



Connecticut Commission
on Culture & Tourism

HISTORIC
PRESERVATION
AND MUSEUM
DIVISION

*Supplemental Certified
Local Government
Grants*

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SUPPLEMENTAL CERTIFIED LOCAL GOVERNMENT GRANTS

PROGRAM HIGHLIGHTS

Supplemental Certified Local Government Grants (SCLG) may be used by municipalities that are approved by the National Park Service (NPS), U.S. Department of the Interior as Certified Local Governments (CLG). Grants may be used to support activities sponsored by CLG 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 status from the National Park Service. 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 U.S. Secretary of the Interior. For more information on the federal CLG program, visit 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 NPS, 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** (ex: federal, municipal, private, etc.) **funds except for survey and inventory projects. 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.

WHO MAY APPLY

Eligible applicants are strictly limited to municipalities that have been formally designated as Certified Local Governments 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 860-256-2756 or mary.dunne@ct.gov.

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

WHAT WE FUND

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.

- Historic and Architectural Resource Surveys that produce detailed inventories of buildings located in the municipality including archival research, fieldwork and photography;
- Computer indexing of surveyed 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 materials

Program must be compatible with the Commission on Culture & Tourism's Strategic Plan and the Historic Preservation and Museum Division's State Historic Preservation Plan, *Building Quality Communities* (available at www.cultureandtourism.org)

Ineligible activities and costs include:

- acquisition of real estate;
- archeological salvage;
- archival research not connected to historic preservation, "pure" history;
- capital expenses;
- construction, restoration or rehabilitation;
- costs incurred prior to the date of a grant award and the execution of the state contract;
- curation;
- equipment purchase;
- fines or penalties;
- fundraising efforts;
- general operating expenses;
- hospitality expenses including alcoholic beverages and food, meals or entertainment;
- indirect costs;
- interpretative expenses;
- survey or research on federally-owned or state-owned properties;
- interest payments;
- lobbying activities;
- nonconformance with applicable Secretary of the Interior's Standards;
- projects already underway;
- political contributions;
- regranteeing;
- scholarships;
- software acquisition;
- travel

If you have any questions regarding your eligibility for the SCLG program or your application, contact Mary Dunne, Local Government Grants Coordinator, Historic Preservation and Museum Division, CCI, at telephone (860) 256-2756 or Mary.dunne@ct.gov.

**APPLICATION
INFORMATION**

For first priority consideration for funding, applications must be received by June 16, 2008. Applications may be submitted after June 16, 2008 and will be considered for funding only if state funds are available. 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.

All Certified Local Governments are strongly encouraged to apply.

The original application and one copy shall be submitted. Faxed or electronic Applications will not be accepted. The application must include the cover sheet, narrative, budget, timeline and required state forms. Applications missing any of the listed materials will be considered incomplete and will not be reviewed. Please submit applications to:

Mary Dunne, Local Government Grants Coordinator
Historic Preservation and Museum Division
Commission on Culture & Tourism
1 Constitution Plaza, Second Floor
Hartford, CT 06103

**APPLICATION
MATERIALS**

Applications must include one original copy (with original signatures) and one photocopy.

1. Application Cover Sheet

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

2. Application Narrative

Answer questions in narrative form in no more than ten (10) single-spaced typed pages (one side only). Margins should be no less than ¾ 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. All projects must be completed within a 12-month period.
- C. Describe the benefits of your program to the historic district commission and municipality.

3. Budget

Use the provided attachment sheet to 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 - Included behind Application Cover Sheet in this packet

- Project Budget Form – *one page*
- Signatory Authorizing Resolution – *on letterhead, original signature*
- State of Connecticut Employer Report of Compliance Staffing Form
- Affirmative Action and Americans with Disabilities Compliance Form
- Federal Assurances
- Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions

**ASSEMBLY
CHECKLIST**

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. Signatory Authorizing Resolution – *on letterhead, original signature*
- 5. State of Connecticut Employer Report of Compliance Staffing Form
- 6. Affirmative Action and Americans with Disabilities Compliance Form
- 7. Federal Assurances
- 8. Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions

FOR FIRST PRIORITY FUNDING CONSIDERATION, APPLICATIONS MUST BE RECEIVED AT THE COMMISSION **BY 4:30 PM ON MONDAY, JUNE 16, 2008**

Faxed or electronic applications will not be accepted.

