

info@gracedelta.org



(970) 339-3100

# Grace Community Church Delta Housing Benevolence Application

Please be advised GCCD's maximum benefit amount is \$500.00.

	Amount F	Requested:_	
	Amount	Approved:_	
Date:			
Applicant Name:			Date of
Birth:			
Co-Applicant Name:			Date of
Birth:			
Address:	City:		St: Zip:
Mailing			
Address:	City:		St:
Zip:			
Applicant Email:		_Cell	
Phone:			
Co-Applicant Email:		Cell	
Phone:			
Applicant Work Phone:			
Co-Applicant Work Phone:			
Last 2 addresses and how long you've lived there:			
(1			//
(2			/



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Please provide name, mailing address and phone number of your Landlord or Mortgage Company. Landlord/Mortgagor:
Account number
Contact person: Phone number:
Email Address:
Mailing Address:
Please be advised you must submit to Grace Community Church Delta a copy of your signed
Lease/Rental Agreement or current Mortgage Statement, plus a notice of default and/or letter from
your Landlord/Mortgage Company showing default and amount owed. Failure to do so will render
your application incomplete and result in immediate denial of your application without notice to you.
Who referred you to Grace Delta?
Are you receiving help from other sources? If yes, please explain:
What church do you attend?
Do you have a relationship with any Grace Community Church members, officers, trustees or
directors of the church? If yes, please explain:



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To assist the Benevolence Committee with their decision concerning this request, please respond to

the following questions for both Applicant and Co-Applicant:
l. Please provide us a character reference (not related to you) and phone number:
2. How many adults are you responsible for?
3. How many children (under 18 yrs.) are you responsible for?
4. Have you ever sought financial assistance before? If yes, when?
5. Does your family or friends know of your need and are they helping?
6. Please provide name, address, and phone number of current employer. If self-employed what is
your occupation and name you do business as?
7. How long have you been currently employed at the above:
8. If unemployed, who was your last employer? Please provide us with a contact name and number:
9. How long were you employed with your last employer?
O. How long have you lived in this area?
II. What spiritual needs can we help you with?
2. What are the circumstances that have led to your present situation?
3. Do you have a clear plan of action to change your situation?



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, hereby certify that the information contained herein is
true and correct. I hereby grant authorization to Grace Community Church Delta ("GCCD") to contact
my Landlord/Mortgage Company, Utility Provider, current and previous employers, character reference
or any/all persons listed in this application to verify the statements and information contained in this
application. Should GCCD be unable to verify any statements or information contained herein, I
acknowledge that GCCD will deny this application for assistance. I have read the attached benevolence
policy and agree to all the terms contained in said policy. I understand that GCCD is not legally bound to
provide any assistance to me.

Signed:\_\_\_\_\_ Date:\_\_\_\_\_

Printed Name:\_\_\_\_\_



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# <u> Article I. Housing/Utility Benevolence Fund Purpose</u>

The fund is to enable International Church of the Foursquare Gospel, dba Grace Community Church Montrose-Delta (hereinafter "GCCD") to provide housing or utility financial aid to individuals who are in need on an urgent basis. The fund may not be applicable to all urgent cases, especially for these who have "other" financial options. GCCD reserves the right to deny the applicant's request. The fund will assist with housing needs only.

### <u> Article II. Eligibility Criterion</u>

All applications will be handled on a case-by-case approval. Applications will be approved or denied by the Benevolence Committee at its sole discretion.

# <u> Article III. Application Process</u>

# Section 3.01 How to Apply

The application may be obtained from GCCD by our website, email request to info@gracedelta.org or from the GCCD Office. Applications must be fully completed with all supporting documentation and turned back into the drop box by 8:00 am Monday morning to be considered for that week. Applications not received by the deadline will result in up to a one (1) week delay of consideration of your application without notice to applicant.

#### Section 3.02 Verification of Information

All information contained in the application will be reviewed and verified. This may include contact of references and phone calls or emails with third party payees, i.e.,

Landlord/Mortgagee. Applicant's submittal of application is direct consent authorizing GCCD to contact to verify and to discuss any information contained in said application.



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#### Section 3.03 Interview Process

Upon GCCD's review of timely submitted applications, GCCD will contact applicant to set up an initial in person interview. Interview's will only be held in person, on Mondays or Thursdays, from one o'clock (1:00 pm) to two thirty o'clock (2:30 pm), excluding legal holidays and by appointment only. No walk-in's will be allowed.

#### Section 3.04 Benevolence Committee Review

Once an application has been submitted and initial interview conducted, GCCD's Benevolence Committee will review and decide upon that application within a maximum period of ten (10) business days. It is possible that the Benevolence Committee may require additional information in order to arrive at a fair decision. In such cases, the applicant may be asked to come in for a second interview or be required to provide additional information prior to a final decision.

Once the Benevolence Committee has arrived at a decision, applicant will be notified of the Committee's decision by letter and/or email. Phone calls will not be used to approve or disapprove the request.

### Section 3.05 Approved Applications

Should an application be approved, GCCD will prepare a GCCD check payable to the third-party payee to which the applicant owes funds. The applicant should be aware that GCCD will not pay funds directly to the applicant nor allow for the applicant to deliver said funds to a thirdparty payee. GCCD reserves the right to award an amount less than the amount requested by any applicant, even if that amount does not resolve the outstanding amount owed to the thirdparty

# Section 3.06 Denied Applications

Should an applicant's request for aid be denied, GCCD will notify applicant by letter and/or email.

payee.



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### Section 3.07 Time Limits on Application

An applicant may apply for assistance one (1) time in one twelve-month period.

#### **Section 3.08 Miscellaneous Provisions**

Applicant hereby agrees that they will wait for the established time frames contained herein for the thorough review and consideration of the application. No status updates from GCCD will be given in person, verbally or by phone during the review process.

### **Article IV. Availability of Funds**

All applicants are considered first come, first served basis and as funds are available. GCCD is under no obligation to spend these funds in their totality every year. Should the funds be exhausted, GCCD will not provide any additional funds to ANY applicant no matter how valid the need may be.

# <u>Article V. Hold Harmless/Liability Release Clause</u>

GCCD, its Pastors, Officers, Agents, Employees and Members are hereby released, forever discharged, and held harmless from any/all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred while applicants request is being reviewed, approved, and/or denied. Furthermore, applicant hereby agrees to hold harmless and indemnify GCCD, its Pastors, Officers, Agents, Employees and Members for any financial liability sustained by said acts of the aforementioned GCCD parties.