

*National Credit Union Administration  
Office of Small Credit Union Initiatives  
Community Development Revolving Loan Fund*

<h2 style="margin: 0;">Application</h2> <h3 style="margin: 0;">Urgent Needs Grant - 2009</h3>
---

1. CREDIT UNION NAME	
2. MAILING ADDRESS	
MAILING ADDRESS, CON'T	
3. CITY, STATE, ZIP	
4. CONTACT NAME/TITLE	
5. CONTACT PHONE	
6. CREDIT UNION FAX NUMBER	
7. CREDIT UNION EMAIL ADDRESS	
8. CREDIT UNION CHARTER NUMBER	
9. CREDIT UNION EMPLOYER TAX ID NUMBER	
10. CREDIT UNION DUN AND BRADSTREET UNIVERSAL NUMBERING SYSTEM NUMBER	
11. AMOUNT REQUESTED	\$
12. NAME AND TITLE OF AUTHORIZED INDIVIDUAL	
13. SIGNATURE	

\*By signing above, the credit union representative (1) is certifying that the credit union remains low-income designated, as defined in NCUA's Rules and Regulations; and (2) is committing the credit union to working toward the objectives of the CDRLF as described in the grant guidelines and in the application.

## Application Urgent Needs Grant (2) - 2009

Before completing the application, please read  
all instructions and guidelines carefully and thoroughly.

Answer the following questions. Attach separate sheets for your responses.

Check when  
completed.

- 1. Describe fully the activity or project that the grant will cover.
- 2. Describe why this request is sudden, unplanned, and unexpected? For more information, see the heading entitled "What Is Considered An Urgent Need?" in the grant guidelines.
- 3. Describe how failing to implement the project, undertake the activity, or purchase the item, would impair or disrupt existing service to members.
- 4. What is the total cost of implementing the project or undertaking the activity—including grant awards from NCUA, the credit union's own monies, grants from other partners, and all other funds provided to complete the project:?

Total cost of the project—

NCUA grant:                   \$ \_\_\_\_\_

Other funds:                   \$ \_\_\_\_\_

Total Cost of Project       \$ \_\_\_\_\_

Note: OSCUI considers the degree to which the credit union has acquired financial resources, other than NCUA grants, when evaluating the grant application.

## Application Urgent Needs Grant (3) - 2009

Before completing the application, please read  
all instructions and guidelines carefully and thoroughly.

Check when  
completed.

5. Provide a list of vendors who will deliver the goods and/or services, and an itemized list of costs associated with the project.

Please provide your response in the format shown below. List costs in order of most to least important.

Vendor Name	Item Description	Cost of Item
(1) <u>Example Company</u>	<u>1 Thing</u>	<u>\$ 500.00</u> (most important)
(2) <u>Sample, Inc.</u>	<u>4 Things @ \$100.00</u>	<u>\$ 400.00</u> (least important)

6. Attach copies of bids, estimates, prices, and other supporting information.

NATIONAL CREDIT UNION ADMINISTRATION  
OFFICE OF SMALL CREDIT UNION INITIATIVES  
1775 DUKE STREET  
ALEXANDRIA, VIRGINIA 22314  
(703) 518-6610

E-MAIL APPLICATIONS TO: [OSCUIAPPS@NCUA.GOV](mailto:OSCUIAPPS@NCUA.GOV)

FAX APPLICATIONS TO: (703) 519 – 4088

**EMAIL OR FAX ONLY THE APPLICATION AND YOUR RESPONSES;  
DO NOT SEND THE GUIDELINES.**

