

J. Jay Anderson, President Jeffrey Belair, Treasurer

Mark McKenna, Vice President Theodore Kozlowski, Clerk

**COMMUNITY DEVELOPMENT**

**TECHNICAL ASSISTANCE GRANT**

**APPLICATION**

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(Business Name) (Date Submitted)

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(Name of Applicant) (Amount Requested from PERC)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Appl. No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature of Applicant) Date Rec'd \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rec'd by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PERC COMMUNITY DEVELOPMENT**

**TECHNICAL ASSISTANCE GRANT PROGRAM**

**I. PROGRAM DESCRIPTION**

**GENERAL**: The Pittsfield Economic Revitalization Corporation (PERC) provides grants for specialized technical assistance to owners of and persons developing small businesses and microenterprises in Pittsfield. The matching grants are intended for applicants and potential applicants of PERC’s small business loan program, but grants may also be made to eligible applicants of other public or private financing programs. The grants are designed to provide funding to businesses unable to obtain such funding in the private market. The source of funding for this program is the Federal Community Development Block Grant (CDBG) made available to PERC by the City of Pittsfield.

**ELIGIBILITY REQUIREMENTS**:

* Project must be located in Pittsfield.
* Company must meet the SBA definition of a small business:
* Independently owned.
* Does not have a net worth more than $18 million.
* Does not have an average income after Federal income taxes for the preceding two years in excess of $6 million.
* Applicant is concurrently making application for a business loan. Otherwise, there must be a reasonable expectation that, upon completion of the technical assistance grant, the applicant will be prepared to apply for a business loan.
* Applicant must create or retain at least one full-time equivalent, permanent job per $35,000 of CDBG funds used; or applicant is developing a micro-enterprise and is qualified by income to receive assistance:
* Individuals are eligible if they are Pittsfield residents developing a micro-enterprise (a commercial enterprise that has five or fewer employees, one or more of whom owns the enterprise) and meet low- to moderate-income guidelines.
* Applicant, if not a micro-enterprise, must guarantee that at least 51% of jobs created or retained will be held by low- or moderate-income residents of Pittsfield as defined by HUD income guidelines.
* Applicant shall provide matching funds on a dollar-for-dollar basis. Waivers, in cases of extreme financial hardship, shall be at the discretion of PERC.

**APPLICATION**: Applications are accepted by PERC, subject to the availability of funds, throughout the year. They are reviewed by PERC’s Finance Committee prior to a recommendation being made to the Board of Directors.

The application shall include a statement of the purpose of the Technical Assistance Grant and benefit to be realized. Completed applications shall be accompanied by appropriate documentation supporting the request, including, as applicable:

1. proposal from the consultant with a description of services to be provided;
2. documentation of the consultant’s expertise;
3. budget and price quote;
4. timetable for use of the grant;
5. verification of the matching source of funds;
6. latest tax return of micro-enterprise owner for income verification;
7. business plan, if applicant is a start-up;
8. other supporting documentation, as appropriate.

Return completed application to: Pittsfield Economic Revitalization Corp., City Hall, 70 Allen Street, Room 205, Pittsfield, MA 01201. If you have any difficulties completing this application, please contact PERC at 499-9378.

**ELIGIBLE USES:**

I. Pre-Start-up (for microenterprise applicants only):

* Market studies, such as primary market research, determination of market niche, market testing
* Legal advice regarding business formation
* Consultation regarding form of organization
* Consultation regarding business planning, such as architectural and engineering, appraisal
* Consultation regarding set-up of accounting system

II. Start-up:

* Accounting, such as set-up and implementation of accounting system
* Bookkeeping services
* Cash flow management
* Marketing related to initial promotion, such as advertising, signage, custom campaigns
* Management advice

III. Post Start-up:

* Improvement of managerial skills
* Marketing for expansion to new market area: market testing, primary and secondary market research, promotion, etc.
* Employee management
* Payroll accounting, tax reporting, withholding
* Improvement of financial controls

**INELIGIBLE PROJECTS:**

* General promotion of the community as a whole.
* Assistance to professional sports teams.
* Assistance to privately owned recreational facilities that serve a higher income clientele.
* Acquisition of land for which the specific proposed use has not been identified.
* Businesses that have unresolved non-compliance finding for previous CDBG assistance.

