

Operation Harvey:
Application for Disaster Relief Assistance from MarineParents.com, Inc.

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Application for relief must be related to YOUR loss as a Marine or Marine Corps veteran who has served post 9/11/2001. The Marine must complete this application.

Application must be completed in full. Incomplete applications will not be accepted. All questions must be answered, including yes/no/not applicable. If you are unable to complete this application, please contact our office to complete the application via phone.

This application has 31 questions and will take approximately 30-45 minutes to complete. Be ready to provide basic contact information, addresses, dates of service, dependent names, employer and contact information, You will be required to provide additional information as supporting documents, dates of birth, and proof of loss after completing the application and before an award will be made.

Contact information for MarineParents.com Corporate Office: Voice call: 573-449-2003 Monday through Friday, 8:00 a.m. to 5:00 p.m. Central Time. Fax 573-303-5502.

1. Are you a Marine who has incurred a loss due to Hurricane Harvey and/or its aftermath? Yes No
2. Your rank at discharge or date of loss: _____
3. Your first name: _____
4. Your last name: _____
5. Your middle name/initial: _____
6. Your Cell Phone: _____
7. Your Email: _____
8. What is the address you resided when loss was incurred?
Street: _____
City: _____ State: _____ Zip Code: _____
9. What is the address where you are currently residing or sheltered?
Street: _____
City: _____ State: _____ Zip Code: _____

10. One of the following must be applicable for you to qualify for assistance through MarineParents.com Operation Harvey:

a. Does your DD214 indicate an honorable discharge?

Yes No Not Applicable

b. Are you currently an active duty Marine?

Yes No Not Applicable

c. Are you currently in the Marine Corps Reserves?

Yes No Not Applicable

11. Were you in the Marine Corps on 9/11/2001?

Yes No Not Applicable

12. When did you serve in the Marine Corps?

a. Start Service _____

b. End Service _____

c. Are you still in service with the Marine Corps? Yes No

13. Was/is your primary residence in the area impacted by Hurricane Harvey?

Yes No

14. What date did you establish this location as your primary residence?

15. Can you provide proof of residence in the form of a utility bill in your name at this address? Yes No

16. Approximate date of loss: _____

17. Evidence of loss will be required. What can you provide as proof of your loss?

18. Describe in a few words, major details/area of your loss: _____

19. Describe what you need assistance with immediately: _____

20. Do you have homeowners insurance, flood insurance, or renters insurance?

Yes No

21. What is your marital status? (select one)

Married Divorced Separated Never Married Life Partner

22. Did your spouse or significant other live with you when loss was incurred?

Yes No

