Applications due by 4:00pm Thursday, April 18, 2024

# PRESERVE NEW JERSEY HISTORIC PRESERVATION FUND 2024 GRANT APPLICATION HISTORIC SITE MANAGEMENT



www.njht.org njht@dca.nj.gov (609) 984-0473



## Instructions

All questions with an \* are *required*. Some questions are only required if you gave a certain answer in a previous question. Those are denoted with a +.

Make sure to adhere to the maximum word limits on all questions. You will not be able to enter more than this in the online application, and evaluators will not consider answers that exceed the limit.

All applicants should read the <u>Grant Guidelines</u> (PDF) carefully before applying. The guidelines include important information about eligible applicants and activities, criteria for evaluation, schedule for review, and more.

In addition to the application, you will need to submit a USB drive with supporting documentation to the New Jersey Historic Trust's office by the application deadline. A Supporting Documents Checklist is included at the end of this application. The end of each section also has a list of supporting documents for that section.

The <u>Applicant's Governing Body/Board Resolution and Assurances</u> (Word doc) are required as part of Attachment A on the USB drive. <u>Owner Approval</u> (Word doc) is required as part of Attachment B for any properties not owned by the applicant.

Whether you are submitting the application online or have been given permission by the New Jersey Historic Trust to submit as a Word document, *do not wait until the last minute!* This is a complex application. Start early to avoid missing the deadline.

Applications and USB drives are due to the New Jersey Historic Trust office by **4:00pm on April 18**, **2024**, no exceptions.

## **Eligibility Statements**

The following application is for Historic Site Management (HSM) projects. This includes projects such as Preservation Plans, Historic Structures Reports, conditions assessments, design documents, etc. For a full list of eligible projects, please review the <u>Grant Guidelines</u> or contact New Jersey Historic Trust staff at 609-984-0473.

To be eligible for this grant program:

- The applicant must be an entity of county, municipal, or state government **OR** a 501c tax-exempt organization in compliance with NJ charity registration laws.
- The applicant must own the propert(ies) **OR** have permission from the owner(s) to conduct the proposed activities.
- The resource must be individually listed or considered eligible for individual listing in the New Jersey or National Register of Historic Places **OR** is a contributing resource to a New Jersey or National Register-listed or eligible historic district.

Make sure to review the <u>Grant Guidelines</u> for all eligibility criteria and contact New Jersey Historic Trust staff with any questions at 609-984-0473 or <u>njht@dca.nj.gov</u>.

## **Applicant Information**

**Organization Type:** \* □ Entity of County, Municipal, or State Government □ 501(c) Tax Exempt Organization

Applicant Organization Name: \* Organization Mailing Address: \* Organization Website: Organization Socials (Facebook, Instagram, etc.):

Federal EIN: \*

+Required for 501(c) organizations only: NJ Charitable Registration Number:

Primary Contact Person First Name: \* Primary Contact Person Last Name: \* Primary Contact Person Phone Number: \* Primary Contact Person Email: \*

#### **ATTACHMENTS CHECKLIST FOR THIS SECTION (Attachment A – Applicant Information):**

If applicable, provide the following documentation in a folder labeled "Attachment A" on the USB drive:

1. IRS 501(c) Determination Letter (required for non-profit applicants only)

- 2. Applicant's Governing Body/Board Resolution and Assurances (required)
- 3. Notice of Charities Registration Number (required for non-profit applicants only)

## **Property Ownership**

Are all properties owned by the applicant? \*

□ Yes □ No

<u>+Required if No</u>: For any properties not owned by the applicant, the Owner Approval form must be included on the USB drive as Attachment B. The Owner Approval form can be found at the end of this document.

<u>+Required if Owner Approval cannot be obtained by the application deadline</u>: Please explain why not and what the timeline is for obtaining it: (250 word max)

Please note that if Owner Approval cannot be obtained, your application will be ineligible for funding.

