



**MASSACHUSETTS  
HISTORICAL  
COMMISSION**

**COMMONWEALTH OF MASSACHUSETTS  
Office of the Secretary of State**

294 Washington Street  
Boston, Massachusetts  
02108  
617-727-8470

MICHAEL JOSEPH CONNOLLY  
Secretary of State

MEMORANDUM

TO: National Register of Historic Places Property Owners  
and Other Interested Parties

FROM: <sup>V.J.</sup> Valerie Talmage, Executive Director, Massachusetts  
Historical Commission

RE: FY83 DEVELOPMENT GRANT PROGRAM

DATE: April 20, 1983

\* \* \* \* \*

As many of you are aware, the Massachusetts Historical Commission is about to receive a \$640,000 appropriation from the Department of Interior to be awarded on a competitive basis to support rehabilitation projects of National Register Properties. While MHC has yet to receive final instructions and selection criteria from the National Park Service, we are requesting interested National Register property owners to submit the attached REQUEST APPLICATION FOR HISTORIC PRESERVATION DEVELOPMENT PROGRAM.

Due to the one year limit for completion of projects, MHC staff will be forced to evaluate the capability of applicants to complete a development project in a very short timespan. If you feel you are able to fulfill the requirements, please submit the REQUEST APPLICATION as soon as possible. After reviewing your request, we will notify you in early May and invite you to submit a FULL APPLICATION. If you are unable to submit a REQUEST APPLICATION, due to funding or time constraints, but are interested in future funding, please return the FUTURE FUNDING SECTION. MHC will keep your request on file and notify you if future funds become available.

Because the emergency appropriation was designed to generate jobs quickly, the Massachusetts Historical Commission is required to have the funds obligated (under contract) by October, 1983, the work started by January, 1984, and the money spent by September 30, 1984. Furthermore, grant recipients must match the federal funds dollar for dollar with either state or private monies. (CDBG funds are the only federal funds eligible to match the grants-in-aid program).

The following criteria must be met for eligibility under the one year Grants Program:

1. Property is listed on the National Register of Historic Places.
2. Project will be completed by September 1, 1984.
3. Total project cost will be expended before MHC reimburses the 50% matching share (grant award).
4. Grant recipients will comply with all pertinent federal/state laws and regulations.

If your property is not listed on the National Register of Historic Places and you would like it considered for nomination so you may apply for future program assistance, contact your local historical commission at your town or city hall. National Register nominations are submitted to the MHC under the sponsorship of local historical commissions. National Register listing provides recognition and protection, as well as eligibility to apply for federal funds and federal tax benefits (for income-producing properties) under the Economic Recovery Act of 1981.

More specific criteria and information will be included in the FULL APPLICATION. Please feel free to contact the MHC Grants Division if you should have any questions. We look forward to reviewing your REQUEST APPLICATION.

VT/sac

MASSACHUSETTS HISTORICAL COMMISSION  
REQUEST APPLICATION FOR  
PRESERVATION DEVELOPMENT PROGRAM

**PROPERTY NAME** As listed in the National Register of Historic Places. Be sure to include name of district if property is not individually listed.  
DISTRICT: \_\_\_\_\_ PROPERTY: \_\_\_\_\_

**PROPERTY ADDRESS** Street: \_\_\_\_\_  
City/Town: \_\_\_\_\_

**OWNERSHIP**

<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> PRIVATE ORGANIZATION
<input type="checkbox"/> PRIVATE NON-PROFIT ORGANIZATION	<input type="checkbox"/> COUNTY/MUNICIPAL/TOWN GOVERNMENT
<input type="checkbox"/> STATE	<input type="checkbox"/> OTHER (EXPLAIN): _____

**PROPERTY USE**

P <input type="checkbox"/> F <input type="checkbox"/> RESIDENTIAL (SINGLE FAMILY)	P <input type="checkbox"/> F <input type="checkbox"/> PUBLIC (NON-GOVERNMENTAL USE)
<input type="checkbox"/> <input type="checkbox"/> RESIDENTIAL (MULTI FAMILY)	<input type="checkbox"/> <input type="checkbox"/> PUBLIC (GOVERNMENTAL USE)
<input type="checkbox"/> <input type="checkbox"/> MUSEUM	<input type="checkbox"/> <input type="checkbox"/> PARK, MONUMENT OR OPEN SPACE
<input type="checkbox"/> <input type="checkbox"/> CHURCH	<input type="checkbox"/> <input type="checkbox"/> COMMERCIAL
<input type="checkbox"/> <input type="checkbox"/> INDUSTRIAL	<input type="checkbox"/> <input type="checkbox"/> OTHER (EXPLAIN): _____

P = Present Use      F = Future Use

**BUDGET SUMMARY**

A. TOTAL PROJECT

Grant Requested* (Federal Share of Project)	\$ _____
Applicant's Share (Non-Federal Share of Project)	\$ _____
Total Estimated Project Cost	\$ _____

\*"Grant Requested" may not exceed 50% of total project cost.

B. APPLICANT'S SHARE

Source _____	Amount _____
Kind _____	Date Available _____

EXAMPLE: Source: (Construction Loan; Town Appropriation)  
Kind: (Cash; materials)

NOTE: Applicant's share must be non-federal funds (Exception: CDBG funds)

**PROJECT PERIOD**

ESTIMATED BEGINNING DATE: \_\_\_\_\_

ESTIMATED COMPLETION DATE: \_\_\_\_\_

DESCRIPTION OF  
PROPOSED PROJECT WORK

PRESERVATION PLANNING

- Feasibility Study, Preservation Plan or Historic Structures Report has been prepared for property.
- A Study, Plan or Report has not been prepared for this property.

JOBS

Estimated number of persons who will be employed during construction: \_\_\_\_\_. Permanent jobs which would be created as a result of grant-assisted work: \_\_\_\_\_.

**CERTIFICATION**

APPLICANT: NAME \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

TITLE (IF APPLICABLE) \_\_\_\_\_

ORGANIZATION (IF APPLICABLE) \_\_\_\_\_

STREET \_\_\_\_\_

CITY/TOWN \_\_\_\_\_ ZIP \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

LIST CONTACT PERSON IF OTHER THAN SHOWN ABOVE \_\_\_\_\_

\_\_\_\_\_ TELEPHONE # \_\_\_\_\_

OWNER(S): (IF OWNER IS NOT APPLICANT) NAME(S) \_\_\_\_\_

STREET \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

CITY/TOWN \_\_\_\_\_ ZIP \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**REQUEST FOR FUTURE FUNDING**

I do not wish to apply for funding at this time. However, if Future Funds become available, I would like the Massachusetts Historical Commission to consider my property.

NAME \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

STREET \_\_\_\_\_

CITY/TOWN \_\_\_\_\_ ZIP \_\_\_\_\_

PROPERTY NAME AS LISTED IN THE NATIONAL REGISTER OF HISTORIC PLACES

DISTRICT (IF APPLICABLE) \_\_\_\_\_

PROPERTY: \_\_\_\_\_

CHECK BOX IF NOT LISTED IN NATIONAL REGISTER OF HISTORIC PLACES

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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