

Your File Number will be provided to you when you make your application. Please quote it for all correspondence

Office Use Only
FILE NO.

Essex County Tornado Assistance Fund

Application for Assistance for Losses Resulting from the June 6, 2010 Tornado

All claims are subject to audit. If a claim is found to be suspicious or based on false or misleading information, a criminal investigation may result.

The Government of Ontario will provide assistance to residents and non-profit organizations in the Municipality of Leamington, the Town of Kingsville and the Town of Essex for eligible losses caused by the June 6, 2010 tornado.

1.0 INSTRUCTIONS:

1. Please submit one form per household. Tenants can submit a separate form. Please fill in all appropriate answers on this form. **PRINT** clearly.
2. If you require help or have any questions about this form please call **Essex County Tornado Assistance Fund Office** at (519) 322-2337.
3. If your claim includes emergency living expenses, please include only receipts and details of the emergency costs (such as food, clothing, etc.) that have not been claimed through other means (insurance, aid agencies, etc.).
4. If you are in extreme financial hardship due to the June 6, 2010 tornado event, please call the **Essex County Tornado Assistance Fund Office**.
5. Attach all necessary receipts to completed forms and submit no later than July 21, 2010 to:

Essex County Tornado Assistance Fund Office
 Leamington Kinsmen Recreation Complex
 249 Sherk Street
 Leamington, ON N8H 4X7
 Fax: 519-322-2407

2.0 CONTACT INFORMATION:

Last Name of Applicant:	First Name of Applicant:
Name of Co-Applicant:	
Municipality:	Number of People Living in Household:
Address Where the Damage Occurred:	Tax Roll No.:
Home Phone:	Work Phone (if applicable):
Email Address (if applicable):	
Mailing Address (if different from Address Where the Damage Occurred):	

3.0 NOTICE OF COLLECTION OF PERSONAL INFORMATION:

Personal information contained in or required by an application for financial assistance is being collected by the Ministry of Municipal Affairs and Housing for the proper administration of the Essex County Tornado Assistance Fund. The personal information will be collected and used by the Ministry and The Municipality of Leamington to administer the program including processing applications, assessing eligibility for assistance, verifying information provided under the program, processing payments and performing audits. In addition, the information may be used in any action to recover payments made under the program where the Ministry determines that such payments are unauthorized. Inquiries about the collection of this personal information should be directed to Helen Collins, Municipal Programs and Education Branch, Ministry of Municipal Affairs and Housing, 3rd Floor, 777 Bay Street, Toronto ON M5G 2E5, Telephone: 416-585-6060, Email: Helen.Collins@ontario.ca

Any information created or obtained by any person, organization, or government body involved in the administration of this program is confidential and, except as required by law, shall be used and disclosed for the purpose of administration of assistance. The Freedom of Information and Protection of Privacy Act applies to any such information you provide. **All personal information will be kept strictly confidential, except for the purposes of verification and audit of the information you have submitted.**

4.0 TYPE OF CLAIM:

Residential

I am (check) Registered Owner Tenant (claiming for essential household goods only)

Is the residence the applicant's primary home? Yes No

If the applicant is not the owner, give the name and address of the owner:

Last Name:	First Name:
Postal Code:	Telephone (home):

Non Profit Organization

Name of Non Profit Organization:
Address of Damaged Property:
Non Profit Organization Charitable No. (if applicable)

5.0 IDENTITY & ADDRESS VERIFICATION:

Address Verified _____

Identification that verifies your identity and address must be presented with your application.

Check the box of the item you are using to confirm your identity and address. If you cannot provide the documents required, please contact the **Essex County Tornado Assistance Fund** office at (519)322-2337 for assistance.

You need to provide either a valid		
<input type="checkbox"/> Provincial Driver's License (The address must match the address you are claiming assistance for)		
OR		
You need to provide TWO of the following, one of which MUST contain the address you are claiming assistance for (the name on both documents MUST also match):		
<input type="checkbox"/> Utility Bill (Telephone, Hydro, etc.)	<input type="checkbox"/> Credit Card or Credit Card Statement	<input type="checkbox"/> Signed and dated tenant agreement
<input type="checkbox"/> Passport	<input type="checkbox"/> Birth Certificate	<input type="checkbox"/> Certificate of Canadian Citizenship

6.0 ELIGIBILITY GUIDELINES:

The Essex County Tornado Assistance Fund is not intended to replace insurance policies provided by private insurance companies, or to be a blanket program to assist residents and non-profit organizations for all losses caused by the June 6, 2010 tornado. It is intended to provide basic assistance for essential costs to those residents and non-profit organizations who suffered the most hardship and loss due to this event. Additional repairs and replacement costs required to meet current provincial codes and standards for construction, access and fire and occupational safety are eligible. The following is a general list of eligible and ineligible items for you to use when completing Section 8.0 Claim Information of this form.

Eligible and Ineligible Costs for Residential Claims

<p><u>Eligible Individuals</u></p> <ul style="list-style-type: none"> • Homeowner • Resident or tenant for personal property only <p><u>Examples of Eligible Costs</u></p> <ul style="list-style-type: none"> • Emergency living costs incurred during emergency phase (e.g. evacuation costs, temporary accommodation and meals, essential clothing) • Restoration, repair or replacement to pre-tornado condition of primary residence and garage • Removal of fallen trees, tree limbs and other essential debris clean-up, including rental of equipment such as chainsaws, up to a maximum of \$2,000 per property • Restoration, repair or replacement to pre-tornado of essential furnishings including fridge, stove, washer and dryer, furnace, freezer, television • Removal and storage of essential furnishings and property as required to avoid damage 	<p><u>Ineligible individuals:</u></p> <ul style="list-style-type: none"> • Owners of seasonal homes • Farmers (except for principal residences) • Business enterprises • Tourists • Renters of seasonal homes • Owners of homes under construction <p><u>Examples of Ineligible Costs</u></p> <ul style="list-style-type: none"> • Loss of income, loss of opportunity or inconvenience • Insurance deductibles • Volunteer labour and own labour • Removal of tree stumps and private tree replanting • Non-essential furnishings, e.g. audio-visual equipment, recreational/sports equipment, recreation room furnishings, documents/books, tools, seasonal decorations • Luxury items such as jewelry, fur coats, antiques/collections • Docks, boat houses, boats, trailers, swimming pools • Losses recoverable at law • Personal injury • Landscaping, fencing, driveways, walls, garden sheds, sod • Repair or replacement of personal vehicles lost/damaged • Private roads/bridges and erosion • Sewage backup
<p>Note: Some eligible items may only receive coverage to a maximum allowable amount</p>	

