**Intent to Apply for Small Cities Funding Form\***

*Please note that all proposed projects must meet the eligibility requirement and national objective criteria. It is understood that projects sometimes change by the time applications are submitted, so please communicate any changes to us immediately.*

Seila Mosquera-Bruno

*Commissioner*

Ned Lamont

*Governor*

The City/Town of       intend to submit a Small Cities Application for the Choose an item. competitive application round.

Proposed project name:

Proposed project activity (is this SSHP): Choose an item.

The proposed project description:

What year was the building(s) built (if applicable):

Based on the preliminary determination of the ERR, is an ESA Phase 1 required? Choose an item.

**If yes**, check all Toxins and or chemicals (per Statutory Checklist) subject to testing based on the initial inspection (please list all other agents not listed):

[ ] **Lead** [ ]  **Radon** [ ] **Asbestos** [ ]  **Mold** [ ]  **Other**

Other(s):

The City/Town will submit an application in the amount of: $

Does the Town have a Certified Grant Administrator (CGA) on staff:  **Choose an item.**

If no, will the assigned town staff(s) be certified by October 2023? **Choose an item.**

The City/Town plans to advertise for a consultant: **Choose an item.**

If a Consulting Team (more than one firm) has been procured for Blended funds CDBG/SSHP applications, a cooperative agreement is necessary. Indicate the name of the **Firm1:**       **Firm2:**       **Name of the Lead Firm**:

Is the consultant certified in Connecticut: **Choose an item.**

If no, will the consultant be certified by October/November 2023? **Choose an item.**

**Provide the Staff/Consultant responsible for submitting the application:**

**Name**:       **Email**:       **Phone**:

**Name**:       **Email**:       **Phone**:

City/Town CEO:       Date:      M/D/YYYY

Phone:       EXT       Email:

Address:                  5-DIGIT

 Street Town/City Zip

*\*Email the completed form to* ***DOH.CDBGapps@ct.gov*** *by* ***Sunday, April 30, 2023 COB***