

APPLICATION COVER SHEET (Tab 1)

FY2014 REQUEST FOR APPLICATION (RFA)

AGENCY / DEVELOPER / APPLICANT INFORMATION: _____

Legal Name: _____

Organization's Fed. Tax or Employer Identification Number (TIN /EIN): _____

Organization's Dun & Bradstreet D-U-N-S # (Required): _____

To obtain a DUNS # please call 1.866.705.5711 or visit <http://fedgov.dnb.com/webform>)

Contact Person _____

Phone: _____

e-mail: _____

MAILING ADDRESS (P.O. Boxes will not be accepted):

Address Line 1 _____

Address Line 2 _____

City _____

State _____

Zip+4 _____

To answer the questions below, you may obtain the information at the following link:

<http://gisims2.miamidade.gov/Cservices/CSReport.asp?>

County Commission District(s) where activity is located

--Please circle District number(s)

1 2 3 4 5 6 7 8 9 10 11 12 13
County Wide

County Commission District(s) where clients reside (service area):

--Please circle District number(s)

1 2 3 4 5 6 7 8 9 10 11 12 13
County Wide

Neighborhood Revitalization Strategy Area(s):

Low-Mod Area (LMA Benefit Eligible Block Group(s) _____

Opa-locka _____

South Miami _____

Goulds _____

Model City _____

Biscayne North _____

Leisure City/Naranja _____

West Little River _____

Perrine _____

Cutler Ridge _____

Are you applying for Homeless Funds? Yes ___ No ___

ACTIVITY INFORMATION:

Activity Title: _____

For this activity, please list the total amount of HOME/SHIP/ESG funds requested:

\$ _____