

## RENEWAL PROJECT APPLICATION

Agency: \_\_\_\_\_

Project Name: \_\_\_\_\_

Project Type: \_\_\_\_\_

### Applicant Certifications

Yes/No	The project applicant will not engage in racial preferences or other forms of illegal discrimination
Yes/No	The project applicant will not operate drug injection sites or “safe consumption sites,” knowingly distribute drug paraphernalia on or off of property under their control, permit the use or distribution of illicit drugs on property under their control, or conduct any of these activities under the pretext of “harm reduction.”
Yes/No	The project will require service participation

### Statement of Intent

Yes/No	Our agency intends to reapply for renewal project funding for the FY25 CoC Competition.
--------	---