

## **PROJECT SUMMARY FORM – PY 2026**

APPLICANT INFORMATION					
Applicant Name				Da	te
Address					
Contact Person/ Title					
E-Mail Address					
Telephone			Fax		
ACTIVITY/PROJECT DETAILS					
Activity/Project Title				Applicati	on Type
				☐ Priority	☐ Alternate
Project Location Address					
Brief Project Description					
Anticipated Outcome/Benefit					
Amount of CDBG Funds Requested	\$		FOR OHCD USE ONLY		
Local Contribution	\$		ta Danii III		
Amount of Other Funds		. Da	ite keceived: _		
<b>Total Project Cost</b>	\$	Re	eviewed by:		