

Disaster Relief Program



Agenda

- Program Overview
- Subsidy Limits
- Funding & Allocation
- Application Process
- Eligible Use of Funds
- Homebuyer & Small Business Enrollment Process
- Reporting



Program Overview

Program Purpose

Provides mortgage assistance to homeowners and small businesses affected by disasters in New England.



Subsidy Limits



Transaction Subsidy Limits

- Lesser of six months of mortgage assistance or \$15,000
 - \$5,000 minimum subsidy request

Annual State Cap

- \$1,000,000 annual state cap

Member Funding Cap

- \$150,000 Member cap
 - Adjustable by FHLBank Boston dependent on need

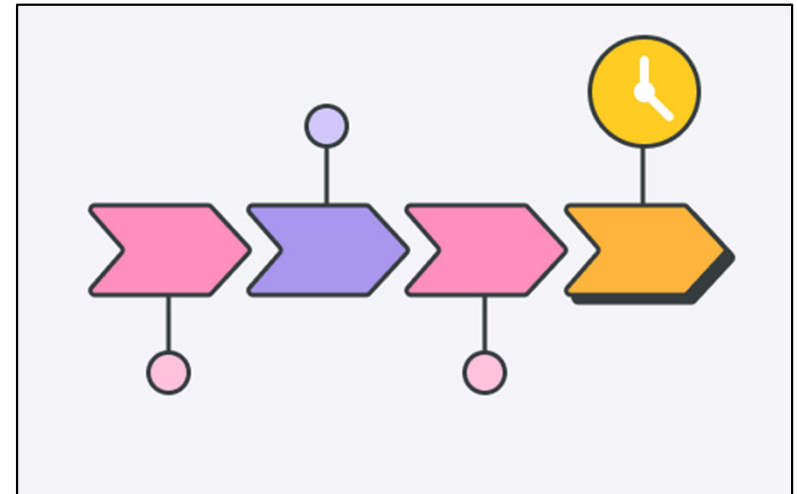
Funding & Enrollments

Funding Notification Timeline

After a state or federally declared natural disaster triggers the program, FHLBank Boston will notify its Members of the program's activation and provide approximately 30 days advance notice regarding the availability of funding.

Enrollment Timeframe

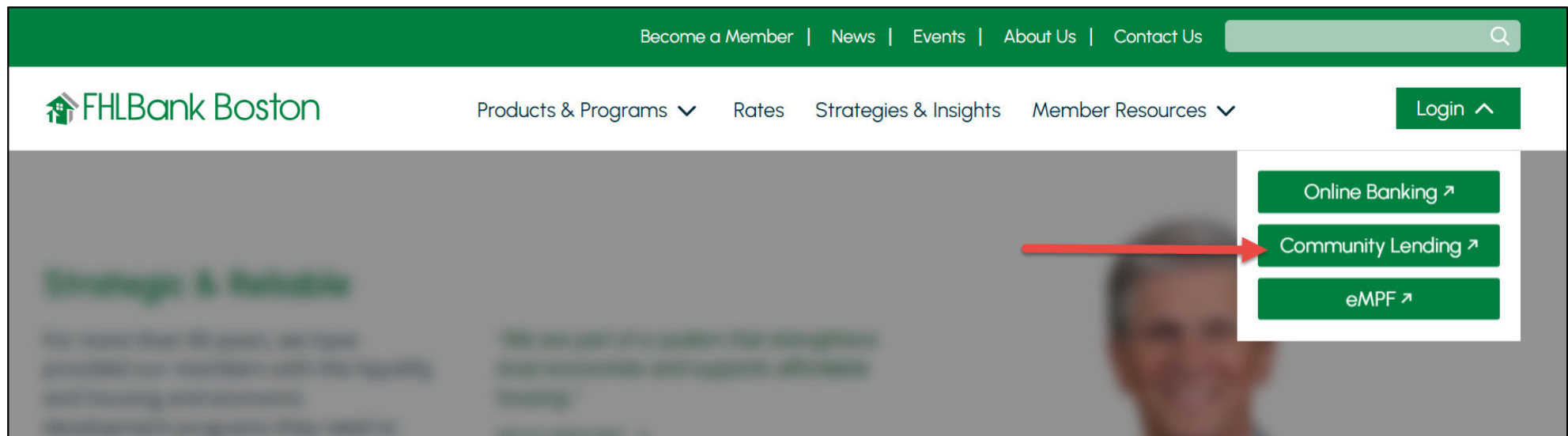
The program will remain open for 30 days after the date of funding availability. Enrollments must be received during those 30 days.



Member Application Process

Member Application

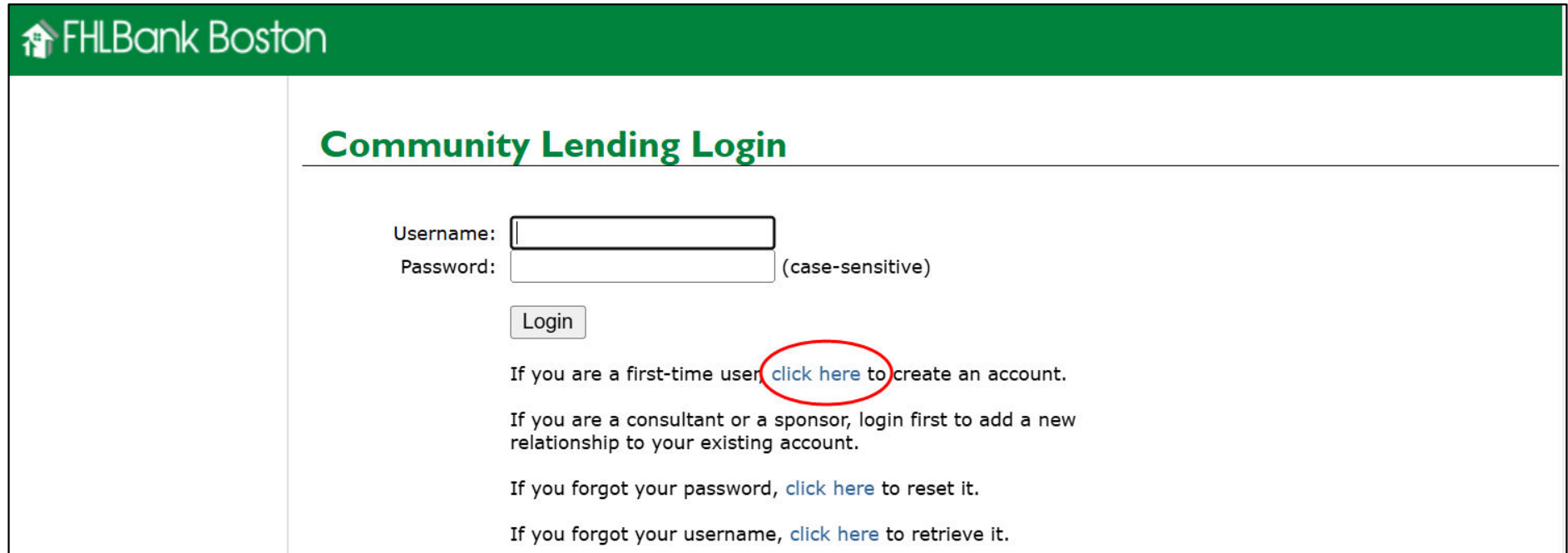
No formal application period or deadline: Members must sign up to use the program via the FHLBank Boston Community Lending Portal



Member Application Process

Member Application

New to our programs? Create an account.



