



NEW JERSEY  
**HISTORIC  
TRUST**

PRESERVE NEW JERSEY  
HISTORIC PRESERVATION FUND

# 2020 GRANT APPLICATION CAPITAL LEVEL I & II

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Applications due by 4:00 p.m., Thursday, April 23, 2020

[www.njht.org](http://www.njht.org)  
[njht@dca.nj.gov](mailto: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 [Grant Guidelines](#) (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 of supporting documentation to the Trust 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 [Governing Body Resolution](#) (Word doc) and [Applicant Assurances](#) (Word doc) are required as part of Attachment A on the USB drive.

[Owner Assurances](#) (Word doc) are required as part of Attachment B for any properties not owned by the applicant. Additionally, for those applicants who do not own the property and do not have a long-term lease (minimum of 15 years), the [Owner Authorization form](#) (Word doc) is required as part of Attachment B.

Whether you are submitting the application online or have been given permission to submit as a Word document, ***do not wait until the last minute!*** There are bound to be glitches. Start early to avoid missing the deadline.

Applications and USB drives are due to the Trust office by **4:00 pm on April 23, 2020**, no exceptions.

## Eligibility Questions

Please answer the following pre-application questions to determine eligibility for the grant program.

Is the applicant an entity of county, municipal, or state government OR a 501c tax-exempt organization in compliance with NJ charity registration laws?

Yes

No

Does the applicant own the property(ies) OR have a long-term lease (15 years) that gives the applicant permission to conduct the proposed activities?

Yes

No

Is the resource either individually listed or considered eligible for individual listing in the New Jersey or National Register of Historic Places or a contributing resource to a NJ or National Register-listed or eligible historic district?

Yes

No

If you have answered no to one or more of the eligibility questions, this could mean you are not eligible for this grant. Please contact NJ Historic Trust staff at 609-984-0473 to discuss your project further before completing the application.

If you have answered yes to all of the eligibility questions, you may continue with the application. Please note this does not guarantee eligibility.

Make sure to review [the grant guidelines](#) for all eligibility criteria and contact NJ Historic Trust staff with any questions at 609-948-0473 or [njht@dca.nj.gov](mailto:njht@dca.nj.gov).

## **Project Summary**

Project Title (ex. "Exterior Restoration of Historic Bank of Main Street"):\*

Grant Request Amount:\*

Total Project Cost:\*

Project Summary (500 word max):\*

## Applicant Information

Applicant Contact Person First Name:\*

Applicant Contact Person Last Name:\*

Applicant Contact Person Phone Number:\*

Applicant Contact Person Email:\*

Applicant Organization Name:\*

Organization Mailing Address:\*

Organization Phone:\*

Organization Email:\*

Organization Website:

Organization Type:\*

Entity of County, Municipal, or State Government

501(c) Tax Exempt Organization

Federal EIN:

+Required for 501(c) organizations only:

NJ Charitable Registration Number:

If there is a co-applicant, please provide the organization name and their relationship to the historic resource:

### ATTACHMENTS CHECKLIST FOR THIS SECTION

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 Assurances](#) (required)
3. [Governing Board Resolution](#) (required)

## Property Ownership

Are all properties owned by the applicant or co-applicant?\*

Yes

No

+Required if no: For any properties not owned by the applicant or co-applicant, the Owner's Assurances must be included on the USB drive as Attachment B.

[Download the Owner Assurances form.](#) (Word doc)

+ Have all necessary Owner's Assurances been signed and included as Attachment B on the USB drive?

Yes

No

+If the Owner's Assurances cannot be obtained by the application deadline, please explain why not and what the timeline is for obtaining it: (250 word max)

If Owner's Assurances cannot be obtained, your application may be ineligible for funding.

+Required if all properties not owned by applicant: For any properties not owned by the applicant or co-applicant, is there a long-term lease (15 years or more) in place that allows the applicant to conduct the proposed project?

Yes

No

+If yes, please include a copy of the signed lease agreement as part of Attachment B on the USB drive.

