

NEW JERSEY STATE FIREFIGHTER'S ASSOCIATION

FIELD EXAM: RELIEF APPLICATION CHECKLIST

The attached Application for local relief association _____ in county _____
for _____ has been reviewed and the following is noted:

_____ Application is in good order.

_____ The following, deficiencies are noted:

_____ Missing Association/Company/Line number on one or all pages.

_____ Missing information in sections 1-6.

_____ lacking supporting documentation of Income and expenses.

_____ proof of income

_____ Copies of current bills.

_____ Additional bills needed.

_____ Not using current Relief Applications.

_____ Missing Signatures-Applicant /Trustees/ Officers.

_____ Missing recommended action/amount by Trustees and/or final action/amount by Representatives.

_____ Missing check numbers and/or amounts paid.

_____ Amount granted previous years should have amount filled in or "N/A".

_____ Applicant demonstrated "Need" and Special Relief should have been applied for.

Additional Comments:

If deficiencies are noted, moving forward, please take the necessary action to avoid repeating them.
Thank you for your cooperation.

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