



Department of Economic and  
Community Development

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State Historic Preservation Office

# State Historic Preservation Office

## Historic Restoration Fund Grant Application April 2016

State Historic Preservation Office

One Constitution Plaza | Hartford, CT 06103 | P: 860.256.2800 | [Cultureandtourism.org](http://Cultureandtourism.org)

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The following appendices can be found on the website [www.cultureandtourism.org](http://www.cultureandtourism.org)

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## Historic Restoration Fund Grants Overview (HRF)

The State Historic Preservation Office (SHPO) offers matching, reimbursement Historic Restoration Fund Grants to Connecticut municipalities and 501(c)3 and 501(c)13 nonprofits to be used for the restoration, rehabilitation, stabilization, or archaeological investigation of Connecticut's historic resources which are listed in the State or National Registers of Historic Places.

The property must be owned by a municipality or a 501(c)3 or 501(c)13 nonprofit organization and the grant awards are paid as a onetime reimbursement. Applications are accepted on a rolling basis.

- Grant awards range from \$5,000-\$50,000.00;
- Grant awards must be matched on a one-to-one basis with cash (no in-kind services allowed);
- Matching funds cannot be funds from the State of Connecticut. Federal funds or other non-state funds may be used;
- Facilities must be open to the public or work must be visible to the public;
- A preservation easement of limited duration must be placed on the property following completion of the project;
- Grant funds are paid to grantees on a single-payment reimbursement basis following the completion of the project and approval of all work by staff; and
- Project work must be consistent with the Secretary of the Interior's Standards for the Treatment of Historic Properties

HRF Grants are funded by the Community Investment Act. The Community Investment Act (also known as Public Act 05-228) was signed into law on July 11th, 2005 and provides increased funding for open space, farmland preservation, historic preservation and affordable housing.

Depending on the project, HRF grants may require Design Development level plans and specifications to be completed by a Historical Architect who meets the Secretary of the Interior's Professional Qualifications Standards as published in the Code of Federal Regulations, 36 CFR Part 61. Please consult SHPO staff regarding whether your project requires a qualified professional consultant.

The use of state and/or federal funds requires an open bidding process. Contractors cannot be pre-selected and any potential contractor cannot play any role in the design of the project or application. Grantees may only have one active SHPO construction grant at a time. Any existing construction grants must be officially closed before a new application is submitted to SHPO.

### **Application Information and Selection Process**

Applications are accepted on a rolling basis. All complete applications will be reviewed by SHPO staff and considered for funding. Once an application is reviewed, SHPO will contact the applicant with any questions or points of clarification. If the application is complete, it will be placed on the next available agenda of the Historic Preservation Council which votes to award the grant. The Historic Preservation Council meets the first Wednesday of each month.

**Historic Restoration Fund  
Grant Application**

**APPLICANT INFORMATION**

Applicant Organization:

Chief Elected Official/Executive Director:

Federal Employer ID Number:

Street Address:

Municipality:

State:

ZIP Code:

Contact Name:

Daytime Phone:

Email Address:

Website:

Mailing address (if different from above):

Municipality:

State:

ZIP Code:

**PROJECT SITE INFORMATION**

**Street Address:**

Municipality :

Historic Name of Property:

**PROJECT INFORMATION**

1. Identify the type of project:

- Rehabilitation
- Restoration
- Stabilization
- Archaeological Investigation

2. One sentence explanation of the project:

3. Grant Amount Request: \$

4. Is the property listed in the:

- National Register of Historic Places
- National Historic Landmark
- State Register of Historic Places
- Local Historic District or Property

5. Identify the architect or builder of the property:

6. Identify the applicant:

- Municipality
- 501(c)3 nonprofit
- 501(c)13 nonprofit

Please submit a copy of the applicant's IRS Status Determination letter

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7. Has a Certified Resolution approved by the applicant's legislative body been completed?

yes  no

See Appendix A for a Certified Resolutions sample and instructions

8. Is this a subsequent phase of a project:

yes  no

If yes, explain:

9. Has the applicant received a grant from SHPO in the past:

yes  no

If yes, please list all grants received (include grant type, date awarded, and award amount):

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10. List any previous capital grants received from the State in the last three years (include grant type, date awarded, and award amount):

11. Has the applicant read the Preservation Restriction sample and agreed to the terms?

yes     no

Please see website for a sample of the Preservation Restriction

12. Has the property had a Preservation Restriction in the past?

yes     no

If so, when, for what project, and is it still active:

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13. Please provide a legal opinion from an attorney licensed to practice law in the State of Connecticut which identifies the following:

- Property's Legal Owner of Record (name and contact information):
- Names of Other Parties Holding Interest (names and contact information):
- A Preservation Restriction Can Be Placed on the Property  yes  no

If other parties have an interest in the property, the applicant must submit notarized letters from each party authorizing the applicant to submit this application and complete the project