MAXIMUM GRANT AMOUNT: Up to $20,000 per applicant / business, matched on a dollar-for-dollar basis.

APPROVAL: Applications will be reviewed by the application will be reviewed by the PERC Finance Committee. Then the application will receive approval or disapproval at PERC's monthly Board meeting when a completed application is submitted at least ten days before a scheduled meeting.

II. PROJECT APPLICANT

A. Applicant's Legal Name:

DUNS Number:

Street Address:

City, State, and Zip:

Telephone: (\_\_\_\_) E-mail:

B. Ownership/Management: All officers, directors, and owners of 20% or more of the applicant business are listed below:

Name, Address Office Held and

Telephone number Social Security # % of Ownership

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C. Have any of the persons listed above ever been charged with, or convicted of any criminal offenses, other than a minor motor vehicle violation?  Yes  No

D. Has the applicant or management of applicant been informed of any current or on going investigation of the applicant with respect to possible violations of state or federal securities laws?  Yes  No

E. Has the applicant or any person listed above been connected with, been in receivership, or adjudicated as bankrupt?  Yes  No

F. Is the applicant or any person listed above aware of any threatened or pending litigation which would impair the operation of the business?  Yes  No

If you answered yes to any of the above questions, please explain:

G. Is the applicant a legal resident of the United States?  Yes  No

**III. PROJECT REPRESENTATIVES**

Applicant's Regular Bank/Branch:

Contact Name:

Legal Representative(s):

Accountant(s):

**IV. PROJECT SUMMARY** Brief narrative description of the project:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**V. SOURCES AND USES OF FUNDS** (Include requested grant and matching funds.)

Source of Funds

Use of Funds Amount (Grant, Applicant, Other)

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TOTAL $

**VI. EMPLOYMENT**

A. Total number of current employees: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number part-time: \_\_\_\_\_\_\_\_\_\_ Number full-time: \_\_\_\_\_\_\_\_\_\_\_\_\_

B. ETHNICITY (Optional): 🞏 Hispanic or Latino 🞏 Not Hispanic or Latino

RACE:

🞏 White 🞏 American Indian/Alaskan Native and White

🞏 Black/African American 🞏 Asian and White

🞏 Asian 🞏 Black/African American and White

🞏 American Indian/Alaskan Native 🞏 American Indian/Alaskan Native and Black/African American

🞏 Native Hawaiian/Other Pacific Islander 🞏 Other Multi-racial

C. Estimate # of new jobs created in next 12 months: \_\_\_\_\_\_\_\_

24 months: \_\_\_\_\_\_\_\_

**VII. PROJECT IMPACT**

1. How will the technical assistance grant benefit your business?

B. Do you expect to apply for a loan afterwards?  Yes  No

If yes, where do you expect to apply?  Bank  PERC

 Other

C. How much has been invested in your business?

Loan $

Personal Funds $

Other ( ) $

**ATTACHMENT A**

**NOTE: PLEASE SIGN ONE OF THE THREE CERTIFICATIONS**

**ASSOCIATED WITH THE CONDITION TO BE MET.**

**CERTIFICATION STATEMENT FOR MICRO-ENTERPRISES:**

**COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM**

570.3 Definition

*Micro-enterprise* means a commercial enterprise that has five or fewer employees, one or more of whom owns the enterprise.

570.201 Basic Eligible Activities

(o)(1) The provision of assistance ... to facilitate economic development by: ... (ii) Providing technical assistance, advice, and business support services to owners of micro-enterprises and persons developing micro-enterprises...

I certify that I am, or plan to be, an owner of a micro-enterprise, as defined above, and I further certify that I am a low- or moderate-income resident of Pittsfield.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

**ATTACHMENT A**

**EMPLOYMENT CERTIFICATION STATEMENT FOR SMALL BUSINESSES:**

**COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM**

570.3 Definition

*Low- and moderate-income persons or low- income person* means a member of a family having an income equal to or less than the Section 8 low- income limit established by HUD. Unrelated individuals shall be considered as one-person families for this purpose. (The method for determining income under Section 8 Housing Assistance Payments program need not be used for this purpose.)