+If no, please explain the current ownership status and what the plans to meet the property ownership criteria of this grant program. If you do not have a long-term lease in place, you are required to submit the [Owner Authorization form](#) as part of Attachment B. The owner of the property must be an eligible applicant (non-profit organization or entity of municipal, county, or state government). If neither the applicant or the co-applicant owns or leases the properties, and you are unable to complete the Owner Authorization form, you may not be eligible for this grant. (250 word max)

## **ATTACHMENTS CHECKLIST FOR THIS SECTION**

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

1. [Owner Assurances](#)
2. Signed lease agreement
3. [Owner Authorization form](#)

## Property Information & Historic Significance

To be eligible for a capital 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 NJ or National Register of Historic Places by **August 1, 2020**.

If a capital grant is awarded, all properties must be listed in order to receive reimbursements.

To determine a property's register status, visit the [NJ Historic Preservation Office \(HPO\) website](#).

If your site is part of a historic district, and **not** individually listed, you will need to determine if it is a contributing resource to the historic district. Sometimes this information can be found in the register nomination form. Some National Register nominations have been digitized and can be found in the [National Park Service database](#).

If you still cannot find your property, or have questions about register status only, contact NJ HPO at (609) 984-0176.

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

Over time, historic sites may be known by different names. When referencing your property, please use the name provided by the [NJ Historic Preservation Office \(HPO\) website](#).

Property Name, as listed by the NJ HPO:\*

Physical property address:\*

Property City:\*

Property County:\*

Property State:\*

Property Zip Code:\*

Provide a link to the property in [Google Maps](#):\*

NJ Legislative District of the property ([find your legislator](#)):\*

US Congressional District of the property ([find your representative](#)):\*



Is the resource listed or eligible for listing in the NJ or National Register of Historic Places? (either individually or as a contributing resource to a historic district)\*

- Listed
- Eligible
- Neither

+Required if listed or eligible: What is the register status of the resource? Check all that apply.

- Individual
- Contributing resource to a historic district
- New Jersey Register
- National Register
- National Historic Landmark

+Required if neither: Please note that in order to be eligible, all properties must be listed or eligible for listing by August 1, 2020. Please explain what steps will be taken to meet the criteria by the deadline. (250 word max)

What is the historic significance of the resource(s) and why is it important to preserve? Please include relevant dates, building phases, people, events, etc. (1000 word max)\*

Give a brief history of the property's use. Include historic and current uses, and future plans. (500 word max)\*

What is the applicant's history with the property? Include when the building was acquired or leased. (500 word max)\*

Describe any structural threat, inappropriate use, or preservation need faced by the property. If it is endangered, explain the nature of the threats and why they developed. (500 word max)\*

## **ATTACHMENTS CHECKLIST FOR THIS SECTION**

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  
*For more detail about nomination and eligibility documentation requirements see the Supporting Documents Checklist at the end of this application.*

If you need a copy of your nomination form, some National Register nominations have been digitized and can be found in the [National Park Service database](#). If your nomination has not been digitized, or your site is not National Register-listed, and you need a copy, contact NJ HPO at (609) 984-0176.

## Project Concept & Team

Describe the project for which funding is requested in this grant round. Identify the project goals and explain how the project addresses the needs of the resource. (1000 word max)\*

Is the project for which grant funds are requested part of a larger capital project?\*

- Yes  
 No

+If no, please skip the Multi-Phase and larger project questions. The next question you should be answering is the “Work proposed in this project is for (interior/exterior)” question.

+Required if yes: For large capital projects with multiple phases, applicants may request funding for future phases. The grant request per phase must be at least \$500,000. Each phase must be substantially complete before funding for the next phase will be available. Funding for future phases is based upon future appropriations.

Is this a multi-phase funding request?

- Yes  
 No

+If yes, please answer the following multi-phase questions below  
+If no, please skip down to the “larger but not multi-phase request” section

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Multi-phase questions:

It is strongly recommended that you obtain professionally prepared cost estimates before submitting a multi-phase funding request. Have professionally prepared cost estimates been obtained for the entire project?

- Yes  
 No

Briefly describe the project as a whole, including project goals and an explanation of how the project addresses the needs of the resource. You will be asked to detail the proposed work for each phase in a later question.\* (1000 word max)

How many phases is the entire project broken into?\*

How many phases are you requesting funding for?\*

Explain how your project fits our multi-phase program and how the multi-phase funding opportunity will benefit your project\* (1000 word max)

Grant Request for Phase I\*

Total Project Costs for Phase I\*

Expected Start Date for Phase I\*

Expected Completion Date for Phase I\*

Brief Description of Proposed Work for Phase I\* (500 word max)

Grant Request for Phase II\*

Total Project Costs for Phase II\*

Expected Start Date for Phase I\*

Expected Completion Date for Phase I\*

Description of Proposed Work for Phase II\* (500 word max)

Grant Request for Phase III

Total Project Costs for Phase III

Expected Start Date for Phase III

Expected Completion Date for Phase III

Description of Proposed Work for Phase III (500 word max)

Grant Request for Phase IV

Total Project Costs for Phase IV

Expected Start Date for Phase IV

Expected Completion Date for Phase IV

Description of Proposed Work for Phase IV (500 word max)

Expected completion date for entire project:\*

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Larger project, but not multi-phase funding request:

Briefly describe the scope of the larger project, including what work has been completed to date, what remains to be done, and how this request fits in. (500 word max)\*

Total cost of the larger capital project:\*

Cost of the work completed to date:\*

Start date of larger project:\*

Expected completion date of larger project:\*

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Work proposed in this project is for (check all that apply):\*

Interior

Exterior

What is the predominant historic preservation treatment being applied in this project?\*

- Preservation
- Rehabilitation
- Restoration

Other activities included in this project (check all that apply):\*

- Archaeology
- Barrier-free access
- Interpretive materials
- Register nomination
- Planning documents (HSR, Preservation Plan, Conditions Assessment, Materials Analysis, etc.)
- Preparation of Design Documents (schematic designs, construction documents, specifications, etc.)
- Construction Administration
- Improvements
- Reconstruction
- New construction
- Other:

Please note that archaeological consideration will be required for all projects that involve ground disturbance.

Planning documents can include, but are not limited to: Historic Structure Reports, Preservation Plans, Conditions Assessments, Materials Analysis, historic research, engineering reports, archaeological investigations, master plans, feasibility studies, etc.

Historic Structure Reports, Preservation Plans, and updates to these documents should follow the formatting and guidelines in the [\*HSRs & Preservation Plans: A Preparation Guide, 2nd Edition\*](#).

List the planning documents that substantiate the work proposed in this project, including the year the document was completed. If part of this grant proposal includes preparation of or updates to planning documents, please note that. (250 word max)\*

Current project status (check all that apply):\*

- Project not started yet
- Preliminary Scope of Work prepared
- Request for Proposal (RFP) for consultant services prepared
- Proposals submitted
- Consultant selected
- Schematic/design development
- Construction documents complete
- Bid package prepared
- Project out to bid
- Contractor selected
- Construction underway
- Other:

+Required if consultant selected: Name of consulting firm:

+Required if consultant selected: Detail the role the consulting firm(s) will play in this project:

+Required if contractor selected: Name of contractor firm:

Provide names of additional consultants (engineers, archaeologists, etc) that will be involved in the project, if any:

Provide roles of any additional consultants that will be involved:

Project start date:\*

Project end date:\*

#### **ATTACHMENTS CHECKLIST FOR THIS SECTION:**

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

1. Scope of work, Request for Proposals, proposals received and/or selected
2. Proposed fees and construction estimates for the entire project (for multi-phase proposals, provide fees and estimates broken down by individual phases as well as for the entire project)
3. Design documents, construction documents, bid documents
4. Planning documents that substantiate the proposed work
5. Resume/credentials of proposed and/or selected consultant and/or contractor

## Project Budget

For evaluation purposes, capital grants are separated into three categories based on the level of funding.

Choose what range your grant request falls under:\*

- Level I (\$5,000 - \$150,000)
- Level II (\$150,001 - \$750,000)
- Level II Multiphase (\$500,000 - \$750,000 per phase)

(Whole numbers only)

Grant request:\*

Total Project cost:\*

+Required if pursuing a Level II Multiphase grant:

Grant request for Phase I:\*

Grant request for Phase II:\*

Grant Request for Phase III:

Grant Request for Phase IV:

Total Project Cost:\*

To determine the minimum match for Level I grants, multiply the project total by 0.4. For example, if the project total is \$100,000, the required match is \$40,000.

The minimum match for Level II is the same number as the grant request, since it is a 1:1 match.

