

Submitted by: \_\_\_\_\_

Date: \_\_\_\_\_

**NEW CDBG PROJECT INFORMATION FORM**

1. Project Name: \_\_\_\_\_

2. Project Location: \_\_\_\_\_

3. Service Area: \_\_\_\_\_

4. Matrix Code: \_\_\_\_\_

5. National Objective: \_\_\_\_\_

6. PY \_\_\_\_\_ FY \_\_\_\_\_

7. Amount of Funding: \_\_\_\_\_

8. Description of Project: \_\_\_\_\_

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➤ Annual Goals Supported (mark all that apply):

- Housing \_\_\_\_\_
- Public Services \_\_\_\_\_
- Community & Economic Development \_\_\_\_\_
- Program Administration \_\_\_\_\_

➤ Priority Needs Addressed (mark all that apply):

- Housing Rehabilitation \_\_\_\_\_
- Homeless Services \_\_\_\_\_
- Public Facilities and Infrastructure \_\_\_\_\_
- Public Transportation \_\_\_\_\_
- Neighborhood Revitalization \_\_\_\_\_
- Program Administration \_\_\_\_\_
- COVID – 19 Prevention, Response & Recovery \_\_\_\_\_

➤ Goal Outcome Indicators

- Persons assisted \_\_\_\_\_
- Households assisted \_\_\_\_\_
- Businesses assisted \_\_\_\_\_
- Beds \_\_\_\_\_
- Jobs \_\_\_\_\_
  - Created \_\_\_\_\_
  - Retained \_\_\_\_\_
- Other \_\_\_\_\_

***For Development  
Department Staff***  
Eligible/Ineligible  
Comments:

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