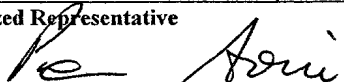
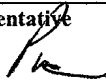


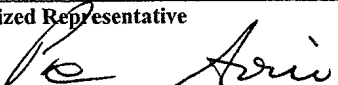
Application for Federal Assistance

		2. Date Submitted 8/12/03	Applicant Identifier 591101138	
1. Type of Submission: Application: Construction Preapplication:	3. Date Received by State		State Application Identifier	
	4. Date Received by Federal Agency 8/15/03		Federal Identifier	
5. Applicant Information				
Legal Name CITY OF TAMPA		Organizational Unit Revenue and Finance, Budget Office		
Address 306 E. Jackson Street, #8E Tampa, FL 33602 Hillsborough		Contact James Stefan (813) 274-8111		
6. Employer Identification Number (EIN): 591101138		7. Type of Applicant: Municipal		
8. Type of Application: Type: New				
9. Name of Federal Agency: U.S. Dept. of Housing & Urban Development		11. Descriptive Title of Applicant's Project: Community Development Block Grant Program Twenty-Ninth Entitlement		
10. Catalog of Federal Domestic Assistance Number: Catalog Number: 14-218 Assistance Title: Community Development Block Grant				
12. Areas Affected by Project: City of Tampa				
13. Proposed Project:		14. Congressional Districts of:		
Start Date 10/01/03	End Date 09/30/04	a. Applicant Seventh	b. Project Seventh	
15. Estimated Funding:		16. Is Application Subject to Review by State Executive Order 12372 Process? Review Status: Program not covered		
a. Federal	\$4,663,000			
b. Applicant	\$0			
c. State	\$0			
d. Local	\$0			
e. Other	\$1,387,557			
f. Program Income	\$603,835			
g. Total	\$6,654,392	17. Is the Applicant Delinquent on Any Federal Debt? No		
18. To the best of my knowledge and belief, all data in this application/reapplication are true and correct, the document has been duly authorized by the governing body of the applicant and the applicant will comply with the attached assurances if the assistance is awarded.				
a. Typed Name of Authorized Representative Pam Iorio		b. Title Mayor		c. Telephone Number (813) 274-8111
d. Signature of Authorized Representative 			e. Date Signed 8/4/03	


Application for Federal Assistance

		2. Date Submitted 8/12/03	Applicant Identifier 591101138	
1. Type of Submission: Application: Construction Preapplication:	3. Date Received by State		State Application Identifier	
	4. Date Received by Federal Agency 8/15/03		Federal Identifier	
5. Applicant Information				
Legal Name CITY OF TAMPA		Organizational Unit Revenue and Finance, Budget Office		
Address 306 E. Jackson Street, #8E Tampa, FL 33602 Hillsborough		Contact James Stefan (813) 274-8111		
6. Employer Identification Number (EIN): 591101138		7. Type of Applicant: Municipal		
8. Type of Application: Type: New				
		9. Name of Federal Agency: U.S. Dept. of Housing & Urban Development		
10. Catalog of Federal Domestic Assistance Number: Catalog Number: 14-231 Assistance Title: Emergency Shelter Grant Program		11. Descriptive Title of Applicant's Project: Emergency Shelter Grant Program (ESGP)		
12. Areas Affected by Project: City of Tampa				
13. Proposed Project:		14. Congressional Districts of:		
Start Date 10/01/03	End Date 09/30/04	a. Applicant Seventh	b. Project Seventh	
15. Estimated Funding:		16. Is Application Subject to Review by State Executive Order 12372 Process? Review Status: Program not covered		
a. Federal	\$167,000			
b. Applicant	\$0			
c. State	\$0			
d. Local	\$0			
e. Other	\$0			
f. Program Income	\$0			
g. Total	\$167,000	17. Is the Applicant Delinquent on Any Federal Debt? No		
18. To the best of my knowledge and belief, all data in this application/reapplication are true and correct, the document has been duly authorized by the governing body of the applicant and the applicant will comply with the attached assurances if the assistance is awarded.				
a. Typed Name of Authorized Representative Pam Iorio		b. Title Mayor		c. Telephone Number (813) 274-8111
d. Signature of Authorized Representative 		e. Date Signed 8/4/03		

