2079 EAST 9TH ST, 5-300 CLEVELAND, OH 44115 216.443.3700 COUNTYPLANNING.US

2019 Community Planning Grant Program APPLICATION FOR PLANNING SERVICES

Applications Open: Friday, May 3rd, 2019

Applications Close: Friday, June 7th, 2019

Project Name:			
Project Location:			
Applicant Community:	Date of Application:		
If Joint Application, list co-applicants:			
Cooperation Agreement Attached: Previously Awarded Planning Grant Funds: If yes, name of project:	Yes Yes	No No	N/A
Applicant Contact / Title:			
Address:			
Phone:Email:			
Federal IRS Tax ID Number:			
County Council District:			
Internal Use Only:	ition Received / Init	ials	



2019 COMMUNITY PLANNING GRANT PROGRAM APPLICATION
Page 2 of 7

Describe the Project (One (1) Page Maximum)



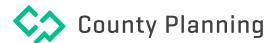
2019 COMMUNITY PLANNING GRANT PROGRAM APPLICATION
Page 3 of 7

What is your community's need for professional planning services? (One (1) Page Maximum)



2019 COMMUNITY PLANNING GRANT PROGRAM APPLICATION
Page 4 of 7

What does your community hope to achieve through this planning process? (One (1) Page Maximum)



2019 COMMUNITY PLANNING GRANT PROGRAM APPLICATION
Page 5 of 7

Who and what will this study impact? At both the regional and local scale? (One (1) Page Maximum)



2019 COMMUNITY PLANNING GRANT PROGRAM APPLICATION
Page 6 of 7

How does your community plan to coordinate implementation of any recommendations proposed by this planning process? (One (1) Page Maximum)



2019 COMMUNITY PLANNING GRANT PROGRAM APPLICATION
Page 7 of 7

(Attach additional pages if necessary)

APPLICANT CERTIFICATION

I HEREBY CERTIFY that I have the authority to apply for professional planning assistance on behalf of the entity described herein, and that the information contained herein and attached hereto is true, complete and correct to the best of my knowledge.

IN WITNESS THEREOF, the undersigned, being duly authorized so to do, have signed this application.

City / Village:		
Mayor / City Manager:	Signature	Date
Printed Name / Title:		
CO-APPLICANTS (if applicable)		
City / Village:	City / Village:	
Mayor / City Manager:	Mayor / City N	Manager:
Signature Date	Signatur	e Date
Printed Name / Title:	Printed Name	e / Title: