



**2009/10 PRESERVATION IS LOCAL GRANTS
APPLICATION**

**HISTORIC PRESERVATION PROJECTS
FOR LOCAL GOVERNMENTS**

RHODE ISLAND HISTORICAL PRESERVATION AND HERITAGE COMMISSION
150 BENEFIT STREET, PROVIDENCE, RI 02903
(401)222-4142 FAX: (401)222-2968 TTY (401) 222-3700 www.preservation.ri.gov

DUE DATE: FRIDAY, JULY 17, 2009

The application form should be typed. Additional printed sheets should be stapled to the application. CDs, photographs, and any other supporting documentation must be labeled and enclosed in an envelope and stapled to the application.

Seven complete copies are required. Incomplete applications or those postmarked or hand delivered after the final deadline will not be reviewed. Unsigned applications will be returned.

PROJECT TITLE: _____

AMOUNT OF GRANT REQUEST: _____
(maximum request \$20,000)

- APPLICATION COMPLETE**
- APPLICATION SIGNED**
- APPENDIX SIGNED**

I. LOCAL GOVERNMENT

A. NAME OF TOWN/CITY _____

City/Town Hall Address _____

Street _____

City/Town _____ Zip Code _____

B. NAME OF CHIEF LOCAL ELECTED OFFICIAL _____

Office Address _____

Street _____

City/Town _____ Zip Code _____

Daytime Telephone _____ E-mail address _____

C. NAME OF CONTACT PERSON AT LOCAL GOVT _____

(typically planner or HDC staff member)

Office Address _____

Street _____

City/Town _____ Zip Code _____

Daytime Telephone _____ E-mail _____

D. NAME OF DESIGNATED GRANT CONTACT PERSON _____

(if applicable; can be third party)

Office Address _____

Street _____

City/Town _____ Zip Code _____

Daytime Telephone _____ E-mail _____

II. PROJECT IDENTIFICATION AND DESCRIPTION

A. IDENTIFICATION

PROJECT TITLE: _____

PROJECT LOCATION: _____

(name) _____ NATIONAL REGISTER DISTRICT

(name) _____ LOCAL HISTORIC DISTRICT

_____ CONGRESSIONAL DISTRICT

B. PROJECT DESCRIPTION

Describe the project in detail, identifying the project and its purpose. Explain how project work will be carried out. Describe all work products that will be produced. Indicate who the principal project personnel will be, if known, and state whether or not they meet the "Professional Qualifications Standards" cited in 36 CFR 61 (see Guidelines VI.D). If principal project investigators are known, submit a resume with the application.

Please note if the local government is delegating this project to a third party organization. This organization will act on behalf of the local government to administer the grant and receive funds directly from the RIHPHC.

For survey projects, state: 1) type of survey to be done (architectural or archaeological); 2) estimated number of miles and acres to be surveyed; 3) estimated number of inventory forms to be produced; 4) number of reports and/or other products to be produced.

For National Register projects, state: 1) type of nomination to be prepared (e.g., individual, district, multiple property submission); 2) estimated number of nominations to be prepared; 3) estimated number of contributing properties to be contained in the nomination.

For planning/land use projects, state: 1) type of document to be prepared; 2) who will use the document produced; 3) how the document will be integrated into the local government's overall planning objectives (i.e., integration into comprehensive plan, etc.); 4) the number and nature of products that will be produced.

For historic district zoning projects, state: 1) type of activity proposed (training, public workshop, publication, survey, pre-HDC planning, etc.); 2) specific grant products; 3) audience that will be served.

For historic property management projects, state: 1) type of activity proposed (architectural study, plans & specifications, feasibility plan, etc.); 2) specific grant products and how they will be used.

For public education/heritage tourism projects, state: 1) specific grant products and how they will be delivered; 2) audiences to be served

Describe project below:

III. PROJECT SCHEDULE

Outline project work schedule. Include dates that interim and final work products will be submitted to the Commission for review. Projects must be completed by Oct. 31, 2010.

<u>September 9 – October 1, 2009</u>	Funding agreements signed by subgrantee and RIHPHC
_____	RFP prepared in consultation with RIHPHC, and sent to qualified consultants

_____	Consultant selected, and draft contract prepared and submitted to RIHPHC with Procurement Form

_____	Contract signed, and work begins

<u>March 1, 2010</u>	Progress report and draft work products submitted to RIHPHC for review

<u>October 31, 2010</u>	Final work products submitted to RIHPHC for review with final project report and fiscal documentation

IV. PROJECT SELECTION CRITERIA

Describe how project work meets RIHPHC's Project Selection Criteria:

V. LOCAL NEEDS & PRIORITIES

One of RIHPHC's goals for the Preservation Is Local initiative is to understand local preservation needs and priorities. In many communities, there is a range of worthwhile activities that would strengthen historic preservation. Describe how the proposed project relates to other preservation needs in your community, and explain why this project is the right action to take now:

VI. BUDGET

AMOUNT OF GRANT REQUEST: (maximum request \$20,000)	\$ _____
MATCHING SHARE (if available)	\$ _____
TOTAL PROJECT COST	\$ _____

Provide a simple budget in the space below. Include major line items such as: personnel, equipment, supplies, travel, contributed services. Use the most accurate costs available. Use a separate page if necessary.

