



LNU Lightning Complex Fire Relief Fund Application Guidelines

The Travis Credit Union Foundation is providing funds to individuals and families who have been impacted by the LNU Lightning Complex Fire in Solano, Yolo and Napa counties.

Financial assistance is available for:

Lost Home	Up to \$20000
Damaged Property/Personal Items	Up to \$5000

Lost Home Category – this amount will supplement insurance – helping to cover food and housing costs.

Damaged Property Category - this amount will supplement insurance – helping to cover costs of rebuilding or repurchasing personal items.

To apply, please complete the application below and submit it to Dimpel Sandhu, at dsandhu@tcufund.org. Your application can also be mailed to:

Travis Credit Union Foundation
PO Box 1086
Vacaville, CA 95687-9998

Please attach requested documents and any additional information you wish to submit. Only one application per household will be accepted. **Application review will begin on October 1st, 2020.** You will be notified via email upon review of application. Please allow for 1 – 2 weeks to receive funds upon approval of application.

Public records will be used to verify the information provided in the application



Travis Credit Union Foundation's LNU Lightning Complex Fire Relief Fund Application

Date: _____

Legal Name(first/last)_____ Birthdate_____

Spouse Legal Name (first/last)_____ Birthdate_____

PhoneNumber: _____ Email:_____

EmploymentStatus: Full-time Part-time Retired Unemployed Self-employed

Annual Income: _____

To provide proof of income, submit one of the following: Income verification letter from employer, pay stub, 2019 tax return, social security documents, disability insurance, pension, or unemployment documentation.

PRIOR TO THE FIRE

Address: _____

City_____ State_____ Zip_____

Own Rent Live with family/Friends

Type of property: Apartment Single family dwelling Hotel Trailer/Mobile Home

Other_____ Rent: _____ Monthly Weekly Biweekly Daily

To provide proof of residency, submit one of the following: passport, driver's license, utility bill, or bank statements

AFTER THE FIRE

Current Address: _____

City_____ State_____ Zip_____

Own Rent Live with family/Friends

Type of property: Apartment Single family dwelling Hotel Trailer/Mobile Home

Other_____ Rent: _____ Monthly Weekly Biweekly Daily

Members of Household Information		
Relation to Head of Household	Legal Name (first/last)	Birthdate
<i>Self</i>		

DISASTER RELATED ASSISTANCE/DUPLICATION OF BENEFITS INFORMATION

Have you registered with FEMA? YES _____ NO _____ FEMA # _____ If NO, why not?

Have you received any assistance from FEMA to date? YES _____ NO _____ If YES, how much have you received?

Do you have FIRE Insurance? YES _____ NO _____ If YES, how much have you received? _____

REQUEST FOR SUPPORT

Loss of Home:

Estimated cost of rebuild: _____ Estimated completion date: _____



Loss of Other Property

If applying for loss of other property, not a home, please describe loss/damage:

Estimated cost to replace property: _____

Please read the following and sign.

I, the undersigned, swear the provided information is true and understand that public records will be used to verify my application. All funds that I may receive will be used to aid me and or my family with damages caused by the LNU Lightning Complex Fire.

Applicant Signature

Date