.

I, the applicant, certify that the information provided is true and correct. I understand disaster relief is only available for loss or damage caused by Typhoon Merbok and only to the extent of funding availability. I further understand that VOS retains sole discretion regarding funding decisions and that any misrepresentations made by me on this application will automatically disqualify me from being eligible to receive funding through this effort or any future disaster relief that may become available. I hold VOS harmless from any liability, loss or damages I may incur as a result of receiving this funding.

_____   _____

Applicant Signature   Date

Village of Solomon ONLY   Date: _____

Approved by: _____   Signed: _____