

**FORM 3-4
PROJECT STATUS REPORT**

**OFFICE OF COMMUNITY RENEWAL
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM**

** TO SUBMIT A FINAL ANNUAL PERFORMANCE REPORT USE FORM 3-1, 3-2 OR 3-3*

REFER TO REVISED INSTRUCTIONS FOR FORM 3-4 BEFORE COMPLETING THIS REPORT

I. RECIPIENT INFORMATION

RECIPIENT NAME: _____

PROJECT #: _____ **REPORTING PERIOD:** 01/01/2016-6/30/2016

II. PROJECT STATUS NARRATIVE

A. Provide a summary of the current status including significant accomplishments and milestones of each activity funded as identified in the instructions:

B. Will activities be completed as proposed in the application? Describe any changes to the project design.

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C. If there are any issues that are or have impeded the progress of your project, provide a detailed description of the issues, the efforts to resolve them and the steps to be taken to ensure the completion of the project within the approved project schedule.

D. If the project is not on target to meet the accomplishments as proposed in the application, provide an explanation as to why these accomplishments will not be met.

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III. CERTIFICATION OF THE PROJECT STATUS REPORT *(SEE INSTRUCTIONS)*

I certify that, to the best of my knowledge, this report is correct and complete and that all expenditures were for eligible NYS CDBG activities and deposited and disbursed, according to requirements of Title I of the Housing and Community Development Act of 1974 and the grant agreement executed with the NYS Office of Community Renewal and the policies and programs requirements governing NYS CDBG Program.

Typed Name of Chief Elected Official

Check box if Chief Elected Official has changed since last reporting period.

Signature of Chief Elected Official

Date

Telephone*

E-mail Address*

Name of Person who prepared this report*

E-mail Address*

Telephone*

*Response required

THIS REPORT MUST BE SUBMITTED TO OCR VIA E-MAIL AT OCRINFO@NYSHCR.ORG

DO NOT MAIL THIS, THE ORIGINAL MUST BE RETAINED WITH LOCAL PROJECT FILES