



NATIONAL ASSOCIATION OF POLICE ORGANIZATIONS
RELIEF FUND, INC.
317 S. PATRICK STREET
ALEXANDRIA, VA 22314
(800) 322-6276 www.napo.org

ASSISTANCE REQUEST FORM, PAGE 1 OF 2
2021 WINTER STORMS

(Check One)

Sworn Law Enforcement Officer Sworn Corrections Officer
 Civilian Employee Other (Please Specify) _____

Name: _____ Rank: _____ Employing

Agency: _____ Badge/ID Number: _____

Police Union or Association: _____

SSN: _____ Date of Birth: _____

Current Residential Mailing Address:

Cell Phone: _____ Email address: _____

Residence Damage Assessment Number: _____

(Please use the attached sheet for information to determine assessment number)

By signing below, I affirm under penalty of perjury that this claim is true and complete:

Signature: _____ Date: _____

PLEASE SEND THIS FORM TO MEMBER.SERVICES@CLEAT.ORG

DO NOT SEND TO NAPO



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ASSISTANCE REQUEST FORM, PAGE 2 OF 2

In order for us to determine the extent of damage caused by Winter Storms to homes, we have developed the following scale. Please rate the damage to your home based on the damage assessments that we have listed and turn the information in to MEMBER.SERVICES@CLEAT.ORG

DO NOT SEND TO NAPO.

Current/future mailing address is very important and should be written legibly. All information should be completed and turned in as soon as possible.

- 1. No Damage (livable)**
- 2. Minor Damage (livable)** **Minor Shingle Loss
Minor Debris
No Water Damage**
- 3. Moderate Damage (livable)** **Shingle Loss
Small Trees Down
Some Water Damage**
- 4. Major Damage (unlivable)** **Roof Needs Replacing
Extensive Flooding
Large Trees Down
Carpet/Sheetrock Needs Removing**
- 5. Total Loss** **Structure is either destroyed or will have to be demolished**