

**MUNICIPAL GRANT PROGRAM
PROGRESS REPORT CONT.**

Grantee: _____ Project #: _____

Project Title: _____

Period Covered: _____ through _____

4. Discuss below any developments that have positively or negatively affected the project's activities.

5. Attach all Municipal Building Official's Inspection reports to date.

(Add additional pages as needed)

Signatures: _____	_____	_____
Project Director	Print Name, Title	Date

_____	_____	_____
Grantee Chief Executive Officer	Print Name, Title	Date

DPS REVIEW AND APPROVAL

TECHNICAL SIGNATURE
