

Use this form if your agency intends to apply for SFY2025 Alaska Community Transit (ACT) human service transportation grants, and your agency has received a grant from ACT within the last 5 years (SFY2019-2024).

Instructions: Completed forms must be sent to dot.alaska.transit@alaska.gov by 4:30 pm, September 25, 2023.

GENERAL INFORMATION

Agency Legal Name: _____

SAM.GOV #: _____

Primary Contact*: _____ Title _____

Email: _____ Phone: _____

Mailing Address _____ **AK**
Mailing Address City/Community State Zip

Physical Address of Project: _____ **AK**
Address City/Community State Zip

Year of most recent ACT grant: _____

Year of most recent Coordinated Transportation Plan: _____

PROJECT REQUEST(S)

Match rates: Operating Assistance (50%/50%), Purchase of Services (80%/20%), Capital (80%/20%)

Project Title	Project Type	Requested Funding	Match	Total Project Cost
Total:				

I certify, to the best of my knowledge, that the information in this intent to apply is true and accurate and that this organization has the necessary fiscal, data collection, and managerial capability to implement and manage the projects associated with these projects.

Name: Agency Representative authorized to sign on behalf of Agency

Title

Signature

Date

*See Reverse side to request additional users to access the ACT electronic grants management system, BlackCat.

BLACKCAT USERS

Please list any **additional staff** that will need access to BlackCat, if approved, to apply for ACT grants.

User Name _____ Title _____

Email: _____ Phone: _____

User Name _____ Title _____

Email: _____ Phone: _____

User Name _____ Title _____

Email: _____ Phone: _____