



The Onyx & Breezy Foundation
P.O. Box 857, Tuxedo Park, NY 10987 (845-351-8830)
www.onyxandbreezy.org

Questionnaire

Applicant:

Name _____ Age: _____

Spouse's Name _____ Age: _____

Children _____ Ages: _____

How did you hear about us? _____ Have we assisted you before? Yes No

If so, what was the approximate Date? / / How did we assist you? _____ Amount: \$ _____

Own Home: Yes No Address: _____ City: _____ State: _____ Zip: _____ Home Phone: _____

Email address: _____ Market Value: _____ Mortgage Amount: _____ Total monthly payment including taxes: _____

Applicant Employment:

Address: _____ Telephone: _____ Position: _____ Annual Compensation: _____

Spouses/Employment:

Address: _____ Telephone: _____ Position: _____ Annual Compensation: _____

Other sources of Income: _____ Investments (including savings): _____

Other Debt: College: _____ Credit Cards: _____ Other (List) _____

Vets name & number: _____ Pets name: _____ Date of birth: _____

Pet Breed: _____ Is your pet Spayed/Neutered?: Yes No

Approximate money spent on animal care (not including Routine Medical cost): _____ Do you have Pet insurance? Yes No

What are you requesting for a donation? Please explain:

The above statements are true & factual.

Sign Name _____

** Please include copy of Tax Return / Financials Statements & Proof of Non-Profit Status with application.
We are a non-profit 501(c) (3) organization