ATTACHMENT 2

Cover Page Sheet

1. Applicant (Organization):

Name: City of Lemon Grove

Address: 3232 Main Street

City: Lemon Grove County: San Diego ZIP Code: 91945

Tax ID Number: 95-3144560

2. Project Director:

Name: Mike James

Title: Assistant City Manager/Public Works

Director

Telephone: (619) 825-3814

Email: mjames@lemongrove.ca.gov

3. Grant Administrator:

Name: Christian Olivas

Title: Management Analyst Telephone: (619) 825-3813

Email: colivas@lemongrove.ca.gov

4. Contact person for application, if different than Project Director:

Name: Christian Olivas

Title: Management Analyst Telephone: (619) 825-3813

Email: colivas@lemongrove.ca.gov

The applicant certifies that, to the best of his or her knowledge and belief, the data in this application are true and correct.

Name of Authorized Official: Lydia Romero

Print: Lydia Tomero

Date: 12/30/24 Signature: