

Activity Estimated Cost

Provide the financial data described below. When preparing this data:

- For multi-year activities, please prepare a table for each funding year, as well as, the summary table.
- Use the best information currently available. More detailed and exact figures will be requested if the activity is approved for funding.

Year 1/Single Year Activity Total	\$
Year 2 Total	\$
Year 3 Total	\$
SUMMARY of Years TOTAL Budget	
	\$

Sources of Funds

List all sources of other funding obtained/committed/sought for this activity in the following table (e.g. state funds, local funds, etc):

Source of Funds	Amount	Work Item to be Accomplished with Funds	Status* (Select One)	Contingent upon CDBG Funding?
1.	\$		Secured _____ Pending _____ Denied _____	YES _____ NO _____
2.	\$		Secured _____ Pending _____ Denied _____	YES _____ NO _____
3.	\$		Secured _____ Pending _____ Denied _____	YES _____ NO _____
4.	\$		Secured _____ Pending _____ Denied _____	YES _____ NO _____
TOTAL				
	\$			

* If secured, attach confirmation letter (unless local funds). If denied, attach denial letter stating the name of the source, the date funds were sought, and the reason for the denial.

If no other funding sources are involved in this activity, please explain why:

Sources of Funds (cont.)

Total funding sources (including CDBG request):

	<u>Year 1/Single Year</u>	<u>Year 2</u>	<u>Year 3</u>
Total other sources (from table above)	\$ _____	\$ _____	\$ _____
CDBG Funds Requested	\$ _____	\$ _____	\$ _____
TOTAL All Sources	\$ _____	\$ _____	\$ _____

SUMMARY OF ALL SOURCES FOR ALL Years \$ _____

Note: Summary must match the "Summary of Years Total Budget" line on the previous page.

Planning Information (please continue on attached sheets, if necessary)

1. Municipal applicants: List plans and ordinances currently in place or underway

	<i>Date Adopted</i>	<i>Date Updated (If applicable)</i>
Comprehensive Plan	_____	_____
Zoning Ordinance	_____	_____
Subdivision/Land Development Ordinance	_____	_____
Act 537 Plan	_____	_____
Building Codes	_____	_____
Other:	_____	_____
	_____	_____
	_____	_____

2. Is the activity mandated by other governmental entities or the courts: ____ YES ____ NO

If YES, describe:

Activity Narrative (please continue on attached sheets, if necessary)

1. **Describe the proposed activity:** Where is it located (attach a municipal or street map); describe the scope and principal elements of the planning effort.

2. **Is the activity a continuation of an earlier CDBG funded activity?** If yes, please describe:

3. **Describe the need for the activity.** Clearly and concisely state the problem, what caused it, and who is affected by it. Describe the urgency and severity of the need (health/safety, public facility, lack of essential services, etc.). Attach surveys, photographs, reports, etc.

4. **Describe how the activity addresses the need described above:**

5. **Cite the Community Development Priority Need, Goal and Objective listed on page 5, 6, or 7 of the "General Information" which this activity *best* addresses:**

6. **Describe how the proposed activity addresses this Community Development Goal and Objective:**