Only those items which are necessary to accomplish project work are allowable costs. Preparation of the Final Project Report, photographs, and other costs necessary to administer the grant are eligible costs for all types of projects. The following budget items are NOT allowable costs: contingency funds, allowances for overhead and profit, and miscellaneous category. The budget must include BOTH the PIL grant amount and the matching share amount.

Grantees will have an opportunity to revise budget figures before signing a contract.

A. BUDGET

Item	PIL grant	Match (if any)	Total cost
<u>Personnel</u> hrs @ \$ /hr = \$ cost			
<u>Consultant Fees</u>			
<u>Mileage</u>			
<u>Supplies/Materials</u>			
<u>Other</u>			
TOTAL	\$	\$	\$

B. BASIS FOR COSTS

Explain the basis for the costs (hourly rate of contractor, price of similar project, etc):

VII. NON-FEDERAL OR CDBG MATCHING SHARE

A. Donor _____

(name of source, e.g. City of Warwick, RI Foundation, etc)

Amount _____ Date Available _____

Source _____

(type of source, e.g. CDBG, Town appropriation, private donation, operating funds)

Kind _____

(e.g. cash, in-kind services, volunteer services, donated space or equipment, etc.)

B. Donor _____

Amount _____ Date Available _____

Source _____

Kind _____

C. Donor _____

Amount _____ Date Available _____

Source _____

Kind _____

Sources of non-federal/CDBG matching share include: CDBG, local/state appropriation, private donations, gifts/contributions, fundraising events. In addition to cash match, in-kind or donated services may also be used to match the PIL grant. In-kind services include: staff salaries, contributed supplies, or use of equipment such as computers, etc. Donated or volunteered services may include donated professional services, donated secretarial services, donated office space, or donated equipment.

Describe how non-cash match contributes to achieving the scope of work proposed.

VIII. ASSURANCES

NOTE: If the application is being prepared by a third party organization, local officials should be contacted well in advance of the RIHPHC grant application deadline to allow enough time for review and signatures.

In consideration of and for the purpose of applying for a historic preservation grant from the Rhode Island Historical Preservation and Heritage Commission, we, the City/Town of _____, hereby assure and pledge that we currently meet and will continue to meet the following:

Laws and Regulations: Grants will be administered in conformance with all applicable federal and state laws, regulations and policies of the Rhode Island Historical Preservation and Heritage Commission grant program including but not limited to:

- a. Compliance with equal opportunity and handicapped laws and regulations;
- b. Conducting all bidding and contracting actions in a manner that provides for maximum open and free competition in compliance with the Office of Management and Budget Circular A-102;
- c. Certification that the municipality is not presently debarred, suspended, ineligible or voluntarily excluded from receiving federal funds by any federal department or agency (signature required on Appendix).

Project Funding: Adequate financial resources will be available to initiate the project upon federal approval, complete the proposed work on schedule and provide for the cash flow requirements of the project taking into consideration one or two interim reimbursements and one final reimbursement. The matching share will meet the standards explained in the attached instructions.

Personnel: The project will be conducted by a person or persons whose qualifications

meet Professional Qualifications Standards 36 CFR, Part 61 and are approved by the Rhode Island Historical Preservation and Heritage Commission to ensure conformance with federal standards.

Final Project: A Final Project Report as described in the instructions will be submitted as a condition of final reimbursement.

Termination: Termination or reduction of the grant award may occur at any time by the Rhode Island Historical Preservation and Heritage Commission if the project work does not meet the approved plan(s) and/or specifications or if the grantee fails to fulfill, in a timely manner, his or her obligations under the grant.

SIGNED:

Chief Elected Official

Date

If necessary according to this grant application, I (Chief Elected Official) authorize the following third-party designee to act on behalf of the city or town for purposes of this grant application:

Name of designee

Signature of designee

Date

Please read and sign APPENDIX (Certifications Regarding Debarment...) and attach signed copy to application form.

IX. CLG APPLICANTS ONLY

This page should be filled out if the grant project comes from any of the following communities: Bristol, Cranston, Cumberland, East Greenwich, Gloucester, Hopkinton, New Shoreham, Newport, North Kingstown, North Providence, North Smithfield, Pawtucket, Providence, South Kingstown, Warwick

NAME(S) OF LOCAL HISTORIC DISTRICT ZONING AREA(S)

LOCATION(S) _____

NAME OF HISTORIC DISTRICT COMMISSION CHAIR _____

Mailing Address _____

Street _____

City/Town _____ Zip Code _____

Daytime Telephone _____ E-mail _____

SIGNED:

Historic District Commission Chair

Date