



Crois Dhearg na hÉireann
Irish Red Cross

APPLICATION FORM

Government Scheme to provide Emergency Humanitarian Support to Community, Voluntary and Sporting Bodies affected by the Explosion in Creeslough, County Donegal on 7th October 2022

This scheme is designed to cover damage to buildings, contents and fixtures and fittings.

CLOSING DATE FOR RECEIPT OF APPLICATIONS: 31st December 2022. Return by post to Irish Red Cross, 16 Merrion Square, D02 XF85 or by email to rdunn@redcross.ie

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 _____

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



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)

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 affected, in the name of the organisation.

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Part 2 – Insurance Details:

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

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

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

Insurance Company Name, Address and Policy No:

13. Have you and/or your organisation applied for or received any other form of financial assistance in respect of the damage caused by the explosion 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 which occurred on the 7th October as a result of the explosion in Creeslough, County Donegal Please note you will also need to attach photos and/or videos of the damage caused.

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.

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

Please provide copies of any other 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 affected by the explosion in Creeslough, County Donegal on 7th October 2022. 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 affected. 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 affected by the Creeslough Explosion. 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 Scheme. In the event that the organisation receives payments under this Emergency Humanitarian Support Scheme and the organisation subsequently receives 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)

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Please ensure you have each of these items before returning your application –

Fully completed Application Form []

Photos and/or Videos of Damage caused []

Utility Bill []

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