FARM / BUSINESS / NON PROFIT ORGANIZATION
APPLICATION
DISASTER FINANCIAL ASSISTANCE

Manitoba Emergency Measures Organization

Claim number: _____ (office use only)

GPS: _____ _____ (office use only)

Applicant Information

I am applying for damages and losses to (choose only one): ☐ farm ☐ business ☐ non profit organization

Name:_____ (legal name of farm, business, or owner's name)

Contact Person:_____

Home phone :_____

Mailing Address:_____

Work phone :_____

_____ Postal Code: _____

Cellular phone:_____

Civic Address: _____

Fax:_____

Local Authority: _____ (city, town or municipality)

List all legal property descriptions damaged and tax roll numbers:_____

_____

_____

Is the damaged property your own? ☐ yes ☐ no	Is there any damage or loss to land you rent? ☐ yes ☐ no
If yes, attach current property tax assessment.	If yes, owner authorization (reverse side) must be completed by owner.

Type of business / organization: ☐ Sole proprietorship ☐ Partnership ☐ Limited Company ☐ Other (please specify):

Applicant P.S.T. number is:	Applicant G.S.T. number is:

Attached is a copy of the applicant's

☐ Articles of Incorporation (Ltd. only).
☐ Revenue Canada charitable organization registration number.
☐ T1 General or notarized proof of income.
☐ partnership agreement.

Has the applicant previously received Disaster Financial Assistance? ☐ yes ☐ no

Has this property been approved under any Province of Manitoba Flood Proofing Program? ☐ yes ☐ no

Disaster

Nature of disaster (flood, tornado…):	Date of loss or damage: (yyyy/mm/dd)

Please check all applicable categories:

☐ Depth of water over buildings (if applicable) Main floor:_____ft. _____in. Basement: _____ft. _____in.

☐ Loss or damage of equipment essential to this operation.
☐ Pre-emptive (i.e. sandbagging...)
☐ Loss of harvested crop including bales and grain in the bin.
☐ Erosion damage to farmland in production.
☐ Evacuation of and or emergency feeding for livestock.
☐ Damage to fencing used to contain livestock.

☐ Other (please specify): _____

_____

I COVENANT AND AGREE:

1. That all the information provided in this application is complete and correct.
2. That if I took no action during the disaster to protect my property, or after the disaster there is an indication of neglect or indifference regarding the loss or damage, that any assistance may be reduced or
3. That all costs claimed herein will not be claimed for under any insurance contract or other assistance program.
4. That any assistance as a result of expenses due to this disaster is a grant from the Government of Manitoba.
5. That this Application or any inspection does not constitute eligibility for assistance. Eligibility is determined by an evaluation process and based on information and documentation provided by me.
6. Information will be kept strictly confidential and not disclosed except in accordance with the provisions of the Freedom of Information and Protection of Privacy Act.

APPLICANT'S SIGNATURE **CO-APPLICANT'S SIGNATURE** **DATE**