**Community Project Assistance Fund (CPAF)**

2025-2026 CPAF Grant Application Form

Logo, company name

Description automatically generated

**Project Title (6 words max):** Insert Project Title

**Municipality:** Insert Municipality

**Points of Contact & Basic Project Information:**

**Point of Contact Name:** Insert name

**Point of Contact Email:** Insert email

**Point of Contact Phone Number:** Insert phone number

**Point of Contact Department:** Insert department

**Mailing Address:** Insert address

Will the Point of Contact also serve as the Project Manager?

Yes  No

If not, please provide the following information, otherwise leave blank:

**Project Manager Name:** Insert name

**Project Manager Email:** Insert email

**Project Manager Phone Number:** Insert phone number

**Project Manager Department:** Insert department

**Project Type** *(Select all that apply):*

Design/Engineering/Permitting Work

Produce a Study or Plan (feasibility study, needs assessment, strategic plan, etc.)

Other, please specify:

Is the applicant intending to use this grant as a match for a Federal or State grant?

Yes  No

**Project Budget:**

**Requested Grant Amount Here:** Insert dollar amount

# **Project Overview**

1. **Project Description & Scope of Work**

*What is the project scope, how will it be completed, and by whom?*

Insert response here.

1. **Project Purpose & Benefits**

*How will this project help to address community challenges/vulnerabilities to improve community resiliency, stormwater management, and/or enhance public infrastructure?*

Insert response here.

*What benefits will the project deliver? Who will benefit? Will the project deliver multiple co-benefits? (ex. resiliency, environmental, economic development, quality of life, etc.)*

Insert response here.

1. **Timeline & Project Tasks**

*When will the project start and finish, including key milestones? Please provide a list of key project tasks. Please note that all CPAF projects MUST be completed with* ***18 months*** *of a grant agreement being executed with the Infrastructure Bank.*

**Task 1:** insert task name and anticipated completion date

**Task 2:**

**Task 3:**

Add additional tasks as needed

1. **Budget**

*How will the requested grant funds be used? Aside from the requested grant funds, do you need to acquire additional capital to complete the project?*

Insert response here.

*Please complete the table below:*

|  |  |
| --- | --- |
| **Use of Funds** | **Grant Amount** |
| Contractual Expenses for Design/Engineering/Permitting |  |
| Contractual Expenses for a Study/Plan |  |
| Other (please specify) |  |
| **Total:** | **$** |

*The maximum amount which can be requested for one or more projects per municipality is $50,000.*

# Authorization of Grant Proposal Submission

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Signature of Chief Municipal Officer Date

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Name and Title