

Survey and Planning Grant

Application 2022

Survey and Planning Grant | Application

Applicant Information				
Municipality/Organization:				
Chief Elected Official/Executive Director:				
Federal Employer ID Number:				
Street Address:				
City/Town:	State:	ZIP Code:		
Mailing Address if different from above:				
Contact Information				
Contact Name:				
Email Address:				
Phone Number:				
This contact information will be used for all qu	iestions and mailings related	d to the grant process.		
Project Information				
Please Identify the grant activity you are applying	For:			
Historic Resources Inventory				
Archaeological Survey or Report				
Geophysical Survey for Human Burials (max grant. \$5,000)				
Historic Designation Report or Nomination				
Municipal Historic Preservation Planning Reports				
Pre-development Studies				
Partners In Preservation				

1. Brief description of the project:	
2. Street Address of the project resource	
3. Date of Construction of the project resource	
4. Grant Amount Request:	Total Project Cost:
5. Identify historic designation status of the resource National Historic Landmark National Historic Landmark, District: National Register of Historic Places National Register of Historic Places, District: State Register of Historic Places State Register of Historic Places, District: Local Historic Property Local Historic District:	·
6. Identify the applicant:	
municipality 501(c)3 nonprofi	t 501(c)13 nonprofit
If the applicant is a 501(c)3 or 501(c)13, submi	it a copy of the IRS Status Determination letter.

7. Is this a subsequent phase of a project?
☐ yes ☐ no
If yes, explain:
8. Has the applicant received previous grants from SHPO?
☐ yes ☐ no
If yes, please list all grants received (include grant type, date awarded, and award amount):

9. Does the applicant own or lease the property?				
own lease				
If the property is leased, does the applicant have a long-term lease of at least 20 years as of the date of the application?				
☐ yes ☐ no				
If the property is leased, have notarized statements been obtained from the owner/s of the property that permit the applicant to submit this application and complete the project?				
☐ yes ☐ no				
N/A Explain				
Please submit a copy of the Certificate of Title or lease and applicable notarized statements.				
Authorization				
Name of Authorized Official:				
Title:				
Title: Signature:	Date:			
	ution as empowered to			
Signature: The authorized official is the individual identified in the Certified Resolution carry out the grant application and associated agreements on	ution as empowered to			
Signature: The authorized official is the individual identified in the Certified Resolution carry out the grant application and associated agreements on organization/municipality.	ution as empowered to			
Signature: The authorized official is the individual identified in the Certified Resolution and associated agreements on organization/municipality. Legislative Information	ition as empowered to behalf of the			
Signature: The authorized official is the individual identified in the Certified Resolution and associated agreements on organization/municipality. Legislative Information U.S Representative's Name:	ntion as empowered to behalf of the District #:			

Application Checklist

This checklist should be submitted with the application. All material listed is required unless otherwise noted. See the Application Guidelines for an explanation of each item.

	Included	N/A	Comments
A. Project Abstract			
B. Project Narrative			
C. Photographs			
D. Project Timeline			
E. Budget			
F. Budget Narrative			
G. Long-term preservation plan (for pre-dev. Grants)			
H. 501(c)3 or 501(c)13 IRS tax status determination letter (contingent)			
I. Certified Resolution			
J. Vendor Profile Form and W-9			
H. Vendor Direct Deposit (ACH) Election Form			
Certificate of title or long-term lease agreement (if applicable)			
Letters of Support (optional)			
Applicant has read SEEC Form 11 (see website)			