

USDA Rural Development Capital Needs Assessment Provider Information

We would like to be included on the CNA Provider List maintained by USDA RD. (We realize this list is not an endorsement, but merely for reference for property owners and those interested.) We authorize USDA to release this information as part of the CNA Provider Directory.

Company Name: _____

Mailing Address 1: _____

Mailing Address 2: _____

City: _____ State: _____ Zip Code: _____

Contact Name: _____

Telephone Number: _____

Fax Number: _____

E-mail: _____

Please Type or Print Clearly

**Email/Fax: Please email or fax this completed form to
your respective Rural Development State Office
Multi-Family Housing Specialist or State Architect.**