

Project Description

Describe your project in detail. Describe the building in your project, the **changes to be made**, and the **year** each was built.

Describe the results you expect from your project:

Does your project involve retrofitting a building that's been placed on the National Historic Register or is 50 years old or older? **If yes, the State Historical Society must complete a Section 106 Clearance Form.*

Yes No

Certification:

I, the undersigned authorized representative of the applicant, certify that to the best of my knowledge the information in the application is true and correct. I also certify that the applicant shall maintain accounting records in accordance with generally accepted governmental accounting principles and that the funds awarded will be included in those audits or financial statements. I further certify that the applicant represents a political subdivision within the State of North Dakota and will comply with all local, state and federal laws and regulations, including but not limited to the State Health Department's requirements for solid waste management and EPA's Renovation, Repair and Painting Rule. I also certify that the applicant is in good financial standing and has no delinquencies on existing North Dakota State Government grants or loans.

Authorized Signature	Name (Please Print)
Title	Date

Mail an original of the completed application and supporting documents* to:

**North Dakota Department of Commerce
Division of Community Services
P.O Box 2057
Bismarck, ND 58502-2057**

**Supporting documents include:*

- *Energy Savings Analysis*
- *Section 106 Clearance Form (if applicable)*
- *Bid(s)*

For Commerce Use Only			
	Approved	Amount of Grant	Authorized Signature:
	Denied	Date	