Facilities Consolidation Fund (FCF)

***Preliminary Application Form***

1. Date:

Agency: DMH / DDS (circle)

2. Name of Sponsoring Organization:

3. Contact Person / Phone:

4. Property Location (street,city/town):

5. Description of Property and Development Plan (i.e. # Units, # Residents – type of work to be done)

6. Description of Site / Location (i.e. environmental, zoning, proximity to goods, services)

7. Experience of Sponsoring Organization:

8. Financing Plan:

9. Development Team:

10. Project Schedule:

11. Population to be Served:

12. Services Anticipated:

13. Attach Additional Notes or Documents (if any)

(Complete and return to DMH or DDS Area Housing Coordinator with copy to CEDAC)