ATTACHMENT 2

Cover page sheet

1. Applicant (Organiz	ation):		
5rfcd v <u>City of Sausalit</u>	0		
Address <u>420 Litho Stre</u>	eet		
City <u>Sausalito</u>	County_Marin	ZIP Code <u>94965</u>	
Tax ID Number <u>94-60</u>	00429		·····
2. Project Director: Name <u>Kevin McGowar</u>	1		
Title Director of Public	Works		
Telephone 415-289-41	76		
Email KMcgowan@sa	usalito.gov		
3. Grant Administrato Name <u>Chris Zapata</u>	or:		
Title City Manager			
Telephone 415-289-41	66		
Email CZapata@saus	alito.gov		
4. Contact person for Name Kevin McGowar		nt than Project Director	:
Title <u>Director of Public</u>	Works		
Telephone 415-289-41	76		
Email <u>KMcgowan@sa</u>	usalito.gov		
	s that, to the best of leation are true and co	nis or her knowledge an rrect.	d belief
Name of Authorized O	fficial		
Print Jill James Hoffm	an /		
Signature (, ffer	Date <u>12/31/2021</u>	