

CONNECTICUT COMMISSION  
ON CULTURE & TOURISM

Supplemental  
Certified Local Government Grants

Certified Local Government Program

2008

59 South Prospect Street  
Hartford, CT 06106

(860) 566-3005

[www.cultureandtourism.org](http://www.cultureandtourism.org)

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**Connecticut Commission on Culture & Tourism  
SUPPLEMENTAL  
CERTIFIED LOCAL GOVERNMENT GRANTS**

Fiscal Year 2008

Application Deadline: June 15, 2007

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**PROGRAM  
HIGHLIGHTS**

**The Historic Preservation and Museum Division of the Connecticut Commission on Culture and Tourism (CCT)** is pleased to support programs that recognize the importance of the state's heritage and its role in enhancing the quality of life for all citizens. Supplemental Certified Local Government Grants (SCLG) may be used by municipalities that are approved by the National Park Service, U.S. Department of the Interior as Certified Local Governments. Grants may be used to support activities sponsored by municipalities for a wide range of historic preservation planning activities.

**Certified Local Government Program**

Local Governments strengthen their local historic preservation efforts by achieving Certified Local Government (CLG) status from the National Park Service (NPS). The CLG program creates a local, state, and federal partnership that promotes historic preservation at the grassroots level. The CLG program seeks to develop and maintain local historic preservation programs that will influence the zoning and permitting decisions critical to preserving historic properties, and to ensure the broadest possible participation of local governments in the national historic preservation program while maintaining the preservation standards established by the Secretary of the Interior. For more information on the federal CLG program, visit [www.ct.nps.gov/hps/clg](http://www.ct.nps.gov/hps/clg). In Connecticut, CLG certification applications are filed with Mary Dunne, Local Government Grants Coordinator, Historic Preservation and Museum Division of the Commission on Culture & Tourism.

**Grants**

With federal funds provided by the Historic Preservation Fund of the National Park Service, CCT annually awards Historic Preservation Enhancement Grants (HPEG), small non-matching grants of up to \$2,800. (See separate HPEG application)

With state funds provided by the Community Investment Act, the Commission on Culture & Tourism awards SCLG grants of up to \$30,000 on a competitive basis. **Grant awards must be matched (50/50%) by non-state funds except for survey and inventory projects.** Grants will be awarded in **August, 2007 for activities that take place between August 1, 2007 and September 30, 2008.** **Applications will be accepted on a monthly basis as long as funds are available.**

A proposed program or project budget may exceed the total matching grant; however, additional sources of non-state funding must be identified in the application budget. SCLG grants will be available on an annual basis; however, municipalities may have only one active SCLG grant at a time.

The following are examples of initiatives, projects or programs that would qualify for funding. This is intended as guidance to assist in the development of an appropriate application.

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**PROGRAM  
HIGHLIGHTS**  
(continued)

- Historic and Architectural Resource Surveys – Detailed inventories of buildings located in the municipality including archival research, fieldwork, and photography;
- Computer indexing of historic properties;
- Archaeological Surveys at the reconnaissance or intensive level;
- Nominations to the State or National Registers of Historic Places;
- Pre-development studies such as feasibility studies, structural and engineering studies, or reuse studies for historic buildings;
- Architectural plans and specifications for historic municipally-owned properties;
- Outdoor Sculpture Condition Assessment Reports and Conservation Reports;
- Historic Structure reports;
- Historic Preservation Plans or Historic Preservation components of the municipal plan of conservation and development;
- Archaeological preserve reports;
- Public education publications and events;
- Website development on local historic preservation activities;
- Local historic district studies or reports;
- Heritage tourism studies, promotional activities

## WHO MAY APPLY

### SCLG

**Eligible applicants** are strictly limited to municipalities that have been formally designated as Certified Local Governments (CLG) by the National Park Service of the U.S. Department of the Interior. Municipalities that are interested in the Certified Local Government program should contact Mary Dunne, Local Government Grants Coordinator of the Commission on Culture & Tourism, at telephone 860-566-3005 ex. 326 or mary.dunne@ct.gov.

**Connecticut Certified Local Governments: Bridgeport, Brookfield, Canton, Chaplin, Colchester, Colebrook, East Hartford, Fairfield, Glastonbury, Groton, Guilford, Hamden, Harwinton (pending), Hebron, Killingly, Ledyard, New Fairfield, New Haven, New London, New Milford, Norwich, Old Lyme, Orange, Roxbury, Salisbury, Simsbury, Southbury, Tolland, Vernon, Waterford, Westport, Windsor, Woodbury, and Woodstock.**

**Ineligible activities** include: general operating expenses, acquisition of real estate, fundraising efforts; scholarships; lobbying activities; hospitality expenses; capital expenses; software acquisition; construction, restoration or rehabilitation, equipment purchase, travel, or regranteeing.

Municipalities applying for other CCT grant programs such as Historic Preservation Enhancement Grants (HPEG) or Historic Restoration Fund (HRF) grants may also apply for funding from the SCLG program.

If you have any questions regarding your eligibility for the SCLG program, contact Mary Dunne, Local Government Grants Coordinator, CCT, at telephone (860) 566-3005 Ex. 326 for more information.

**HOW TO APPLY**

**For first priority consideration for funding, applications must be received by June 15, 2007. Applications may be submitted after June 15, 2007 and will be considered for funding as long as state funds are available.**

**Faxed or Electronic Applications will not be accepted.**

**Copies may be requested from Mary Dunne as shown above.**

## APPLICATION REVIEW PROCESS

### SCLG

The Commission is using a simplified application process for the Supplemental Certified Local Government Grants. Applications will be reviewed and scored by the staff of the Historic Preservation and Museum Division and will be presented to the Historic Preservation Council for review. Final award will be made by the full board of the CCT. **All Certified Local Governments are strongly encouraged to apply.** The following criteria are the basis for the review of SCLG applications:

**1. QUALITY OF PROGRAM:**

- Ability of program to have a clear and positive impact on local historic preservation efforts

**2. PROGRAM IMPACT:**

Evidence that the proposed program will do one or more of the following:

- Encourage new awareness of historic preservation at the local level
- Expand the scope of current public education outreach
- Strengthen the municipality's administrative or regulatory capacity related to historic preservation
- Produce written or website materials for homeowners and/or town officials
- Leverage or serve as a catalyst for further investment
- Connecticut historic preservation with larger/boarder preservation efforts or plans at the local level

**3. ABILITY TO CARRY OUT THE PROGRAM:**

- Thoroughness and appropriateness of program budget
- Feasibility of the program's success, based on thorough planning reflected in narrative

## APPLICATION MATERIALS

### APPLICATION MATERIALS

Your application must include an application cover sheet, narrative, budget and attachments. **Please note that applications missing any of the listed materials will be considered incomplete and will not be reviewed.** Program must be compatible with the Commission on Culture & Tourism's Strategic Plan and the Historic Preservation and Museum Division's State Plan on historic preservation.

#### 1. Application Cover Sheet

Complete one application cover sheet for your program. The form must be signed and dated, with an original signature.

#### 2. Application Narrative

Answer questions 1-3 in narrative form in no more than ten (10) single-spaced typed pages (one side only). Margins should be no less than  $\frac{3}{4}$  inch on all four sides, with font size no smaller than 11 point. Your project budget is not included in the ten-page total.

- A. Describe your historic district commission's current activities.
- B. Describe the project for which you seek funding. **Specify how requested funds will be used. Provide an estimated project timeline.**
- C. Describe the benefits of your program to the historic district commission and municipality.

#### 3. Budget

Outline the budget for the proposed program. State Funds of any kind may not be used as matching share. Federal, municipal or private funds may be used as matching share. Matching share may be composed of both cash and in-kind services. Matching funds are not required for projects undertaking the survey and inventory of historic resources.