The screenshot shows the FHLBank Boston website header in green. Below it, the page title "Community Lending Login" is displayed in green. The login form includes fields for "Username:" and "Password:" (with a "(case-sensitive)" note). A "Login" button is positioned below the password field. Below the button, there are four lines of text, each with a blue hyperlink: "If you are a first-time user, [click here](#) to create an account.", "If you are a consultant or a sponsor, login first to add a new relationship to your existing account.", "If you forgot your password, [click here](#) to reset it.", and "If you forgot your username, [click here](#) to retrieve it." The first hyperlink "click here" is circled in red.

FHLBank Boston

Community Lending Login

Username:

Password: (case-sensitive)

Login

If you are a first-time user, [click here](#) to create an account.

If you are a consultant or a sponsor, login first to add a new relationship to your existing account.

If you forgot your password, [click here](#) to reset it.

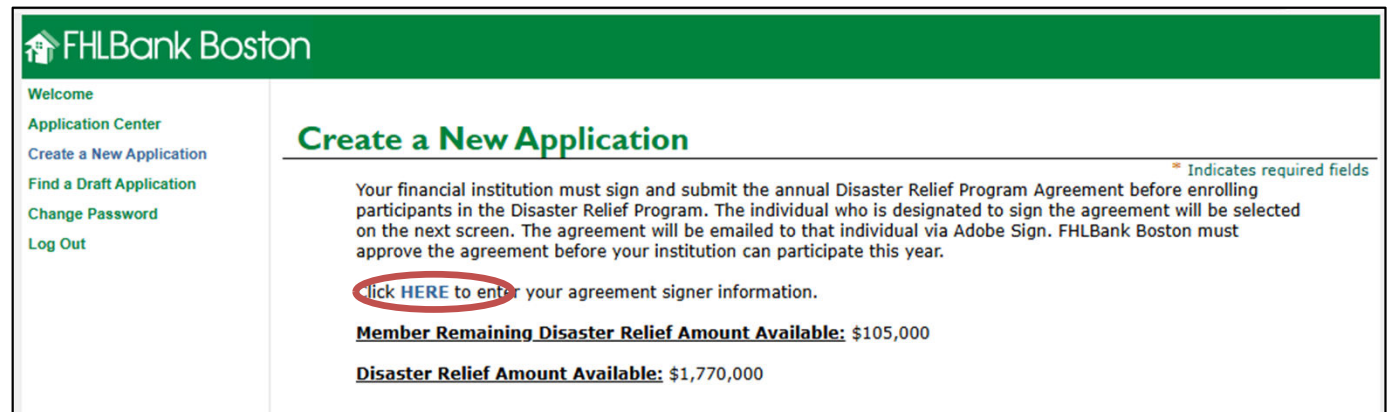
If you forgot your username, [click here](#) to retrieve it.

Member Application Process



Steps:

- “Disaster Relief”
- “Create a New Application”
- “Click HERE”



Member Application Process

Disaster Relief Agreement

* Indicates required fields

The 2025 Disaster Relief Agreement must be executed before your institution can begin to enroll households/businesses for Disaster Relief grants.

Please select the name of the individual who will sign the 2025 Disaster Relief Program agreement below.

- Your organization must authorize one individual to e-sign the annual Disaster Relief Program agreement.
- We strongly encourage that a Disaster Relief contact on this application be granted the entitlements to be an authorized signer of the Disaster Relief Program agreements.
- The entitlement process is completed through FHLBank Boston's Online Banking Platform by your organization's User Entitlement Administrator (UEA). Please contact your UEA to be granted the EBP/HOW "approval" entitlements in order to be able to sign the Disaster Relief agreements.
- If you do not know who your UEA is please contact customerservice@fhlbboston.com or 800-357-3452 (option 3)
- If the individual who will sign the Disaster Relief Program agreements is not listed, please have your organization's UEA grant that individual the necessary entitlements prior to submitting this application.

By clicking the "Submit" link below, you are indicating to the Federal Home Loan Bank of Boston that you would like to participate in the Disaster Relief program.

See the Bank's [web site](#) for more information.

Name of the individual who will sign the Disaster Relief Program agreement: *

- Select -

Signature

I agree to participate in the Disaster Relief Program.

Name.

Signature:

Please retype your name as proof of your signature.

E-Sign

By clicking the button below, you acknowledge that you are the party identified and that you are willing and authorized to participate on behalf of your organization.

If you did not intend to sign, or signed electronically in error, click Return to application. To confirm your signature and the accuracy of the information included in this report, click Submit application.

[Submit](#)

Agreements must be signed by an authorized signer.

Members **MUST** sign Disaster Relief Agreement to participate in program.

Upon Member application approval – ready to create Disaster Relief Applications!

Create a New Disaster Relief Grant Application

Click [HERE](#) to create a new Disaster Relief Grant application.

Started Disaster Relief Grant Applications

If you have started your Disaster Relief Grant application, click on the Disaster Relief Grant borrower to continue working on that application. Applications that have been completed and submitted will not appear.

| Business/Homeowner | Project Number | Contact | Created |
|---------------------|----------------|---------|------------|
| - No Name Entered - | X-0059 | | 11/12/2025 |
| - No Name Entered - | X-0058 | | 11/12/2025 |
| - No Name Entered - | X-0057 | | 11/12/2025 |
| - No Name Entered - | X-0055 | | 11/12/2025 |

Eligibility Criteria & Use of Funds



Homeowner Eligibility Requirements

- Homeowners must earn at or below 100% of Area Median Income for household size; and
- Home must be primary residence; and
- Be experiencing financial hardship.

