2023 RURAL COMMUNITY RECOVERY PROGRAM

**NOTICE OF INTENT TO APPLY**

Submit by **Monday, June 3, 2024.** Email to Brittany Piperat**brittany.piper@nebraska.gov****.**

DED requires submission of this form to ensure applicants will have access to the application submission portal in AmpliFund, DED’s grants management system. Applicants that submit this form after this date will not be eligible to apply.

Applicants should submit one form per project application. Applicants may only apply for funding for one project. Refer to program guidelines for further information.

**APPLICANT NAME:** Click or tap here to enter text.

**PROJECT NAME:** Click or tap here to enter text.

**PROJECT LOCATION:** Click or tap here to enter text. ***(City and County)***

**AMOUNT REQUESTED:** Click or tap here to enter text.

**PROJECT TYPE:** [ ]  Installation of Public Features

 [ ]  Site Development for Affordable Housing

**PROJECT DESCRIPTION:** Click or tap here to enter text. ***(Brief summary of project purpose)***

**List of person(s) needing AmpliFund access:**

|  |  |
| --- | --- |
| **NAME** | **EMAIL** |
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