**EXPRESSION OF INTEREST (Optional)**

The purpose of this Expression of Interest is to give interested applicants an opportunity to articulate their overall goals, objectives, and preparedness as they relate to growth through community economic development. When completing the form, consider all of the funding requests that may be made in the full application. Forms submitted by the posted deadline will be reviewed by the state’s economic development partner agencies, who can provide feedback and guidance for the best path forward for each project.

**SECTION 1. Prospective Applicant & Project Information**

1. Primary Location: (*Select from drop-down*)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| EOHED Region  | *(auto-filled)* | MassDOT District | *(auto-filled)* | Rural or Small Town | *(auto-filled)* |
| MDFA Regional Office | *(auto-filled)* | Gateway City  | *(auto-filled)* | Housing Choice | *(auto-filled)* |
| Regional Planning Agency  | *(auto-filled)* | MVP Community | *(auto-filled)* | MBTA Community | *(auto-filled)* |

1. Organization Type: (*Select from following drop-down options*)

**Public Entity:**

☐ Municipality

☐ Public Housing Authority

☐ Redevelopment Authority

☐ Regional Planning Agency

☐ Quasi-Governmental Agency

☐ Water or Sewer District

**Non-Public Entity:**

☐ Community Development Corporation

☐ Non-Profit Organization

☐ For-Profit Organization

1. Applicant Organization Name:
2. Applicant Organization Legal Address:
3. City/Town:
4. State: MA
5. Zip Code:
6. CEO Name:
7. CEO Title:
8. CEO Tel.:
9. CEO Email:
10. Project Contact Name (if different):
11. Project Contact Title:
12. Contact Tel:
13. Contact Email:
14. Organization Description – Describe your organization’s structure, including staff capacity, and economic development goals.

 (*2,000 characters*)

1. Indicate any applicable certifications and/or classifications for this organization *(For Non-Public Entities Only)*:

☐ Women-Owned Business Enterprise

☐ Minority-Owned Business Enterprise

☐ Disadvantaged Business Enterprise

☐ Veteran-Owned Business Enterprise

**SECTION 2 (P): Priority Projects / Initiatives –** Describe the top priority projects or initiatives that the applicant intends to submit in a One-Stop application for grant consideration. Describe the projects, areas, and/or sites and indicate the types of funding sought, even if unsure about the specific sources. This section is meant to provide state reviewers with insight into the prospective projects.

**Project / Initiative One**

1. Name of Project/Initiative:
2. Based on the descriptions outlined for the One Stop’s [Development Continuum](https://www.mass.gov/info-details/one-stop-for-growth-development-continuum), what is the primary funding you would like to explore for this project/initiative:

☐ Community Activation and Placemaking

☐ Planning and Zoning

☐ Site Preparation

☐ Building

☐ Infrastructure

☐ Not sure

1. Project Description – Provide a concise description of the project. For site specific projects, please provide an address and the ownership status of the site.

 (*1,000 characters*)

1. Project Goals – Explain how the anticipated outcomes of the project will catalyze community/economic development.

 (*1,000 characters*)

1. Budget Estimate – Approximately how much funding do you anticipate requesting from the One Stop for Growth? *Please note that you may change your budget request when completing the Full Application.*

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1. What would you use the One Stop funding for? If possible, indicate specific scope of work and your anticipated expenses associated with the project.

 (*1,000 characters*)

1. Timeline Information – Describe the timeline for the project and provide information about any notable dates and/or milestones. Please indicate if project is phased and any progress made to date. Note: Grants will be announced in Fall 2023 for contracts starting in FY24.

 (*1,000 characters*)

1. Would you like to add a second project?

|  |  |
| --- | --- |
| ☐ Yes | ☐ No |