#### **ATTACHMENTS CHECKLIST FOR THIS SECTION (Attachment B – Property Ownership):**

If applicable, provide the following documentation in a folder labeled "Attachment B" on the USB drive:

1. Owner Approval

### **Resource Information & Historic Significance**

To be eligible for a Historic Site Management (HSM) grant, all properties must be individually listed or considered eligible for listing or a contributing resource to a listed or eligible historic district in the New Jersey or National Register of Historic Places by **August 1, 2024**.

To determine a property's register status, visit the <u>State Historic Preservation Office (SHPO) website</u>. You can also utilize the <u>LUCY GIS</u> platform, an online viewer for New Jersey's cultural resources inventory. Some National Register nominations have been digitized and can be found in the <u>National</u> <u>Park Service database</u>. If you still cannot find your property, or have questions about register status only, contact the New Jersey Historic Preservation Office at 609-940-4312.

If the property is in a historic district, but not specifically noted as contributing, you must obtain a letter from the State Historic Preservation Office (SHPO) certifying that it is a contributing resource. A certification letter must be requested from the SHPO <u>at least 45 days</u> before the application deadline.

If the property is not listed either individually or as part of a historic district, you must obtain a Certificate of Eligibility (COE) from the State Historic Preservation Office by **August 1, 2024**. For COEs that are 10 years or older, you must obtain an updated certification letter. A certification letter must be requested from the SHPO <u>at least 45 days</u> before the application deadline.

If you have questions about the overall eligibility of your proposed project, contact the New Jersey Historic Trust at 609-984-0473.

#### The proposed project is for: \*

- $\Box$  A single property or historic district
- □ Multiple properties (not including architectural surveys)

If this is application is for more than one property, please choose one relevant property or district as the "reference property." You will be able to list all the properties in another question.

Over time, historic sites may be known by different names. When referencing your property, please use the name provided on the <u>State Historic Preservation Office (SHPO) website</u>.

Property Name, as listed by the SHPO: \* Physical property address: \* Property City: \* Property County: \*

Provide a link to the property in Google Maps:\*

NJ Legislative District of the property (<u>find your legislator</u>):\* US Congressional District of the property (<u>find your representative</u>):\*

What is the register status of the resource? Select all that apply. \*

## **Resource Information & Historic Significance**

- □ Certificate of Eligibility (COE)
- □ Individually listed
- $\Box$  Contributing resource to a historic district
- □ New Jersey Register listed
- □ National Register listed
- □ National Historic Landmark
- $\Box$  None of the above

<u>+Required if none of the above</u>: Please note that in order to be eligible, all properties must be listed or eligible for listing by August 1, 2024. Please explain what steps will be taken to meet the criteria by the deadline. (250 word max)

+Required if multiple properties: Please list all properties below.

<u>+Required if multiple properties</u>: Are all of the properties listed or eligible for listing in the New Jersey or National Register of Historic Places? (either individually or as a contributing resource to a historic district)

 $\Box$  Yes

🗆 No

<u>+Required if No:</u> Please note that in order to be eligible, all properties must be listed or eligible for listing by August 1, 2024. Please explain what steps will be taken to meet the criteria by the deadline. (250 word max)

# Based on the New Jersey or National Register listing or Certificate of Eligibility, which criteria of significance does your resource(s) or district meet? \*

**Criterion A**, "Event", the property must be associated with a major pattern of American history.

**Criterion B**, "Person", is associated with significant people of the American past.

**Criterion C**, "Design/Construction", concerns the distinctive characteristics of the building by its architecture and construction, including having great artistic value or being the work of a master.

**Criterion D**, "Information potential", often addressed through archaeology, is satisfied if the property has yielded or may be likely to yield information important to prehistory or history.