Small Business Eligibility

- Meet federal definitions under 15 U.S.C. 632(a) and 13 CFR part 121; and
- Be experiencing financial hardship.

Mortgage Servicing Condition

- Mortgages must be held or serviced by a participating member for homeowners and small businesses.

Location

- Home or small business must be located within the state or federally declared disaster area.

Eligible Uses

- Funds cover principal, interest, mortgage insurance, taxes.

Enrollment Documentation Requirements:



Homeowner Requirements

- Documentation showing proof of mortgage amount (CD or mortgage statement); and
- Proof of ownership (Deed or property record)
- 3rd Party Income documentation; and
 - Only include income for household members on the deed!
- Disaster Relief Program Disclosure form; and
 - <https://www.fhlbboston.com/forms-applications/>

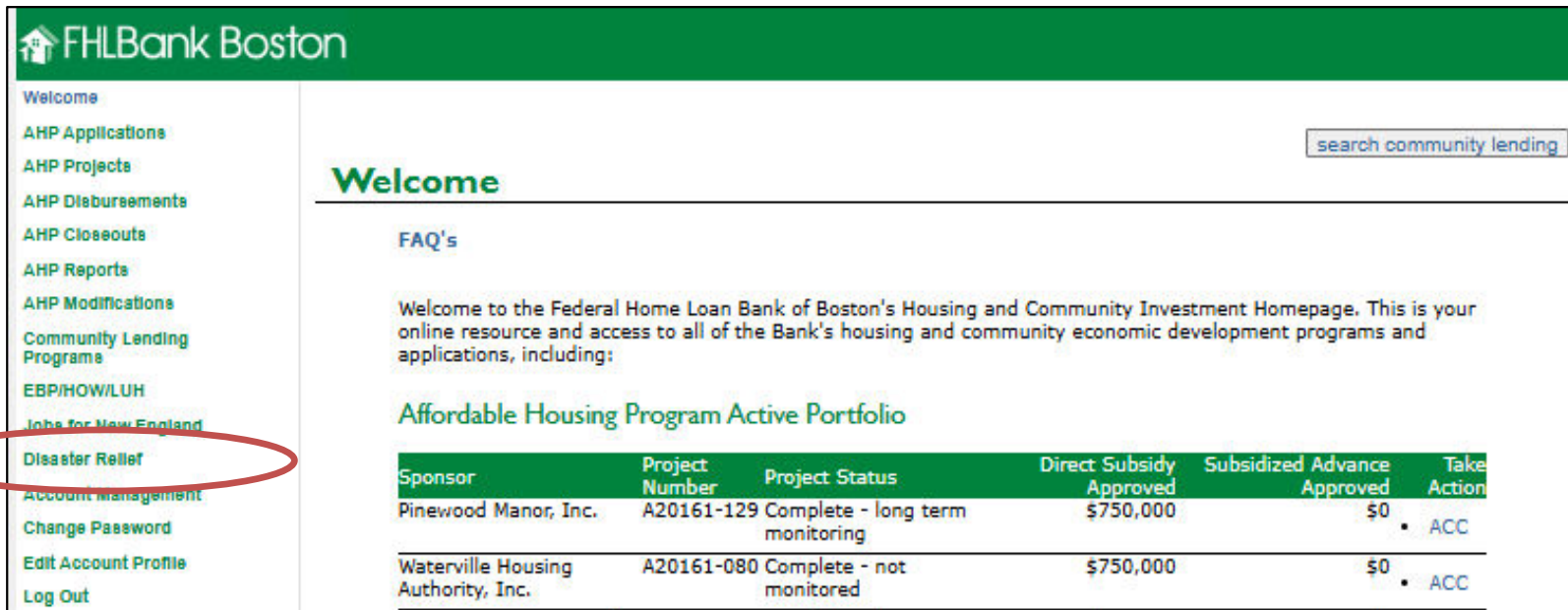
Enrollment Documentation Requirements:

Small Business Requirements

- Proof of mortgage amount
 - CD or mortgage statement



Enrollment Process: Getting Started



FHLBank Boston

Welcome

[AHP Applications](#)
[AHP Projects](#)
[AHP Disbursements](#)
[AHP Closeouts](#)
[AHP Reports](#)
[AHP Modifications](#)
[Community Lending Programs](#)
[EBP/HOW/LUH](#)
[Jobs for New England](#)
[Disaster Relief](#)
[Account Management](#)
[Change Password](#)
[Edit Account Profile](#)
[Log Out](#)

[search community lending](#)

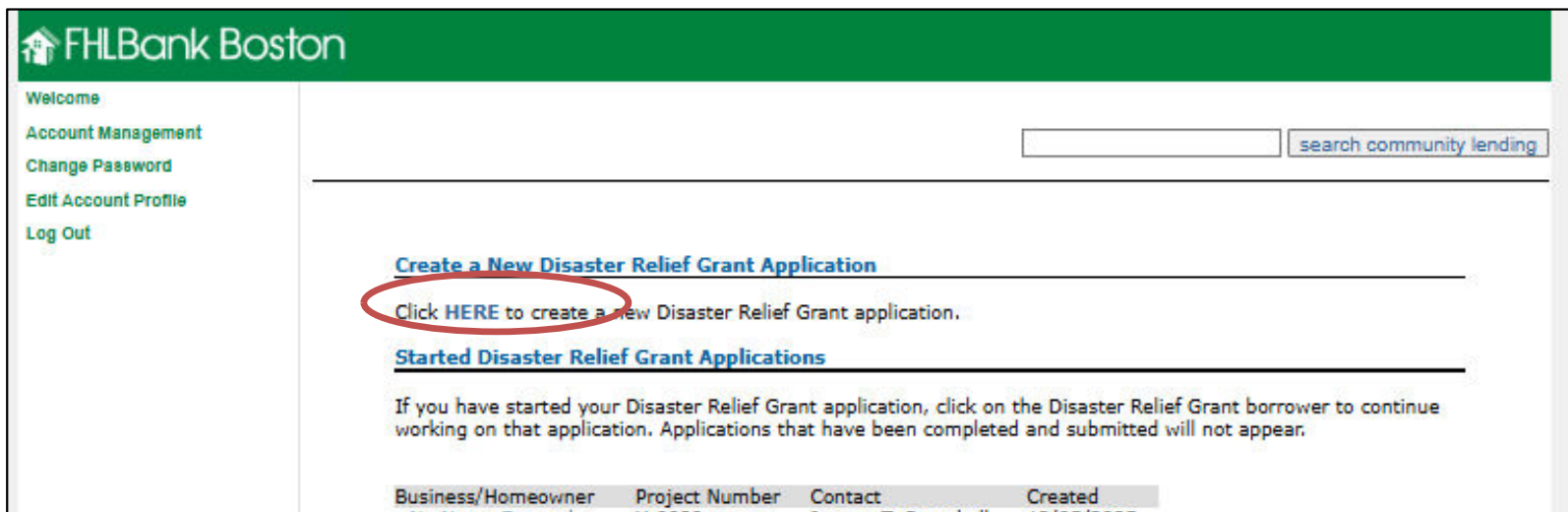
Welcome

[FAQ's](#)

