



Community Development Partnership Program (CDPP) Request for Grant Modification/Extension

Use this form to request modifications to the approved scope of work, project cost and/or period of performance. Please be concise and include only relevant information. Once reviewed, LCRA staff will contact you with a decision on the request. Submit the form to grants@lcra.org or LCRA CDPP, P.O. Box 220, Austin, TX 78767-0220.

Please print/type legibly.

Organization: _____

Contact Name: _____ Phone: _____

Contact Email: _____ Date: _____

Grant Amount: _____ Grant Application Date: January July Year: _____

Grant Project Description:

Reason for Request (check all that apply):

Budget Modification Project Modification Completion Date Extension

Description of modification/extension request. (Attach supporting documentation/information as necessary.):

Justification for modification/extension request. (Attach supporting documentation/information as necessary.):

Following to be completed by CDPP staff:

Received:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
_____ day extension granted.	Amended Completion Date:
Authorized By:	Date: