



Housing Advocacy

Mobile Home Program

Mobile Home Program: Park Flooding Recovery Assistance Fund (FRAF) Verification of Eligibility

Applicant Details:

Full Name: _____

Mobile Home Address: _____

Contact Number: _____ Email: _____

Date of Application Submission: _____

Alternative Verification by Mobile Home Program Staff:

Verification for Primary Residence:

Confirmed: The mobile home located at the address mentioned above is the primary residence of the applicant based on other forms of verification.

Verification for Flooding Impact:

Confirmed: The mobile home located at the address mentioned above was impacted by the July 2023 flooding based on other forms of verification.

Service Provider's Declaration:

I, _____, hereby confirm that the above details are accurate to the best of my knowledge. By signing below, I verify that the applicant meets the stated eligibility criteria for the Park Flooding Recovery Assistance Fund (FRAF).

Signature: _____ Date: _____