



# LETTER OF INTENT

This Letter of Intent is submitted to the Governor's Center for Local Government Services to request technical assistance. By submitting this request, the municipality agrees to cooperate with the Center.

The governing body must approve this request for assistance by motion prior to submission. No resolution is required.

Complete and return the form either by mail or fax. Center personnel will evaluate the request to determine the level of assistance. The contact person designated below will receive all future information regarding this request.

### PLEASE COMPLETE THE FOLLOWING

Type of technical assistance being requested:

- |   |  |
|---|--|
| <input type="checkbox"/> Regional Police Consolidation                        | <input type="checkbox"/> Finance                                   |
| <input type="checkbox"/> Police Management                                    | <input type="checkbox"/> Public Works                              |
| <input type="checkbox"/> Fire & Emergency Services                            | <input checked="" type="checkbox"/> Administrative/Secretary       |
| <input type="checkbox"/> Council of Governments/Intergovernmental Cooperation | <input type="checkbox"/> Home Rule                                 |
| <input type="checkbox"/> Land Use Planning                                    | <input type="checkbox"/> Boundary Change                           |
| <input type="checkbox"/> Uniform Construction Code                            | <input checked="" type="checkbox"/> Other <u>HUD grant support</u> |

Are you currently a part of any intergovernmental agreement?

Yes  No

If yes, describe briefly: \_\_\_\_\_

Description of Project: Due to significant staff turnover, technical support is needed to adequately train HUD staff in the core HUD programs and to create the standard operating procedures to insure compliance.

### CHIEF ELECTED OFFICIAL (PRINT)

Municipality: City of Allentown

~~23-2248358~~

Federal ID#: 23-6003116

County: Lehigh

Name: Matt Tuerk

Title: Mayor

Municipal Address: 435 Hamilton Street

Allentown, PA 18101

Signature: \_\_\_\_\_

Date: 8-31-23

### CONTACT PERSON

Name: Vicky Kistler

Title: DCED Director

Address: 435 Hamilton Street

Allentown, PA 18101

Phone: 610-437-7610

Fax: \_\_\_\_\_

E-mail: vicky.kistler@allentownpa.gov

### SIGNATURE AND VERIFICATION

I hereby certify that the governing body, at a public meeting held on \_\_\_\_\_, has approved this Letter of Intent.

\_\_\_\_\_  
Attest (Secretary)

\_\_\_\_\_  
Date