Welcome to the Federal Home Loan Bank of Boston's Housing and Community Investment Homepage. This is your online resource and access to all of the Bank's housing and community economic development programs and applications, including:

Affordable Housing Program Active Portfolio

| Sponsor | Project Number | Project Status | Direct Subsidy Approved | Subsidized Advance Approved | Take Action |
|------------------------------------|----------------|---------------------------------|-------------------------|-----------------------------|-----------------------|
| Pinewood Manor, Inc. | A20161-129 | Complete - long term monitoring | \$750,000 | \$0 | • ACC |
| Waterville Housing Authority, Inc. | A20161-080 | Complete - not monitored | \$750,000 | \$0 | • ACC |



FHLBank Boston

Welcome

[Account Management](#)
[Change Password](#)
[Edit Account Profile](#)
[Log Out](#)

[search community lending](#)

Create a New Disaster Relief Grant Application

Click [HERE](#) to create a new Disaster Relief Grant application.

Started Disaster Relief Grant Applications

If you have started your Disaster Relief Grant application, click on the Disaster Relief Grant borrower to continue working on that application. Applications that have been completed and submitted will not appear.

| Business/Homeowner | Project Number | Contact | Created |
|--------------------|----------------|-------------------|------------|
| No Name Entered | X-0000 | James T. Campbell | 12/05/2025 |

Enrollment Process: Application Type

Create a New Application

Indica

Member Remaining Disaster Relief Amount Available: \$105,000

Disaster Relief Amount Available: \$1,770,000

Click [HERE](#) to start your **Small Business** Disaster Relief Grant application. Applications cannot exceed the member's round cap or the funds available.

Click [HERE](#) to start your **Homeownership** Disaster Relief Grant application. Applications cannot exceed the member's round cap or the funds available.


My Application

- Use the links under "My Application" (at left) or at the bottom of each screen to view and complete each section.
- Use "Validate and Submit" (at left) to finalize your application.
- All disaster relief applications must be submitted by Wednesday, December 31, 2025.
- Thank you for your interest in the Bank's disaster relief program.

[> Begin application](#)

Application for Disaster Relief to support Small Business
Federal Home Loan Bank of Boston

Enrollment Process: Member Information

 FHLBank Boston

Welcome

My Application

Member Information

Grant Amount

Property Addresses

Eligibility Criteria

Exhibits

Validate and Submit

Printable Version

Save & Exit

Log Out

Member Information

* Indicates required fields

| | |
|-----------------------|--|
| Contact Name: * | Joanne T. Campbell |
| Title: * | Executive Vice President/Risk Management |
| Member Institution: * | Camden National Bank |
| Street: * | 245 Commercial Street |
| City: * | Rockport |
| State: * | ME |
| Zip: * | 04856 |
| Phone: * | 207-230-2089 |
| Fax: | 207-230-2033 |
| E-mail: * | jcampbell@camdennational.com |

- > Select a different contact
- > Update contact information
- > Return to previous section
- > Continue to next section

Application for Disaster Relief to support Small Business
Federal Home Loan Bank of Boston

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Legal Disclaimer | Privacy Policy

Enrollment Process: Grant Amount

Grant Amount

* Indicates required fields

My Remaining Cap:

Subject to money being available in the pool

\$93,000

Please enter

Monthly Mortgage (Total PITI): * [Help Topic](#)

(USD)

Please upload a monthly mortgage statement or closing disclosure: *

[Attach File](#)

Grant Amount: (This should be the lesser of 6 month of mortgage or \$15,000) *

(USD)

Please contact Jason Uttam, or another HCI community investment manager, if you have any questions.

> [Return to previous section](#)

> [Continue to next section](#)

Enrollment Process: Property Address

Small Business:

Property Addresses

* Indicates required fields

List the address of the businesses being funded.

Business Name*

Business Code from North American Industry Classification System*

☐ The small business is eligible under SBA guidelines*

Street Address*

City*

State*

Zip Code*

Census Tract (FFIEC):

[* Help Topic](#)

> [Return to previous section](#)

> [Continue to next section](#)

Homeownership:

Property Information

* Indicates required fields

Enter information as requested. Those fields marked with an asterisk(*) are required.

Address of the property:

Street:*

City:*

State:*

Zip:*

Household Census Tract(FFIEC):*

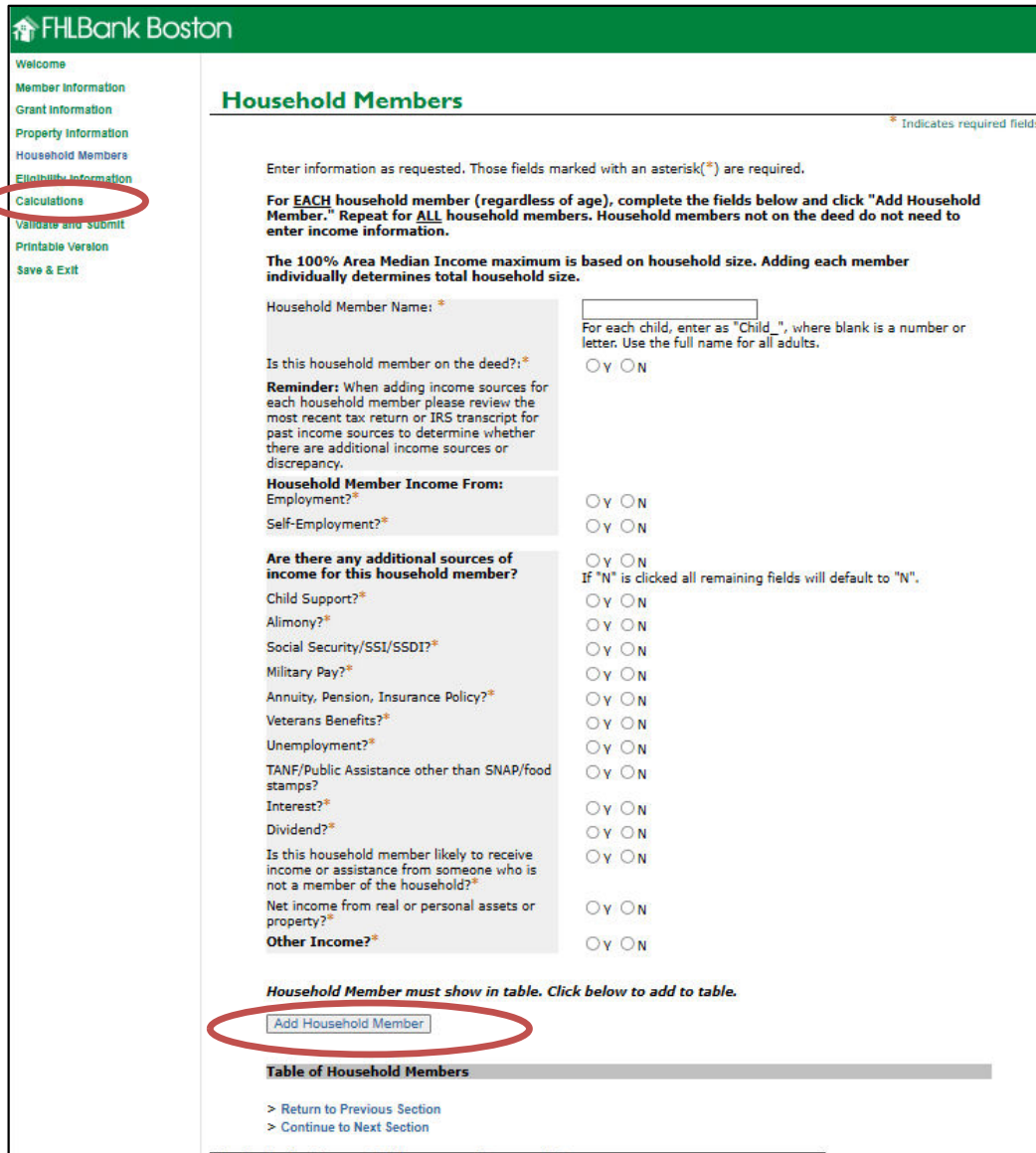
[Help Topic](#)

Proof of property ownership (deed or municipality property record):*

> [Return to Previous Section](#)

> [Continue to Next Section](#)

Enrollment Process: Household Members & Income (Homeownership Only)



FHLBank Boston

Welcome

Member Information

Grant Information

Property Information

Household Members

Calculations

Validate and Submit

Printable Version

Save & Exit

Household Members

* Indicates required fields

Enter information as requested. Those fields marked with an asterisk(*) are required.

For **EACH** household member (regardless of age), complete the fields below and click "Add Household Member." Repeat for **ALL** household members. Household members not on the deed do not need to enter income information.

The 100% Area Median Income maximum is based on household size. Adding each member individually determines total household size.

Household Member Name: *

For each child, enter as "Child_ ", where blank is a number or letter. Use the full name for all adults.

Is this household member on the deed? *

Reminder: When adding income sources for each household member please review the most recent tax return or IRS transcript for past income sources to determine whether there are additional income sources or discrepancy.

Household Member Income From:

Employment? *

Self-Employment? *

Are there any additional sources of income for this household member?

Child Support? *

Alimony? *

Social Security/SSI/SSDI? *

Military Pay? *

Annuity, Pension, Insurance Policy? *

Veterans Benefits? *

Unemployment? *

TANF/Public Assistance other than SNAP/food stamps? *

Interest? *

Dividend? *

Is this household member likely to receive income or assistance from someone who is not a member of the household? *

Net income from real or personal assets or property? *

Other Income? *

Household Member must show in table. Click below to add to table.

Add Household Member

Table of Household Members

> Return to Previous Section

> Continue to Next Section

Be sure to follow the Disaster Relief Income Guidelines posted on the website:

<https://www.fhlbboston.com/forms-applications/>

Link to instructional videos for entering income:

<https://www.youtube.com/watch?v=Zjv6T6ai38U&list=PL0IOX58XHl09aztK74w0Dm93WVYvrkkDP>

Enrollment Process: Eligibility Criteria

Small Business:

Eligibility Criteria

To qualify for a Disaster Recovery Grant, the initiative must meet

Declared disaster: *

Original loan amount: *
(USD)

Is the small business in the federal or state declared disaster zone: * ☐ Yes ☐ No

Will the grant be used for rent or mortgage assistance for the small business: * ☐ Yes ☐ No

Is the mortgage currently held or serviced by your financial institution: * ☐ Yes ☐ No

Is the small business experiencing financial hardship defined as a material reduction in income, or a material increase in living or operating expenses associated with a federal or state declared disaster, creating or increasing the risk of mortgage delinquency, mortgage default, missed rental payments, foreclosure, loss of utilities, or displacement of a homeowner?: * ☐ Yes ☐ No

Is the small business' mortgage currently held or serviced by your financial institution: ☐ Yes ☐ No

> [Return to previous section](#)

> [Continue to next section](#)

Homeownership:

Eligibility Information

Enter information as requested. Those fields marked with an asterisk(*) are required.

Declared disaster: *

Is the homeowners' primary residence in a federal or state declared disaster zone: * ☐ Yes ☐ No

Loan origination date: *
(example: 01/01/2025)

Original loan amount: *
(USD)

Is the homeowner's mortgage less than the annual FHFA conforming loan limit for the year originated: * ☐ Yes ☐ No

Will the grant be used for mortgage assistance: * ☐ Yes ☐ No

Is the mortgage currently held or serviced by your financial institution: * ☐ Yes ☐ No

Is any household member employed by your financial institution? * ☐ Yes ☐ No

If yes, please upload a signed and dated letter on official company letterhead stating that the employee (household member) had no influence or participation in the enrollment process for the Disaster Relief grant.

Program Disclosure (Economic hardship and income certification): *

> [Return to Previous Section](#)

> [Continue to Next Section](#)

Enrollment Process: Program Disclosure (Homeownership Only)

Disaster Relief Program Disclosure
Homebuyer Information and Authorization to Release/Certification

Household Members & Homeowner Income Worksheet

Household Name: _____ **X**

Total Number of Household Members: (Include all persons living at the property) _____ **X**

Total Number of Homeowners: (Include all person on the deed) _____ **X**

HOMEOWNER INSTRUCTIONS:

- 1.) Please complete information for each household member. Use an additional page if needed.
- 2.) For each homeowner, all income categories must be completed with a checkmark and initial.
- 3.) Include all current sources of income for each homeowner.
- 4.) If not employed and no source of income, homeowners must complete the **Certification of Zero Income**.