570.208 Review for compliance with national objectives.

((1) Activities benefiting low- and moderate-income persons)

(a)(4) *Job creation or retention activities.* An activity designed to create or retain permanent jobs where at least 51 percent of the jobs, computed on a full time equivalent basis, involve the employment of low- and moderate-income persons. As a general rule, each assisted business shall be considered to be a separate activity for purposes of determining whether the activity qualifies under this paragraph. However, in certain cases such as where CDBG funds are used to acquire, develop or improve real property (e.g., a business incubator or an industrial park) the requirement may be met by measuring jobs in the aggregate for all the businesses that locate on the property, provided such businesses are not otherwise assisted by CDBG funds...For an activity that creates jobs, the recipient must document that at least 51 percent of the jobs will be held by, or will be available to, low- and moderate-income persons. For an activity that retains jobs, the recipient must document that the jobs would actually be lost without the CDBG assistance and that either or both of the following conditions apply with respect to at least 51 percent of the jobs at the time the CDBG assistance is provided: The job is known to be held by a low- or moderate-income person; or the job can reasonably be expected to turn over within the following two years and that steps will be taken to ensure that it will be filled by, or made available to, a low- or moderate-income person upon turnover. Jobs will be considered to be available to low- and moderate-income persons only if:

(i) Special skills that can only be acquired with substantial training or work experience or education beyond high school are not a prerequisite to fill such jobs, or the business agrees to hire unqualified persons and provide training; and

(ii) The recipient and the assisted business take actions to ensure that low- and moderate-income persons receive first consideration for filling such jobs.

I certify that (firm name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will use its best efforts to create \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (jobs) within (time frame) \_\_\_\_\_\_\_\_\_\_\_\_\_ as a result of the CDBG technical assistance grant. A minimum of 51% of the jobs created will be held by or will be made available to low- and moderate-income persons in accordance with 24 CFR 570.3 and 570.901 (b).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

**ATTACHMENT A**

**MEETING ANOTHER NATIONAL OBJECTIVE:**

**COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM**

If the proposed project is unable to satisfy the above conditions, the project must either prevent or eliminate slums or blight or meet an urgent need.

570.208

(b) *Activities which aid in the prevention or elimination of slums or blight*. Activities meeting one or more of the following criteria, in the absence of substantial evidence to the contrary, will be considered to aid in the prevention or elimination or slums or blight:

(1) *Activities which aid in the prevention or elimination of slums or blight on an area basis*. An activity will be considered to address prevention or elimination of slums or blight in an area if:

(i) The area, delineated by the recipient, meets a definition of a slum, blighted, deteriorated or deteriorating area under State or local law.

(ii) Throughout the area there is a substantial number of deteriorated or deteriorating buildings or the public improvements are in a general state of deterioration;

(iii) Documentation is maintained by the recipient on the boundaries of the area and the condition which qualified the area at the time of its designation; and

(iv) The assisted activity addresses one or more of the conditions which contributed to the deterioration of the area....

(2) *Activities to address slums or blight on a spot basis*. Acquisition, clearance, relocation, historic preservation and building rehabilitation activities which eliminate specific conditions of blight or physical decay on a spot basis not located in a slum or blighted area will meet this objective. Under this criterion, rehabilitation is limited to the extent necessary to eliminate specific conditions detrimental to public health and safety.

(3) *Activities to address slums or blight in an urban renewal area.* An activity will be considered to address prevention or elimination of slums or blight in an urban renewal area if the activity is:

(i) Located within an urban renewal project area or Neighborhood Development Program (NDP) action area; i.e. an area in which funded activities were authorized under an urban renewal Loan and Grant Agreement or an annual NDP Funding Agreement, pursuant to Title I of the Housing Act of 1949; and

(ii) Necessary to complete the urban renewal plan, as then in effect, including *initial* land redevelopment permitted by the plan.

