

# GRANTEE WORKSHOP

Preserve New Jersey Historic Preservation Fund  
Historic Site Management; Heritage Tourism; and Municipal,  
County, and Regional Planning (MCRP)

2025 Grant Recipients





## NJ HISTORIC TRUST MISSION

*The mission of the New Jersey Historic Trust is to advance historic preservation in New Jersey for the benefit of future generations through education, stewardship and financial investment programs that save our heritage and strengthen our communities.*

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# NJ HISTORIC TRUST BOARD

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- › 12 Citizen Members
- › 3 *Ex-Officio* Members, representing
  - › Department of Community Affairs
  - › Department of Environmental Protection
  - › Treasury

# STAFF OF THE HISTORIC TRUST

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- › Glenn Ceponis, Executive Director
- › Carrie Hogan, Fiscal Officer
- › Historic Preservation Specialists:
  - › Alexis Alemy
  - › Jennifer Boggs
  - › Shannon Bremer
  - › Olivia Chaudhury
  - › Kristin Downing
  - › Stephanie Kraut
  - › Judith Murphy, AICP, PP
  - › Ashley Parker
  - › Tara Ritz
  - › Nan Wakefield



# OVERVIEW

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# TODAY'S AGENDA

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- › Overview of the Grant Agreement process
- › Overview of Grantee Packet and Grant Manual Materials
- › Executing the Grant Agreement
- › Defining the Scope of Work
- › Archaeological Requirements
- › Administering an Active Grant
- › Closing out the Grant
- › Publicity for your Project
- › Q&A



# GRANT AGREEMENT PROCESS

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1. The Trust holds a Grantee Workshop to explain the administrative requirements of the Grant Agreement.
2. The Grantee submits the supporting documentation.
3. The Trust assembles the materials and sends two originals of the Grant Agreement to the Grantee for signature.
4. The Grantee signs and returns the two Grant Agreements to the Trust for signature by the Executive Director and Department of Community Affairs Fiscal Office; ***at this point the Agreement is executed.***
5. Once the Agreement is executed, all reporting requirements are in effect.

# GRANT MATERIALS AND MANUAL

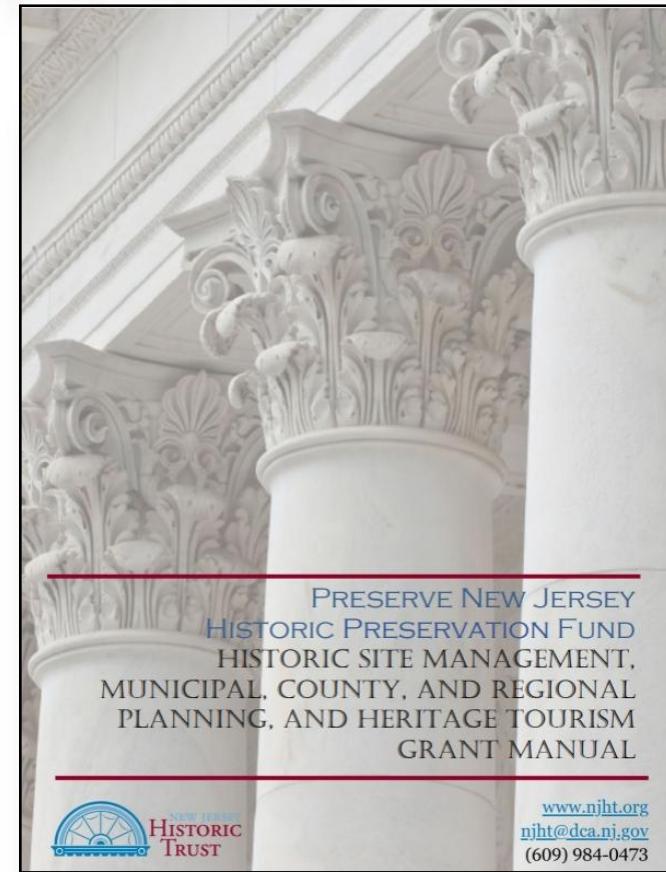
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## Grantee Info Packet:

- › Documents for executing your Grant Agreement
- › **Please print, fill out, compile certifications and resolutions, then mail to the Trust by March 27, 2026**

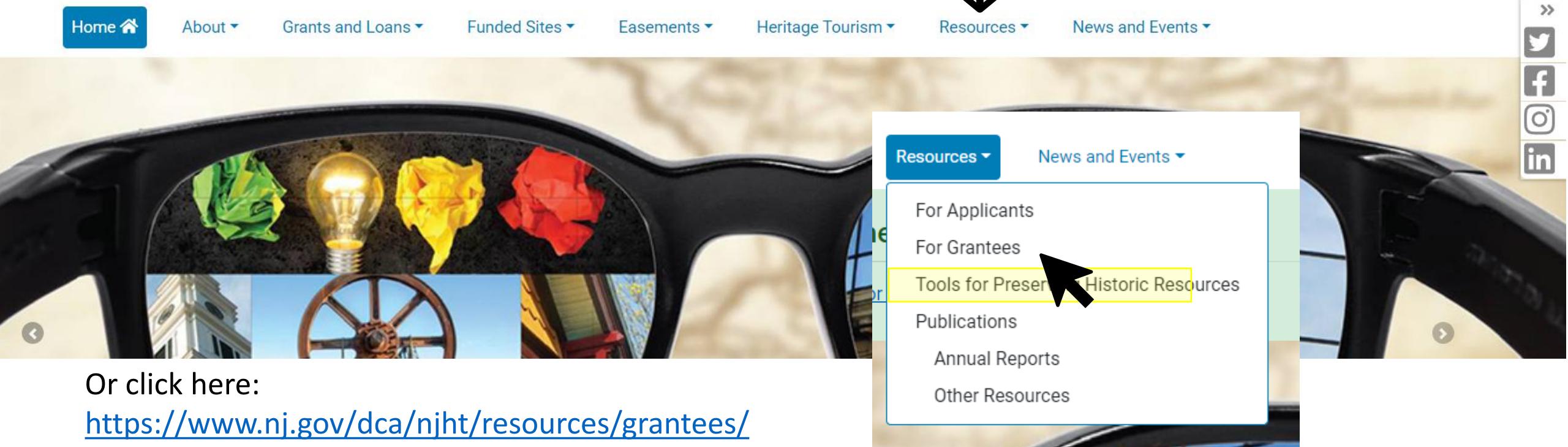
## Grant Manual:

- › Everything you need to know to successfully manage your grant project



# RESOURCES WEB PAGE

The entire grant manual is available on the NJHT website at: [njht.org](http://njht.org)



The image shows a screenshot of the NJHT website. At the top, there is a navigation bar with links: Home (selected), About, Grants and Loans, Funded Sites, Easements, Heritage Tourism, Resources (selected), and News and Events. To the right of the Resources link is a dropdown menu with the following options: Resources (selected), News and Events, For Applicants, For Grantees, Tools for Preserving Historic Resources (highlighted with a yellow box and a black arrow), Publications, Annual Reports, and Other Resources. The background of the page features a collage of images related to historic preservation, including a lightbulb, crumpled paper, a steering wheel, and a building. On the far right, there are social media icons for Twitter, Facebook, Instagram, and LinkedIn.

