INDIAN NATIONS COUNCIL OF GOVERNMENTS (INCOG)

Rural Economic Action Plan (REAP) Application

ECONOMIC/COMMUNITY DEVELOPMENT - FY 2018

I.	APPLICANT INFORMATION		
A.	Name:	County:	
В.	Address:	Phone:	
		Fax:	
C.	Applicant's Chief Elected Official:		
D.	Applicant's Contact Person (if other than chief elected official):		
	Name:		
	Address:	Phone:	
		Fax:	
	E-mail:		
E.			
II.	PROJECT INFORMATION:		
A.	Project Description:		
B.	Project Location (attach map of target area):		
C.	Amount of Grant Request:		
D.			
E.			
F.	Total number of people benefiting fro	om project:	
G.	Project Budget (Form attached)		

III. REGIONAL OBJECTIVES

A. Does the project enhance economic development? Yes No If yes, please explain_____

В	Does the project promote intergovernmental cooperation? Yes No If yes, please explain.		
С	Does the project promote public health and safety? Yes No If yes, please explain		
	Is the project included regional or local plans such as long range or capital improvement plans? Yes INo If yes, please provide documentation.		
E.	Is the project multijurisdictional? Yes No If yes, please explain		
IV.	ECONOMIC/COMMUNITY DEVELOPMENT PROJECT IMPACT		
A.	Does the Project create Jobs (attach additional sheets if necessary):		
В.	Explain Impact (attach additional sheets if necessary):		
V	LOCAL EFFORT		

A. Narrative of local effort in the project/area (Attach letters designating source and amount of local match and/or agreements with other contracting entities.)

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3.	Source*	Amount
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*Sources may be local funds, other grant funds, volunteer labor (list # of hours at \$10/hour) or donated materials (give actual or estimated worth).