



Applicant Organization Name	Project Name	Date of Application	
Address	City	State	ZIP Code
Primary Contact	Title		Fax
E-mail	Telephone		
Individual Signing The Agreement	Title		
E-mail	Telephone		

Total Project Budget	Amount Requested
Proposed Start Date	Project Duration

[illegible]

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? <i>*If yes, the State Historical Society must complete a Section 106 Clearance Form.</i>	Yes	No
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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 Department of Environmental Quality's requirements for solid waste management and the 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

Submit a completed application and supporting documents to:

E-mail:
kciverson@nd.gov

Mail:
North Dakota Department of Commerce
Department of Community Services
PO Box 2057
Bismarck, ND 58502-2057

If you have questions, please contact:

Kevin Iverson
ND Department of Commerce
Department of Community Services
Email: kciverson@nd.gov
Phone: 701-328-5385

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