

## 2.7 Application for Emergency Relief / Disaster Relief

District:.....

Divisional Secretariat Division:.....

Grama Niladhari Division:

Office Reference Number:

1. Full name of the applicant:.....
2. Address of the applicant:.....
3. Telephone number:.....
4. Married / Unmarried:..... Gender:..... Age of the applicant:.....
5. Occupation of the applicant and monthly income:.....
6. Income received from other sources in addition to employment:.....
7. Details of relief and assistance received from the government:.....
8. Date on which the disaster occurred:.....
9. Details of the disaster that occurred:.....
- 10. Condition of the house before the disaster**

- Roof – Tiles / Asbestos / Tin sheets / Other / Coconut leaves
- Walls and floor – Stone / Bricks / Cement blocks / Wattle and daub / Planks / Other

11. Nature of the Disaster (Put a tick in the relevant box)

Complete collapse		Tilting of the house	
Washing away of the floor		Subsidence / sinking	
Cracking of walls		Collapse of walls	
Collapse of the roof		Fire / catching fire	
Cyclone / strong winds		Landslide	

12. Assessment of damage to the affected

Reason / Cause	Extent of damage	Relief requested

13. Does the land on which the damaged house is located belong to the applicant or to a family member? If not, please specify the nature of ownership.

I certify that the above particulars are true and correct.

Date.....

Applicant's Signature.....

**Grama Niladhari Report**

I certify that the details mentioned herein are correct, that the information regarding the applicant’s income is true, and that the assessment of the loss/damage is fair.

Date.....

Grama Niladhari Signature.....

**Social Services Officer Recommendation**

On ....., I inspected the house that was damaged. I recommend that assistance be provided as follows:

- 1. For the house
- 2. For professional tools
- 3. For kitchen utensils

Date.....

Social Services Officer's Signature.....

**Approval**

The details mentioned here have been examined by me. I approve the payment of Rs. ....

Date .....

Secretary / Assistant Secretary / DivisionalSecretary

For office use

1. Date ..... money.....  
of payment of installment

2. Date ..... money.....  
of payment of installment