Unknown

<u>+If the criterion of significance is unknown:</u> **Explain how you will obtain this information.** (50 words max) *Example: The Trust grant will fund a State and National Register nomination for the property, which will better inform us of the resource's criterion of significance.* 

+ *Briefly* explain your resource(s) or district's significance as it pertains to or is not covered by the above criteria. (100 word max) *Example: Only surviving example of an 18th-century farmhouse in the county; housed British soldiers during the French and Indian War* 

What was the property's historic use? What is the current use? What are the projected future plans for the property? Please include dates when available. (100 word max) \*

## **Resource Information & Historic Significance**

Example:

1) Historic use: boarding house (1700-1750); inn (1750-1800); bar (1800-1950),

2) Current use: house museum and community center (1950-Present),

3) Future use: house museum and community center (1900-no date)

## How did the property evolve to meet changing needs? Changes should not be limited to physical alterations. (100 words max) \*

Example: Addition added to rear elevation (1820); interior walls removed on second floor to create storage space (approx. 1920); second-floor walls reinstalled to represent layout during period of significance; ADA accessible ramp added to porch (2000); organization's mission changed to adapt to community need for a community center (2005)

When and how did the applicant acquire or lease the property? If applicable, what is the status of the lease? (100 word max) \*

## Is your property endangered? If so, briefly explain the nature of the threats and why they developed? (100 word max) \*

*Example: The previous owner of the property did not have the funding to properly care for the resource. Several issues are readily apparent; however, there could be issues that are unseen. A conditions assessment will inform us if the property is endangered.* 

#### **ATTACHMENTS CHECKLIST FOR THIS SECTION** (Attachment C – Resource Information & Historic Significance)

If applicable, provide the following documentation in a folder labeled "Attachment C" on the USB drive.

1. The most recent nomination form or eligibility statement for each property or historic district. As a reminder, a certification letter must be requested from the SHPO at least 45 days before the application deadline. *For more specific information about including nomination and eligibility information see the Supporting Documents Checklist.* 

If you need a copy of your nomination form, some National Register nominations have been digitized and can be found in the <u>National Park Service database</u>. If your nomination has not been digitized, or your site is not National Register-listed, and you need a copy, contact the New Jersey Historic Preservation Office at (609) 940-4312.

## **Climate Change**

Which of the following climate hazards have the potential to affect the resource based on the county it is located in? Select all that apply. (<u>Risk Index Map</u>) \*

 $\Box$  Avalanche  $\Box$  Coastal flooding  $\Box$  Cold wave  $\Box$  Drought □ Earthquake □ Hail  $\Box$  Heat wave □ Hurricane  $\Box$  Ice storm  $\Box$  Landslide □ Lightning □ Riverine flooding  $\Box$  Strong wind □ Tornado □ Tsunami  $\Box$  Volcanic activity □ Wildfire  $\Box$  Winter weather  $\Box$  None of the above

How are you factoring climate change into your preservation efforts? How will this project in particular address climate change? (500 word max) \* *Example: Our Preservation Plan will include a section on preparing our resource for the effects of climate change; A conditions assessment will allow us to understand our building and how to better preserve the threatened historical fabric.* 

Is the resource located in a flood zone? (Flood Map) \*

□ Yes □ No □ Unknown

#### Does your resource have flood insurance? \*

□ Yes □ No □ Not Required

<u>+Required if No or Not Required:</u> Have you considered flood insurance for your resource? If so, what is the reason behind the decision? (50 words max)

Has the applicant organization attended any events regarding climate change's effects on cultural resources? \*

□ Yes □ No

<u>+Required if Yes:</u> List the relevant climate change events attended by the project team members or applicant organization. Example: Rutgers Climate Change Resource Center, American Association for State and Local History, Northeast Regional Climate Center, NJ Cultural Alliance for Response

## **Project Concept & Team**

#### **Project Title (select all that apply)**\*

- ☐ Historic Structures Report (HSR)
- □ Preservation Plan
- □ Update to an HSR or Preservation Plan
- □ Conditions Assessment
- □ National Register Nomination
- □ Architectural Plans, Designs, Specifications, or other Construction Documents
- □ HABS/HAER/HALS documents
- $\Box$  Cost Estimates
- □ Archaeological Investigation
- □ Adaptive Reuse/Feasibility Study
- □ Master Plan for Rehabilitation
- □ Historic Research Report
- □ Materials Analysis
- □ Building Systems Analysis
- □ Engineering Report
- □ Landscape Report
- Disaster Management Plan
- □ Maintenance Plan
- □ ADA Accessibility Planning
- □ Strategic, Fundraising, or Endowment Planning
- $\Box$  Other:

**Project Summary:** (100 word max) \* *Example: Preparation of a Preservation Plan for Historic House.* 

Explain how the proposed project will be innovative or exemplary. (100 word max)

# Stage of the project (Please note for HSM grants there is no reimbursement for funds expended prior to the application deadline. Consult the <u>Grant Guidelines</u> for more information.): \*

- $\Box$  Project not started yet
- $\Box$  Preliminary Scope of Work prepared
- $\Box$  Request for Proposal (RFP) for consultant services prepared
- □ Proposals submitted
- □ Consultant selected
- $\Box$  Other:

<u>+Required if consultant selected:</u> Name of consulting firm if one has been chosen:

Proposed project schedule including major milestones: (100 words max) \*

Example: Kick-off meeting with selected consultant October 2024 Draft Preservation Plan April 2025 Final Preservation Plan September 2025 Presentation to the Board of Trustees October 2025

### ATTACHMENTS CHECKLIST FOR THIS SECTION (Attachment D – Scope of Work):

## **Project Concept & Team**

If applicable, provide the following documentation in a folder labeled "Attachment D" on the USB drive:

1. Scope Statement (Preliminary Scope of Work, Requests For Proposals (RFP), proposals received and/or selected, or written statement describing the scope of work and the professional qualifications that will be required)

- 2. Proposed fees and estimates
- 3. Resume/credentials of proposed and/or selected consultant team

## **Project Budget**

For Historic Site Management (HSM) grants, "match expended," meaning work that is completed prior to the application deadline of April 18, 2024, is **not** eligible for reimbursement.

Matching funds derived from other Corporate Business Tax (CBT) funded projects, or from special appropriations awarded by the Legislature, shall not be used as the matching share of project costs by nonprofit organizations or local government units. If Federal funds are used as a match, additional documentation may be required.

Download and complete the **<u>Project Expenditure Worksheet</u>** and include it on Attachment E.

Please enter all dollar amounts using the format \$X,000 and round to the nearest whole number, no cents.

Total project cost: \*

Grant request (no more than 75% of the total project cost not to exceed \$75,000): \*

Match required to complete project (subtract grant request from total project cost): \*

Amount of match already raised (match-in-hand): \*

Remaining match needed (subtract match-in-hand from match required to complete project): \*

#### **ATTACHMENTS CHECKLIST FOR THIS SECTION (Attachment E – Project Budget):**

If applicable, provide the following documentation in a folder labeled "Attachment E" on the USB drive:

1. Project expenditure worksheet

## **Organizational Ability**

**Describe your organization, its mission, and the audience it reaches. Explain the role that your resource plays in the mission of your organization.** (500 word max) \*

Explain how both cyclical and long-term maintenance of the resource are addressed. Include information about any organizational structure such as a building/maintenance committee or other individuals responsible to make decisions regarding the resource's preservation and maintenance. Identify any planning documents that help guide these decisions. (500 word max) \*

Have any staff, board, volunteers, or project team members attended the following professional development activities in the past 2 years? Select all that apply.

□ New Jersey Historic Trust & New Jersey Historical Commission Best Practices Workshops

□ New Jersey History & Historic Preservation Conference

□ Historic Preservation Commission Trainings

Continuing Education in Historic Preservation classes at Rutgers Camden (M.A.R.C.H)

 $\Box$  Other

Who will be managing this project? List their names, their relationship to the organization, and their role in the project. List any relevant examples of grants managed by the organization in the past five years. (250 word max) \*

**Does your organization currently have any open grants with the New Jersey Historic Trust?** \*

□ No

<u>+Required if Yes:</u> Explain the status of your open grants and how your organization has the capacity to manage more than one open grant at a time. (100 word max)

List any relevant examples of the organization's experience working with consultants and/or contractors. Include the firm name, service provided, contract amount, project start and end date, and project manager. (100 word max) \*

If applicable, explain how you will raise the remaining matching funds needed for the proposed project. (500 word max)

List any recent relevant examples of the organization's experience with successful fundraising campaigns including approximate amounts raised and/or any upcoming planned fundraising campaigns including goal amounts. (250 word max) \*

Example: Capital campaign – Roof replacement -Fall 2022 Halloween Ghost Tours - \$7,500 Summer 2023 Fireworks Festival - \$10,000 Winter 2023 Holiday Gala - (Upcoming, Goal \$30,000) Spring 2024 Home and Garden Tours - (Planned, Goal \$10,000)

### **ATTACHMENTS CHECKLIST FOR THIS SECTION (Attachment F – Organizational Ability):**

If applicable, include the following documentation in a folder labeled "Attachment F" on the USB drive:

1. Cyclical Maintenance Plan

2. Resume/credentials of project manager/project team

## **Organizational Ability**

3. Documentation of match-in-hand

- Non-profit organizations must provide account statements or letters of funding commitment showing the amount of available funds
- County or municipal government applicants must provide a governing body resolution committing specific matching funds

4. Organization's current <u>year-to-date balance sheet</u> showing income and expenses to date and past year's summary balance sheet showing income and expenses (required for non-profit applicants only)

## **Public Access & Benefit**

Explain how your resource is interpreted to the public. (500 word max) \*

How does your organization assess the needs of the community and work to address them? Please further demonstrate this in Attachment G, "Letters of Support". (500 word max) \*

Is the resource compliant with the <u>Americans with Disabilities Act (ADA)</u>? If so, to what extent? If not, explain how you plan to improve accessibility. (500 word max) \*

Is the resource located within a Certified Local Government (CLG) municipality? (<u>List of CLGs</u>) \*

□ Yes

□ No

#### Is the resource open to the public on a regular basis? \*

 $\Box$  Yes

🗆 No

+*Required if No:* Explain why not. (100 word max)

**Current hours of operation:** (100 words max) \* *Example: The first and third Saturday of each month from 11AM – 4PM* 

Do you have plans to expand your hours of operation? (100 word max) \*

Number of days/year the site is open: (50 words max) \*

Are visitation numbers collected? \*

 $\Box$  Yes

🗆 No

#### +Required if Yes: Number of visitors/year (based on visitation records): (100 words max)\*

Special consideration will be given to grant proposals that address the following themes:

**The 250<sup>th</sup> Anniversary of the American Revolution**. The United States Semiquincentennial will be celebrated in 2026 to commemorate the 250<sup>th</sup> anniversary of the nation and its victory in the American Revolution. Grant proposals that aim to promote New Jersey's role in the Revolutionary War are encouraged.

**Underrepresented Histories**. In keeping with the <u>New Jersey Comprehensive Statewide Historic</u> <u>Preservation Plan (</u>2023-2028), the New Jersey Historic Trust (NJHT) seeks to expand representation of marginalized groups and empower meaningful involvement of minority constituencies in the identification, preservation, and interpretation of historic resources. NJHT encourages applications demonstrating efforts and/or initiatives that consider and engage with underrepresented histories including, but not limited to, Black history, civil rights history, women's history, disability history, Indigenous history, Latinx history, LGBTQ+ history, or the history of any marginalized group. To learn more about the initiative, <u>click here</u>.