#### 4. Attachments

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### FINAL REPORTS

**Supplement Certified Local Government Grants are awarded on a reimbursement basis.** Funded municipalities are required to submit a Final Report and a Request for Reimbursement within 60 days of the completion of the project or no later than October 10, 2008. Failure to submit a final report will void eligibility for future funding from CCT. **Samples of any finished work with the Commission's acknowledgement statement and logo must be submitted. If possible, submit photographs.**

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### ASSEMBLY

Submit **two (2) photocopies, and one (1) original.**

Applications should be assembled in the following order:

- 1. Application Cover sheet – *signed at the bottom*
- 2. Application Narrative – *no more than 10 pages*

Required Attachments

- 3. Project Budget Form – *one page*
- 4. Authorizing Letter – *on letterhead, original signature*
- 5. State of Connecticut Employer Report of Compliance Staffing form
- 6. State of Connecticut Notification to Bidders form
- 7. Affirmative Action and Americans with Disabilities Compliance Form
- 8. Gift Affidavit Form

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**FOR FIRST PRIORITY FUNDING CONSIDERATION, APPLICATIONS MUST BE RECEIVED AT THE COMMISSION BY 4:30 PM ON FRIDAY, JUNE 15, 2007**

Faxed or electronic applications will not be accepted.

**Send applications to:**  
**Mary Dunne, Local Government Grants Coordinator**  
Connecticut Commission on Culture and Tourism  
59 South Prospect Street  
Hartford, CT 06106

**The CCT anticipates moving to a new location in winter of 2007. Please check the CCT website to confirm the mailing address .**

**CONNECTICUT COMMISSION ON CULTURE & TOURISM  
SUPPLEMENTAL CERTIFIED LOCAL GOVERNMENT GRANTS:  
APPLICATION COVER SHEET**

**APPLICANT  
INFORMATION**

Federal Employer ID Number \_\_\_\_\_  
Municipality Name \_\_\_\_\_  
Street Address or Location \_\_\_\_\_  
Mailing Address (if different) \_\_\_\_\_  
City/State/Zip \_\_\_\_\_

Daytime Telephone \_\_\_\_\_ Fax Number \_\_\_\_\_ Web Address \_\_\_\_\_

Chief Elected Official \_\_\_\_\_ Phone or Extension \_\_\_\_\_ Email Address \_\_\_\_\_

Application Contact Person \_\_\_\_\_ Phone or Extension \_\_\_\_\_ Email Address \_\_\_\_\_  
Historic District Commission

**PROJECT  
INFORMATION**

Is this a new initiative?  Yes  No  
Is this the expansion of a current project/program?  Yes  No

**LEGISLATIVE  
INFORMATION**

U.S. Representative \_\_\_\_\_ District Number \_\_\_\_\_  
State Senator \_\_\_\_\_ District Number \_\_\_\_\_  
State Representative \_\_\_\_\_ District Number \_\_\_\_\_

**PROJECT  
SUMMARY**

Use one sentence to describe your project/program in the space allotted here:

**GRANT REQUEST**

Up to \$30,000

**START DATE/END  
DATE (NO LATER  
THAN 9/30/08)**

Start Date:

End Date:

Signature of Authorized Official \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

**SIGNATURE**

\_\_\_\_\_

**ATTACHMENT 3**

**REQUIRED ATTACHMENTS**

Expense (Description)	SCLG Funds State	In-Kind	Federal or Private Funding	Municipal Cash Match	Expense Total
Personnel Salary: _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Consultant Fees: _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Supplies: _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Postage: _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Telephone: _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Printing: _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Promotion: _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Legal notices: _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Other (Specify): _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Overall Total(s)	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

**REQUIRED ATTACHMENTS**  
(continued)

**ATTACHMENT 4**  
**Signatory Authorizing Resolution**

I, \_\_\_\_\_, the duly qualified and acting Clerk of the \_\_\_\_\_ of \_\_\_\_\_, Connecticut, do hereby certify that  
(Town/city)  
the following resolution was adopted at a \_\_\_\_\_ meeting of the \_\_\_\_\_  
(regular/special)  
(town/city governing body), held on \_\_\_\_\_, and is on file  
(date)  
and of record, and that said resolution has not been altered, amended or revoked and is in full force and effect.