Application for Federal Assistance

		2. Date Submitted 8/12/03	Applicant Identifier 591101138	
1. Type of Submission: Application: Construction Preapplication:	3. Date Received by State		State Application Identifier	
	4. Date Received by Federal Agency 8/15/03		Federal Identifier	
5. Applicant Information				
Legal Name CITY OF TAMPA		Organizational Unit Revenue and Finance, Budget Office		
Address 306 E. Jackson Street, #8E Tampa, FL 33602 Hillsborough		Contact James Stefan (813) 274-8111		
6. Employer Identification Number (EIN): 591101138		7. Type of Applicant: Municipal		
8. Type of Application: Type: New				
9. Name of Federal Agency: U.S. Dept. of Housing & Urban Development		11. Descriptive Title of Applicant's Project: HOME Investment Partnerships Program		
10. Catalog of Federal Domestic Assistance Number: Catalog Number: 14-239 Assistance Title: Home Investment Partnerships Program				
12. Areas Affected by Project: City of Tampa				
13. Proposed Project:		14. Congressional Districts of:		
Start Date 10/01/03	End Date 09/30/04	a. Applicant Seventh	b. Project Seventh	
15. Estimated Funding:		16. Is Application Subject to Review by State Executive Order 12372 Process? Review Status: Program not covered		
a. Federal	\$2,208,771			
b. Applicant	\$0			
c. State	\$0			
d. Local	\$0			
e. Other	\$0			
f. Program Income	\$200,000			
		\$2,408,711		
17. Is the Applicant Delinquent on Any Federal Debt? No				
18. To the best of my knowledge and belief, all data in this application/reapplication are true and correct, the document has been duly authorized by the governing body of the applicant and the applicant will comply with the attached assurances if the assistance is awarded.				
a. Typed Name of Authorized Representative Pam Iorio		b. Title Mayor		c. Telephone Number (813) 274-8111
d. Signature of Authorized Representative 			e. Date Signed 8/4/03	

Application for Federal Assistance

		2. Date Submitted 8/12/03	Applicant Identifier 591101138	
1. Type of Submission: Application: Construction Preapplication:	3. Date Received by State		State Application Identifier	
	4. Date Received by Federal Agency 8/15/03		Federal Identifier	
5. Applicant Information				
Legal Name CITY OF TAMPA		Organizational Unit Revenue and Finance, Budget Office		
Address 306 E. Jackson Street, #8E Tampa, FL 33602 Hillsborough		Contact James Stefan (813) 274-8111		
6. Employer Identification Number (EIN): 591101138		7. Type of Applicant: Municipal		
8. Type of Application: Type: New				
		9. Name of Federal Agency: U.S. Dept. of Housing & Urban Development		
10. Catalog of Federal Domestic Assistance Number: Catalog Number: 14-241 Assistance Title: Housing Opportunities for Persons with Aids		11. Descriptive Title of Applicant's Project: Housing Opportunities for Persons with AIDS		
12. Areas Affected by Project: City of Tampa				
13. Proposed Project:		14. Congressional Districts of:		
Start Date 10/01/03	End Date 09/30/04	a. Applicant Seventh	b. Project Seventh	
15. Estimated Funding:		16. Is Application Subject to Review by State Executive Order 12372 Process? Review Status: Program not covered		
a. Federal	\$2,993,000			
b. Applicant	\$0			
c. State	\$0			
d. Local	\$0			
e. Other	\$0			
f. Program Income	\$0			
g. Total	\$2,993,000	17. Is the Applicant Delinquent on Any Federal Debt? No		
18. To the best of my knowledge and belief, all data in this application/reapplication are true and correct, the document has been duly authorized by the governing body of the applicant and the applicant will comply with the attached assurances if the assistance is awarded.				
a. Typed Name of Authorized Representative Pam Iorio		b. Title Mayor		c. Telephone Number (813) 274-8111
d. Signature of Authorized Representative 			e. Date Signed 8/4/03	