

## **COMMUNITY MT**

## **Community Development Block Grant Program**

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## **CDBG Planning Grant Completion Report**

Planning Completion Reports must be submitted for approval by the Department of Commerce within 60 days of completion of the project.

completion of the project.		
A. Grantee		
B. Primary contact		
C. Phone & Email		
<b>D.</b> County, City, Zip Code		
E. DOC Contract Number		
F. Planning project		
	Contractor Name	City, State
<b>G.</b> Name and location of all primary contractors, subcontractors, and sub- recipient entities engaged in any of the activities described in Section 6 SCOPE OF WORK of CONTRACT.		
H. Current status of planning project	Finished	
I. Project Completion Date		
J. Cumulative costs incurred over life of project		
K. Grant funds remaining		

L. Project accomplishments		
M. Steps the Grantee will pursue as a result of this planning project. Please indicate whether the Grantee intends to apply for CDBG project grant funds.		
N. Any Additional Comments		
To the best of my knowledge and belief, the information provided on this form is true and correct.		
Signature:		
Title:		
Date:		