

**GRANT ANALYSIS FORM**  
**OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS**

**Department/Division:** CITY DEVELOPMENT

**Contact Person & Phone No:** BEVERLY CRAIG, x5642

**Category of Request**

- ☒ **New Grant**
- ☐ **Grant Continuation**
- ☐ **Change in Previously Approved Grant**

**Previous Council File No.**

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**Project/Program Title:** ECONOMIC DEVELOPMENT GRANTS

**Grantor Agency:** STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

**Grant Application Date:** 10/1/02

**Anticipated Award Date:** 12/1/02

**Please provide the following information:**

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

THE CITY OF MILWAUKEE PROPOSES TO FIND INNOVATIVE WAYS TO UNLOCK THE POTENTIAL FOR CREATING JOBS FOR RESIDENTS WHO LIVE IN THE CITY OF MILWAUKEE. THE PROJECT WILL FUND SITE INVESTIGATION AND REMOVAL OF UNDERGROUND STORAGE TANKS AND DEMOLITION ON VARIOUS SITES IN THE CITY OF MILWAUKEE.

**2. Relationship to Citywide Strategic Goals and Departmental Objectives:**

PROVIDE JOBS AND INDUSTRIAL REDEVELOPMENT.

**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:**

12/1/02 TO 11/30/2004

**6. Provide a List of Subgrantees:**

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