#### Does your project address either of these themes? (select all that apply)

## **Public Access & Benefit**

- □ 250<sup>th</sup> Anniversary of the American Revolution
- □ Underrepresented Histories

<u>+Required if Yes:</u> Please explain how your project addresses one or both of the special initiatives. (500 word max)

# State and Federal Initiatives – select all that apply. Click the links for more information and to see if your resource is part of the initiative.

- □ <u>National Park Initiatives</u>
- □ <u>Scenic Byways</u>
- Coastal Heritage Trail
- □ <u>New Jersey Women's Heritage Trail</u>
- Delaware River Heritage Trail
- □ Federal Opportunity Zones
- □ <u>Urban Enterprise Zone</u>
- □ <u>Transit Village</u>
- □ <u>Journey Through Jersey</u>
- □ <u>Main Street Community</u>
- Crossroads of the American Revolution Heritage Area

# **ATTACHMENTS CHECKLIST FOR THIS SECTION (Attachment G – Public Access and Benefit):**

If applicable, include the following documentation in a folder labeled "Attachment G" on the USB drive:

1. Letters of Support

- Letters of Support from people and/or groups that benefit from your resource and/or programming
- Legislative Letters of Support

2. Documentation of community support/engagement such as press releases, news articles, flyers, programs, etc. This includes documentation that supports your efforts to participate in one or both of the special initiatives.

## **Supporting Documents Checklist - HSM**

Below is a list of all supporting documents that should be included on your USB drive (note that some attachments are required while others may not apply to you). <u>Please organize all supporting documents into corresponding folders labeled by Attachment</u>. You must also include a table of contents that lists all documents included on the USB. Below is a checklist of all documents that should be included as well as a screenshot of how the documents should be organized.

Check off all the documents that you have included:

□ Table of Contents

#### Attachment A – Applicant Information

□ IRS 501(c) Determination Letter

□ Applicant's Governing Body/Board Resolution and Assurances

- □ Notice of Charities Registration Number (required for non-profit applicants only)
- $\Box$  None of the above

#### Attachment B – Property Ownership

Owner Approval

 $\Box$  None of the above

#### Attachment C – Resource Information & Historic Significance

 $\Box$  Most recent nomination form or eligibility statement

 $\Box$  If the property is <u>individually listed</u> in the New Jersey or National Register of Historic Places, include a copy of the *complete* nomination form (not just the HPO list showing that your resource is listed in the State or National Registers). OR

 $\Box$  If the property is <u>included in a historic district</u> listing as contributing to the district, include all relevant pages of the nomination form. If the property is located in a historic district, but not specifically noted as contributing, submit all relevant pages and a letter from the State Historic Preservation Office (SHPO) certifying that it is a contributing resource. A certification letter must be requested from the SHPO <u>at least 45 days before</u> the application deadline. OR

 $\Box$  If the property is not listed in the State or New Jersey Register of Historic Places, include a letter from the State Historic Preservation Office (SHPO) certifying eligibility for listing of a site in the New Jersey Register, or certifying that a site listed in a historic district is a contributing property. A certification letter must be requested from the SPHO <u>at least 45 days before</u> the application deadline.

 $\Box$  If the Certificate of Eligibility (COE) is 10 years or older, include an updated letter from the State Historic Preservation Office (SHPO) certifying eligibility for listing of a site in the New Jersey Register, or certifying that a site listed in a historic district is a contributing property. A certification letter must be requested from the SPHO <u>at least 45 days before</u> the application deadline.

 $\Box$  None of the above

#### Attachment D – Scope of Work

## **Supporting Documents Checklist - HSM**

 $\Box$  Scope Statement (Preliminary Scope of Work, Requests for Proposals (RFPs), proposals received and/or selected, or written statement describing the scope of work and the professional qualifications that will be required)

 $\Box$  Proposed fees and estimates

 $\Box$  Resume/credentials of proposed and/or selected consultant team

 $\Box$  None of the above

#### Attachment E – Project Budget

<u>Project Expenditure Worksheet</u>

#### Attachment F - Organizational Ability

- □ Cyclical Maintenance Plan
- □ Resume/Credentials of Project Manager/Project Team
- $\Box$  Documentation of match-in-hand

