2022 Maintenance and Repair funding for Religious Organizations PRE-APPLICATION

Applicant Information

Full name of the Applicant Organization

[Required Field]

Is the Applicant Organization a 501 (c) (3)?

[Required Answer] [Yes] or [No]

Federal EIN number (Tax ID)

[Required Field]

[Optional Field] Web address for the site/organization

[Required Field] List other organization/groups that use the facility

[Required Field] Number of parish members

Contact information for the person coordinating the grant for the organization

[Required Field] Phone number

[Optional Field] Alternative phone number

[Required Field] Email address

[Optional Field] Alternative email address

[Optional Field] Alternative email address

[Required Field] Contact/Organizational mailing address

Must fill each field >>>>[Number and Street] [Town] [County] [State] [Zip Code]

[Required Field] Physical address of project site

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Must fill each field >>>>[Number and Street] [Town] [County] [State] [Zip Code]

Project Information

[Required Answer] Select one: Which preservation category best fits the project for which you are applying? Select all that apply:

- exterior painting
- finishes and surface restoration
- fire detection
- lightning protection
- security systems
- repairs to/restoration of porches
- repairs to/restoration of roofs
- repairs to/restoration of windows
- repairs to foundation and sills
- repairs to chimney
- masonry repointing

[Required Field] [Brief explanation of project scope] >>> 100 words max

[Required Field] Why is this project a priority for the project site? What studies, reports, or observations (i.e. condition assessment, maintenance plan, preservation plan, etc.) were used to draw this conclusion? >>>>> Max 100 words

[Required answer] Has the applicant received a Maintenance and Repair Grant from Preservation Connecticut for the <u>project site</u>?

Yes or No. [Optional field] If Yes, please list ______

[Required Field] Please list any other major preservation projects that have been undertaken at the **project site** in the last 10 years.

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[Required Field] Amount of the request (up to \$15,000)
[\$]
[Required Field] Total amount of matching funds that will be in place by time of application
[\$]
Site Information
[Required Answer] Historic Designation of resource. Property must be listed on the State or National
Register of Historic Places to qualify.
[National Register of Historic Places]
[National Register of Historic Places, District [Name of District]
[State Register of Historic Places]
[State Register of Historic Places, District] [Name of District]
[Required Answer] Briefly explain the importance of the project site for the community. [100 Words or less]
[Required Answer] Does any Government entity or organization hold an easement or preservation restriction which will require review of the proposed project? [Yes] or [No] If Yes, name easement holder []
[Required Answer] Will this project require review and/or a Certificate of Appropriateness (COA) from a Local Historic District Commission or other regulatory body? [Yes] or [No] If Yes, name review body []
Required submission of at least 3 photos in .jpg format 1 photo must be a general view of the project site At least 2 photos must illustrate project area

Optional Submission: If this project is informed by a condition assessment, preservation or maintenance

plan, please upload a PDF copy.