



PROJECT SUMMARY FORM – PY 2025

APPLICANT INFORMATION			
Applicant Name			Date
Address			
Contact Person/ Title			
E-Mail Address			
Telephone		Fax	

ACTIVITY/PROJECT DETAILS	
Activity/Project Title	Application Type
	<input type="checkbox"/> Priority <input type="checkbox"/> Alternate
Project Location Address	
Brief Project Description	
Anticipated Outcome/Benefit	

Amount of CDBG Funds Requested \$ _____ Local Contribution \$ _____ Amount of Other Funds \$ _____ Total Project Cost \$ _____	FOR OHCD USE ONLY
	Date Received: _____
	Reviewed by: _____