



South Carolina Office of Resilience – Disaster Recovery Division

Hurricane Helene

CDBG-Disaster Recovery – Mitigation Match Application

Mail To: CDBG-DR Mitigation Match Program
South Carolina Office of Resilience – Disaster Recovery Division
632 Rosewood Drive, Columbia, South Carolina 29201

Email To: MITIGATION@SCOR.SC.GOV

Instructions: All fields within the application are expandable as needed. Please be as thorough as possible in your explanations.

Match funding activities must meet both the CDBG-DR as well as the primary funding source's eligibility requirements.

APPLICANT INFORMATION

Applicant Name _____ **Title** _____ **County/Local Government/State Agency** _____

Address: _____

Phone Number: _____ **Email Address:** _____

Project Details: (Attachments are acceptable)

Type, Description, Primary Funding Source Name and Project #, HUD National Objective, and LMI population served:

Option to share information across grant programs and agencies. Please include the primary funding entity's name and project identification number. Optional and has no impact on eligibility.:

☐ I authorize _____ to
share details regarding Project # _____ with the South Carolina Office of Resilience.

☐ I do not authorize _____ to
share details regarding Project # _____ with the South Carolina Office of Resilience.

Total Project Cost: _____ **Match Funds Amount Requested:** _____

Must provide the following documents:

- A copy of the complete project application submitted to the primary funding source entity
- A copy of the project approval letter and agreement from the primary funding source
- If applicable, the project Environmental Report. (All projects types, except Plans & Studies)

Applicant Signature _____ **Date** _____