



Sonoma County Grape Growers Foundation
3245 Guerneville Road
Santa Rosa, CA 95401
707.522.5864
www.scggf.org

Application for SCGGF Housing Support Fund for Ag Employees impacted by the Russian River flooding in Feb 2019

Name: _____ Today's Date: _____

Address where damage occurred, including zip code (*note, only one application per household*):

Current mailing address: _____

Telephone: _____ Email (*if any*): _____

If you rent, name of landlord: _____ Telephone: _____

Proof this was your primary residence at the time of the flood is required.

This is the address you use on your federal tax return, your voter registration, your driver's license, or other photo identification, and your utility bills.

Please provide a copy of any one of these documents with your application.

Briefly describe how you were impacted by the February 2019 flooding of the Russian River. Was your primary residence destroyed or significantly damaged by the flood? Was your car destroyed? Did you have evacuation costs? To what degree, if any, are you insured for any of your losses? (homeowners, renters, and/or auto insurance)

Signature: _____ Date: _____

Return completed application to Sonoma County Grape Growers Foundation
3245 Guerneville Road, Santa Rosa, CA 95401 or info@scggf.org

PLEASE COMPLETE ANSWERS ON REVERSE SIDE

Please take a moment to complete this demographic information.

Do you currently work in the Agriculture Industry? (Yes/No) _____

What is your title or position? _____

Who is your employer? _____

How many people are in your household? Adults: ____ Children: ____ Total in Household: ____		
Relation to Head of Household Spouse/Child/Partner/Etc.	Name Last, First	Birthdate
<i>Self</i>		

Family Type		Housing (Prior to the Flood)	
<input type="checkbox"/>	Single Person	<input type="checkbox"/>	Own
<input type="checkbox"/>	Two-Parent Household	<input type="checkbox"/>	Buying
<input type="checkbox"/>	Single Parent	<input type="checkbox"/>	Rent
<input type="checkbox"/>	Adults - No Children	<input type="checkbox"/>	Homeless
<input type="checkbox"/>	Adults & Children	<input type="checkbox"/>	Temporarily Living with friend/relative
<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	Other: _____