 $\Box$  Non-profit organizations must provide account statements or letters of funding commitment showing the amount of available funds

□ County or municipal government applicants must provide a governing body resolution committing specific matching funds

 $\Box$  Organization's current year-to-date <u>balance sheet</u> showing income and expenses to date and past year's summary balance sheet showing income and expenses (required for non-profit applicants only)  $\Box$  None of the above

#### Attachment G – Public Access & Benefit

□ Letters of Support

Letters of Support from individuals/groups that benefit from your resource/programming

□ Legislative Letters of Support

 $\Box$  Documentation of community support/engagement (press releases, news articles, flyers, programs, etc.) This includes documentation that supports your efforts to participate in one or both of the special initiatives.

 $\Box$  None of the above

#### <u>Attachment H – Photographs</u>

 $\Box$  Labeled Photos and Photo Identification Sheet (photographs <u>must</u> be uploaded as JPEG files, not as PDFs)

 $\Box$  Photo Identification Sheet that identifies the included photos by number and briefly describes each photograph

 $\Box$  Photographs showing each elevation (i.e., north, south, east, and west) of the resource

 $\Box$  Photograph of the resource as a whole (i.e., an overall shot that shows the resource in its context or setting)

 $\Box$  Photographs of details that show areas of concern

 $\Box$  Any additional miscellaneous documents (including any completed research that supports the project request)

 $\Box$  None of the above

#### Sample Screenshot of how the USB Folders should be organized:

## Supporting Documents Checklist - HSM

\* Please only label the attachment folders as shown below (Attachment A, Attachment B, etc.). Do not use additional information to label the Attachment folders.

Name	*
🔰 Attachment A	
퉬 Attachment B	
鷆 Attachment C	
🍌 Attachment D	
🌛 Attachment E	
🌛 Attachment F	
🝌 Attachment G	
🍌 Attachment H	
Table of Contents	

## Applicant's Governing Body/Board Resolution and Assurances\* (required)

The governing body/board authorizes submission of this application for assistance from the New Jersey Historic Trust.

The governing body/board further authorizes \_\_\_\_\_\_(Name and title of person) to complete and sign application documents on behalf of the organization.

The governing body/board further authorizes that, if awarded the grant, matching funds in the amount of \$\_\_\_\_\_\_ are committed to complete this project within the required time frame.

The governing body/board further resolves and acknowledges:

- a. The facts, figures and information contained in this application, including all attachments, are true and correct;
- b. Any funds received will be expended in accord with the terms and conditions of N.J.A.C. 5:101 and the grant agreement to be executed with the New Jersey Historic Trust; and
- c. The organization agrees to abide by the time frame set forth in the grant guidelines.

Introduces and passed (date)
Ayes: \_\_\_\_\_
Nays: \_\_\_\_\_
Absent: \_\_\_\_\_
Approved on this date: \_\_\_\_\_\_
(Signature of Board Chair, Mayor, or Commissioner Director)

Typed Name and Title: \_\_\_\_\_

Attested:

(Signature of Municipal or County Clerk or Board Secretary)

Name & Title \_\_\_\_\_

**Owner Approval** 

Resources not owned or leased by the applicant must submit the following signed Owner Approval.

NOTE: Proposals for multiple resources must include a separate signed Owner Approval page for each participating resource. If the application is for a historic district nomination, consent from the Mayor of the municipalities within the district is required, not every property in the district.

The property owner certifies that:

- 1) He/she understands the purpose and the proposed scope of work of this application, and agrees to its submission to the New Jersey Historic Trust; AND
- 2) He/she agrees that the listing of the property in the New Jersey or National Registers of Historic Places may be a condition of a grant.

Signature of Property Owner	Date	
Typed Name & Title		
Signature of Co-Owner (if applicable)	Date	
Typed Name & Title		