

COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) PREAPPLICATION

NORTH DAKOTA DEPARTMENT OF COMMERCE

DIVISION OF COMMUNITY SERVICES

SFN 61542 (09/18)

PREAPPLICATION COVER SHEET FOR FISCAL YEAR _____			
1. LEGAL APPLICANT			
Applicant Name	County		
Mailing Address	City	State	ZIP Code
Local Government Contact Person	Telephone Number	Email Address	
Auditor	Telephone Number	Email Address	
Person Who Completed Application	Telephone Number	Email Address	
2. ELIGIBLE ACTIVITY Which eligible activity listed in Section II of the State Program Distribution Statement does this project comply with?			
3. NATIONAL OBJECTIVE		4. PROPOSED BENEFIT	
5. PROJECT BENEFICIARIES a. Population from Last U.S. Census b. Project Area Population c. Low-to-Moderate Income Population	Persons _____ _____ _____	Businesses _____ _____ _____	6. LMI PERCENTAGE Divide persons in (c.) by (b.) in #5
6. PROJECT DESCRIPTION			
7. PROJECT ACTIVITY TYPE		8. USE OF FUNDS	
9. ANTICIPATED PROJECT START DATE		10. ANTICIPATED PROJECT DURATION (MAX 18 MONTHS)	
11. PROPOSED PROJECT BUDGET			
SOURCE	AMOUNT	USE	
CDBG			
CDBG Administration			
State/Local			
State/Local Administration			
Other			

CDBG PREAPPLICATION CHECKLIST

The following documents must be provided with the preapplication, if applicable.

PUBLIC FACILITIES

12. Preliminary architect/engineering report provided? (Required for all public facility projects over \$50,000)

- No Yes N/A

13. Does this project involve special assessments?

- No Yes *Attach project map N/A

14. Is the public facility occupied by more than one tenant?

- No Yes - Explain N/A

MAIN STREET

15. Describe the specific project taking place for each building:

16. Additional Comments:

By signing below, the Applicant certifies that:

To the best of my knowledge and belief, data in this application are true and correct, and the document has been duly authorized by the governing body of the applicant.

Name of Chief Elected Official

Title of Chief Elected Official

Signature of Chief Elected Official

Date