OREGON ASSOCIATION OF REALTORS® HOME FOUNDATION (OAR HOME) GRANT APPLICATION COVER LETTER

Date____/____/_____

Local REALTOR® Association/Board Name _____

Local REALTOR® Association/Board Contact _____

Dollars Requested $_____

Note: *Please fill out this form completely. "Not Applicable" (N/A) should be noted if a question does not pertain to the project for which funds are requested.*

APPLICANT IDENTIFICATION

Due to the volume of grants received, the HOME Foundation Board of Directors will typically only consider one application per organization. If an organization submits more than one application for separate projects, the HOME Foundation B.O.D. has sole discretion to determine if more than one project will be awarded a grant.

Applicant Name _____

Mailing Address _____

Contact Person _____ **Title** _____

E-Mail_____ **Phone** _____

EIN_____ **501(c)(3) Tax Exempt Status** [ ] Yes [ ] No

Check the phrase that best describes the applicant.
[ ] Home Building [ ] Housing Authority [ ] Education
[ ] Down Payment Assistance [ ] Other (Please specify)_____

Briefly describe the project, target population including income levels and the number of households benefitting from the project.

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