GRANT ANALYSIS FORM Error! Bookmark not defined.
OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

Department/Division: CITY DEVELOPMENT
Contact Person & Phone No: ALLISON ROZEK x5693

Error! Bookmark not defined.Category of Request

☒ **New Grant**

☐ **Grant Continuation**

☐ **Change in Previously Approved Grant**

Previous Council File No.

Previous Council File No.

Project/Program Title: 2005 COMPREHENSIVE PLANNING GRANT

Grantor Agency: STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION, OFFICE OF LAND INFORMATION SERVICES

Grant Application Date: 9/1/04 **Anticipated Award Date:** 1/1/05

Please provide the following information:

1. Description of Grant Project/Program (Include Target Locations and Populations):

THIS GRANT WILL PROVIDE FUNDING FOR THE DEVELOPMENT OF A CITYWIDE COMPREHENSIVE PLAN, INCLUDING STANDARDIZED PROCEDURES FOR PLAN DEVELOPMENT, AMEMDMENTS, UPDATES AND PUBLIC PARTICIPATION.

2. Relationship to Citywide Strategic Goals and Departmental Objectives:

THE PROPOSED CITYWIDE COMPREHENSIVE PLAN WILL REFLECT AND FACILITATE THE IMPLEMENTTATION OF THE CITY'S STRATEGIC GOALS PARTICULARY AS THEY RELATE TO LAND DEVELOPMENT AND REDEVELOPMENT. THE 1999 WISCONSIN SMART GROWTH LAW REQUIRES CONSISTENCY BETWEEN THE CITY'S ZONING AND A COMPREHENSIVE PLAN THAT SPECIFICALLY ADDRESSES NINE ELEMENTS. THE COMPREHENSIVE PLAN TO BE PREPARED UNDER THIS GRANT WILL ENSURE THE CONTINUED VALIDITY AND ENFORCABILTIY OF THE CITY'S ZONING.

3. Need for Grant Funds and Impact on Other Departmental Operations (Applies only to Programs):

N/A

4. Results Measurement/Progress Report (Applies only to Programs):

N/A

5. Grant Period, Timetable and Program Phase-out Plan:

1/1/2005 TO 7/31/2008

6. Provide a List of Subgrantees:
N/A

7. If Possible, Complete Grant Budget Form and Attach to Back.