



APPLICATION FOR RELIEF GRANT

MAIL DIRECTLY, along with supporting required documentation to:

Postal Employees' Relief Fund (PERF)

PO Box 7630, Woodbridge VA 22195

Phone: (202) 408-1869 * email: perf10268@aol.com * www.postalrelief.com

PERSONAL INFORMATION (PLEASE PRINT):

DATE OF LOSS: _____ DISASTER TYPE OR HOUSE FIRE: _____

FULL NAME: _____ EMPLOYEE IDENTIFICATION NUMBER: _____

Retirees, who no longer have an EIN, may use the last four digits of their Social Security Number

HOME TELEPHONE: _____ CELL: _____ EMAIL: _____

CURRENT MAILING ADDRESS: _____

It is the applicant's responsibility to ensure PERF is advised of any change in your mailing address or other listed contact information

ADDRESS OF "PRIMARY" RESIDENCE SUSTAINING DAMAGE: [] HOMEOWNER [] RENTER

PRIMARY RESIDENCE IS:
[] Totally destroyed/no expectation to return
[] Uninhabitable for extended period of time
Expected return home date is: _____
(If return date changes, please notify PERF accordingly)

VERIFICATION OF DAMAGES AND DISPLACEMENT. See "Eligibility Criteria" to ensure required documentation is submitted. All applicants having been temporarily displaced from their primary residence under "uninhabitable" MUST submit a signed, personal narrative detailing the specific reasons for the anticipated duration of the displacement.

USPS EMPLOYMENT STATUS: DESIGNINATION/ACTIVITY CODE ASSIGNED BY USPS: _____

[] ACTIVE CAREER EMPLOYEE [] NON-CAREER BARGAINING UNIT
[] RETIRED— *Must provide copy of PS Form 50 or other documentation substantiating applicant is a postal retiree with application.*

NAME/ADDRESS USPS FACILITY ASSIGNED: _____

NAME OF UNION or MANAGEMENT ORGANIZATION, WHO WOULD REPRESENT YOU (PLEASE CHECK ONE):

[] APWU [] NALC [] NPMHU [] NRLCA [] NAPS [] UMPA

[] Yes, I would like to be contacted by an EAP counselor for assistance and additional resources

APPLICANT MUST SIGN AND DATE THE FOLLOWING STATEMENT:

I hereby certify that the information provided herein is true and accurate. I am also aware that any statements made herein which are willfully false are subject to penalty, including fines and imprisonment under applicable state and federal laws. Such statements will require me to making full restitution to PERF for any PERF relief grant received under this application and render me ineligible to any future PERF grant. I understand that submission of this application does not entitle me to a claim against the Postal Employees' Relief Fund – it merely constitutes a request for assistance.

SIGNATURE OF APPLICANT: _____ DATE: _____

THIS APPLICATION HAS BEEN SIGNED BY: [] UNION OFFICER [] MANAGEMENT OFFICIAL

I hereby confirm, to the best of my knowledge, that the applicant has been impacted by a natural disaster or house fire.

SIGNATURE: _____ DATE: _____

PRINT NAME AND TITLE: _____ PHONE: _____



Postal Employees' Relief Fund (PERF)

Eligibility Criteria

PERF Mailing Address: P.O. Box 7630, Woodbridge, VA 22195-7630

Email: perf10268@aol.com * Website: www.postalrelief.com * Phone: (202) 408-1869

(Effective for natural disasters occurring on or after October 29, 2012)

Relief grants are only considered for property damage sustained to a "primary residence" due to a natural disaster, such as but not limited to, a hurricane, flood, tornado, wildfire, earthquake or severe storm; or as the result of a house fire (applicant must include copy of the official fire report).

All relief grants are considered based on one of two categories:

- A. Primary residence is totally destroyed (never able to return) or,*
- B. Primary residence is significantly damaged (left temporarily uninhabitable for an extended period, with an expectation that the applicant will be able to eventually return home; anticipated displacement must be at least 90 days).*

1. Applicant must provide documentation that they are (1) a current employee of the United States Postal Service or (2) a retired USPS employee, at the time of the disaster or house fire.
2. Only one request for relief will be considered per family residing in the same principal place of residence, regardless of the number of eligible persons residing in the household. Applicants and qualifying spouses/partners are limited to receiving a maximum of two grants per lifetime.
3. For verification of eligibility all "homeowner" applicants must submit copies of a report or estimate from first responders, city/government officials, other relief agencies or insurance adjusters that substantiate the degree of damages and the extent of displacement from primary residence. The document must list the applicant or spouse/partner's name and address as declaration of ownership.

All "renter" applicants must submit copies of a report from first responders, city/government officials, other relief agencies or insurance adjusters, or provide a signed letter from the landlord that substantiates the degree of damages and expected duration of the applicant's displacement from their primary residence. The document or copy of the lease agreement must list the applicant or spouse/partner's name and address as declaration of occupancy.

Applicants do NOT have to wait for emergency relief or insurance claims to be settled for documents to be considered proper in order to apply.

4. All applicants must have their application signed by their union officer or management official prior to submission to PERF as confirmation.
5. All applicants having been temporarily displaced from their primary residence under "uninhabitable" MUST submit a signed, personal narrative detailing the specific reasons for the anticipated duration of the displacement.
6. Applications for grants from PERF must be received no later than 6 months from the date that the natural disaster or house fire occurred, unless the applicant can provide sufficient reason(s) why they were unable to complete and submit their application prior to this deadline. Requests for exceptions will be ruled on by the PERF Executive Committee on a case-by-case basis.