Send applications to:

Mary Dunne, Local Government Grants Coordinator
Connecticut Commission on Culture and Tourism
One Constitution Plaza
Second Floor
Hartford, CT 06103

**SELECTION
PROCESS**

Applications will be reviewed 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 Commission of CCT. 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
- All must be carried out in accordance with the Applicable Secretary of the Interior's Standards for Archaeology and Historic Preservation

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
- Inventory and survey historic, architectural and archaeological resources
- Produce written or website materials for property owners and/or town officials
- Leverage or serve as a catalyst for further investment
- Connect historic preservation with larger/boarder preservation efforts or plans at the local level
- Protect properties through nominations to the National Register of Historic Places or the State Register of Historic Places
- Produce high-quality pre-development documents such as historic structures reports, feasibility studies or architectural plans

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

**GRANT AWARD,
STATE CONTRACT
AND REQUEST FOR
REIMBURSEMENT**

Supplement Certified Local Government Grants are awarded on a reimbursement basis.

- A grant award letter and contract will be sent to the grantee following award by the full commission of the Commission on Culture & Tourism.
- Grant contracts must be signed and returned within 30 days. CCT will not disburse funds without receipt of signed original contracts.
- Grant recipients are required to use funds for the purposes indicated on the contract and must seek and receive CCT prior written approval for any changes or modifications to the contract.
- Grantees are required to credit the “Connecticut Commission on Culture & Tourism” in all print, audio, video and internet materials and all publicity materials. A publicity kit will be provided.
- SCLG grants are funded on a reimbursement basis. In order to receive a reimbursement check from the CCT, grantees are required to submit payment and expense documents. Grantees will receive further information from the SCLG coordinator.
- Funded municipalities are required to submit a Final Report within 60 days of the completion of the program. Forms and instructions will be provided. Failure to submit a final report will void eligibility for future funding from CCT.

**GRANT
CANCELLATIONS**

CCT has the right to withhold, reduce or cancel grants if a municipality:

- Has past due final reports from a previously received CCT grant
- Fails to comply with the terms of the grant contract
- Demonstrates inadequate financial management or oversight
- Does not properly credit CCT support
- Experiences significant changes in programs or services, or cancels or suspends a funded project

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 _____ E-mail _____

Application Contact Person _____

Historic District Commission

Phone or Extension _____ E-mail _____

PROJECT INFORMATION

Is this a new initiative? Yes No

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

LEGISLATIVE INFORMATION (OBTAIN FROM TOWN CLERK OR WWW.VOTESMART.ORG)

U.S. Representative's Name _____ District # _____

State Senator's Name _____ District # _____

State Representative's Name _____ District # _____

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 9/30/09*): _____

SIGNATURE

Signature of Authorized Official _____

Title _____ Date _____

FOR OFFICE USE ONLY:

App# _____

BUDGET FORM

Expense (Description)	SCLG Fund State	In-Kind	Federal/Private Funding	Municipal Cash Match	Expense Total
Personal Salary	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Consulting Fees	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Supplies	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Postage	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Telephone	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Printing	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Promotion	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Legal notices	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Other	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Overall Total(s)	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

SAMPLE 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)
_____, held on _____, and is on file and of record,
(town/city governing body) *(date)*
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)

**STATE OF CONNECTICUT
EMPLOYER OF COMPLIANCE STAFF
LABOR DEPARTMENT**

Department _____ Approved Pending Investigation
Compliance Officer _____ Disapproved Investigation Requested
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): _____

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/City/State/Zip _____

* If no, indicate the usual methods of recruitment.

Connecticut State Employment Service Private Employment Agency Newspaper Advertisement
 Walk-In Other (specify) _____

SIGNATURE

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 _____
Signature _____
Title _____

AFFIRMATIVE ACTION AND AMERICANS WITH DISABILITIES COMPLIANCE FORM

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 _____
 City/State/Zip _____

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.

