

DCA Applicant Form 6

**Georgia Department of Community Affairs
CDBG Innovative Grant Program
Low and Moderate Income and Civil Rights Benefit Calculation**

Applicant: _____
 Original Amendment, dated: _____

1	2	3	4	5	6	7	8
CDBG Activity Number	Total Number of Persons the Activity will serve	Total Number of Minorities the Activity will serve	Total Number of Non-Minorities the Activity will serve	Number of Low and Moderate Income Persons the Activity will serve	Percent of Persons Who have Low and Moderate Incomes	Amount of CDBG Funds requested for the Activity	Amount of CDBG Funds to benefit Low and Moderate Income Persons

Describe Methodology. (See Instruction for Required Information. Attach Additional Sheets if needed, and a copy of the Survey Form if one is used.)

9 TOTAL BENEFIT

$$\frac{\text{Sum of Column 8}}{\text{Sum of Column 7}} \times 100 = \underline{\hspace{2cm}}$$