COMMUNITY DEVELOPMENT BLOCK GRANT

LMI BENEFICIARY SUMMARY FORM

Town/City or Target Area: **UPLOAD THE COMPLETED FORM FROM APPLICATION **COUNTY:**

A. AUTOMATIC LMI QUALIFICATION? - YES OR NO

* IF YES- Use the LowMod tables found in the CDBG APP Guidelines Appendix for completion of the LowMod %, LowModUniv, and LowMod Beneficiary Information.

*** IF NO, Skip to "B" Below**

Qualifying LMI % =
Population / "LowModUniv" =
LMI "LowMod" Beneficiaries =

B. LMI SURVEY CONDUCTED? - YES OR NO

* IF YES- Indicate Survey Date - (M/D/YR)

* IF YES- For eligible Town/City wide activities, use the LowMod tables in the CDBG APP Guidelines Appendix for total persons (LowModUniv). For targeted activities, the applicant will need to independently verify the total persons and total occupied households information.

Total Persons / Beneficiaries in Activity Target Area =
Total Occupied Households in Activity Target Area =

* IF YES- Complete "C" Below. NOTE: The "LMI Survey Summary" row immediately below will automatically update as table data is entered. No data entry is required.

LMI Survey Summary: Total Beneficiaries (Persons)= 0 Total LMI Beneficiaries (Persons)= #DIV/0! LMI % #DIV/0!

C. IF A LMI SURVEY WAS CONDUCTED AS INDICATED BY ANSWERING YES IN "B" ABOVE, SUMMARIZE THE LMI SURVEY SHEETS IN THE TABLES BELOW.

Insert County Income Levels	$0		$0		$0		$0		$0		$0		$0		$0	
Number of People in Each Family	1		2		3		4		5		6		7		8	
Insert Survey Sheet Number Below	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above
LMI Survey Sheet #																
Column Total:	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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LMI BENEFICIARY SUMMARY FORM

Town / City or Target Area: **UPLOAD THE COMPLETED FORM FROM APPLICATION

County: 0 Survey Date: 0

County Income Levels	$0		$0		$0		$0		$0		$0		$0		$0	
Number of People in Each Family	1		2		3		4		5		6		7		8	
Insert Survey Sheet Number Below	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above
Column Total:	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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LMI BENEFICIARY SUMMARY FORM

Town / City or Target Area: **UPLOAD THE COMPLETED FORM FROM APPLICATION

County: 0

Survey Date: 0

County Income Levels	$0		$0		$0		$0		$0		$0		$0		$0	
Number of People in Each Family	1		2		3		4		5		6		7		8	
Insert Survey Sheet Number Below	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above
Column Total:	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

SUMMARY TABLE	**UPLOAD THE COMPLETED FORM FROM APPLICATION											Survey Date: 0				
County Income Levels	$0		$0		$0		$0		$0		$0		$0		$0	
Number of People in Each Family	1		2		3		4		5		6		7		8	
Below or Above the County Income Levels	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above	Below	Above
Number of Families Surveyed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Person Totals Accounted for by Survey Per Income Level and "Below" or "Above" Status																
Persons Accounted for by Survey	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Total Number of Occupied Households/Homes in Activity Target Area =	**0**
Total Number of Persons in the Activity Target Area =	**0**
Total Number of Occupied Households/Homes Surveyed in the Activity Target Area =	**0**
Total Number of Families Below the Low and Moderate Income Level =	**0**
Percentage of Total Families Below the Low and Moderate Income Level =	**#DIV/0!**
Total Number of Beneficiaries (Persons) =	**0**
Total number of LMI Beneficiaries (persons) based on survey results =	**#DIV/0!**
Percentage of Total Persons Below the Low and Moderate Income Level =	**#DIV/0!**