**Attachment C**

**Public Housing Innovations Application Cover Sheet Form**

|  |
| --- |
| Housing Authority:  Development(s) Name:  Development Number:  Development Address:  Program Applied for (PEHO 2 or Gateway Program):  (If PEHO 2) Developer Co-Applicant: |

(Please print)

|  |
| --- |
| LHA Contact Person: |
| Title: |
| Address: Zip Code: |
| Email: Telephone: |

PEHO 2 ONLY

|  |
| --- |
| Developer Co-Applicant Contact Person: |
| Title: |
| Address: Zip Code: |
| Email: Telephone: |

|  |
| --- |
| PROJECT SUMMARY:  Total Development Cost: $\_\_\_\_\_\_  Total Funding Request: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

I approve submission of this application.

Signature of LHA Executive Director Name (print)

Date

Signature of Developer Co-Applicant Name (print)

(PEHO 2 applications only)

Title

Date