The minimum match for Level II Multi-phase is the same number as the grant request, since it is a 1:1 match (please list the minimum match requirement for Phase I below).

Minimum match requirement:\*

Match required to complete the project (Total project cost minus grant request):\*

Applicants will be evaluated based on their ability to raise **the match required to complete the project (the second number)**, not the minimum required match.

For capital grants, up to 25% of the total project cost can be claimed as “match expended.” To qualify, the match must have been spent within two years of the application deadline (between April 23, 2018 and April 23, 2020) AND the work must meet the [\*Secretary of the Interior's Standards\*](#).

Funds derived from other Corporate Business Tax (CBT) funded projects, or from special appropriations awarded by the Legislature, cannot be used as your match for Preserve New Jersey grant funded projects. If Federal funds are used as a match, additional documentation may be required.

Does your project have any match expended?\*

Yes

No

+Required if yes: Match expended amount (should not be more than 25% of total project cost):

+Required if yes: Itemize all work items that are considered "match expended." Include a brief description of the item, when work was begun and completed, and the cost. (500 word max)

Do you have any additional matching funds in-hand, excluding match expended?\*

Yes

No

+Required if yes: What is your match in-hand, excluding match expended:

+Required if yes: Itemize all additional matching funds, including funding source, amount, and dates when funds will be available. (500 word max)

+Required if no: If you do not have any other matching funds in-hand, explain how you will raise the required matching funds. Include grants you have applied for or plan to apply for, other fundraising plans, and the expected time frame for raising the match. (500 word max)

+Required for Level II Multi-phase applicants: Explain the source of matching funds for not only this phase, but for subsequent phases. (500 word max)

Calculate remaining match still needed using the following formula\*:

Total Project Cost – Grant Request – (Match Expended + Match In-Hand) = Match Remaining

If applicable, explain how you will raise the remaining matching funds. Include grants you have applied for or plan to apply for, other fundraising plans, and the expected time frame for raising the match. (500 word max)

Do you have any expenses that are ineligible for reimbursement but are necessary to complete your project? See the Grant Guidelines for a list of ineligible activities.

Yes

No

+Required if yes: Explain what the ineligible expenses are and how you will fund these costs. (500 word max)

Cost estimates for the project are based on:\*

- Architect's estimate
- Engineer's estimate
- Contractor's proposal
- Preliminary estimates from a design professional
- Quantity take-offs from measured drawings
- Competitive bids based on construction drawings
- Other:

Itemized project budget: Download and complete the [Capital Project Budget Worksheet \(Excel\)](#) and include it on the USB drive as Attachment E.\* If your project includes multiple structures, fill out one structure per tab. Add more tabs as needed.

For Level II Multi-phase applicants, download and complete the [Capital Multiphase Budget Worksheet \(Excel\)](#) and include it on the USB drive as Attachment E.\*

Construction work is broken out by CSI divisions. [Click here for a list of CSI divisions.](#)

## **ATTACHMENTS CHECKLIST FOR THIS SECTION**

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

1. Documentation of match in-hand (excluding match expended)
  - Non-profit organizations must provide account statements or letters of funding commitment showing the amount of available funds
  - County of municipal government applicants must provide a governing body resolution committing specific matching funds
  - Multi-phase applicants must provide documentation of match in-hand for this phase and subsequent phases
2. Documentation of match expended
3. Documentation of work completed (including contracts with professionals, invoices, proof of payment, before and after photos, and SHPO authorization for government owned resources)
4. [Capital Project Budget Worksheet](#) or [Capital Multiphase Budget Worksheet](#)



## Organizational Ability

What is the size of your organization? Please break out into: staff, board, volunteers, and membership. (250 word max)\*

Describe the mission of your organization and the audience it reaches. Explain the relationship of this proposed project to your mission and any planned program growth. (1000 word max)\*

How are decisions made related to the preservation of the historic resource(s) in this application? (500 word max)\*

Explain how you plan and budget for cyclical maintenance of the historic resource(s) included in this application. How will the resource be maintained once the funded work is completed? Who is responsible for supervising and performing the maintenance work? (500 word max)\*

How are you factoring climate change into your preservation efforts and into this project in particular? (500 word max)\*

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

- NJ Historic Trust & NJ Historical Commission Best Practices Workshops
- NJ History & Historic Preservation Conference
- Historic Preservation Commission Trainings
- Continuing Education in Historic Preservation classes at Rutgers Camden (M.A.R.C.H)

List any other relevant professional development activities that staff, board, or volunteers have participated in within the last 2 years. (250 word max)

List any relevant examples of grants managed by the organization and/or project manager. Include the funding source, purpose of the grant, grant amount, award and completion dates, and the grant manager. (250 word max)\*

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

Yes

No

+Required if yes: Explain the scope and status of your open grants and how your organization has the capacity to manage more than one open grant at a time.

