PROJECT INFORMATION SHEET FOR FY 2019/2020

Public Service Capital Improvement Project
Project Name:
Organization:
Mailing Address:
Phone:
Fax:
Contact Person-Program: Name: Phone: E-Mail:
Contact Person-Finance: Name: Phone: E-Mail:
CDBG Allocated: \$
Brief Summary of Project (One Sentence):
HUD Matrix Code: (Department use only) Environmental Review:
(Department use only)
Insurance: (Department use only) Approved Expires
General Liability: Auto Liability: Worker's Compensation: