

FY 2017 Community Revenue Sharing Program

APPLICATION FORMS

Filing Deadline: June 1, 2016



State of Alaska
Bill Walker, Governor

Department of Commerce, Community,
and Economic Development
Chris Hladick, Commissioner

Division of Community and Regional Affairs
Katherine Eldemar, Director

**FY 2017
COMMUNITY REVENUE SHARING PROGRAM
APPLICATION COVER SHEET**

Name of City

Date

Mailing Address

Phone

City, State, Zip Code

Fax

Printed Full Name of Designated CRS Contact

Primary Contact E-Mail

"Minimum Qualifications"

Yes

No

Not
Applicable

a. Did your municipality successfully conduct its most recently scheduled local regular election?

b. Are regular meetings of the governing body held in accordance with local code and a record of the proceedings maintained?

c. Have your municipality's ordinances been codified?

d. If the municipality levies and collects property taxes, has the municipality provided the Taxpayer Notice required by AS 29.45.020?

"Certification and Assurances"

The applicant certifies that to the best of my knowledge and belief, the information contained in this application is true and correct and the applicant agrees to comply with the laws and regulations which are used to administer Community Revenue Sharing Program funds.

Mayor, Manager or Administrator
Printed Name, Title

Mayor, Manager or Administrator
Signature

FY 2017 COMMUNITY REVENUE SHARING

PROPOSED CRS BUDGET FORM

Name of City

Please describe below how your city proposes to use its estimated FY 2017 Community Revenue Sharing payment.

FUEL	\$ _____
ELECTRICITY	\$ _____
INSURANCE	\$ _____
EDUCATION	\$ _____
WATER/SEWER	\$ _____
PUBLIC SAFETY	\$ _____
FIRE	\$ _____
ROAD MAINTENANCE	\$ _____
HARBORS	\$ _____
HEALTH	\$ _____
LOCAL TAX RELIEF	\$ _____
GENERAL ADMINISTRATION	\$ _____
OTHER _____	\$ _____
OTHER _____	\$ _____
OTHER _____	\$ _____

ESTIMATED PAYMENT