



Ned Lamont
Governor

STATE OF CONNECTICUT
DEPARTMENT OF HOUSING



Seila Mosquera-Bruno
Commissioner

Intent to Apply Form

- The Town of _____ intends to submit a Small Cities Application for the 2020 competitive application round.
- Proposed project name: _____
- Proposed project activity: _____
- The proposed project description: _____
- The Town will submit an application in the amount of: \$ _____
- Does the Town have a Certified Grant Administrator (CGA) on staff: ___ Yes ___ No
- If no, will the assigned town staff(s) be certified by June 30, 2020? ___ Yes ___ No
- The Town plans to advertise for a consultant: ___ Yes ___ No
- If consultant is in place, please indicate name of firm: _____
- Is the consultant certified in Connecticut: ___ Yes ___ No
- If no, will the consultant be certified by June 30, 2020? ___ Yes ___ No
- Town CEO: _____ Date: _____
- Phone: _____ Email: _____
- Address: _____

Street	Town/City	Zip
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Note: Email completed form to Miguel Rivera at rivera.miguel@ct.gov by **February 28, 2020**.

Please note that all proposed projects must meet the eligibility requirement and national objective criteria. It is understood that this project could change by the time applications are submitted.