Eligible and Ineligible Costs For Non-Profit Organizations

<p><u>Eligible Organizations</u></p> <ul style="list-style-type: none"> • Service clubs, charitable organizations, churches, cemeteries, private schools or other non-profit organizations that provide facilities or services to the community. <p><u>Eligible Costs</u></p> <ul style="list-style-type: none"> • Restoration, repair or replacement to pre-tornado condition of buildings, furnishings and equipment essential to the operation of the non-profit • Removal of fallen trees, tree limbs and other essential debris clean-up, including rental of equipment such as chainsaws and chippers, up to a maximum of \$2,000 per property • Removal and storage of essential furnishings and equipment as required to avoid damage 	<p><u>Ineligible Costs</u></p> <ul style="list-style-type: none"> • Loss of potential revenue, overtime and lost-time salary costs of the organization members or employees • Non-profit organization loan costs • Volunteer labour and own labour • Removal of tree stumps and private tree replanting • Costs incurred as an individual, or costs recoverable through any other program
<p>Note: Some eligible items may only receive coverage to a maximum allowable amount</p>	

7.0 INSURANCE AND OTHER FORMS OF ASSISTANCE INFORMATION:

<p>Did you receive relief assistance for losses caused by the June 6, 2010 tornado event from any other organization/source?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If yes, specify name of organization/source (e.g. Samaritan's Purse), nature of donation and dollar value.</p>

Do you have a copy of an insurance adjuster's report or any other documentation to establish your claim for your insurer?

Yes No If yes, please attach

Do you have an insurance policy for your:

Home Household Goods
 Non Profit Organization

Do you have an insurance deductible? Yes No
If yes, what is the amount? _____

Please provide explanation why items you are claiming for are not covered by insurance.

Name of the insurance company which provides your homeowners/residents insurance:

Name of insurance agent/broker:

Address: _____ Telephone No.: _____

I hereby authorize and direct my insurer named below to cooperate fully with the Municipality of Leamington and /or the Ministry of Municipal Affairs and Housing and their authorized representatives and to provide them with any information or documents they may request concerning coverage available and losses paid under the policy referred to below.

Signature: _____ Date: _____

8.0 CLAIM INFORMATION:

PLEASE REFER TO SECTION 6.0 ELIGIBILITY GUIDELINES BEFORE FILLING OUT THE REMAINDER OF THIS FORM TO ENSURE THAT YOU ARE ONLY CLAIMING ELIGIBLE LOSSES.

You must **attach receipts or written estimates for all costs claimed**. You should **take photos of any damaged goods** which are disposed of for health/safety reasons. If you do not have receipts, **you may be required to provide proof of loss for eligible items to the adjusters**. Please keep copies of all receipts, estimates and applications for your own records.

Type of Loss for Residents			Amount being claimed (\$)		
			Insurance		
Type of Loss (Column 1)	Description (Column 2)	Amount Claimed (\$) (Column 3)	Amount Claimed (\$) (Column 4)	Amount Paid (\$) (Column 5)	Awaiting Response (check) (Column 6)
Full time permanent dwelling building					
Cleanup and debris clearance					
Essential household goods, including removal and storage If applicable					
Emergency Living Expenses					
Total \$					

Type of Loss for Non-Profit Organizations			Amount being claimed (\$)		
			Insurance		
Type of Loss (Column 1)	Description of Damage/Loss (Column 2)	Amount Claimed (\$) (Column 3)	Amount Claimed (\$) (Column 4)	Amount Paid (\$) (Column 5)	Awaiting Response (check) (Column 6)
Permanent Structure					
Cleanup and debris clearance					
Essential equipment					
Removal and storage of essential equipment					
		Total \$			

If space above is insufficient, additional information may be attached to the claim.

10.0 DECLARATION:

PLEASE READ AND ENSURE YOU UNDERSTAND THE FOLLOWING DECLARATION BEFORE SIGNING.

I declare/understand:

- a) That all of the information provided in the application is true and that it will be subject to audit;
- b) That records will be maintained for a period of 7 years from the date of this application;
- c) That all costs claimed herein will not be claimed for under any other insurance or assistance program;
- d) That if any part of this claim is found to be false, the Municipality of Leamington and/or Ontario Ministry of Municipal Affairs and Housing may demand immediate repayment from the recipient and may avail itself of any legal remedies which it deems appropriate to recover repayment of the funds from the recipient;
- e) This claim is subject to review and assessment. Ineligible costs will be deducted from the total amount of eligible claim.
- f) Receipt of assistance under this program does not constitute an admission of liability on the part of the Government of Ontario.

Dated at _____, Ontario, this _____ day of _____, _____

Signature of Applicant

**NOTE: DEADLINE FOR SUBMISSION OF CLAIMS IS WEDNESDAY, JULY 21, 2010
IF YOU HAVE QUESTIONS REGARDING ANY SECTIONS PLEASE CALL 519-322-2337.**