CDBG CONTRACT AMENDMENT REQUEST FORM

This form must be completed and submitted to the Nebraska Department of Economic Development when making a contract amendment request. Complete the sections for <u>each</u> type of amendment requested. Along with this form, you are required to submit <u>all</u> attachments identified under the applicable amendment type.

DED Program Representative						
By completing this form, I confirm that this project is current on all reporting requirements.						
Name, Organization						
Email						
Requesting Amendment # Date of Last Project Status Report (PSR):						
Extension of Contract End Date						
Original Contract End Date						
Current Contract End Date including any previously approved extensions						
Proposed Contract End Date						
Required Attachments						
Attachment 1: Letter from the Chief Elected Official including:						
Certification that the local governing body has approved the extension.						
Identification and reasons for the proposed amendment, including:						
a. Changes to the nature of the project requiring the amendment;						
b. Steps implemented to avoid any future amendment requests for the same reasons.						
3. Where additional local matching funds are required due to this extension, certification that such						
funds are available.						
Attachment 2: Revised implementation schedule showing completion of major milestones for all activities.						
Decrease in proposed accomplishments						
Original Proposed Accomplishments Amended Proposed Accomplishments						
Required Attachments						
Attachment 1: A letter from the Chief Elected Official including:						
Certification that the local governing body has approved the decrease in proposed						
accomplishments;						
Identification and reasons for the proposed amendment; including						
a. Changes to the nature of the project requiring the amendment;						
b. Steps implemented to avoid any future amendment requests for the same reasons.						
3. If additional local matching funds are required due to this decrease, certification that such funds are						
available.						
Attachment 2: Revised implementation schedule showing completion of major milestones for all activities.						
Amendment to Housing Program Guidelines						
Required Attachments						
Attachment 1: Letter from the Chief Elected Official including:						
Certification that the local governing body has approved the amendment to the housing program						
guidelines;						

available. **Attachment 2:** If the housing program guidelines amendment will affect major milestones, a revised implementation schedule showing completion of major milestones for all activities.

3. If additional local matching funds are required due to this amendment, certification that such funds are

Attachment 3: A complete copy of the proposed revised housing program guidelines.

2. Identification and reasons for the proposed amendment;

☐ Budget/Source	es and Uses Amend	ment				
Original Contract E						
Activity Name	Activity Number	CDBG Funds	Other Funds	Total Funds		
					_	
					_	
Total						
TOTAL						
Proposed Budget A	After Amendment					
Activity Name	Activity Number	CDBG Funds	Other Funds	Total Funds		
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Total						
 Certific 	etter from the Chief El cation that the local g ication and reasons f	overning body has a or the proposed bud	approved the budget get amendment; incl	luding		
 a. Changes to the nature of the project requiring the amendment; 						
b. Steps implemented to avoid any future amendment requests for the same reasons.						
 If additional local matching funds are required due to this amendment, certification that such funds are available. 						
4. If the amendment includes a new activity, certification that the activity meets the national objective.						
Attachment 2: Minutes from the public hearing held on the proposed amendment (required if reallocating more						
than 10% of the total original grant amount).						
Attachment 3: If the budget amendment will affect major milestones, a revised implementation schedule showing completion of major milestones for all activities.						
	owing completion of ertification of re-evalu			this form is include	od in the CDRG	
	Iministration Manual			uns form is include		
-		FOR DED US				
Program Penresen	tative Recommendation		eny consultation			
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					Cianatura	
					Signature	
Date amendmer	nt request received				Printed Name/Title	
approved	denied					

Date