PLEASE NOTE: Failure to disclose homeowners of the subject property, failure to disclose household member of the subject property, failure to disclose income sources, or failure to provide accurate income data and documents may result in cancellation/denial of your Disaster Relief Program grant request and/or repayment of any disbursed funds.

| Homeowner #1 | Yes | No | HB Initial | Homeowner #2 | Yes | No | HB Initial |
|---|-----|----|------------|---|-----|----|------------|
| Print Name: _____ X | | | | Print Name: _____ X | | | |
| Age: _____ | | | | Age: _____ | | | |
| Is this person on the property deed? | | | | Is this person on the property deed? | | | |
| Does this person live <u>in</u> the property? | | | | Does this person live <u>in</u> the property? | | | |
| A.) Regular Wages: | | | | A.) Regular Wages: | | | |
| Name of Employer: | | | | Name of Employer: | | | |
| B.) Self Employed: | | | | B.) Self Employed: | | | |
| Start Date of Self Employment: | | | | Start Date of Self Employment: | | | |
| C.) Second/Seasonal job: | | | | C.) Second/Seasonal job: | | | |
| Name of Employer: | | | | Name of Employer: | | | |
| D.) Unemployment Assistance: | | | | D.) Unemployment Assistance: | | | |
| E.) Child/Alimony Support: | | | | E.) Child/Alimony Support: | | | |
| F.) Pension/Social Security/Disability | | | | F.) Pension/Social Security/Disability | | | |
| G.) Rental Income: | | | | G.) Rental Income: | | | |
| H.) Interest Income: (\$100 or greater only) | | | | H.) Interest Income: (\$100 or greater only) | | | |
| I.) Other (specify) | | | | I.) Other (specify) | | | |

Page 2 of 4
Revised January 2026

Disaster Relief Program Disclosure
Homebuyer Information and Authorization to Release/Certification

| Homeowner #3 | Yes | No | HB Initial | Homeowner #4 | Yes | No | HB Initial |
|---|-----|----|------------|---|-----|----|------------|
| Print Name: _____ | | | | Print Name: _____ | | | |
| Age: _____ | | | | Age: _____ | | | |
| Is this person on the property deed? | | | | Is this person on the property deed? | | | |
| Does this person live <u>in</u> the property? | | | | Does this person live <u>in</u> the property? | | | |
| A.) Regular Wages: | | | | A.) Regular Wages: | | | |
| Name of Employer: | | | | Name of Employer: | | | |
| B.) Self Employed: | | | | B.) Self Employed: | | | |
| Start Date of Self Employment: | | | | Start Date of Self Employment: | | | |
| C.) Second/Seasonal job: | | | | C.) Second/Seasonal job: | | | |
| Name of Employer: | | | | Name of Employer: | | | |
| D.) Unemployment Assistance: | | | | D.) Unemployment Assistance: | | | |
| E.) Child/Alimony Support: | | | | E.) Child/Alimony Support: | | | |
| F.) Pension/Social Security/Disability | | | | G.) Pension/Social Security/Disability | | | |
| H.) Rental Income: | | | | F.) Rental Income: | | | |
| G.) Interest Income: (\$100 or greater only) | | | | I.) Interest Income: (\$100 or greater only) | | | |
| J.) Other (specify) | | | | H.) Other (specify) | | | |

All signatures are required:

Homeowner(s): _____ **X** _____ Date: _____
Signature

_____ Date: _____
Signature

Member Contact: _____ **X** _____ Date: _____
Sign and print name

Refer to: <http://www.fhlbboston.com> for specific program guidelines, income calculations and forms required to complete the enrollment request.
The words "execution," "signed," "signature," and words of like import in this agreement shall be deemed to include electronic signatures or the keeping of records in electronic form, each of which shall be of the same legal effect, validity or enforceability as a manually executed signature or the use of a paper-based record keeping system, as the case may be, to the extent and as provided for in any applicable law, including, without limitation, Electronic Signatures in Global and National Commerce Act or any other similar state laws based on the Uniform Electronic Transactions Act, and the parties hereto hereby waive any objection to the contrary.

Page 3 of 4

Enrollment Process: Program Disclosure (Homeownership Only)

Disaster Relief Program Disclosure
Homeowner Information and Authorization to Release/Certification

I/We hereby authorize _____ to:

Full Name of Lending Financial Institution

Release all information to FHLBank Boston required for the purpose of determining eligibility for the Disaster Relief Program.

This form must be signed by all homeowners.

I/We certify that all information including, but not limited to, number of household members, number of homeowners and total homeowner income, for the purpose of determining eligibility for the Disaster Relief Program, is true to the best of my/our knowledge.

I/We understand that false statements or information will lead to cancellation/denial of the application to the Disaster Relief Program.

I/We acknowledge that the lender has provided, and we have received and reviewed a copy of Disaster Relief Program Information.

By signing below, I/we acknowledge that (1) we intend to proceed, (2) are under 100% AMI, (3) have a mortgage for a primary residence on a property that is in a state or federally declared disaster area held or serviced by a FHLBank Boston member, and (4) are experiencing financial hardship defined as a material reduction in income, or a material increase in living or operating expenses associated with a federal or state declared disaster, creating or increasing the risk of mortgage delinquency, mortgage default, missed rental payments, foreclosure, loss of utilities, or displacement of a homeowner.

| | | |
|---------------------------------|---------------------------|------------|
| Type/Print Homeowner Name _____ | Homeowner Signature _____ | Date _____ |
| Type/Print Homeowner Name _____ | Homeowner Signature _____ | Date _____ |
| Type/Print Homeowner Name _____ | Homeowner Signature _____ | Date _____ |
| Type/Print Homeowner Name _____ | Homeowner Signature _____ | Date _____ |

The words "execution," "signed," "signature," and words or use import in this Agreement shall be deemed to include electronic signatures or the keeping of records in electronic form, each of which shall be of the same legal effect, validity or enforceability as a manually executed signature or the use of a paper-based record keeping system, as the case may be, to the extent and as provided for in any applicable law, including, without limitation, Electronic Signatures in Global and National Commerce Act or any other similar state laws based on the Uniform Electronic Transactions Act, and the parties hereto hereby waive any objection to the contrary.

Page 4 of 4
Revised January 2020

Enrollment Process: Exhibits and Validate

Exhibits

* Indicates required fields

Note: Providing attachments is optional.

