

<b>Grant Type:</b>	<b>Submission for Cycle:</b>	<b>Application:</b>
<input type="checkbox"/> Accessibility Modification <input type="checkbox"/> Implementation <input type="checkbox"/> Planning <input type="checkbox"/> Scattered Site RLF		<b>Single</b> <input type="checkbox"/> Municipal <input type="checkbox"/> Regional  <b>Joint</b> <input type="checkbox"/> Consortium  <input type="checkbox"/> <b>Multi-Year Application</b>
	<b>Date Submitted:</b>	

**Applicant Municipality**

\_\_\_\_\_

\_\_\_\_\_

**Chief Executive Officer**  
 NAME & TITLE: \_\_\_\_\_  
 MUNICIPAL ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**Contact Person**  
 NAME & TITLE: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

<b>National Objectives</b> <i>(check only those that apply)</i>	<b>State Objectives</b> <i>(check all that apply)</i>
<input type="checkbox"/> Low/Moderate Income <input type="checkbox"/> <u>Slums &amp; Blight</u> <input type="checkbox"/> Spot <input type="checkbox"/> Area <input type="checkbox"/> <u>Urgent Need</u>	<input type="checkbox"/> Housing <input type="checkbox"/> Economic Development <input type="checkbox"/> Public Facility <input type="checkbox"/> Public Service

**Estimated Project Funding**

<b>VCDP Request</b>	\$	
<b>Other Resources</b>		
<i>list potential ones if known</i>		
<b>Total Funding</b>	\$	

