



**CT Dept. of Economic and Community Development  
Office of Brownfields Remediation & Development**

**Municipal Brownfield Grant Program Application (Assessment-Only)**

**MULTI-PROJECT APPLICATION COVER SHEET**

*(Councils of Government and Brownfield Land Banks Only)*

**1. Applicant:**

**Contact Name:**

**Title:**

**Telephone:**

**Email:**

**2. Type of Organization**

☐ **Regional Council of Government**   ☐ **Brownfield Land Bank**

**3. Cumulative Total Amount of Assistance Requested (all project) : \$**

Please provide a breakout of projects & the amount of funding requested per project:

<b>Project Name</b>	<b>Project Address</b>	<b>Municipality</b>	<b>Amount of Assistance Requested</b>
		<b>TOTAL</b>	

\*Maximum (Cumulative Total) Request Not-to-Exceed \$500,000

\*\*Individual project minimum = \$100,000/maximum = \$200,000