TO BE REPRODUCED LOCALLY AND ADAPTED AS APPROPRIATE FOR REHABILITATION PROJECTS

SECTION 202 SCREENING CHECKLIST SUMMARY SHEET
(CONDITIONAL COMMITMENT)

INSTRUCTIONS: TO BE PREPARED BY MHR UPON RECEIPT OF COMMENTS FROM REVIEWING OFFICES AND PLACED ON TOP OF FIELD OFFICE DOCKET

Project Name: ___________________ Project Number: ________________

Name of Owner: _________________________________________________________

Street Address: ________________________________________________________

City, State, Zip: _______________________________________________________

Request: Acceptable for Technical Processing

Unacceptable for Technical Processing—Date Letter Sent: __________________

Incomplete or Missing Exhibits: ____________________________

Resubmission Review:

<table>
<thead>
<tr>
<th>Exhibit No.</th>
<th>Acceptable</th>
<th>Unacceptable</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Date: ___________________ Signature: ___________________

Date: ___________________ Signature: ___________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

1 7/92