You may attach any additional documents here (you must have a file on your computer to attach). If you have any paper exhibits, they may be faxed with the cover page of your application.

Browse your computer to attach a file.

No file chosen

Please include a description of this file:

- > [Upload another file](#)
- > [Return to previous section](#)
- > [Continue to next section](#)

Validate and Submit

* Indicates required fields

These sections are not valid.

You can click on the section names to jump to that section and make the appropriate edits.

Then, you can use the links under "My Application" (at left) or at the bottom of the screen to jump back to the "Validate and Submit" section.

Grant

- You must enter the monthly mortgage amount.
- You must upload the monthly mortgage statement.
- You must enter a grant amount.
- You have not requested the minimum grant amount. The minimum is \$5,000.


Validate and Submit

* Indicates required fields

- **This application has been validated, but not yet submitted!**
- Next you will have the opportunity to make **one final review** of your application.
- This will also be your **last opportunity to print the entire application for your records.**

> [Continue](#)

Enrollment Process: Preview and Submit

 FHLBank Boston

[> Print this page](#)
[> Return to application](#)
[> Continue to submit application](#)

Application for a Disaster Relief Grant

Dec 05, 2025

Member Information

Application Submission

* Indicates required fields

By clicking the "Submit" link below, you are submitting this application to the Federal Home Loan Bank of Boston. **You will no longer have access to the application once it is submitted.**

The Bank will review your application and you will be notified when the application is approved. Please note, should your application be approved, the advance request/disbursement will be subject to the Bank's Products Policy and requirements.

Certification The undersigned certifies that (i) the initiative described in the Disaster Relief application meets the guidelines for Disaster Relief and that all information provided in the application is true and correct, and (ii) the funds from the Disaster Relief requested will be used in accordance with the description contained in the Disaster Relief application.

Signature

I hereby agree to the terms and conditions set forth in the certification above.

Name: John Doe, Executive Director
 Manager: _____
 Signature:

Please retype your name as proof of your signature.

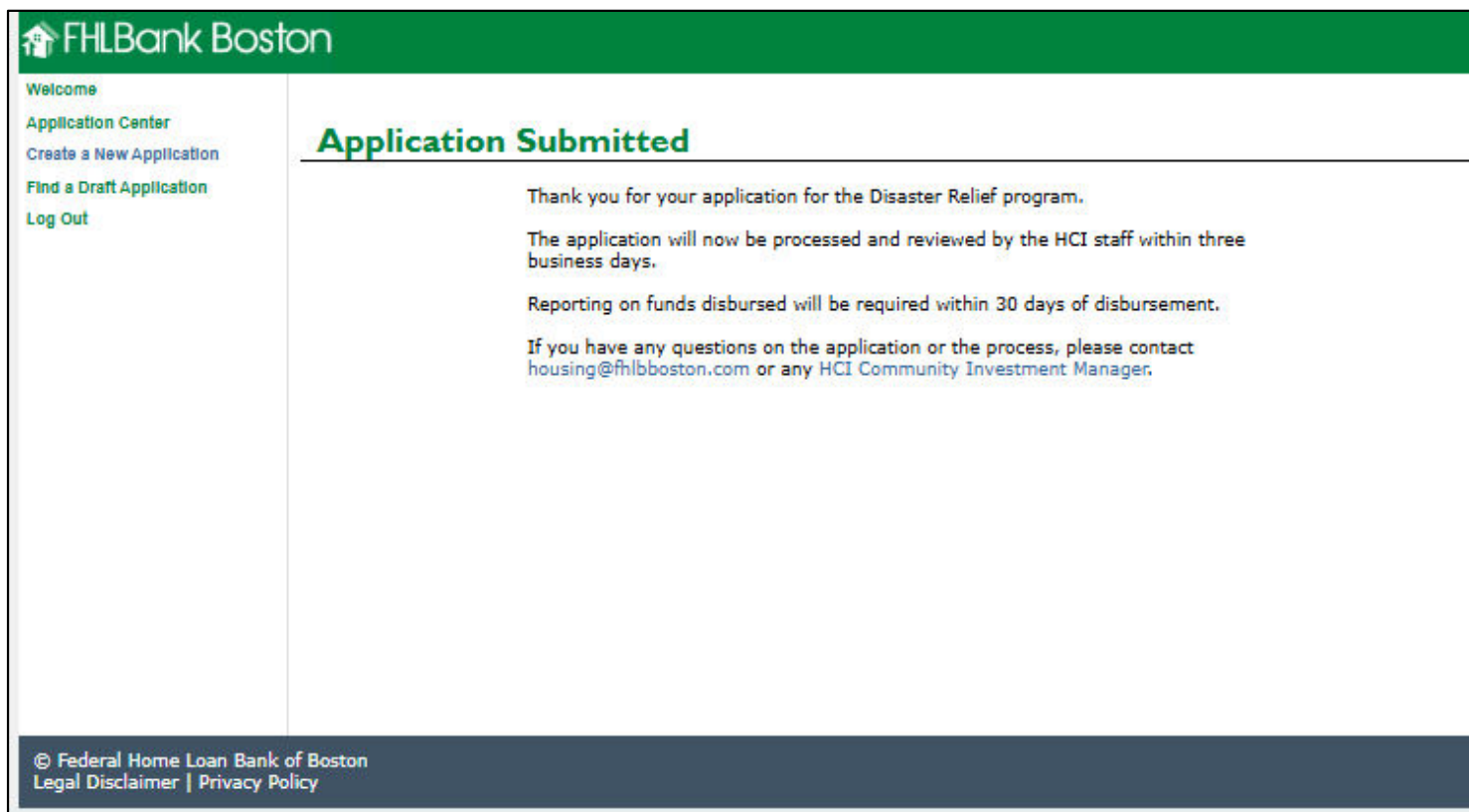
E-Sign

By clicking the button below, you are executing the certification, you acknowledge that you are the party identified, and that you are willing and authorized to execute the certification in the section above on behalf of your organization.

If you did not intend to sign, or signed electronically in error, click Return to application. To confirm your signature and the accuracy of the information included in this report, click Submit application to affirm your agreement to the terms and conditions set forth in the certification above.

[> Submit application](#)
[> Return to application](#)

Enrollment Process: Successful Submission



The screenshot displays the FHLBank Boston Application Center interface. The header is green with the FHLBank Boston logo. A left sidebar contains navigation links: Welcome, Application Center, Create a New Application, Find a Draft Application, and Log Out. The main content area is titled 'Application Submitted' in green. It contains a confirmation message: 'Thank you for your application for the Disaster Relief program. The application will now be processed and reviewed by the HCI staff within three business days. Reporting on funds disbursed will be required within 30 days of disbursement. If you have any questions on the application or the process, please contact housing@fhlbboston.com or any HCI Community Investment Manager.' The footer is dark blue with copyright and legal disclaimer information.

