

## **Technical Assistance Request Form**

## 2017/2018 CDBG-MIT Planning and Public Services and Resilient Infrastructure Programs

## Instructions:

Contact Information

Name of County of Project

Name of Organization:

Location:

- Email completed request form to: MIT-PPS@hcd.ca.gov or MIT-RIP@hcd.ca.gov
- Subject line: [Organization Name] TA Request.
- Please submit a separate request form for each technical assistance session you are requesting.
- You may attach additional documentation that supports your request.
- If you have a question that does not require TA, please do not use this form but send the
  question directly to the MIT-PPS or MIT-RIP email at: <a href="MIT-PPS@hcd.ca.gov">MIT-PPS@hcd.ca.gov</a> or
  MIT-RIP@hcd.ca.gov

Contact Phone Number Email Address: Please select dates/ti		nical Assis	stance for eithe	r the M	IT-RII	P or MIT-PPS
<b>orogram</b> Due to capacity and de Session requests are d				hours r	nay b	e limited.
MIT-RIP TA Sessions			MIT-PPS TA	Sessio	ns:	
Tuesday sessions:	3:00-4:00		Monday ses	ssions:		1:00-2:00
Thursday sessions:	10:00-11:00				ns:	2:00-3:00
ession.						
session.		Title		Email	Addre	ess
f applicable, please indicates indicates in the session.  Attendees: Name				Email	Addre	ess
session.  Attendees:				Email .	Addre	ess
session.  Attendees:				Email	Addre	ess
Attendees: Name	Job	Title	st.	Email	Addre	ess
Attendees: Name	Job	Title	st. Environmenta		Addre	ess
Attendees: Name  TA Topics: Please check	Job  k all that apply to Resolutio	Title  2 your requesins nce		al	Addre	
Attendees: Name  TA Topics: Please check  Budgets	k all that apply to Resolutio	Title  Dyour requesins Ince S/Goals	Environmenta	al s	Addre	Equity Duplication of

Please give examples	e addressed in TA session: and questions that you may have to be addressed in the TA session. Indicate ched additional documentation that supports your request.
Planning and Public confirmation of your	tting your request for Technical Assistance for the 2017/2018 CDBG-MI Services and Resilient Infrastructure Programs. You will receive request within two business days. An HCD Representative will be in your requested session.
	HCD Section only
Representative:	
Contact Date:	
TA Schedule Date/T	ime:
Attendees:	
Meeting Notes:	
Resources/Follow-u	Provided: