

**FORM 1-2  
DESIGNATION OF DEPOSITORY INSTRUCTIONS**

Enter the following information on Form 1-2 and submit the Form to your OCR Community/Economic Developer. Retain a copy for your files.

**NYS CDBG Program Project #** - Enter the OCR assigned CDBG Project #.

**PART 1: PAYEE IDENTIFICATION** - This section is to be completed by the Recipient.

**Payee Name and Mailing Address** - Enter the name, email, phone number and complete address of the Recipient.

**Initialization Section** – Initial the two boxes in this section, indicating that you have both read the warning clause in this section and the account listed is a non-interest bearing checking account.

**PART 2: FINANCIAL INSTITUTION INFORMATION** - Enter name of the Recipient's financial institution where CDBG funds will be electronically transferred.

**Account Number** - Enter the account number of the Recipient's CDBG account.

**Name on Account** – Enter the name of the Recipient's CDBG account.

**Account Type** – Select the type of bank account being utilized.

**Routing Number** - Enter the Recipient's financial institution CDBG bank account routing number for the electronic transfer of funds.

**PART 3: AUTHORIZATION** – Sign and enter the title and date of the Recipient's Chief Financial Officer.