PROGRAM	INFORMA	TION
PROGRAM	INFORMA	

1. RECIPIENT INFORMATIO	ON				
Recipient Name:			County: _		
□ County	□ Town	□ Village	□ City		
Federal Identification Number:* *DUNS #	(Month/Day)	Fiscal Ye	ar End Date:		
Chief Elected Official Name:				Title:	
Address:				Zip Code:	
Telephone #: ()	Fax #: ()	E-	Mail:		
2. RECIPIENT CONTACT PE	ERSON (IF NOT T	HE CHIEF ELEC	CTED OFFI	(CIAL)	
Name:	Title:				
Address:				Zip Code:	
Telephone #: ()	Fax #: ()	F	E-mail:		
3. GRANT ADMINISTRATO	R	Government Staff		ecipient □ Consultant*	
Name:	Title:				
Organization:					
Address:	Zip Code:				
Telephone #: () Fa	ax #: ()	E- mail:			
4. BUSINESS INFORMATION programs do not need to complete		c Development a	nd Small B	susiness awards only. Microenterprise	
Name of Business:					
Business Address:	Zip Code:				
**DUNS#·					

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^{*} Federal procurement requirements may be applicable, 24 CFR 85.36

^{**} DUNs numbers are required for all local governments and businesses receiving CDBG funds. A DUNs number can be obtained from www.dnb.com or by calling 1-800-234-3867.