Choice Neighborhoods IMPLEMENTATION GRANTS Key Eligibility Data Form

## U.S. Department of Housing and Urban Development Office of Public and Indian Housing

OMB Approval No. 2577-0269 (exp. 2/28/2011)

## CHOICE NEIGHBORHOODS IMPLEMENTATION GRANTS APPLICATION INFORMATION

## ELIGIBLE APPLICANT

You must provide the following information for the Lead Applicant and, if applicable, the Co-Applicant

Lead Applicant: _		
Type of Eligible Applicant [ (check one)	Public Housing Agency PHA Code:	Local Government
	Nonprofit	For profit developer applying jointly with a public entity
Mailing Address: _		
Executive Officer Name & Title: _		
Telephone: _	Fax:	Email:
Primary Contact Name & Title: _		
Telephone: _	Fax:	Email:
Co-Applicant (if any):		
Type of Eligible Applicant [ (check one)	Public Housing Agency PHA Code:	Local Government
(check one)		
   Mailing Address:	Nonprofit	For profit developer applying jointly with a public entity
Executive Officer Name & Title:		
– Telephone:	Fax:	Email:
Primary Contact Name & Title:		
Telephone:	Fax:	Email:
PRINCIPAL TEAM MEMBERS		
Housing Implementation Entity:		
Mailing Address:		
Executive Officer Name & Title:		
Telephone: _	Fax:	Email:
People Implementation Entity:		
Mailing Address:		
Executive Officer Name & Title:		
Telephone:	Fax:	Email:
Education Implementation Entity:		
- Mailing Address:		
Executive Officer Name & Title:		
Telephone:	Fax:	Email:
Neighborhood Implementation Entity:		
– Mailing Address:		
Executive Officer Name & Title:		
- Telephone:	Fax:	Email:
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## **ELIGIBLE TARGET HOUSING**

Your application must focus on severely distressed public and/or HUD-assisted housing. See section I.C for defintions of "public housing," "assisted housing," and "severely distressed housing."

Provide the following information for each target housing project. List each site separately.

D	1				
Project N	lame:				
Type of E	ligible Housing				
(check or	ne)	Public Housing (section 9)	sec	tion 811	
		Project-based section 8	sec	tion 221(d)(3)	
		section 202	sec	tion 236	
	If Public Housing	PIC AMP Number:			
	ii r ubiic riousiiig	"old" Project Number:			
	If Assisted Housing	Contract Number:			
		REMS Number:			
		If FHA Insured, FHA #:			
Physical	Street Address				
(include c	ity, state and ZIP)				
Unit Info	rmation as of Applica	ation Date			
		umber of Units in Project		Number Occupied	
Number of Public and/or Assisted Units in Project			Number Vacant		
		<u> </u>			
Project #	<b>2</b> (if applicable)				
Project N	lame:				
Type of E	ligible Housing				
		D   L.   L.   L.   L.   L.   L.   D.   L.   D.   D	section 811		
	10,	Public Housing (section 9)	sec	11011 011	
		Project-based section 8		tion 221(d)(3)	
		Project-based section 8	sec	tion 221(d)(3)	
		Project-based section 8 section 202	sec		
	If Public Housing	Project-based section 8	sec	tion 221(d)(3)	
		Project-based section 8 section 202	sec	tion 221(d)(3)	
		Project-based section 8 section 202 PIC AMP Number:	sec	tion 221(d)(3)	
	If Public Housing	Project-based section 8 section 202  PIC AMP Number:  "old" Project Number:	sec	tion 221(d)(3)	
	If Public Housing	Project-based section 8 section 202  PIC AMP Number: "old" Project Number:  Contract Number:	sec	tion 221(d)(3)	
	If Public Housing  If Assisted Housing	Project-based section 8 section 202  PIC AMP Number: "old" Project Number:  Contract Number: REMS Number:	sec	tion 221(d)(3)	
Physical	If Public Housing  If Assisted Housing  Street Address	Project-based section 8 section 202  PIC AMP Number: "old" Project Number:  Contract Number: REMS Number:	sec	tion 221(d)(3)	
Physical (include c	If Public Housing  If Assisted Housing  Street Address ity, state and ZIP)	Project-based section 8 section 202  PIC AMP Number: "old" Project Number:  Contract Number: REMS Number: If FHA Insured, FHA #:	sec	tion 221(d)(3)	
Physical (include c	If Public Housing  If Assisted Housing  Street Address ity, state and ZIP)  rmation as of Application	Project-based section 8 section 202  PIC AMP Number:  "old" Project Number:  Contract Number:  REMS Number:  If FHA Insured, FHA #:	sec	tion 221(d)(3) tion 236	
Physical (include country) Unit Info	If Public Housing  If Assisted Housing  Street Address ity, state and ZIP)  rmation as of Application	Project-based section 8 section 202  PIC AMP Number: "old" Project Number:  Contract Number: REMS Number: If FHA Insured, FHA #:	sec	tion 221(d)(3)	

-	<b>3</b> (if aplicable)				
Project N					
Type of Eligible Housing (check one)		Public Housing (section 9)		ection 811	
(CHECK OI	<u> </u>	-			
	<u> </u>	Project-based section 8		ection 221(d)(3)	
		section 202	Se	ection 236	
	If Public Housing	PIC AMP Number:			7
		"old" Project Number:			
	If Assisted Housing	Contract Number:			<u></u>
		REMS Number:			
		If FHA Insured, FHA #:			
Physical :	Street Address				_
(include ci	ity, state and ZIP)				<del>-</del> -
Unit Info	rmation as of Applic	ation Date			
		lumber of Units in Project		Number Occupied	
Nur	mber of Public and/o	r Assisted Units in Project _		Number Vacant	
Proiect #	4 (if applicable)				
Project N	• • •				
Type of E	ligible Housing				
(check or	·	Public Housing (section 9)	section 811		
		Project-based section 8	se	ection 221(d)(3)	
		section 202	se	ection 236	
	If Public Housing	PIC AMP Number:			7
		"old" Project Number:			
	If Assisted Housing	Contract Number:			Ī
		REMS Number:			
		If FHA Insured, FHA #:			
Physical :	Street Address				_
(include ci	ity, state and ZIP)				_
Unit Info	rmation as of Applic				
<u> </u>			Number Occupied		
Number of Public and/or Assisted Units in Project Number Vacant					