## COMMUNITY MT

Community Development Block Grant (CDBG)
30I S Park Avenue | PO Box 200523 | Helena, MT 59620-0523
Phone: 406-84I-2770 | Fax: 406-84I-277 | | TDD: 406-84I-2702 |comdev.mt.gov

## CDBG PLANNING GRANT REQUEST FOR FUNDS

Local Government/Grantee: $\qquad$

Address: $\qquad$
Contract Number: $\qquad$

Draw Request Number: $\qquad$
Amount Requested: $\qquad$
Type of Planning Project: $\qquad$
Please provide a cover letter with verification of expenses and include the following documentation:
$\square$ Competitive procurement documentation (including affidavit of RFP/RFQ publication); OR
$\square$ Documentation showing limited solicitation requirements have been met per Section VIII of the CDBG
Application Guidelines for Housing \& Public Facilities Planning Grants;
$\square$ Documentation that Section 3 and Disadvantage Business Enterprise requirements were met;

Signed Professional Services Agreement with Consultant;


Consultant's name and DUNS number;


Evidence of expenditure and proof of local match (In-kind match isineligible);

Proof of Worker's Compensation Insurance (per Section 25 of the Contract);
Certificate of Liability Insurance coverage with MDOC listed as additional insured (per Section 20 of the Contract);
Progress Report with first draw request;

First draw: draft of final product (Growth Policy, Housing Needs Assessment, CIP, PER, etc);
Final draw: evidence of compliance with Contract's scope of work; final and complete product submitted in both printed and electronic copies; documentation showing local match requirements have been met; andCompletion Report with final draw request.