RESOLVED:

That the \_\_\_\_\_ is authorized and  
(First Selectman, Mayor, City Manager, Town Manager, Executive Director)  
directed to file an application on forms prescribed by the Connecticut Commission on Culture and Tourism for financial assistance in accordance with the provisions of Public Act 03-06 of the Connecticut General Assembly, in an amount not to exceed \$\_\_\_\_\_, and upon approval said request to enter into and execute a funding agreement with the state for such financial assistance to this municipality for \_\_\_\_\_.  
(grant project)

\_\_\_\_\_  
(Signature of clerk)

\_\_\_\_\_  
(date)

**ATTACHMENT 5**

**REQUIRED ATTACHMENTS**  
(continued)

STATE OF CONNECTICUT      EMPLOYER OF COMPLIANCE STAFF      LABOR DEPARTMENT

Department \_\_\_\_\_  Approved       Pending Investigation  
 \_\_\_\_\_  Disapproved       Investigation Requested  
 Compliance Officer

Date \_\_\_\_\_  
 This form should reflect the number of permanent employees on your payroll on date of submission.

Name of Contracting Firm \_\_\_\_\_ Type of Report \_\_\_\_\_  
 Prime Contractor       Subcontractor

**EMPLOYEE INFORMATION**

Total Employed _____	White _____	African American _____	Spanish Surname _____	Other (specify) _____
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Does your firm have a collective bargaining agreement or other contract or understanding with a labor organization or employment agency for the recruitment of labor?       Yes       No

If yes, list the name and address of the agency or organization.

\_\_\_\_\_ Name      \_\_\_\_\_ Address (No. and Street, City, State)

If no, indicate the usual methods of recruitment.  
 Connecticut State Employment Service       Private Employment Agency       Newspaper Advertisement  
 Walk-In       Other (specify) \_\_\_\_\_

The signer certifies that its practices and policies, including but not limited to matters concerning personnel, training, apprenticeship, membership, grievance and representation, and upgrading, do not discriminate on grounds of race, color, religious creed, age, sex, or national origin, or ancestry of any individual, and that the signer agrees it will affirmatively cooperate in the implementation of the policy and provisions of Executive order Number Three, and consent and agreement is made that recruitment, employment and the terms and conditions of employment under the contract shall be in accordance with the purpose and provisions of Executive Order Number Three.

Is firm in minority ownership? (51% of assets in control of minorities)       Yes       No

I certify that the above is correct to the best of my knowledge.

\_\_\_\_\_ Employer      \_\_\_\_\_ Business Name      \_\_\_\_\_ Date

By \_\_\_\_\_  
 Signature      Title

**ATTACHMENT 6**

**NOTIFICATION TO BIDDERS FORM**

**REQUIRED ATTACHMENTS**  
(continued)

The contract to be awarded is subject to contract compliance requirements mandated by Section 4-114a of the Connecticut General Statutes; and, when the awarding agency is the state, Section 46a-71(d) of the Connecticut General Statutes. There are Contract Compliance Regulations codified at Section 4-114a-1 et seq. of the Regulations of Connecticut State Agencies which establish a procedure for the awarding of all contracts covered by Sections 4-114a and 46a-71(d) of the Connecticut General Statutes.

According to Section 4-114a-3(9) of the Contract Compliance Regulations, every agency awarding a contract subject to the contract compliance requirements has an obligation to “aggressively solicit the participation of legitimate minority business enterprises as bidders, contractors, subcontractors and suppliers of materials.” “Minority business enterprise” is defined in Section 4-114a of the Connecticut General Statutes as a business wherein fifty-one percent or more of the capital stock, or assets belong to a person or persons: “(1) Who are active in the daily affairs of the enterprise; (2) who have the power to direct the management and policies of the enterprise; and (3) who are members of a minority, as such term is defined in subsection (a) of Section 32-9n.” “Minority” groups are defined in Section 32-9n of the Connecticut General Statutes as “(1) Black Americans .... (2) Hispanic Americans .... (3) Women .... (4) Asian Pacific Americans and Pacific Islanders; or (5) American Indians ....” The above definitions apply to the contract compliance requirements by virtue of Section 4-114a-1 (10) of the Contract Compliance Regulations.