Or click here:

<https://www.nj.gov/dca/njht/resources/grantees/>



# EXECUTING THE GRANT AGREEMENT

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# EXECUTING THE GRANT AGREEMENT

## Checklist:

- › Outlines all the items required to prepare the Grant Agreement for execution

## Letter of Acceptance:

- › To be signed and returned with an original signature

### *Grant Agreement Check-list*

Project #:  
Project Name:

Please refer to the project grant number and name (listed above) in all correspondence with the Historic Trust.

Be sure the following items are included with the package. Please note any missing items that will be submitted under separate cover (insurance certificates, board resolutions, etc.). If you have any questions about the required materials, please contact your Program Officer directly.

#### Must be received

- This Grant Agreement Checklist with completed items checked off
- Acceptance Letter with original signature
- Completed Grant Agreement Information Form and Contact Information sheet
- Insurance Certificate (with all categories completed by your insurance company and NJHT listed as Additional Insured)
- Attachment E – Governing Body Resolution (with original signature **and** raised seal)
- Attachment G - Statement of adequacy of accounting (with original signature)

# EXECUTING THE GRANT AGREEMENT

## Information Form:

- › Getting set up as a payee in the State's financial system:  
**Please note: NO ONE needs to register in NJSTART**
  - › First time grantees that are a 501c non-profit organization must submit a W-9 questionnaire to treasury at this e-mail: [aaiunit@treas.nj.gov](mailto:aaiunit@treas.nj.gov)
    - › The W-9 questionnaire can be found at: <https://www.nj.gov/treasury/omb/pdf/forms/W9.pdf>
  - › Municipal, county, and state grantees are likely already in the State's system and need only to provide their EIN on the Info Form
  - › Previous grantees that already have an NJSTART "V" vendor number can continue to use it to access and update their profile by logging in here <https://www.njstart.gov/bso/>
  - › Help Desk: 609-341-3500, [njstart@treas.nj.gov](mailto:njstart@treas.nj.gov)

### GRANT AGREEMENT INFORMATION FORM

The following information is required for the Trust to generate your grant agreement.  
All fields are required.

Project Number: 2020.0090  
Project Name: Ayres/Knuth Farmstead

1. Chief Financial Officer: \_\_\_\_\_
2. Organization's Federal I.D. Number: \_\_\_\_\_
3. NJ START Vendor I.D. Number: \_\_\_\_\_
4. If using Federal funds as matching dollars (example: Tea 21 grants), give Catalog of Federal Domestic Assistance (CFDA) Account Number: \_\_\_\_\_
5. Your Fiscal Year ends: (month) \_\_\_\_\_ (day) \_\_\_\_\_
6. Your Accounting Records use the following system (check appropriate system):
  - Cash Basis
  - Accrual Basis
  - Modified Accrual
  - Other (explain): \_\_\_\_\_
7. Insurance:
  - a) Request that the NJ Historic Trust be named as additional insured (and reference your project number) on the policy for each Insurance Type listed below. Refer to "Insurance Requirements" in your Grant Manual for the Trust's expectations for insurance. If you checked any boxes labeled "Self-Insurance," submit a letter indicating the specific types and levels of self-insurance coverage. In the case of any exemptions, submit a certificate from the New Jersey Commissioner of Banking & Insurance identifying the specific exemption.
  - b) Ask your Insurance Company to submit a copy of your Certificate of Insurance to the Historic Trust. Please check appropriate insurance coverage below:

Comprehensive General Liability:  
 Insurance  
 Self-Insurance

Automobile Liability:  
 Insurance  
 Self-Insurance  
 Organization does NOT own or lease vehicles in its name

Workers' Compensation:  
 Insurance  
 Self-Insurance  
 Organization has no paid employees

Employers' Liability:  
 Insurance  
 Self-Insurance  
 Organization has no paid employees

# EXECUTING THE GRANT AGREEMENT

## Automatic Clearing House (ACH) Payments:

- › ACH payments automatically deposit grant reimbursement funds directly into your organization's designated bank account.
  - › To setup ACH, fill out the [Non-Procurement ACH Form and Instructions](#)
  - › Forms can be found at:  
<https://www.nj.gov/treasury/omb/forms.shtml>

If you have questions or need assistance, contact OMB-Vendor Control at [aaiunit@treas.nj.gov](mailto:aaiunit@treas.nj.gov)

**Electronic Payment Authorization  
For Non-Procurement Vendors  
New Jersey Department of the Treasury**

I (we) hereby authorize the New Jersey Department of the Treasury to initiate electronic (ACH) CREDIT entries into the bank account named below. This authority is to remain in full force and effect until the New Jersey Department of the Treasury has received written notification of any changes, and in such manner as to afford the New Jersey Department of the Treasury a reasonable opportunity to act.

Action Requested:

Establish new ACH (first time users)  
 Change/Update bank information  
 Establish new location code (Indicate type i.e. cafeteria plan, EDRS, etc.): \_\_\_\_\_

NAME: \_\_\_\_\_

BANK NAME: \_\_\_\_\_ (30 positions max)

ACCOUNT TYPE:  Savings  Checking

AUTHORIZED AGENT: (a minimum of two signatures unless individual or sole proprietor)

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Signed: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Signed: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone Number (\_\_\_\_) \_\_\_\_\_ Telephone Number (\_\_\_\_) \_\_\_\_\_

Please attach a voided check or bank letter to the form in confirmation of the above account.

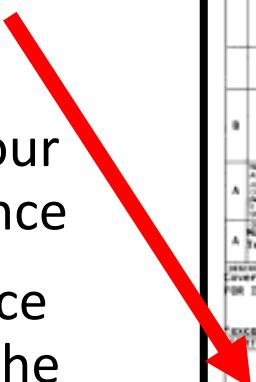
Enter the specified three numbers below:

Vendor Number	Bank Transit Number																								
<table border="1" style="width: 100px; height: 20px;"><tr><td> </td><td> </td></tr></table>													<table border="1" style="width: 100px; height: 20px;"><tr><td> </td><td> </td></tr></table>												
Account Number																									
<table border="1" style="width: 100px; height: 20px;"><tr><td> </td><td> </td></tr></table>																									
<input type="checkbox"/> Enter "X" if the financial institution receiving your payment is a foreign bank or is acting as an agent for a foreign bank on your behalf.																									
Details regarding specific ACH payments, similar to a check stub, may be obtained over the internet through the Vendor Payment Inquiry (VPI) system. VPI also provides two years of historical data and allows for the review of scheduled payments. See Electronic Payment Authorization Instructions on how to obtain an authentication code to access VPI.																									

# EXECUTING THE GRANT AGREEMENT

## Insurance:

- › Grantee must maintain insurance for the entire term of the Grant Agreement
- › NJ Historic Trust *must* be named as an additional insured
- › Request that the Insurance Company add your Project Number on the Certificate of Insurance
- › Grantee must submit Certificates of Insurance and/or documentation of self-insurance to the Trust



**ACORD CERTIFICATE OF LIABILITY INSURANCE**  
CAT 44650119  
06/28/2012

INSURER: 603-334-2562 FAX: 603-334-8812  
The Bowley Agency, Inc.  
139 London Road  
P.O. Box 531  
Concord, NH 03302-0531

INSURER: 603-334-2562 FAX: 603-334-8812  
Hous. Ross Express, Inc.  
P.O. Box 3988  
Penacook, NH 03860-3988

INSURERS AFFORDING COVERAGE: HACIC #  
INSURER: Fireman's Inv. Co. of Nash., DC 893175  
INSURER: Acadia Ins. Co. 893171  
INSURER C  
INSURER D  
INSURER E

**COVERAGES**  
THE POLICY OF INSURANCE LISTED BELOW MAY HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING THE POLICY TYPE, THE POLICY IS NOT A CONTRACT OF INSURANCE. THIS CERTIFICATE IS A CONTRACT OF INSURANCE. THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN TO THE INSURANCE POLICIES OF THE POLICIES DESCRIBED HEREIN, SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. INSURANCE LIMITS WHICH MAY HAVE BEEN REDUCED BY PAY CLAIMS.

INSURER	TYPE OF INSURANCE	POLICY NUMBER	DATE INSURANCE BEGAN	DATE INSURANCE ENDED	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CONTRACTOR'S PER <input checked="" type="checkbox"/> CONTRACTOR'S WORKS <input checked="" type="checkbox"/> COMMERCIAL AUTO <input checked="" type="checkbox"/> PERSONAL AUTOMOBILE <input checked="" type="checkbox"/> GENERAL AUTOMOBILE <input checked="" type="checkbox"/> PRODUCTS - CONTRACTOR'S	CPA6186177-24	07/01/2012	07/01/2013	1 EACH OCCURRENCE \$ 100,000 1 BODILY INJURY PER PERSON \$ 250,000 1 PROPERTY DAMAGE PER INCIDENT \$ 500,000 1 PERSONAL AUTO INSURANCE \$ 100,000 1 GENERAL AUTOMOBILE \$ 250,000 1 PRODUCTS - CONTRACTOR'S \$ 250,000
	AUTOMOBILE LIABILITY	CAU1590178-29	07/01/2012	07/01/2013	1 COMBINED POLICY LIMIT BODILY INJURY \$ 1,000,000
	ALL OTHER AUTO'S				PROPERTY DAMAGE Per incident \$ 1,000,000
	SCHEDULED AUTO'S				EXCESS LIABILITY Per incident \$ 1,000,000
	NON-INSURED AUTO'S				AUTO ONLY - 3rd PARTIES EXCESS AUTO EXCESS AUTO - 3rd PARTIES
B	NON-INSURED AUTO'S <input checked="" type="checkbox"/> MOTOR VEHICLE <input checked="" type="checkbox"/> MOTOR CYCLE <input checked="" type="checkbox"/> AIRCRAFT <input checked="" type="checkbox"/> MARINE	CPA1590179-38	07/01/2012	07/01/2013	1 AUTO EXCESS 1 MARINE EXCESS 1 AIRCRAFT EXCESS 1 MARINE EXCESS 1 AIRCRAFT EXCESS
	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CONTRACTOR'S PER <input checked="" type="checkbox"/> CONTRACTOR'S WORKS <input checked="" type="checkbox"/> COMMERCIAL AUTO <input checked="" type="checkbox"/> PERSONAL AUTOMOBILE <input checked="" type="checkbox"/> GENERAL AUTOMOBILE <input checked="" type="checkbox"/> PRODUCTS - CONTRACTOR'S	CPA6186177-32	07/01/2012	07/01/2013	1 EACH OCCURRENCE \$ 10,000,000 1 BODILY INJURY PER PERSON \$ 10,000,000 1 PROPERTY DAMAGE PER INCIDENT \$ 10,000,000 1 PERSONAL AUTO INSURANCE \$ 10,000,000 1 GENERAL AUTOMOBILE \$ 10,000,000 1 PRODUCTS - CONTRACTOR'S \$ 10,000,000
	NON-INSURED AUTO'S <input checked="" type="checkbox"/> MOTOR VEHICLE <input checked="" type="checkbox"/> MOTOR CYCLE <input checked="" type="checkbox"/> AIRCRAFT <input checked="" type="checkbox"/> MARINE	CPA6186177-29	07/01/2012	07/01/2013	1 AUTO EXCESS 1 MARINE EXCESS 1 AIRCRAFT EXCESS 1 MARINE EXCESS 1 AIRCRAFT EXCESS
	NON-INSURED AUTO'S <input checked="" type="checkbox"/> MOTOR VEHICLE <input checked="" type="checkbox"/> MOTOR CYCLE <input checked="" type="checkbox"/> AIRCRAFT <input checked="" type="checkbox"/> MARINE	CPA6186177-38	07/01/2012	07/01/2013	1 AUTO EXCESS 1 MARINE EXCESS 1 AIRCRAFT EXCESS 1 MARINE EXCESS 1 AIRCRAFT EXCESS
	NON-INSURED AUTO'S <input checked="" type="checkbox"/> MOTOR VEHICLE <input checked="" type="checkbox"/> MOTOR CYCLE <input checked="" type="checkbox"/> AIRCRAFT <input checked="" type="checkbox"/> MARINE	CPA6186177-32	07/01/2012	07/01/2013	1 AUTO EXCESS 1 MARINE EXCESS 1 AIRCRAFT EXCESS 1 MARINE EXCESS 1 AIRCRAFT EXCESS
NOTICE OF ADDITIONAL INSURED: ADDITIONAL INSURED POLICIES ARE NOT CONSIDERED AS ENDORSEMENTS. POLICY ISSUER IS NOT RESPONSIBLE FOR COVERAGE PROVIDED BY ADDITIONAL INSURED POLICIES. COVERING OPERATIONS OF THE NAMED INSURED DURING THE POLICY PERIOD. FOR INFORMATIONAL PURPOSES ONLY.					
EXCEPT 10 days for nonpayment of premium.					
CERTIFICATE HOLDER					
SAMPLE CERT XXXXXX-XXXXXX-XXXXXX-XXXXXX					
CANCELLATION Should any of the above described policies be canceled before the expiration date thereof, the issuing insurer will endeavor to mail 10 days written notice to the certificate holder named to the left, but failure to do so shall not constitute a waiver of liability in any way upon the insurer, its agents or representatives.					
Sara Hartmann, SBR					
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# EXECUTING THE GRANT AGREEMENT



