

### CHOICE NEIGHBORHOODS IMPLEMENTATION GRANTS APPLICATION INFORMATION

#### ELIGIBLE NEIGHBORHOOD

Name of Neighborhood \_\_\_\_\_

#### ELIGIBLE APPLICANT

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

**Lead Applicant:** \_\_\_\_\_

Type of Eligible Applicant  Public Housing Agency  Local Government  Tribal Entity  
(check one) PHA Code: \_\_\_\_\_

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  Public Housing Agency  Local Government  Tribal Entity  
(check one) PHA Code: \_\_\_\_\_

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: \_\_\_\_\_

**PRINCIPAL TEAM MEMBERS**

**Housing Implementation Entity:** \_\_\_\_\_

*Mailing Address:* \_\_\_\_\_

*Executive Officer Name & Title:* \_\_\_\_\_

*Telephone:* \_\_\_\_\_ *Fax:* \_\_\_\_\_ *Email:* \_\_\_\_\_

*Primary Contact Name & Title:* \_\_\_\_\_

*Telephone:* \_\_\_\_\_ *Fax:* \_\_\_\_\_ *Email:* \_\_\_\_\_

**People Implementation Entity:** \_\_\_\_\_

*Mailing Address:* \_\_\_\_\_

*Executive Officer Name & Title:* \_\_\_\_\_

*Telephone:* \_\_\_\_\_ *Fax:* \_\_\_\_\_ *Email:* \_\_\_\_\_

*Primary Contact Name & Title:* \_\_\_\_\_

*Telephone:* \_\_\_\_\_ *Fax:* \_\_\_\_\_ *Email:* \_\_\_\_\_

**Neighborhood Implementation Entity:** \_\_\_\_\_

*Mailing Address:* \_\_\_\_\_

*Executive Officer Name & Title:* \_\_\_\_\_

*Telephone:* \_\_\_\_\_ *Fax:* \_\_\_\_\_ *Email:* \_\_\_\_\_

*Primary Contact Name & Title:* \_\_\_\_\_

*Telephone:* \_\_\_\_\_ *Fax:* \_\_\_\_\_ *Email:* \_\_\_\_\_

**Education Implementation Entity:** \_\_\_\_\_

*Mailing Address:* \_\_\_\_\_

*Executive Officer Name & Title:* \_\_\_\_\_

*Telephone:* \_\_\_\_\_ *Fax:* \_\_\_\_\_ *Email:* \_\_\_\_\_

*Primary Contact Name & Title:* \_\_\_\_\_

*Telephone:* \_\_\_\_\_ *Fax:* \_\_\_\_\_ *Email:* \_\_\_\_\_

**ELIGIBLE TARGET HOUSING**

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

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

**Project #1**

**Project Name:** \_\_\_\_\_

**Type of Eligible Housing**

(check one)  Public Housing (section 9)  section 202  section 236  
 Project-based section 8  section 811  Indian Housing  
 Project-based vouchers  section 221(d)(3)

If Public Housing PIC AMP Number: \_\_\_\_\_  
"old" Project Number: \_\_\_\_\_

If Assisted Housing Contract Number: \_\_\_\_\_  
REMS Number: \_\_\_\_\_  
If FHA Insured, FHA #: \_\_\_\_\_

**Physical Street Address**

(include city, state and ZIP) \_\_\_\_\_

**Unit Information as of Application Date**

Total Number of Units in Project _____	Number Occupied _____
Number of Public and/or Assisted Units in Project _____	Number Vacant _____

**Project #2 (if applicable)**

**Project Name:** \_\_\_\_\_

**Type of Eligible Housing**

(check one)  Public Housing (section 9)  section 202  section 236  
 Project-based section 8  section 811  Indian Housing  
 Project-based vouchers  section 221(d)(3)

If Public Housing PIC AMP Number: \_\_\_\_\_  
"old" Project Number: \_\_\_\_\_

If Assisted Housing Contract Number: \_\_\_\_\_  
REMS Number: \_\_\_\_\_  
If FHA Insured, FHA #: \_\_\_\_\_

**Physical Street Address**

(include city, state and ZIP) \_\_\_\_\_

**Unit Information as of Application Date**

Total Number of Units in Project _____	Number Occupied _____
Number of Public and/or Assisted Units in Project _____	Number Vacant _____

**Project #3 (if applicable)**

**Project Name:** \_\_\_\_\_

**Type of Eligible Housing**

**Type of Eligible Housing**

(check one)  Public Housing (section 9)  section 202  section 236  
 Project-based section 8  section 811  Indian Housing  
 Project-based vouchers  section 221(d)(3)

If Public Housing PIC AMP Number: \_\_\_\_\_  
"old" Project Number: \_\_\_\_\_

If Assisted Housing Contract Number: \_\_\_\_\_  
REMS Number: \_\_\_\_\_  
If FHA Insured, FHA #: \_\_\_\_\_

**Physical Street Address**

(include city, state and ZIP) \_\_\_\_\_  
\_\_\_\_\_

**Unit Information as of Application Date**

Total Number of Units in Project _____	Number Occupied _____
Number of Public and/or Assisted Units in Project _____	Number Vacant _____

**Project #4 (if applicable)**

**Project Name:** \_\_\_\_\_

**Type of Eligible Housing**

**Type of Eligible Housing**

(check one)  Public Housing (section 9)  section 202  section 236  
 Project-based section 8  section 811  Indian Housing  
 Project-based vouchers  section 221(d)(3)

If Public Housing PIC AMP Number: \_\_\_\_\_  
"old" Project Number: \_\_\_\_\_

If Assisted Housing Contract Number: \_\_\_\_\_  
REMS Number: \_\_\_\_\_  
If FHA Insured, FHA #: \_\_\_\_\_

**Physical Street Address**

(include city, state and ZIP) \_\_\_\_\_  
\_\_\_\_\_

**Unit Information as of Application Date**

Total Number of Units in Project _____	Number Occupied _____
Number of Public and/or Assisted Units in Project _____	Number Vacant _____