## PROJECT STATUS FORM

Recipient:	Chautauqua (T)	Contract #:	C1002334
Project Title:	Town of Chautauqua and Vi	illage of Mayville Compreher	nsive Plan
Date Prepared:			

## \*\* See guidelines for directions on completing this form \*\*

Task	Brief Task	Percent of		Date of		Product Submitted
#	Description	Completion	<u>A/T</u>	Completion	Task Accomplishments	to DOS
Task	Project Initiation				Task recomplishments	10 1000
1	Meeting					
Task	Comprehensive					
2	Planning					
-	Committee					
Task	Procurement of			- W 100 / L		
3	Consultant (if					
	applicable)					
Task	Subcontract and					
4	Compliance with					
	Local Procurement					
	Requirements					
Task	Comprehensive					
5	Planning					
	Committee					
	Meetings					
Task	Community					
6	Participation Plan					
Task	Community Survey					
7	and Stakeholder					
,	Interviews					
Task	Review Local and					
8	Regional Planning					
	Efforts and					
	Ongoing Initiatives					
Task	Community Profile					
9						
Task	Community					
10	Visioning					
	Workshops					
Task	Draft					
11	Comprehensive					
	Plan					
Task	Review by the					
12	Local Municipal					
	Board					
Task	Environmental					
13	Quality Review					
Task	County Planning					
14	Board Review					
Task	Final					

15	Comprehensive Plan							
Task	Public Hearing and				1		,	
16	Local Adoption							
Task 17	MWBE Reporting							
Task	Project Status							
18	Reports							
Task 19	Final Project Summary Report							
19	and Measurable							
	Results							
NO	TE: Enter information	into the boxe	es above.	Pushing	tah to move from hox	to box will insert	additional rows	
Indicat firms:	e the MWBE goals fo	r this contra	ct, and th	ie state-sl	nare amounts incurr	ed to date by sta	te-certified MWBE	
MBE	Goal Amount:	\$11,475	5.00		WBE Goal Amount	: \$1	11,475.00	
Incurre	ed by MBE:				Incurred by WBE:	ncurred by WBE:		
If the p	oe work undertaken a	iplete by the	current	end date			request, including	
a detail	led justification and s	pecific reaso	ns for de	lay:				
Describe any proposed amendment to the budget and/or work program of this contract:								
Describ	oe any issues or probl	ems encount	ered dur	ing the cu	irrent reporting peri	od:		
Person	to contact if we have	questions ab	out the i	nformati	on provided on this f	form:		
Name:	e: Email Address:							

Affiliation:

Title: