

**APPLICATION FOR
FEDERAL ASSISTANCE**

OMB Approved No. 3076-0006

Version 7/03

1. TYPE OF SUBMISSION: Application		2. DATE SUBMITTED February 28, 2011	Applicant Identifier
<input type="checkbox"/> Construction	<input type="checkbox"/> Pre-application	3. DATE RECEIVED BY STATE	State Application Identifier
<input checked="" type="checkbox"/> Non-Construction	<input type="checkbox"/> Construction	4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier
<input type="checkbox"/> Non-Construction	<input type="checkbox"/> Pre-application		

5. APPLICANT INFORMATION

Legal Name: County of Orange	Organizational Unit: Department: OC Community Resources
Organizational DUNS: 0730507670	Division: OC Community Resources
Address: Street: 1770 N. Broadway	Name and telephone number of person to be contacted on matters involving this application (give area code) Prefix: Mr. First Name: John
City: Santa Ana	Middle Name
County: Orange	Last Name Viafora
State: CA Zip Code 92706	Suffix:
Country: USA	Email: John.Viafora@occr.ocgov.com

6. EMPLOYER IDENTIFICATION NUMBER (EIN): 95-6000928	Phone Number (give area code) 714-480-2820	Fax Number (give area code) 714-480-2803
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8. TYPE OF APPLICATION: <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) (See back of form for description of letters.) Other (specify)	7. TYPE OF APPLICANT: (See back of form for Application Types) County Other (specify)
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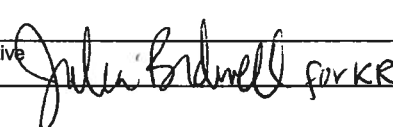
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: TITLE (Name of Program): Labor Management Cooperation Program	9. NAME OF FEDERAL AGENCY: U.S. Department of Housing and Urban Development
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12. AREAS AFFECTED BY PROJECT (Cities, Counties, States, etc.): 14-218	11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: In 2010, Congress appropriated a third round of neighborhood stabilization funds under Section 1497 of the Wall Street Reform and Consumer Protection Act of 2010 (Pub. L. 111 - 202, approved July 21, 2010) (Dodd - Frank Act). The County of Orange received an allocation in the amount of \$1,004,948.
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13. PROPOSED PROJECT Start Date: June 2011	Ending Date: June 2013	14. CONGRESSIONAL DISTRICTS OF: a. Applicant 40, 42, 44, 46, 47, 48	b. Project 40, 42, 44, 46, 47, 48
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15. ESTIMATED FUNDING:	16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?
a. Federal \$ 1,004,948.00	a. Yes. <input type="checkbox"/> THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE:
b. Applicant \$.00	b. No. <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E. O. 12372
c. State \$.00	<input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW
d. Local \$.00	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?
e. Other \$.00	<input type="checkbox"/> Yes If "Yes" attach an explanation. <input checked="" type="checkbox"/> No
f. Program Income \$.00	
g. TOTAL \$.00	

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

a. Authorized Representative		
Prefix Ms.	First Name Karen	Middle Name
Last Name Roper	Suffix	
b. Title Director of OC Community Services	c. Telephone Number (give area code) 714-480-2805	
d. Signature of Authorized Representative 	e. Date Signed 2/28/2011	