



Planning Assistance to Municipalities and Communities (PAMC) Application

To access this application online, visit www.mncppcapps.org/planning/PAMC_Application.

1 - Applicant Information

- A. Name: _____ C. Phone: _____
B. Title/Position: _____ D. Email: _____

2 - Organization

- A. Name: _____ D. Website: _____
B. Address: _____ E. Type (municipality or community): _____
C. Tax ID Number: _____

3 - Project Information

- A. Project Title:
- B. Describe the issue that this project will address.
- C. What past efforts have been made to address this issue?
- D. What are the goals for the project?
- E. Provide a detailed description of the requested project.
- F. What are the desired work products?
- G. Who are the potential project partners and contacts?
- H. Other relevant stakeholders?
- I. Are you aware of any policies or recommendations in the County's approved plans that this potential project would further?
- J. Upon completion, what next steps will be taken to implement the project? If a community organization, identify any partners (government agencies, other organizations) that will assist in implementation.
- K. Provide a map of the project boundaries. (If a municipality, the municipal boundaries or the location of the project within the municipality.) **Please attach files when submitting form via email.**

4 - Additional Information

- A. Is the proposed project location in one of the following?
Priority Funding Area (PFA) Plan 2035 Neighborhood Reinvestment Area
Plan 2035 Employment Area
- B. Organization type: Municipality Community
If applicant is a municipality, provide a resolution of support approved by the City Council. If applicant is a community organization, provide letters of support (minimum 3). **Please attach files when submitting form via email.**