

Disaster Relief Guidelines and Claim Procedures

Below are the established procedures to submit a claim form and receive relief fund disbursements after a natural disaster.

- a) Within 30 days of the damage occurrence, the member must submit a completed claim form to the Territory Community Services Representative.
- b) The claim form submittal must contain the following:
 - date of occurrence
 - own or rent / primary or secondary residence
 - dwelling is habitable or not, (if not, where they are staying)
 - description of damage(s) sustained to the dwelling
 - photos or drawings illustrating the damage(s) to the dwelling
- c) The Territory Community Services Representative, will review the form, ensure it is complete, then submits it to the GVP of the Territory.
- d) The Territory GVP submits the form to the Retirees and Membership Assistance Department.
- e) The Retirees and Membership Assistance department receive and process the claim form, then sends the disaster relief check to the Territory Community Services Representative.
- f) The Territory Community Services Representative presents the check to the member.
- g) The member receiving the check signs the "I AM Assistance Distribution of Funds" form.
- h) The Territory Community Services Representative returns the signed "I AM Assistance distribution of funds" form to the Retirees and Membership Assistance Department.

NOTES:

- In adherence to IAM policy, members submitting a disaster relief request must be in good standing.
- IAM Retirees in good standing are eligible to receive benefits within the guidelines.
- Claims must be filed within 30 days of the occurrence.
- Category 1 - 2 disbursements are only payable if the home is owned by and the primary residence of the member.
- Due to limited resources; additional/ secondary homes, vehicle damages, personal items, furniture, etc. and food losses due to power outages are not covered.

Please return unused funds to:

IAMAW
9000 Machinists Place
Retirees and Membership Assistance
Upper Marlboro, MD 20772-2687

If you have any questions or need assistance with these forms, contact your designated Grand Lodge Representative from your Territory.

Southern Territory

Date _____

Name _____ DL/ LL _____ Card # _____
(In good standing? Circle - YES or NO)

Address _____

City _____ State _____ Zip Code _____

Primary Phone _____ Alternate Phone _____

Email _____ Date of Damage _____

Employer _____ Shift _____
(Work hours)

Address _____

Do you own or rent your residence? _____ Is this your primary residence? _____

Are you staying in the dwelling? _____ If not, where are you staying? _____

Please describe the structural damage to the dwelling only (do not list damages to vehicles, furnishings, household items, clothes or food losses etc.)

This request is verified by IAM Representative:

Name _____ Title _____

Phone _____ Email _____

Signature _____ Date _____

Please return this form to:

IAMAW GLR, Craig Martin, 690 E. Lamar Blvd., STE 580, Arlington, TX 76011

Cell Phone: 337-287-0698

NOTE: IAM Assistance Committee/ Representative, please direct all assistance request(s) through your General Vice President's office.

For IAMAW Headquarters, use only		
Amount _____	Disaster _____	Date _____
Director _____		