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**MINISTRY OF HOUSING AND URBAN DEVELOPMENT**

***44-46 South Quay, Port-Of-Spain***

**Housing Policy Facilitation and Implementation Unit (H.P.F.I.U)**

***EMERGENCY SHELTER RELIEF FUND***

**APPLICATION FORM**

**APPLICANT’S INFORMATION**

National ID/ Passport #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex M F

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Surname First Name Middle

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Citizenship Country of Birth Date Of Birth

**ADDRESS**  **TELEPHONES**

No. & Street \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Village/ Town \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Municipality/Region\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MARITAL STATUS**:

Single Married Divorced Separated Common-Law Widowed

**HOUSEHOLD DATA**

Gross Monthly Household Income $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Source of Income Salary Pension National insurance Self-Employed

Unemployed/student Social Welfare Disability Grant

Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of persons living in the household including yourself\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**LAND TENURE**

Freehold Leasehold Rented Squatter Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DESCRIPTION OF DAMAGE**

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Have you received any assistance under the Ministry’s Home Improvement Subsidy or Home Improvement Grant programmes? Yes No

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Applicant’s Name in Block Date

**DECLARATION**

*I hereby certify that the information given in this form is true to the best of my knowledge and belief. If there is anything in the information given above which is not true or which I/ we do not believe to be true. The Ministry of Housing and Urban Development is entitled to refuse my application.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Signature Date

**SUPPORTING DOCUMENT REQUIRED ONLY AT INTERVIEW:**

1. Copy of Birth Certificate
2. Copy of Marriage, Death, Divorce Certificates *(if applicable)*
3. Copy of Identification (National ID or Passport)
4. Evidence of Citizenship *(if applicable)*
5. Copy of Proof of Ownership or Permission to occupy Property *(Title Deed; Deed of Lease; Rent receipts for the last three years)*
6. Documentary Evidence of Household Income*(Prescribed form)*

7. Recent payslip and job letter, Pension Slip / Letter from the National Insurance Board

1. Completed Quotation for Repair Works *(Prescribed form)*
2. Copy of Damage Assessment form from the Disaster Management unit or from the Regional Corporation. *(if applicable)*
3. Original Fire Report from the Trinidad and Tobago Fire Service *(if applicable)*
4. Pictures of the damaged structure

**WHERE DO YOU APPLY?**

Application forms can be collected and returned at any of the following offices:

**Ministry of Housing and Urban Development**

44-46 South Quay, Port-of-Spain

Tel: 623-HOME (4663) ext. 2248/2139

Grants@mhlma.gov.tt

**WHO CAN QUALIFY?**

1. Citizen of Trinidad and Tobago, residing in the country;
2. Twenty-one (21) years old and over;
3. Total household income does not exceed TT$5,000 per month;
4. Household has not benefitted from any of the Ministry’s Housing Programmes;
5. Proof of legal land tenure or permission to conduct repairs.