



# TOWN OF BRENTWOOD

## Resident Relief Fund

The attached application should be completed by any resident of the Town of Brentwood that is applying for financial assistance due to hardships related to COVID-19.

Completed and signed application should be emailed to [residentrelieffund@brentwoodmd.gov](mailto:residentrelieffund@brentwoodmd.gov) or mailed to the Town Hall at 4300 39<sup>th</sup> Place, Brentwood, MD 20722. Hardcopies can be hand delivered and placed inside the silver mailbox on the wall outside of the Town Hall.

Please contact Town Hall at (301) 927-3344 with any questions or concerns.



# RESIDENT RELIEF FUND APPLICATION

## Part I

### Resident Applicant Information

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

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Part II

### Documentation

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#### Proof of Residence (only one selection required):

State or Federal Issued ID (with address): \_\_\_\_\_

Copy of Utility Bill: \_\_\_\_\_

Other: \_\_\_\_\_

#### Loss of Income (only one selection is required):

Letter from Previous Employer: Y/N

Unemployment Determination Letter: Y/N

Other (brief statement optional):

\_\_\_\_\_

\_\_\_\_\_

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Applicants Signature: \_\_\_\_\_

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

#### Office Use Only:

Application Received By and Date: \_\_\_\_\_

Approved By Date: \_\_\_\_\_

Comments: \_\_\_\_\_