



HISTORIC PRESERVATION FUND SUBGRANT APPLICATION For
project period: February 2020 – July 2021

Application postmark must be no later than November 6, 2020

Before completing this application, please read the *Historic Preservation Fund (HPF) Subgrant Application Guidelines* and the *Certified Local Government Subgrant Criteria*. It will be rejected if incomplete, lacks required signatures, or lacks a letter of intent which was due September 11, 2020. Contact Joe DeRose, phone (608) 264-6512 or email joe.derose@wisconsinhistory.org.

Certified Local Government, Year Certified was _____

PROJECT TITLE: _____

APPLICANT: Legal name of organization _____

Federal Employer Identification Number (FEIN) _____

Address _____

CONTACT: Name _____ Day Phone _____

Mailing Address _____

Email Address _____

Municipality's Financial Officer authorized to certify the funds will be available (see last pg)

Name _____ Day Phone _____

Title _____

Address (if different from applicant) _____

No later than November 6, 2020 send 5 copies of the completed application **plus 1 copy of your community's historic preservation plan, if available** to:

**State Historic Preservation Office
WISCONSIN HISTORICAL SOCIETY
816 STATE STREET
MADISON WI 53706-1482**

This program receives Federal financial assistance for identification and preservation of historic properties. Under Title VI of the Civil Rights Act of 1964 and Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination Act of 1975, as amended, the U.S. Department of Interior prohibits discrimination on the basis of race, color, national origin, disability, or age in its federally-assisted programs. If you believe you have been discriminated against in any program, activity, or facility as described above, or if you desire further information, please write to: Office of Equal Opportunity, National Park Service, 1849 C Street NW, Washington, D.C. 20240.

PURPOSE OF PROJECT - Check the appropriate item, or items, below and then describe the project in detail.

Initial intensive survey of the community.

National Register historic district nominations that result from the initial survey.

Resurvey of a community that was surveyed more than 25 years ago.

National Register nominations for individual private properties.

Public outreach and educational projects.

Design guidelines and preservation plans.

Has the community listed all of the National Register properties identified by the previous intensive survey.

DESCRIPTION OF PROJECT (attach additional pages if needed)

HOW DOES THE PROJECT MEET LOCAL HISTORIC PRESERVATION GOALS - Describe how the project meets local preservation goals. Describe in detail your community's adherence to its preservation plan, how this project relates to your community's preservation plan, and how this project addresses a specific historic preservation need in the community.

[Empty text box for response]

LIST PREVIOUS CLG FUNDED PROJECTS AND HOW THE COMMUNITY HAS BENEFITTED FROM THEM – Describe in detail previous historic preservation projects completed and how they have benefitted the community. How has the community and the historic preservation commission used these products? If this is your first CLG application, list other large-scale projects that have benefitted the community and how they were implemented.

Identify which recent WHS Historic Preservation and Local History Conference, WAHPC Conference, CLG training webinars, etc. or when the commissioner web training module on the WHS website was completed.

BUDGET – Maximum award amount is \$50,000 with no local match required. Provide an estimate of costs in **whole dollars** to do the project. The applicant is **reimbursed** upon product completion up to the award amount; if project costs exceed the award, the applicant will be expected to pay for additional costs. **Two** itemized estimates prepared by professional consultants must be submitted with this application. The estimates must include, the number of researchers, final report printing costs, time spent uploading images to WHPD, line items for overhead, travel, research, field work (if applicable), and final product cost. **All professional consultants must be approved by the SHPO.**

TOTAL SUBGRANT APPLICATION AMOUNT: \$ _____

CERTIFICATION – I have read the *Historic Preservation Fund Subgrant Application Guidelines* and verify that all information on the application is true to the best of our ability. We the applicant agree to comply with Title IV of the Civil Rights Act of 1964 and all requirements imposed by or pursuant to the Department of the Interior regulations issued pursuant to that title, to the end that, no person in the United State shall, on the ground of race, color, national origin, disability, or age be excluded from participation in, be denied benefits of, or be otherwise subjected to discrimination under any program or activity for which financial assistance is received from the National Park Service and hereby give assurance that it will immediately take any measures to effectuate this agreement.

Signature of Financial Officer: _____ **Date:** _____

