[Applicant Letterhead]

**reduction of matching funds for redi community**

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| pt | The Applicant’s **legal signing authority** must sign this Waiver and include it with the Application package. |

The ( APPLICANT ) is a REDI Community and has submitted a Cooperative Funding Program application for consideration for a reduction of matching funds of the proposed project titled (  PROJECT NAME ).

I am an authorized representative of ( APPLICANT’S NAME ) requesting a reduction of matching funds for this project. The ( APPLICANT ) is able to contribute ( $0,000 ).

If there are any questions or additional information is needed, please contact ( NAME ) at (XXX) XXX-XXXX or email at \_\_\_\_\_\_\_\_\_\_.

By Authorized Official: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_