



I. APPLICANT INFORMATION

Applicant	Organization: Contact Name: Address: Phone Number: Email: Authorized representative for execution of contract(s): Name: Title:
Project Request	Name of Project: Amount of funding request: \$ Total Project costs: \$

II. TECHNOLOGY ASSISTANCE PROJECT INFORMATION

Technology Type:	<input type="checkbox"/> Site Selection Software <input type="checkbox"/> Digital Marketing Tools <input type="checkbox"/> Business Intelligence/Economic Data Systems <input type="checkbox"/> Other:
Describe the specific technology you are purchasing. Include the vendor's name and the primary functions of the software.	



Describe the city/township's goals and needs for the software. Please explain why the software is needed.	
Who will lead the upkeep efforts of this software (i.e. City, Third-Party, etc.)?	
How will the city/township fund the ongoing subscription or maintenance costs?	
Estimated time for software implementation?	

Provide details of funding sources for the technology/software.

Source of Funds	Amount	Committed	Pending
	\$		
	\$		
Total:	\$		

The CDA reserves the right to seek additional information after initial review of the application.



REQUIRED RESOLUTION

The application must be approved by the respective city/township council via resolution that includes the Required Resolution Provisions (see sample resolution below).

Sample Resolution

WHEREAS, the City or Township of _____ has identified a proposed project within the City or Township that meets the Carver County Community Development Agency (“CDA”) Community Growth Partnership Initiative Grant (“CGPI”) program’s purpose and criteria; and

WHEREAS, the City or Township has identified economic development technology tools and systems to improve its ability to attract industry and support economic growth; and

WHEREAS, the City or Township has the capacity and capability to ensure the proposed technology assistance will be completed and administered within the CGPI guidelines; and

WHEREAS, the City or Township has the legal authority to apply for financial assistance; and

WHEREAS, the City or Township is supportive of affordable housing and of the CDA’s mission to improve the lives of Carver County residents through affordable housing and community development.

NOW THEREFORE BE IT RESOLVED that the City or Township of _____ approves the application for funding from the Carver County CDA Community Growth Partnership Initiative Grant program.

BE IT FURTHER RESOLVED that if the application is approved by the Carver County CDA, _____, the _____, is hereby authorized to execute such agreements as are necessary to receive and use the funding for the proposed project.