

**2024 Grant Application for Port Related Projects** (tab between fields)

About the Applicant			
Date of Application:			
Legal Name of Organization:			
FEIN:		Commonwealth Vendor #	
Head of Organization or Company		Non-profit/Gov't For Profit	
Title:			
Organization Phone:			
Organization Fax:			
Organization e-mail:			
Website:			
Contact Person (if different from Head of Organization):			
Title:			
Contact's Phone:			
Contact's Fax:			
Contact's e-mail:			
Address (principal or administrative office):			
Mailing address (if different from above):			
Have you applied to Port of Pittsburgh Commission for funding in the past?		Yes	No
Have you received funding from Port of Pittsburgh Commission in the past?		Yes	No

About the Project			
Project Name:			
Project Location			
Total Project Cost:	\$		
Amount of Grant Request:	\$		
Purpose of Grant (one to two sentence summary)			
Beg. and End Dates of Project:			
Geographic Area Served:			

*I certify that I am authorized to submit this grant application and, to the best of my knowledge, if a grant is awarded to this Company/Organization, the proceeds of that grant will not be distributed to or used to benefit any individual or political campaign.*

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

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## Grant Project Narrative

### Organization Mission Statement

### Project Description Including Problem(s) to be Addressed and Anticipated Schedule

Be brief and to the point. Add pages if necessary.