



Emergency Relief Fund Application

FOR NEVADA COUNTY RESIDENTS ONLY

To fill out this application online, please visit: <https://www.nevcorelief.org/apply/> (note: you must have a Gmail account for this method)

You may complete this PDF version of the application and email it to info@nevcorelief.org with your documents attached.

If you would like a paper copy of the application or to submit a completed paper application, please visit the Connecting Point office located at 208 Sutton Way, Grass Valley, CA 95945

* Required Question

Email *

First Name *

Last Name *

Address where damage occurred, including zip code *

Fire Name and Date of Incident *

Own or Rent? *

Own
Rent

If rental, please provide landlord name and contact information.

Your Mailing Address *

Town/City *

Zip Code *

Your Phone Number *

Are you a US veteran?

Yes

No

Please provide proof of residency at the address where damage occurred. Sample documents are your state or federal tax return, voter registration, driver's license or other government photo identification, or utility bills.*

Submit files with completed application as an attachment to an email to info@nevcorelief.org or drop off completed paper application and file at Connecting Point office located at 208 Sutton Way, Grass Valley, CA 95945

Tell Us About Your Need

Briefly describe how you were impacted by the fire. Was your primary residence destroyed or significantly damaged by the fire? To what degree, if any, are you insured for any of your losses? (homeowners, renters, etc.) *

What are your greatest immediate needs? *

How many people are in your household? How many adults? How many children? If you have children in the home, what are their ages? *

Signature/Agreement

By entering my name in the box below, I hereby state that the information presented in this application is complete and factual. *

Thank you. If you have any questions please email info@nevcorelief.org