The awarding agency will consider the following factors when reviewing the bidder’s qualifications under the contract compliance requirements:

- (a) the bidder’s success in implementing an affirmative action plan;
- (b) the bidder’s success in developing an apprenticeship program complying with Sections 46a-68-1 to 46a-68-17 of the Connecticut General Statutes, inclusive;
- (c) the bidder’s promise to develop and implement a successful affirmative action plan;
- (d) the bidder’s submission of EEO-1 data indicating that the composition of its work force is at or near parity when compared to the racial and sexual composition of the work force in the relevant labor market area; and
- (e) the bidder’s promise to set aside a portion of the contract for legitimate minority business enterprises. See Section 4-114a-3(10) of the Contract Compliance Regulations.

\*INSTRUCTION: Bidder must sign acknowledgement below, detach along dotted line and return acknowledgement to Awarding Agency along with bid proposal.

The undersigned acknowledges receiving and reading a copy of the “Notification to Bidders” form.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

On behalf of \_\_\_\_\_

**ATTACHMENT 7**

**AFFIRMATIVE ACTION & AMERICANS WITH DISABILITIES COMPLIANCE FORM**

**REQUIRED ATTACHMENTS**  
(continued)

The Commission has adopted a policy stating that no application for state funds through the Connecticut Commission on Culture & Tourism by any organization shall be complete nor will funds be voted without the submission of affirmative action and ADA information approved by the applicant/organization’s governing body.

Your organization should not discriminate on the basis of disability in admission to, access to, or operation of its programs, services, or activities and should not discriminate on the basis of disability in its hiring or employment practices as provided by Title II of the Americans with Disabilities Act of 1990.

**AFFIRMATIVE ACTION STATEMENT**

I. Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

II. Please list the date (or dates) when your organization’s Board of Directors approved an Affirmative Action Plan or Statement of Policy and an American’s for Disabilities Act (ADA) Compliance or plan. Statements of Compliance may be requested as needed by the Commission on Culture & Tourism, the State Attorney General’s Office or the State Commission on Human Rights and Opportunities Office.

Dates: Affirmative Action \_\_\_\_\_ ADA: \_\_\_\_\_

III. Annual statistical report of employees and board as of last year of fiscal activity.

Indicate year: \_\_\_\_\_

<b>TOTAL MALE</b>							
EMPLOYEES	White	Black	Hispanic	American Indian	Asian or Pacific Islander	General*	Disabled
Full-time Employees							
Part-time Employees							
Contracted Employees							
<b>TOTAL EMPLOYEES</b>							
Board of Directors							

<b>TOTAL FEMALE</b>							
EMPLOYEES	White	Black	Hispanic	American Indian	Asian or Pacific Islander	General*	Disabled
Full-time Employees							
Part-time Employees							
Contracted Employees							
<b>TOTAL EMPLOYEES</b>							
Board of Directors							

\* if none of the above apply

**ATTACHMENT 8**

**Grant Application Gift Affidavit**

**REQUIRED ATTACHMENTS**  
(continued)

I, \_\_\_\_\_, hereby swear that during the two-year period preceding the submission of this grant application that neither myself nor any principals or key personnel of the submitting grantee nor any agent of the submitting grantee gave a gift, as defined in Conn. Gen. Stat. Section 1-79(e), including a life event gift as defined in Conn. Gen. Stat. Section 1-79(e)(12), to (1) any public official(s) or state employee(s) who has participated in the preparation of or has requested funding for this grant application or (2) to any state employee(s) who has supervisory or appointing authority over the state agency administering this grant, except the gifts listed below:

Name of Benefactor	Name of Recipient	Gift Description	Value	Date of Gift
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Further, neither I nor any principals or key personnel of the submitting grantee know of any action to circumvent this gift affidavit.

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name of Grantee

Sworn and subscribed before me on this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_.

\_\_\_\_\_  
Commissioner of the Superior Court  
Notary Public