List any relevant examples of the organization's experience working with consultants. Include the firm name, service provided, contract amount, project start and end date, and project manager. (250 word max)\*

Provide the names of the people who will be managing this project, their relationship to the organization, and what their role in this project will be. (250 word max)\*

#### **ATTACHMENTS CHECKLIST FOR THIS SECTION**

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
3. Organization's current year-to-date balance sheet 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

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

Yes

No

+Required if no: Explain why not. (250 words max)\*

Current hours of operation:\*

Hours of operation once project is complete:\*

Number of days/year site is open:\*

Number of days/year open once project is complete:\*

Number of visitors/year: \*

Number of visitors/year expected once project is complete:\*

Is there an entry fee?\*

Yes

No

+Required if yes: What is the entry fee?\*

Is the resource ADA accessible? If so, to what extent? If not, why not? Will the proposed project improve ADA compliance and accessibility? Please explain. (500 word max)\*

Are visitation numbers collected? If so, how? If not, why not? Is any other visitor information collected? If so, what? How is visitation data used? (500 word max)\*

How will the project benefit the community? Who will benefit from the project? (500 word max)\*

Will the project improve public participation in the organization's programs and will it increase awareness of the resource's history and its relation to the surrounding community? Explain. (500 word max)

How is the resource currently interpreted to the public? Will the project address or improve public interpretation (brochures, signage, tours, etc.)? Will the project enhance participation in heritage tourism opportunities? Please explain. (500 word max)\*

Is the resource located within a Certified Local Government (CLG) municipality? ([List of CLGs](#))\*

Yes

No

Is the resource included on Journey through Jersey? ([Journey through Jersey sites](#))\*

Yes

No

Nomination Submitted

For the 2020 grant round, special consideration will be given to grant proposals that address the following themes:

The 100<sup>th</sup> Anniversary of the 19<sup>th</sup> Amendment/ Women’s History in New Jersey. The year 2020 marks the centennial of the passage of the 19<sup>th</sup> amendment, granting women in the United States the right to vote. In an effort to celebrate this centennial anniversary, grant proposals that incorporate New Jersey women’s heritage sites or that aim to promote women’s history in New Jersey are encouraged.

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 highlight sites involved in the American Revolution or that aim to promote New Jersey’s role in Revolutionary War are encouraged.

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

100<sup>th</sup> Anniversary of the 19<sup>th</sup> Amendment

250<sup>th</sup> Anniversary of the American Revolution

+Required if yes: Please explain how your project addresses one or both of the special initiatives.\*

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

- [National Park initiatives](#)
- [Scenic Byways](#)
- [Coastal Heritage Trail](#)
- [Women's Heritage Trail](#)
- [Delaware River Heritage Trail](#)
- [Federal Opportunity Zones](#)
- [Urban Enterprise Zone](#)
- [Transit Village](#)

#### **ATTACHMENTS CHECKLIST FOR THIS SECTION**

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

1. Letters of Support
  - Letters of Support from individuals 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.

## Optional Questions

What is your organization's total anticipated monetary need over the next 5 years for capital projects and improvements to your historic resources? (Answering this question helps us to gauge future needs for budgeting purposes)

How many people in your organization (board members and/or staff) have a [Discover NJ History license plate](#)?

