

**ROSS - LIST OF RESIDENT  
ORGANIZATIONS SUPPORTING  
NONPROFIT APPLICANTS**

**U.S. DEPARTMENT OF HOUSING  
AND URBAN DEVELOPMENT  
OFFICE OF PUBLIC AND INDIAN HOUSING**

OMB Approval No. 2577-0229  
Expiration date: 02/28/2007

**Instructions for completing this form:** All nonprofit applicants to the ROSS program must complete this form by listing contact information for each resident association supporting your application. Nonprofit applicants must have support from at least one resident association in order to receive funding. Nonprofit applicants can receive funding for working on behalf of one but no more than three resident associations. Attach letters of support to this form.

**Grant to which the applicant is applying:**

\_\_\_\_ RSDM-Family    \_\_\_\_ RSDM-Elderly    \_\_\_\_ Homeownership Supportive Services    \_\_\_\_ Neighborhood Networks

List of Resident Organization(s)			
Name of the Resident Organization/tribe/TDHE	Contact Person, Title, and Telephone Number	Address, City, & State	Housing Authority/Tribe
1.			
2.			
3.			

*The above information is true and correct to the best of my knowledge.*

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

By: \_\_\_\_\_  
*Applicant Executive Director or Other Authorized Representative*

For: \_\_\_\_\_  
*Applicant Name*

---

Public reporting burden for the collection of information is estimated to average fifteen minutes per response. This includes the time for collecting, reviewing, and reporting the data. The information will be used for the ROSS grant. Response to this request for information is required in order to receive the benefits to be derived. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

---