

Date Due: February 1, 2025

**APPLICATION FORM
DEERFIELD COMMUNITY DEVELOPMENT TRUST FUND**

Group Proposing Project _____

Contact Name _____ Phone _____

Address _____

Description of Project _____

Explain how the project provides for improvements in the Village that will enhance the quality of life for current residents and future generations.

PROJECT BUDGET (LIST LINE ITEMS)

AMOUNT REQUESTED

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

SUB TOTAL COST

\$ _____

Matching Funds (if applicable); Subtract from subtotal

(_____)

TOTAL AMOUNT REQUESTED

\$ _____

TOTAL AMOUNT GRANTED BY CDTF COMMITTEE

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COMMENTS ON REQUEST (FOR CDTF COMMITTEE USE):

