



Application No. _____

**Government Scheme to provide Temporary Emergency Humanitarian Support to
Community, Voluntary & Sporting Bodies.**

*For Community, Voluntary & Sporting Bodies impacted by flooding from the 23rd
February to 6th March 2020*

*This scheme is designed to cover damage to buildings, contents and fixtures and
fittings. (Does not cover pitches, pathways, carparks, greens etc.)*

APPLICATION FORM

CLOSING DATE FOR RECEIPT OF APPLICATIONS: 31/03/2020

**Relating to a ONCE-OFF ex-Gratia Contribution up to a maximum of €5,000 per
property (an additional emergency contribution of up to a further €15,000 may be
available following investigation)**

Part 1 – Applicant’s Details:

1. Name of Community, Voluntary or Sporting Body:

2. Name of Applicant: _____

3. Premises Address: _____

4. Contact Number: _____ Email Address: _____

5. Is your Community, Voluntary or Sporting Body registered as a legal entity? YES/NO (Circle your answer)

If YES please supply your CRO number

6. Is your Community, Voluntary or Sporting Body a Registered Charity? YES/NO (Circle your answer)

If YES please supply your CHY number or Charities Regulator Number:

7. If you are applying on behalf of a Sporting Club, please indicate if your club is associated with a National Sporting Association. YES/NO (Circle your answer)

If YES, please indicate which one _____



8. Are you the owner of the premises? YES/NO (Circle your answer)

9. If you have answered NO to the previous question please have the following declaration signed by the premises owner:

<p>I am the owner of the property listed at No.3 above.</p> <p>I intend/do not intend to make a claim under this scheme. (Please circle your answer)</p> <p>Name in Capital Letters: _____</p> <p>Signed: _____ Date: __ / __ / ____</p>
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10. What is the Nature of your Body/Organisation:

Please tick

Community

Voluntary

Charitable

Sporting

Other

If other, please detail below:

Is your Community, Voluntary or Sporting body the sole occupier of the premises at 3 above?

YES/NO (Circle your answer)

When did the flooding of your premises occur? _____

NOTE: Please submit a copy or original of a recent (within 6 months) utility bill e.g. phone, gas, electricity for the premises which was flooded, in the name of the organisation.



Part 2 – Insurance Details:

11. Is your organisations premises/contents currently insured against flooding risk? YES/NO
(Please circle your answer)

If Yes, please detail all exclusions and information regarding any excess relating to your policy.

If No, please explain why your current policy does not have flood risk cover included?

12. Please provide details of your organisation's current insurance policy:

Insurance Company Name, Address and Policy No:

13. Has your organisation's premises been flooded previously? YES/NO (Please circle your answer). If Yes, please provide details:

14. Have you and/or your organisation applied for or received any other form of financial assistance in respect of the flood damage to your premises/contents? YES/NO (Circle your answer)

If yes please provide details:



Part 3 - Loss and/or Damage:

15. What amount are you claiming for under this scheme €_____ (See 17 below)

16. Briefly outline the details of the current damage and cost to your organisation's premises and contents during 23rd February to 6th March 2020.

Damages	Cost of repair or recovery
<u>Total Cost:</u>	€

Please provide more detail on extra sheet(s), if necessary.

17. Indicate which option below (A or B) you are applying for under this Scheme:

- A. A single once-off contribution toward the damage of up to a maximum of €5,000. YES/NO (Please circle your answer)
- B. For damage that exceeds €5,000, a single initial contribution of €5,000 using this form to be followed by a more detailed assessment to determine eligibility for a possible further contribution up to a maximum of €15,000. YES/NO (Please circle your answer)

Please Note: This will require further detailed evidence to be provided by the applicant, an additional process in relation to this will follow.



26. Please provide any other relevant information to your application:

Please provide copies of any documentation or photographs you may consider relevant in support of your application

Part 4 – Declaration:

(Must be signed by the applicant on behalf of community, Voluntary or Sporting Body.)

I declare, that the information given by me in this application is correct and complete and may be retained and used by the Irish Red Cross Society for the sole purpose of determining the eligibility under this Emergency Humanitarian Support to Community, Voluntary & Sporting Bodies Scheme. The data provided may have to be verified with the relevant third parties referenced in the application. I understand and accept that these necessary enquiries are only allowable in terms of establishing and verifying the eligibility of my organisation under this scheme. I have read and agree with the data protection statement set out in relation to this scheme on the Irish Red Cross Website. (<https://www.redcross.ie/data-protection/>) I have enclosed with this completed form a copy or an original of my current organisations utility bill (last 6 months) associated with the organisation address which was flooded. I, therefore, authorise the Irish Red Cross Society and/or their Assessors to make all enquiries necessary but limited to establishing and/or verifying the eligibility status of my Community, Voluntary & Sporting Body for funding under this Emergency Humanitarian Support to Community, Voluntary & Sporting Bodies Scheme. I undertake to provide any further information sought in connection with my application. I undertake to advise Irish Red Cross Society immediately of any changes in circumstances which may occur affecting my eligibility for funding under this Emergency Humanitarian Support 23rd February to 6th March 2020. In the event that I or the business receive payments under this Emergency Humanitarian Support to Community, Voluntary & Sporting Bodies 23rd February to 6th March 2020 Scheme and I or the organisation subsequently receive any other compensation from any other source, I agree to inform the Irish Red Cross and refund such amounts of emergency humanitarian support to the State, as may be determined refundable by the Irish Red Cross Society

**I AM AWARE OF THE CONTENT OF THIS APPLICATION AND I KNOWINGLY
MAKE THIS DECLARATION**

SIGNATURE OF APPLICANT _____

DATE _____

CAPACITY _____ : (Individual/Director/Chairman/Other)

**NOTE: IT IS AN OFFENCE TO GIVE FALSE OR MISLEADING INFORMATION.
INFORMATION MAY ONLY BE SHARED WITH OTHER BODIES IN ACCORDANCE
WITH LAW.**