(c) *Activities designed to meet community development needs having a particular urgency*. In the absence of substantial evidence to the contrary, an activity will be considered to address this objective if the recipient certifies that the activity is designed to alleviate existing conditions which pose a serious and immediate threat to the health or welfare of the community which are of recent origin or which recently became urgent, that the recipient is unable to finance the activity on its own, and that other sources of funding are not available. A condition will generally be considered to be of recent origin if it developed or became critical within 18 months preceding the certification by the recipient.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

**ATTACHMENT B**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **REQUEST FOR VERIFICATION OF EMPLOYMENT** | **APPLICATION NUMBER** | | | |
|  |  |  |  |
| Name, Address, and Zip Code of Applicant | Date of Request: | | | |
| Note to Employer:  The applicant has authorized this Agency in writing to obtain verification from any source as needed. Your verification of employment is for the confidential use of this Agency. | | | |
| Name, Address and Zip Code of  Applicant's Employer | Please furnish the information requested below and return this form, using the stamped, addressed envelope provided. | | | |
| **EMPLOYER'S VERIFICATION** | | | | |
| Position Held | Rate of Pay\* (estimated, if not actually paid on hourly or annual basis.) | | | |
| Dates of Employment:  Start\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  End\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | HOURLY | | ANNUAL | |
| $ | | $ | |
| Probability of Continued Employment | ADDITIONAL COMPENSATION-ACTUAL AMOUNTS RECEIVED PAST 12 MONTHS | | | |
| Overtime | | $ | |
| Other Remarks | Commissions | | $ | |
| Bonus | | $ | |
| \* If applicant is in military service, give income on monthly basis as follows: | | | |
| Base Pay: | | $ | |
| Quarters & Subsistence: | | $ | |
| Flight or hazard duty allowance: | | $ | |
| Signature of Employer  The above information is furnished in strict confidence, in response to your request. | Please return this form to:  Pittsfield Economic Revitalization Corp.  City Hall – 70 Allen St, Rm 205  Pittsfield, MA 01201 | | | |
| \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date Signature  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Title | Authorization  I hereby authorize release of the above requested information. | | | |
| X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Applicant | | | |

**ATTACHMENT C**

**REQUEST FOR VERIFICATION OF INCOME**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| For income other than from employment sources  Community Dev. Technical Assistance Grant Program | **APPLICATION NUMBER** | | | |
|  |  |  |  |
| Name, Address, and Zip Code of Applicant  for Loan/Grant | Date of Request: | | | |
| The applicant referred to has applied for a CD technical assistance grant under the Community Development Technical Assistance Program. The applicant has authorized this Agency in writing to obtain verification from any source named in the application. | | | |
| Name, Address and Zip Code of Agency | Your verification of income is for the confidential use of this Agency. Please furnish the information requested below and return this form, using the stamped, addressed envelope provided. | | | |
| Social Security #: |  | | | |
| Type of Aid |
| Monthly Payments |
| Signature of Agency  The above information is furnished in strict confidence, in response to your request. | Please return this form to:  Pittsfield Economic Revitalization Corp.  70 Allen Street - City Hall  Pittsfield, MA 01201 | | | |
| \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date Signature  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Title | Authorization  I hereby authorize release of the above requested information. | | | |
| X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Applicant / Date | | | |

# ATTACHMENT D

**ACKNOWLEDGMENT REGARDING PUBLIC**

**FUNDING AND INFORMATION DISCLOSURE**

**AND**

**AUTHORIZATION FOR VERIFICATION OF INCOME ELIGIBILITY**

The undersigned applicant acknowledges that the technical assistance grant program for which application is made is funded in whole or in part by the U. S. Department of Housing and Urban Development (HUD) through the Community Development Block Grant (CDBG) program and that because these grants are made with public funds, information supplied by the applicant may be considered public information pursuant to applicable federal and/or state laws and regulations.

Further, the undersigned authorizes the Pittsfield Economic Revitalization Corporation (PERC) to verify all information furnished in connection with the application for a technical assistance grant under the CDBG program. The information that may be verified includes, but is not limited to, the following: employment, pensions, mortgages, deposits, and any other income.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date