TOTAL MALE

Employees	White	Black	Hispanic	American Indian	Asian or Pacific Islander	General <i>If none of the others apply</i>	Disabled
Full Time							
Part Time							
Contracted							
TOTAL							
Board of Directors							

Indicate Year _____

TOTAL FEMALE

Employees	White	Black	Hispanic	American Indian	Asian or Pacific Islander	General <i>If none of the others apply</i>	Disabled
Full Time							
Part Time							
Contracted							
TOTAL							
Board of Directors							

Indicate year: _____

AFFIRMATIVE ACTION & AMERICANS WITH DISABILITIES COMPLIANCE FORM - CONT'D

***IF NONE OF THE PREVIOUS PAGE APPLIES**

IV. Please list new employees hired during the past 12 months on a separate sheet in the following format:

Title _____
Minority, Disabled or Non-Minority (specify) Date of Employment _____

V. Please list new appointments that have been made to the Board during the past 12 months on a separate sheet in the following format:

Position _____
Minority, Disabled or Non-Minority (specify) Date of Appointment _____

COMPLIANCE AGREEMENT

The applicant/organization agrees to comply with all governmental regulations concerning Affirmative Action compliance and Title II of the Americans with Disabilities Act of 1990. The Connecticut Commission on Culture & Tourism is available to assist any organization with information on compliance and requirements as mandated by Congress.

Authorized Organization Official

Title

Name of Organization

Date

FEDERAL ASSURANCES

In consideration of and for the purpose of obtaining a grant from the U.S. Department of the Interior through the Connecticut Commission on Culture and Tourism, _____ (hereinafter called "Applicant Recipient") hereby agrees that it will comply with the following:

1. Grants shall be administered in conformance with all applicable federal and state laws, regulations, policies, requirements, and guidances, including OMB Circular A-102; policies and procedures of the Historic Preservation Fund grant-in-aid program; and civil rights, equal employment opportunity and labor law requirements of federal grants;
2. Procurement actions shall be conducted in a manner that provides for maximum open and free competition in compliance with program requirements, including OMB Circular A-102;
3. Adequate financial resources shall be available to provide the necessary experience, qualified staff, and facilities to complete the proposed project, or a firm commitment or arrangement to obtain such shall be made;
4. All costs charged to the grant project shall be in payment of an approved budget item in accordance with the cost principles of Federal Management Circular 74-4;
5. An adequate financial management system (and audit procedures when deemed applicable) shall be maintained which provides efficient and effective accountability and control of all property, funds, and assets;
6. Matching share shall not consist of funds from the federal government under another assistance agreement unless authorized;
7. The proposed or required completion schedule for the project shall be met.

The Applicant-Recipient recognizes and agrees that such federal assistance shall be extended in reliance on the representatives and agreements made in this assurance, and that the United States shall reserve the right to seek judicial enforcement of this assurance. This assurance is binding on the Applicant-Recipient, its successors, transferees, and assignees, and the person or persons whose signature(s) appear below are authorized to sign this assurance on behalf of the Applicant-Recipient.

Municipality Name _____ Date _____

Authorized Signature _____

Name _____ Title _____

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION LOWER TIER COVERED TRANSACTIONS

This certification is required by the regulations implementing Executive Order 12549. Debarment and Suspension, 43 CFR Part 12, Section 12.510, Participants' responsibilities. The regulations were published Part VII of the May 26, 1988 Federal Register (pages 19160-19211). Copies of the regulations are included in the proposal package. For further assistance in obtaining a copy of the regulations, contact the U.S. Department of the Interior, Acquisition and Assistance Division. Office of Acquisition and Property Management, 18th and C. Streets, N.W., Washington, D.C. 20240.

- (1) The prospective lower tier participant certified, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by an Federal department or agency.
- (2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Signature of Authorized Representative _____

Name _____

Title _____ Date _____



**Connecticut Commission
on Culture & Tourism**

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2nd Floor
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Telephone: 860-256-2800

www.cultureandtourism.org/history