## Supporting Documents Checklist - Capital

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). Please organize all supporting documents into corresponding folders labeled by Attachment. 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 Assurances](#)
- [Governing Board Resolution](#)
- None of the above

### **Attachment B – Owner Information**

- [Owner Assurances](#)
- Signed lease agreement
- [Owner Authorization form](#)
- None of the above

### **Attachment C – Eligibility and Register Status**

- Most recent nomination form or eligibility statement
  - If the property is individually listed in the State or New Jersey 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
  - If the property is included in a historic district 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 **at least 45 days before** the application deadline. OR
  - 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 **at least 45 days before** the application deadline.
- None of the above

**Attachment D – Scope of Work**

- Scope Statement (Scope of work, Request for Proposals (RFPs), proposals received and/or selected)
- Proposed fees and construction estimates for the entire project (multi-phase applicants should submit fees and estimates for the project as a whole and broken down by individual phases)
- Design documents, construction documents, bid documents
- Planning documents that substantiate the proposed work
- Resume/credentials of proposed and/or selected consultant and/or contractor
- None of the above

**Attachment E – Project Budget**

- Documentation of match in-hand:
  - Non-profit organizations must provide account statements or letters of funding commitment showing the amount of available funds
  - County of municipal government applicants must provide a governing body resolution committing specific matching funds
  - Multi-phase applicants must provide documentation of match in-hand for this phase *and* for subsequent phases
- Documentation of match expended
- Documentation of work completed (including contracts with professionals, invoices, proof of payment, before and after photos, and SHPO authorization for government owned resources)
- [Capital Project Budget Worksheet](#) or [Capital Multiphase Budget Worksheet](#)
- None of the above

**Attachment F – Organizational Ability**

- Cyclical Maintenance Plan
- Resume/Credentials of Project Manager/Project Team
- Organization’s current year-to-date balance sheet showing income and expenses to date and past year’s summary balance sheet showing income and expenses (required for non-profit applicants only)
- None of the above

**Attachment G – Community Support**

- Letters of Support
  - Letters of Support from individuals and/or groups that benefit from your resource and/or programming
  - Legislative Letters of Support
- Documentation of community support/engagement (press releases, news articles, flyers, programs, etc.)
- None of the above

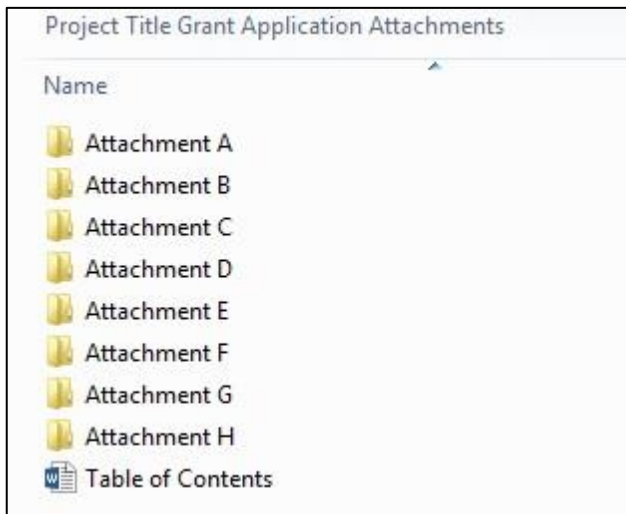


**Attachment H – Photographs**

- Labeled Photos and Photo Identification Sheet\* (photographs must be uploaded as JPEG files, not as PDFs)
  - Photo Identification Sheet that identifies the included photos by number and briefly describes each photograph
  - Photographs showing each elevation (i.e., north, south, east, and west) of the resource
  - Photograph of the resource as a whole (i.e., an overall shot that shows the resource in its context or setting)
  - Photographs of details that show areas of concern
- Any additional miscellaneous documents (including any completed research that supports the project request)
- None of the above

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

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



**Applicant Assurances\***  
**(required)**

The applicant certifies the following:

- a. The filing of this application has been approved by the governing body of the applicant
- b. The facts, figures, and information contained in this application, including all attachments, are true and correct
- c. Matching funds in the amount of \$ \_\_\_\_\_ are currently available, or will be available to complete this project within the required time frame.
- d. 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
- e. The individual signing this agreement has been authorized by the organization to do so on its behalf, and by his/her signature binds the organization to the statements and representations contained in the application
- f. The organization agrees to abide by the time frame set forth in the grant guidelines.

Acting as duly authorized representative for the applicant organization, I am submitting this request for assistance from the New Jersey Historic Trust.

Signature of Individual \_\_\_\_\_ Date \_\_\_\_\_

Typed Name and Title :