



New Life Assembly of God

Stephen's Legacy Assistance Application

APPLICANT INFORMATION

Name _____

Address _____

Driver's License Number _____ State Issued _____

Phone Number _____

Names of Individuals Residing with Applicant: _____

How did you hear about Stephen's Legacy? _____

BACKGROUND

Work History _____

Employer _____ Phone Number _____

Landlord Name _____ Phone Number _____

Home Church _____

NEED

I am requesting assistance for the following (check all that apply):

- | | | |
|---|---|--|
| <input type="checkbox"/> Income Support | <input type="checkbox"/> Damage to Home | <input type="checkbox"/> Loss of Household Items |
| <input type="checkbox"/> Rent/Mortgage | <input type="checkbox"/> Utilities | <input type="checkbox"/> Medical Assistance |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Other (explain): _____ | |

Describe the situation requiring assistance: _____

(OVER)

INCOME SUPPORT

Weekly Income	\$ _____	Welfare Payments	\$ _____
Social Security Payments	\$ _____	Wages	\$ _____
Pension	\$ _____	Other Income	\$ _____
Cash on Hand	\$ _____	Funds in Banks	\$ _____

Do you own property? ☐ Yes ☐ No Do you own your home? ☐ Yes ☐ No

MONTHLY EXPENSES

Housing (Rent/Mortgage)	\$ _____	Consumer Loans	\$ _____
Travel	\$ _____	Electric	\$ _____
Gas	\$ _____	Phone	\$ _____
Medical	\$ _____	Other Utilities	\$ _____
Car Payments	\$ _____	Credit Cards	\$ _____

OTHER ASSISTANCE

Have you applied for assistance from other sources? ☐ Yes ☐ No

Please List them: _____

DAMAGE TO HOME – *Disaster Relief to Household Items*

Is your home habitable? ☐ Yes ☐ No Do you have insurance? ☐ Yes ☐ No

Do you need accommodations? If yes, for how long? _____

What costs are there for your temporary housing? _____

Please specify the damage and/or loss incurred: _____

Do you have an estimate for repairs? ☐ Yes ☐ No Amount \$ _____

Please return your completed application to:

**Stephen's Legacy
New Life Assembly of God
2136 Baltimore Pike, PO Box 492
East Berlin, PA 17316**