

(04/10)

Application Form for the Community Development Block Grant Program (Reproduce this form as necessary or copy this form onto your Official Letterhead)

PUBLIC SERVICE APPLICATION

Date:	
PROGRAM TITLE:	
SUMMARY OF PROPOSED PROGRAM:	
Amount of funds requested: \$(April 1 st and March 31 st .	funds should cover the period of no more than 1 year between
Location of Proposed Program Site (Be Specific):	
Address:	
City: Zip Code:	
Is program currently in operation:Yes	No If yes, How long in operation:
Estimate the number of people to be served by this pro	ogram between April 1st and March 31st:
List tools that will be used to verify residence and inco	ome eligibility:
Title of Applying Agency:	
Non-Profit Yes No	501(c) (3) obtained:Yes No

	(Please print name below)	(Please sign name below)
Submitted by:	Name & Title	Signature
	rume & The	
City	Zip Code	Telephone
Fax:	Email Add	lress:
		Mr. LaParry Howell, MPA City of Tuscaloosa 2201 University Boulevard Tuscaloosa, AL 35401

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CONSTRUCTION APLICATION Date:_____ PROJECT TITLE: SUMMARY OF PROPOSED PROJECT:

Address:

City:_____ Zip Code:_____

Location of Proposed Program Site (Be specific):

Property is owned by: (Name & Address)

Submitted by: _____ Name & Title Signature

Name & Title Signature

Address

City:_____ Zip Code:_____ Telephone # _____

Fax # _____ Email Address: ____

Submit this form to: Non-CDBG Application

Mr. LaParry Howell, MPA

City of Tuscaloosa, Office Federal Programs

2201 University Boulevard Tuscaloosa, AL 35401 205.248.5080 (office) 205.349.0135 (fax)