



MASSACHUSETTS
CLEAN WATER TRUST

Grant Questionnaire

PURPOSE

This questionnaire relates to a Cybersecurity Grant from the Massachusetts Clean Water Trust (the “Trust”). It is intended to provide the Trust with information necessary to fund the Grant.

Please enter a response for each question. If a particular question requests information that is unavailable, please include an explanation of why the information is unavailable.

GENERAL INFORMATION

Commitment No. DEP Project No. Grant Commitment
_____ _____ \$ _____

- A. Applicant (Name of City, Town, District, etc.): _____
- B. Unique Entity Identifier (UEI): _____
- C. Wire Transfer Instructions for Grant Disbursements:
- a. Bank: _____
 - b. Account No. _____
 - c. ABA No. _____

CONTACT INFORMATION

- A. Chief Financial Officer
- Name: _____
- Title: _____
- Address: _____
- E-mail Address: _____
- Telephone: _____
- B. Treasurer
- Name: _____
- Title: _____
- Address: _____
- E-mail Address: _____
- Telephone: _____

