

**STATE OF TENNESSEE
COMMUNITY DEVELOPMENT BLOCK GRANT
LINE ITEM BUDGET**

Contractor Name and Address	Contact Person - Address & Phone No.	
Contract Number		
ORIGINAL <input type="checkbox"/> REVISION NO. _____	Date of Submission	
LINE ITEM	TOTAL COSTS	CDBG COSTS
Construction	\$	\$
Construction Inspection	\$	\$
Engineering Design	\$	\$
Other Engineering Services	\$	\$
Legal Services	\$	\$
Appraisals	\$	\$
Acquisition	\$	\$
Relocation	\$	\$
Housing Rehabilitation	\$	\$
Housing Inspection	\$	\$
Clearance	\$	\$
Project Contingency	\$	\$
Administration	\$	\$
Environment Review	\$	\$
Tap Fees for LMI	\$	\$
Other (<i>Specify</i>)	\$	\$
TOTAL COSTS	\$	\$