FHLBank Boston

Welcome
Application Center
[Create a New Application](#)
[Find a Draft Application](#)
[Log Out](#)

Application Submitted

Thank you for your application for the Disaster Relief program.

The application will now be processed and reviewed by the HCI staff within three business days.

Reporting on funds disbursed will be required within 30 days of disbursement.

If you have any questions on the application or the process, please contact housing@fhlbboston.com or any HCI Community Investment Manager.

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[Legal Disclaimer](#) | [Privacy Policy](#)

Disbursement & Reporting

Fund Request Process

Enrollment and Disbursement process combined to ensure streamlined processing.



Documentation Requirements

Documentation reviewed by HCI staff to confirm eligibility and fund usage purposes.

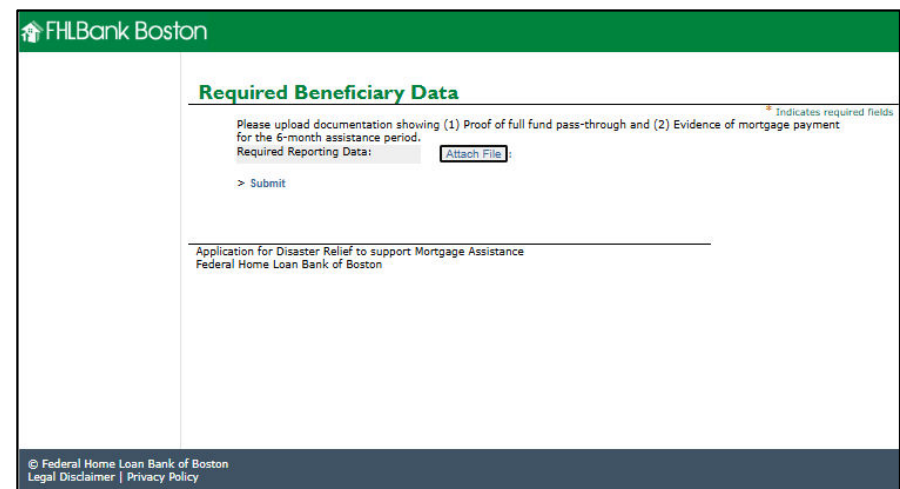
Submitted/Pending Approval/Rejected Disaster Relief Grant Applications

Below is a list of all of your submitted/pending approval/rejected Disaster Relief:

| Business/Homeowner | Project Number | Status | Action |
|--------------------|----------------|----------|-----------|
| FHLBank Boston | X-0064 | \$12,000 | In Review |

Post-Disbursement Reporting

Reporting within seven (7) months includes proof of fund pass-through and mortgage coverage evidence.



Required Beneficiary Data

Please upload documentation showing (1) Proof of full fund pass-through and (2) Evidence of mortgage payment for the 6-month assistance period. * Indicates required fields

Required Reporting Data: [Attach File](#)

[> Submit](#)

Application for Disaster Relief to support Mortgage Assistance
Federal Home Loan Bank of Boston

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Reporting Process

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[Create a New Disaster Relief Grant Application](#)
Click [HERE](#) to create a new Disaster Relief Grant application.
[Started Disaster Relief Grant Applications](#)
If you have started your Disaster Relief Grant application, click on the Disaster Relief Grant application you are working on that application. Applications that have been completed and submitted will be listed here.

| Business/Homeowner | Project Number | Contact | Created |
|---------------------|----------------|--------------------|------------|
| - No Name Entered - | X-0091 | Joanne T. Campbell | 12/05/2025 |
| - No Name Entered - | X-0089 | Joanne T. Campbell | 12/05/2025 |
| Me | X-0088 | Joanne T. Campbell | 12/05/2025 |
| - No Name Entered - | X-0087 | Joanne T. Campbell | 12/05/2025 |
| - No Name Entered - | X-0086 | Joanne T. Campbell | 12/05/2025 |
| blahblah | X-0082 | Joanne T. Campbell | 11/19/2025 |
| blah blah | X-0081 | Joanne T. Campbell | 11/19/2025 |
| - No Name Entered - | X-0063 | Joanne T. Campbell | 11/13/2025 |
| - No Name Entered - | X-0062 | Joanne T. Campbell | 11/13/2025 |
| - No Name Entered - | X-0061 | Joanne T. Campbell | 11/13/2025 |
| - No Name Entered - | X-0060 | Joanne T. Campbell | 11/13/2025 |
| - No Name Entered - | X-0059 | Joanne T. Campbell | 11/12/2025 |
| - No Name Entered - | X-0058 | Joanne T. Campbell | 11/12/2025 |
| - No Name Entered - | X-0057 | Joanne T. Campbell | 11/12/2025 |
| - No Name Entered - | X-0055 | Joanne T. Campbell | 11/12/2025 |

[Submitted/Pending Approval/Rejected Disaster Relief Grant Applications](#)
Below is a list of all of your submitted/pending approval/rejected Disaster Relief Grants:

| Business/Homeowner | Project Number | Amount | Action |
|--------------------|----------------|----------|--------|
| FHLB | X-0090 | \$5,000 | |
| FHLBank Boston | X-0064 | \$12,000 | |

[Approved Disaster Relief Grant Applications](#)
Below is a list of all of your approved Disaster Relief Grants:

| Business/Homeowner | Disbursed |
|-------------------------|------------|
| Bella T (X-0016) | 10/29/2025 |
| Dunder Mifflin (X-0015) | 10/29/2025 |
| Isabel ET (X-0022) | 10/29/2025 |

[Disaster Relief Grant Reports](#)

| Business/Homeowner | Disbursement Date | Due Date |
|--|-------------------|------------|
| Connecticut Hawthorne Fire (FM-5542-CT) (X-0016) | 10/29/2025 | 05/29/2026 |
| Connecticut Hawthorne Fire (FM-5542-CT) (X-0022) | 10/29/2025 | 05/29/2026 |
| Connecticut Hawthorne Fire (FM-5542-CT) (X-0015) | 10/29/2025 | 05/29/2026 |

Required Beneficiary Data

Please upload documentation showing (1) Proof of full fund pass-through and (2) Evidence of mortgage payment for the 6-month assistance period.
Required Reporting Data: [Attach File](#)

> Submit

Questions?