Project Name:   
Project Number:

ATTACHMENT E

PRESERVE NEW JERSEY HISTORIC PRESERVATION FUND  
ADMINISTERED BY THE NEW JERSEY HISTORIC TRUST

GOVERNING BODY / BOARD RESOLUTION

The governing body/board of \_\_\_\_\_ desires to further historic preservation through a grant from the New Jersey Historic Trust, State of New Jersey in the amount of \$ \_\_\_\_\_ for the following project \_\_\_\_\_.

Therefore, the governing body authorizes \_\_\_\_\_ (Insert Name and Title of Authorized Signatory) to execute a grant agreement with the State in an amount up to that awarded for the proposed project, and to seal the grant agreement.

Introduced and passed \_\_\_\_\_, 2020

Approved: \_\_\_\_\_  
(Signature of Mayor, Freeholder Director, or Board Chairperson)  
Title: \_\_\_\_\_  
(Signature of County Clerk, Board Secretary, or Notary Public)

government, corporate or notary seal

(E-1)

## Governing Body / Board Resolution:

- › Your governing body needs to pass a resolution (Attachment E)
- › The individual authorized in Attachment E must be the same individual who will sign the Grant Agreement
- › The resolution **must be** imprinted with a raised government, corporate, or notary seal or official stamp
  - › **Resolutions that are not properly certified will not be accepted**

# EXECUTING THE GRANT AGREEMENT

## Statement of Adequacy of Accounting System:

- › Your CFO or organization's treasurer must review the requirements of the Grant Agreement (state-required audits and reporting) and sign this form
- › Your CFO/Treasurer **cannot be the same person** authorized by resolution (Attachment E) to execute the Grant Agreement
- › Your CFO certifies reimbursement requests and payment vouchers

Project Name:  
Project Number: 2019-\_\_\_\_

**ATTACHMENT G**

**A GRANT AGREEMENT BETWEEN STATE OF NEW JERSEY  
NEW JERSEY HISTORIC TRUST AND**

**Organization Name (Grantee)**  
2019-\_\_\_\_ (Project Number)

**STATEMENT OF ADEQUACY OF ACCOUNTING SYSTEM**

I am the \_\_\_\_\_ (Insert Title of Chief Financial Officer or Treasurer) of  
**Organization** (Grantee) and, in this capacity, I will be responsible for establishing and  
maintaining the financial statements for Grant Number 2019-\_\_\_\_.

The accounting system that will be established and maintained for the purpose of this proposed  
contract/ grant will be adequate to:

1. Provide for accurate identification of the receipts and expenditures for items to be reimbursed  
by the New Jersey Historic Trust;
2. Provide for documentation supporting each book entry, filed in such a way that it can be  
easily located;
3. Provide accurate and current financial reporting information;
4. Be integrated with a strong system of internal controls and;
5. Will conform to any and all requirements or guidelines that the New Jersey Historic Trust  
may issue including Section VIII and Section XI of the Grant Agreement.

Signature of Chief Financial Officer / Treasurer

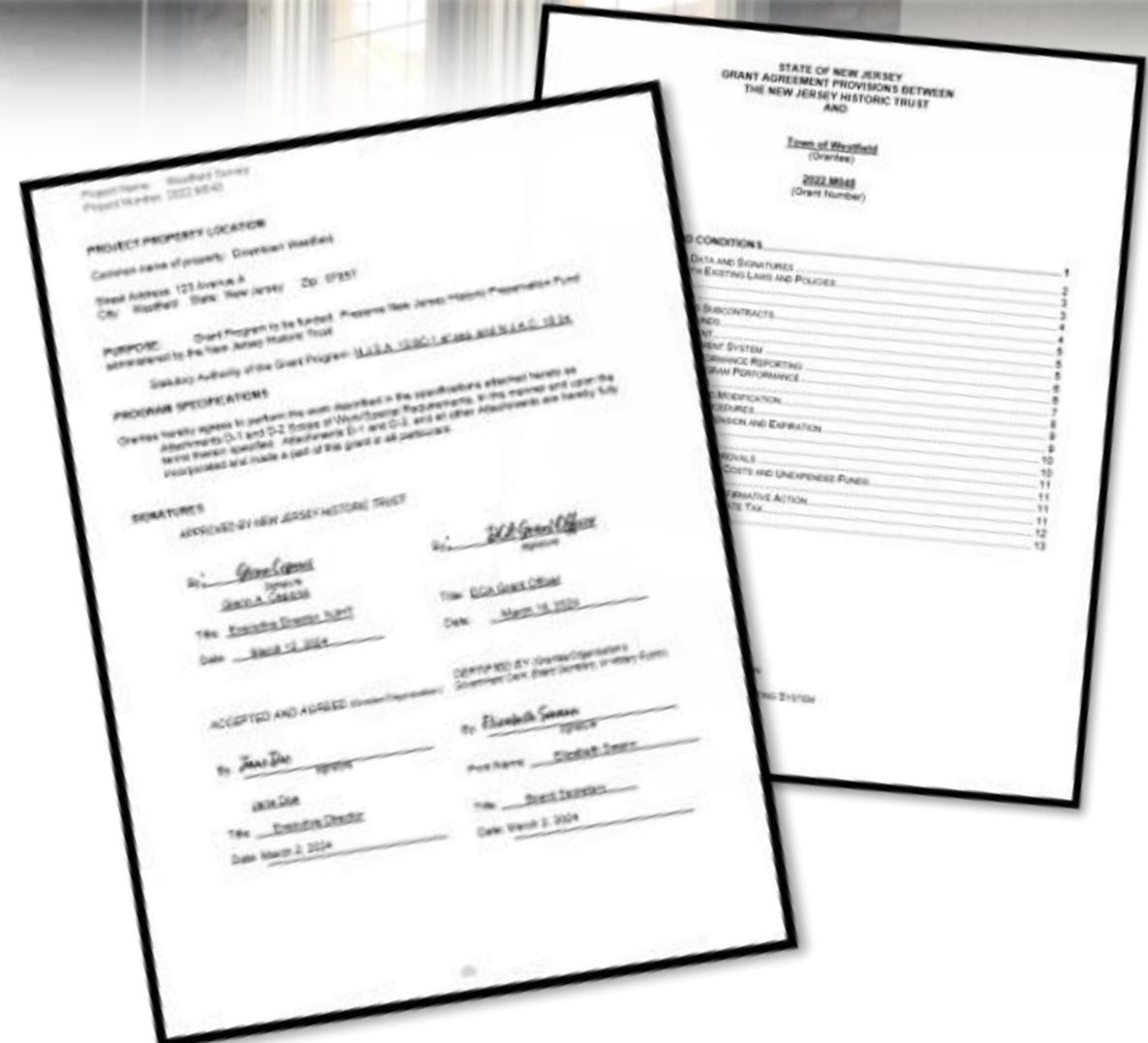
Name (Print or Type) \_\_\_\_\_ Date \_\_\_\_\_

(G-1)

# EXECUTED GRANT AGREEMENT

## Completed Info Packet

- › Surface mail completed info packet to PO
- › PO develops Scope of Work (D-1)
- › PO drafts Grant Agreement and mails two original copies to Grantee
- › Grantee signs and certifies both copies and returns both to PO
- › Historic Trust and DCA Fiscal Services sign Grant Agreement
- › One original Grant Agreement is mailed to Grantee





# DEFINING THE SCOPE OF WORK

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# DEFINING THE SCOPE OF WORK

## Attachment D-1 (Scope of Work):

- › The Grantee will need to review and approve the Attachment D-1
- › Unless changes were made by the Trust during the application period, the Scope of Work in the Grant Agreement should correspond with the Scope of Work submitted in the Grantee's application to the Trust

2.4

### - Sample Scope of Work/ Attachment D-1 -

#### ATTACHMENT D-1, SCOPE OF WORK

Name of Grantee: Historical Society  
Project Name: Historic Battlefield  
Project Number: 2017.0039  
Grant Award: \$20,000

#### I. OVERVIEW OF PRESERVATION OBJECTIVES OF ENTIRE PROJECT

The Battlefield is significant for its association with the Revolutionary War battle fought at the site in 1776 and the location of a Native-American encampment. The park includes the Vanderveer House (a Dutch Colonial, brownstone house from 1713 with brick end gables) and the foundation of a rare grist mill.

The Trust grant will fund the creation of a site management plan that will serve as a blueprint for the development of the site, examining site constraints and environmental context. The plan will assess properties on both sides of the battlefield, including land held by the State of New Jersey and the Historical Society.

#### II. PROJECT REVIEW AUTHORITY

The New Jersey Historic Trust will review and approve at least one draft (80%) and a final copy of the project deliverables. If appropriate, such documents will be reviewed for compliance with the *Secretary of the Interior's Standards for the Treatment of Historic Properties*. Grantee shall copy the New Jersey Historic Trust on all project correspondence and inform Trust representative in advance of project meetings.

#### III. ACTIVITIES FUNDED BY THIS GRANT

##### III A Description of Work to be Funded with this Grant

The scope of work of this grant includes non-construction tasks directly related to the funded work:

1. Professional architectural and historic preservation services for Site Design Guidelines and Phased Implementation Plan as described in proposal by ABC Associates, dated April 22, 2000, pages 1 to 8 (Exhibit 1).
2. Professional services for Archaeological Report as described in proposal by Smith Archaeologists, dated January 10, 2000, pages 1 to 3 (Exhibit 2).
3. Preparation of a Project Completion Report.

# DEFINING THE PROJECT SCOPE

## Attachment D-1 (Scope of Work):

- › Includes project budget with grant award amount
- › Brief history and statement of significance
- › Identifies the Project Review Authority
- › Defines the agreed upon work that will be funded by the grant

2.4

### - Sample Scope of Work/ Attachment D-1 -

#### ATTACHMENT D-1, SCOPE OF WORK

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Project Name: Historic Battlefield  
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3. Preparation of a Project Completion Report.

# PROJECT SCHEDULE

## Attachment D-1 (Scope of Work):

- › Includes a copy of the accepted proposal for activities funded by the grant
- › Includes a project budget for each work product
- › Shows initial payment and final payment
- › **Includes project schedule**



2.5

### III.B. Schedule of Values for Work to be Funded with this Grant

	<u>Item</u>
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#### Amount

Professional fees and project expenses directly related to the funded work:

1. Fees and expenses for Guidelines and Plan by ABC Architects	\$18,000
2. Fees and expenses for report by Smith Archaeologists	\$8,670

**TOTAL** \$26,670

**GRANT AWARD (No more than 75% of total)** \$20,000

Initial payment: \$16,000  
Final payment: \$4,000

The above payments are based on project costs as specified in the Grant Application. If costs are less, these amounts will be reduced and/or the Grantee will remit the balance of grant to the Trust.

### IV. PROJECT SCHEDULE (HSM):

Agreement Commencement Date:  
Work Period Commencement Date:  
Agreement Execution Deadline:  
Project Commencement Deadline:  
Work Period Expiration Date:  
Agreement Expiration Date:

Created: by  
Revised:



# YOUR PROJECT SCHEDULE

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<b>December 23, 2025</b>	The <u>Agreement Commencement</u> date is the day the Governor signs your appropriations bill
<b>December 23, 2025</b>	The <u>Work Period Commencement</u> date may be the same or the day you started work
<b>June 23, 2027</b>	The grant agreement must be executed by the <u>Agreement Execution Date</u>
<b>June 23, 2027</b>	Work must begin by the <u>Project Commencement Deadline</u>
<b>December 23, 2027</b>	Work must be completed by the <u>Work Period Expiration Date</u>
<b>December 23, 2028</b>	Grant must be closed out by the <u>Agreement Expiration Date</u>

# PROJECT TEAM

## Project consultants:

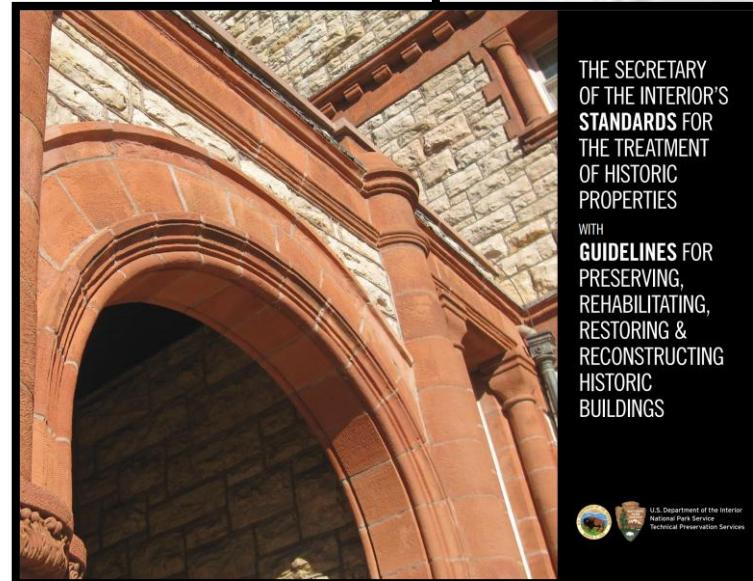
- › NJHT Staff must approve all consultants working on the grant funded project
- › All consultants must meet Professional Qualification Standards
  - › Consultants that were included in original grant applications are considered approved unless otherwise stated
  - › Grantees who did not include consultants in their original grant application must have proposed consultants approved by NJHT before beginning work



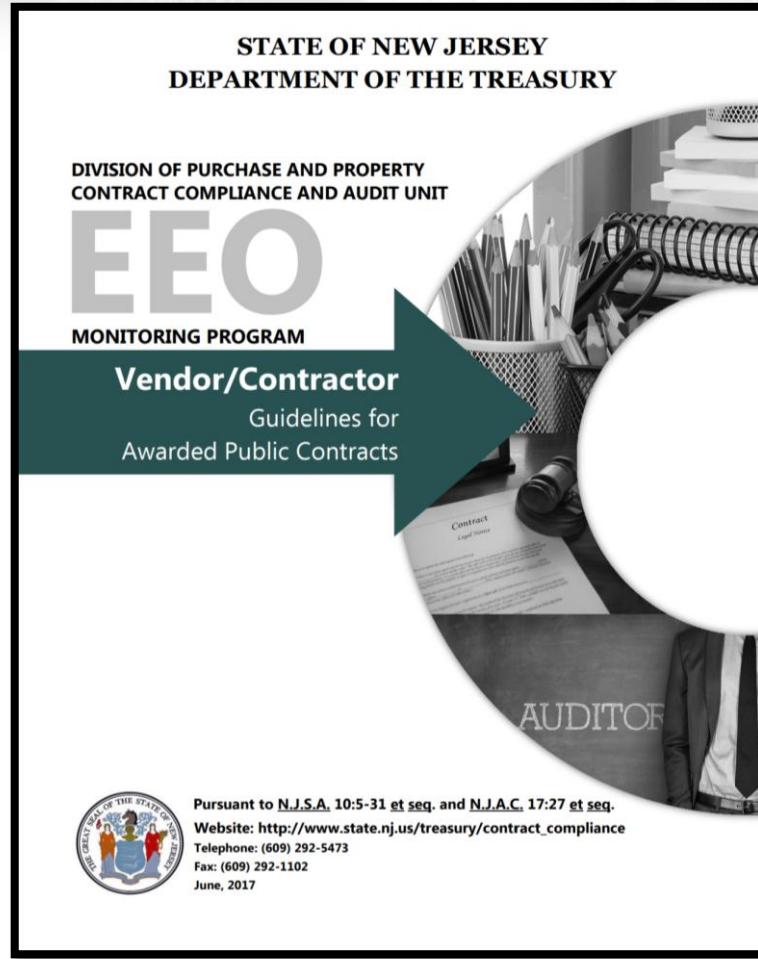
**HSM, MCRP, and HT grantees must submit a signed agreement/consultant contract with their initial reimbursement request.**

# PROJECT REQUIREMENTS

- › All work must meet the Secretary of the Interior's Standards for the Treatment of Historic Properties
- › Consideration of archaeology or the archaeological potential of your site is required for all preservation planning documents
- › Preservation Plans and HSRs
  - › Must meet the content requirements laid out in *A Preparation Guide – Second Edition*



# NEW JERSEY STATE REQUIREMENTS



## Financial Management:

- › Audits
  - › **Audits are ineligible for reimbursement**

## Affirmative Action:

- › Nondiscrimination language and policy
- › Consultant to provide evidence of compliance

# ARCHAEOLOGICAL REQUIREMENTS

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# WHEN IS ARCHAEOLOGY REQUIRED?

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**Acknowledgement of potential archaeological resources and their future treatment is required in planning documents.**

Examples of work products that may require the incorporation of archaeological consideration:

- › Preservation plans
- › Site and resource management plans
- › Planning documents which outline future ground disturbing activity
- › Construction drawings and specifications



# WHEN IS ARCHAEOLOGY REQUIRED?

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**If ground disturbance is planned, archaeological consideration is required.**

Examples of ground disturbing activities:

- › Excavation of trenches for utility services and site drainage
- › Exterior foundation work
- › Installation of signage
- › Construction or expansion of walkways, driveways, and parking
- › Removal and installation of porch footings
- › Removal and installation of footings located below basement floor grade and repairs to basement floors
- › Excavation related to ADA site improvements



# WHAT IS REQUIRED?

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If archaeology is a component of your project, next steps should include:



- › Consultation with a qualified professional archaeologist
- › Submission of a proposal and work plan
- › Investigation in accordance with Secretary of the Interior Standards and the NJ Register of Historic Places Act
- › Submission of a report for NJHT review
- › Consideration of the results of the investigation in comparison with the current or proposed future project
- › Submission of one hard copy and one digital copy of the final approved report

## Archaeological Requirements of the New Jersey Historic Trust (NJHT): FAQ



### Why is the consideration of archaeology required?

Archaeological resources are protected by both Federal and State laws and regulations. Properties the NJHT may have potential for the presence of archaeological remains important in history or prehistory.

### When is the consideration of archaeology required?

When a project involves ground disturbance including, but not limited to, the following:

- Excavation of trenches for utility services and site drainage,
- Work to existing foundations and footings, including those located below basement floor levels,
- Installation of interpretive signage,
- Construction or expansion of walkways, driveways, and parking lots,
- Removal and installation of porch footings,
- Repairs to basement floors,
- Excavation related to ADA site improvements.

The NJHT strongly recommends that archaeology is considered regardless of whether it is required for the long-term stewardship of a historic resource, as well as to inform a site's history and guide future decisions.

### My project will involve ground disturbance but I'm pretty sure the ground has been disturbed in the past. Is archaeological monitoring sufficient?

Archaeological monitoring as a first course of action is not considered to be best practice, unless sufficient evidence indicating that there is little to no potential for archaeological resources within the APE can be provided, such as in most gravel pits, road cuts, and pipeline trenches. Some forms of historic

## Archaeological Monitoring Protocols for Projects Funded by the New Jersey Historic Trust (NJHT): FAQ

When a project involves ground disturbance including, but not limited to, the following:

- Excavation of trenches for utility services and site drainage,
- Work to existing foundations and footings, including those located below basement floor levels,
- Installation of interpretive signage,
- Construction or expansion of walkways, driveways, and parking lots,
- Removal and installation of porch footings,
- Repairs to basement floors,
- Excavation related to ADA site improvements.

**Please note that the following guidance is applicable only for projects where archaeological monitoring has been approved.**

### What is an archaeological monitoring protocol?

An archaeological monitoring protocol is a document stating critical project information as well as the conditions under which the presence of an archaeological monitor are required. It is the responsibility of the applicant, grantee, and/or their consultant team to ensure that the protocol is referenced in all project plans, documents, construction manuals, and specifications. The preparation and distribution of an archaeological monitoring protocol is required for NJHT-funded projects where archaeological monitoring will occur.

### Who drafts the protocol?

A contracted, qualified professional archaeologist providing archaeological monitoring services for a project will draft the protocol. The protocol must be submitted to the New Jersey Historic Trust for review and approval prior to construction.

### What should be included in the protocol?

It is recommended that archaeological monitoring protocols include the following information, at a minimum:

## Archaeological Survey and Reporting Requirements of New Jersey Historic Trust Grant-Funded Work

Archaeological investigations be scheduled to occur prior to or during the design plans or construction documents so as not to impact construction schedules. Archaeological survey and reporting must be in keeping with the [Secretary of the Interior's Standards for Archaeology and Historic Preservation](#) (Federal Register, Volume 48, No. 186, September 29, 1983). Survey efforts must comply with the New Jersey Historic Trust's [Requirements for Phase I Archaeological Survey](#) at N.J.A.C. 7:4-8.4. The individual(s) performing archaeological work must meet the [Secretary of the Interior's Professional Qualifications](#) (48 CFR 44738-9).

Archaeological investigation must be completed, the findings must be submitted to the New Jersey Historic Trust for review and approval.

Archaeological investigation must be completed, the findings must be submitted to the New Jersey Historic Trust for review and approval.

If evidence of a potentially significant archaeological site is found, the following solutions may be proposed: a) modify design plans and construction documents to avoid or minimize impacts or b) conduct a second phase of more intensive archaeological investigations. This latter phase should be structured to retrieve sufficient information to interpret a site or to provide measures for its protection. In some instances, it may be desirable to conduct a third phase consisting of complete data recovery. Allocating sufficient time toward the completion of archaeological investigation in advance of construction is important due to the potential requirement for altering project plans based on findings.

<https://www.nj.gov/dca/njht/programs/preservenj/overview/>



# ADMINISTERING AN ACTIVE GRANT

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# COMMUNICATION WITH THE TRUST

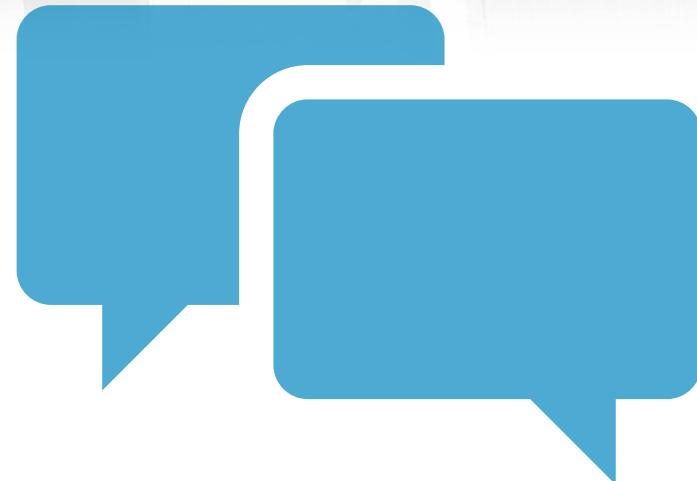
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## **Send to the Trust:**

- › Drafts of planning documents funded by grant
- › Contracts with consultants preparing grant-funded products
- › Quarterly reports and reimbursement requests

## **Close-out:**

- › Final approved grant-funded documents
  - › One hard copy and one digital copy
- › Final report and reimbursement request



## **Know your program staff contact**

Questions?  
Problems?  
Good news?

**When in doubt, call or email... or both!**

# SUBMITTING QUARTERLY REPORTS

## Attachment C-1:

- › Follow checklist of items and include:
  - › Narrative
  - › Team List
  - › Project Schedule
  - › Submissions
  - › Certification

## Submit via:

- › Via email for a report with no reimbursement request
- › Via postal delivery for a reimbursement request
  - › Payment voucher must have **original signature**
- › Send a report - even if there's no activity!

### Reports are due:

- ✓ April 15
- ✓ July 15
- ✓ October 15
- ✓ January 15

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

ATTACHMENT C-1

Preserve New Jersey Historic Preservation Fund  
HISTORIC SITE MANAGEMENT GRANT  
QUARTERLY REPORT

Project Number: \_\_\_\_\_ Project Name: \_\_\_\_\_  
Organization: \_\_\_\_\_  
Project Contact: \_\_\_\_\_  
Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Quarterly Report Check List**  
Quarterly Reports may be e-mailed to Trust or sent hard copy in the mail. The following items are required:  
 Attachment C-1 (this form)  
 Current Status  
 Narrative Description  
 Project Team List  
 Current Project Schedule

**Reporting Schedule:** Quarterly Reports are due every three months:

Reporting Periods	Quarterly Due Date
Jan. 1 – March 31	April 15
April 1 – June 30	July 15
July 1 – Sept. 30	Oct. 15
Oct. 1 – Dec. 31	Jan 15

**CURRENT STATUS** (check off all applicable):  
 Consultant is under contract with Grantee  
 Project Status: \_\_\_\_\_  
 Work products submitted to Grantee:  
 Outline  
 First Draft  
 Final Product  
 other: \_\_\_\_\_

(C-1.1)

# REIMBURSEMENT REQUESTS

- › Two reimbursements
- › Initial reimbursement is 80% of grant award
- › Must include signed consultant contract if not previously submitted
- › Initial retainer or invoice is paid (attach invoice and proof of payment from financial institution)
- › State payment voucher – will not be paid without it!
  - › Requires original signatures of designated CFO
- › Payment will be disbursed after fiscal review
  - › Registering for direct deposit payments through the State's ACH system will expedite the payment process: [www.nj.gov/treasury/omb/pdf/forms/achform.pdf](http://www.nj.gov/treasury/omb/pdf/forms/achform.pdf)

 NEW JERSEY HISTORIC TRUST	<b>NJ Department of Community Affairs Transmittal and Payment Voucher</b>	
Date: _____		
To: New Jersey Historic Trust, PO Box 457, Trenton, NJ 08625-0212		
Payee Reference:		
Project #: <u>2002.0096</u>		
Project Name: <u>Abraham Staats House</u>		
Reimbursement # _____		
<b>Brook Historic Commission</b>		
Grant Agreement Begins: <u>July 30, 2003</u> Ends: <u>July 30, 2006</u>		
Payment Reporting Period _____ to _____ Close-Out / Retainage Report		
Reimbursement \$ _____		
<b>Grantee Certification:</b>		
I certify that the within Fiscal Monitoring Report Payment Voucher is correct in all its particulars and the described goods or services have been furnished or rendered and that no bonus has been given or received on account of said document.		
Randy W. Bahr Typed Name of CFO/Treasurer	Original Signature _____	Date _____
<b>Certification:</b> that the articles have been received or services rendered as stated herein.		
Carrie Hogan, Fiscal Officer NJHT Representative	Signature _____	Date _____
<b>Division Fiscal Certification:</b> <b>22-6002303-00</b> GO # 022-8049800- _____ LN 1 S _____ Vendor ID # _____		

# WORK PRODUCT REVIEW

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- › Submit work products to the Trust in draft form for review and comment
  - › Planning documents
  - › Construction drawings and specifications
- › Allow at least four weeks for review
- › Final work product may be produced after incorporating Trust's comments

# AMENDING THE GRANT AGREEMENT

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## Reasons to amend the Grant Agreement:

- › Change to project schedule
- › Revised scope of work
- › Change in consultant or contractor

## Request for Major Change (Attachment D-2):

- › Complete request ***before*** the end of the work period or Grant Agreement deadline
- › All requests are reviewed by the Grants and Loans Committee



General terms and conditions of the Grant Agreement are non-negotiable.



# CLOSING OUT THE GRANT

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# CLOSING OUT THE GRANT

- › Final Report & Reimbursement Request
  - › Attachment C-2 – Follow Checklist
  - › Submit final and approved scope of work items
  - › Copies of invoices attached to corresponding canceled checks/proof of payment from financial institution
  - › Transmittal/Payment Voucher (with original signature of CFO or Treasurer)
- › You will receive the remaining 20% of the grant award



DAVID TAYLOR  
COLD 1805 SPRING

# PUBLICITY FOR YOUR PROJECT

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# GOALS OF YOUR PUBLICITY PROGRAM



- › Maintain visibility of project and organization during preservation campaign
- › Increase attendance and/or membership for programs and activities
- › Attract new funding support and additional resources

# OUR MUTUAL PUBLICITY GOALS

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Promote and raise awareness of history and historic preservation in New Jersey

- › Good publicity opportunities are:
  - › Grant award announcements and check presentations,
  - › Project milestones
  - › Tours, special events, or staff profiles
  - › Letters to your legislatures and representatives



# JOURNEY THROUGH JERSEY

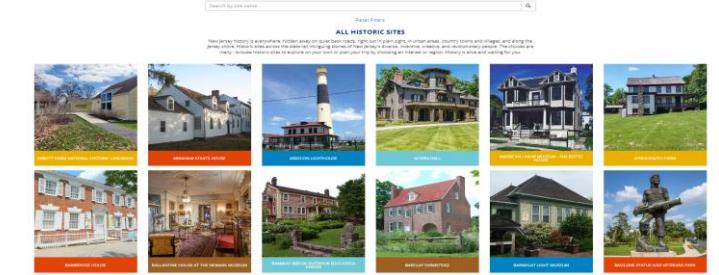
- › Visit [www.journeythroughjersey.com](http://www.journeythroughjersey.com) to nominate your site for inclusion in this valuable and free heritage tourism marketing tool
- › Tag Journey Through Jersey on your Facebook and Instagram posts:
  - › @journeythroughjersey
  - › #journeythroughjersey
- › Add the Journey Through Jersey link and logo to your website!
- › To write a blog post or be otherwise featured on Journey Through Jersey, email: [info@journeythroughjersey.com](mailto:info@journeythroughjersey.com)



JOURNEY  
Through  
Jersey



BY THEME BY INTEREST BY REGION



# STAY IN TOUCH WITH US

- › Facebook, Instagram, BlueSky, and LinkedIn
- › @njhistorictrust



- › Tag us in posts, send us news coverage, progress photos, events, or any other content you'd like us to share (no guarantees but we post as much as we can)
- › Please re-share our posts and link to our site.



# QUESTIONS?

## Program Officers:

- › Alexis Alemy – alexis.alemy@dca.nj.gov
- › Jennifer Boggs – jennifer.boggs@dca.nj.gov
- › Shannon Bremer – shannon.bremer@dca.nj.gov
- › Olivia Chaudhury – olivia.chaudhury@dca.nj.gov
- › Kristin Downing – kristin.downing@dca.nj.gov
- › Stephanie Kraut – stephanie.kraut@dca.nj.gov
- › Judith Murphy, AICP, PP – judith.murphy@dca.nj.gov
- › Ashley Parker – ashley.parker@dca.nj.gov
- › Tara Ritz – tara.ritz@dca.nj.gov
- › Nan Wakefield – nan.wakefield@dca.nj.gov

## Fiscal Officer:

- › Carrie Hogan – carrie.hogan@dca.nj.gov

**Please direct questions pertaining specifically to your project to your Program Officer after the workshop.**



Thank you for joining us today!  
We look forward to working with you!

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