14. 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

Please provide notarized statements from the owner/s of the property which permit the applicant to submit this application and complete the project.

yes  no

Please submit a copy of the Certificate of Title for the property and all applicable notarized statements

15. Is the property insured?

yes  no

Please submit a copy of the Insurance Policy for the property

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16. Does the applicant have the funding for the entire project available and restricted for the purposes of this project?

yes  no

17. Please identify the consultant on the project:

Name:

Firm:

Contact information:

Is the consultant a:

Historical Architect       Structural Engineer       Attorney

Please submit the consultant's resume

18. Is the project shovel ready and does the applicant agree to have the project go out to bid within 90 days of the contract execution?

yes  no

19. Does the project involve ground disturbance?

yes  no

20. If the project involves ground disturbance, has the Staff Archaeologist been contacted?

yes  no yes  N/A

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21. Has a long-term preservation plan been developed for the property?

yes     no

Please include a copy of the preservation plan

22. If the property is located in a Local Historic District, has the applicant received a Certificate of Appropriateness from the Local Historic District Commission?

yes     no

Please include a copy of the COA

23. Does the applicant agree to aggressively solicit bids for all contract work from qualified minority and women owned businesses and to meet all other Affirmative Action and procurement requirements as outlined in the Bidding, Contracting and Construction Guidelines?

yes     no

See Appendix D for the Bidding, Contracting and Construction Guidelines

24. Does project involve improving accessibility or universal access?

yes     no

If yes, explain:

25. Does the project conform to the State Historic Preservation Plan?

See "Investment in Connecticut" at [www.cultureandtourism.org](http://www.cultureandtourism.org)

yes     no

## Historic Restoration Fund Grant Application

26. All projects funded with this grant program must be visible and open to the public at least twelve days a year on an equitably spaced basis and available by appointment. Does the applicant agree to the public visitation stipulation?

yes     no

Please include a proposed schedule outlining the dates and times the property will be open to the public

27. Is the project located within a FEMA designated flood zone?

yes     no

Please include a FEMA FIRM map

28. Has the applicant completed the W-9 and Vendor Profile forms?

yes     no

Please see Appendix B and include the completed forms

29. Has the applicant completed the Budget?

yes     no

30. Does the application have letters of support for this project (not required)?

yes     no

Please submit any letters of support

LEGISLATIVE INFORMATION	
U.S Representative's Name:	District #
State Senator's Name:	District #
State Representatives Name:	District #
AUHTORIZATION	
Name of Authorized Official:	
Title	
Signature:	Date:

### Historic Restoration Fund Grants Application Checklist

Required Items	Included	N/A	Comments
Project Narrative 1-5 pages	<input type="checkbox"/>	<input type="checkbox"/>	
Construction/Project Schedule	<input type="checkbox"/>	<input type="checkbox"/>	
Photographs	<input type="checkbox"/>	<input type="checkbox"/>	
Long-Term Preservation Plan			
Letter from an attorney	<input type="checkbox"/>	<input type="checkbox"/>	
Design Development Level Plans and Specifications or scope of work and materials specifications	<input type="checkbox"/>	<input type="checkbox"/>	
Letter from the property owner/s authorizing application	<input type="checkbox"/>	<input type="checkbox"/>	
Schedule of Public Visitation	<input type="checkbox"/>	<input type="checkbox"/>	
Proof of Insurance	<input type="checkbox"/>	<input type="checkbox"/>	
Certificate of Title or Long-term lease agreement	<input type="checkbox"/>	<input type="checkbox"/>	
Consultant's Resume	<input type="checkbox"/>	<input type="checkbox"/>	
501(c)3 or 501(c)13 IRS tax status determination letter	<input type="checkbox"/>	<input type="checkbox"/>	
Certified Resolution	<input type="checkbox"/>	<input type="checkbox"/>	
Budget	<input type="checkbox"/>	<input type="checkbox"/>	
W-9	<input type="checkbox"/>	<input type="checkbox"/>	
Vendor Profile Form	<input type="checkbox"/>	<input type="checkbox"/>	
FEMA FIRM Map	<input type="checkbox"/>	<input type="checkbox"/>	

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Review letter from Staff Archaeologist	<input type="checkbox"/>	<input type="checkbox"/>	
Certificate of Appropriateness from municipal Historical Commission	<input type="checkbox"/>	<input type="checkbox"/>	
Letters of Support	<input type="checkbox"/>	<input type="checkbox"/>	

Applicant Name: \_\_\_\_\_

Project Name: \_\_\_\_\_

Amount Requested:     \$ \_\_\_\_\_

Signature: \_\_\_\_\_

Date \_\_\_\_\_

**If you have questions regarding the Historic Restoration Fund  
Grant Application please contact**

**Mary Dunne at [mary.dunne@ct.gov](mailto:mary.dunne@ct.gov) or 860-256-2756**