Small Matching Grant Application

A - Organization Information

<Display applicant information read only>

- a. Applicant Name (org or individual)
- b. FEID
- c. Phone number (with extension if applicable)
- d. Principal Address
- e. Mailing Address
- f. Website
- g. Org Type (e.g. nonprofit, school board, etc.)
- h. Org Category (e.g. public library, SOE, etc.)
- i. County
- j. UEI number

1. Designated Project Contact*

The project contact is the applicant organization's primary contact for the application review process. In addition to being available to answer questions from Division staff regarding the proposed project and application, the project contact is usually the individual who will be administering the project, if it is funded.

<Select from Organization Contacts> First & Last Name Phone Number + Extension Email Address

2. Authorized Official*

Provide the name and contact information for the person authorized to sign contracts on behalf of the organization. This is often an Executive Director, President, board member, city manager, county administrator, etc.

<Select from Organization Contacts>
First & Last Name
Phone Number + Extension
Email Address

3. Certified Local Governments (CLG)*

Only governmental entities that are Certified Local Governments (CLG) in good standing are eligible to receive **Federal** funds for the Survey, Planning, and National Register Nomination project categories. CLGs may also apply for state funds for projects in the Heritage Education category). No more than two (2) applications, one for federal funding and one for state funding, may be submitted under a single application deadline. If your CLG organization has multiple distinct budgetary units, each unit may submit an application pursuant to program guidelines; however, only two applications (as described here) may be submitted using the CLG designation and request a match waiver.

Are you submitting this application using the CLG designation as described above? What is a CLG?

- Yes
- o No

3.1.	If ves.	is	this	an a	application	for	federal	or	state	fund	ing?
	, _ ,	_~			- P P			-	~		

- o Federal (Survey, Planning, and National Register Nomination project types only)
- State (Heritage Education projects only)
- 3.2. If yes, provide the following:

Congressional District Number(s)

Congressional District Number of U.S. Congressional Representative for the Project Location (find your legislators on flsenate.gov)

4. Florida-based Accredited Main Street Programs*

Are you an Active Florida-based Accredited Main Street community? Contact the state Main Street Office at FloridaMainStreet@dos.myflorida.com or 850.245.6345 with questions about your organization's status.

- Yes
- o No
- 5. Applicant Grant Experience and History*
 - 5.1. Has the applicant organization received previous grant assistance within the past five years from any source?*
 - \circ Yes
 - o No
 - 5.2. If yes, for the most recent grants (up to 20), specify the year of the grant award, grant number, grant project name, the granting entity, the grant award amount, and its current status. Make sure to include any grants awarded by the Division or other State grants.

Year	Grant No.	Grant Project Name	Granting Entity	Grant Amount	Open/Closed

- 5.3. Has the applicant applied for additional grant assistance from other State or Federal funding sources, including from other divisions of the Department of State, for the same Scope of Work activities within the same fiscal year?*
 - o Yes
 - o No
- 5.4. If yes, for each application specify the grant project name, the granting entity, the grant program, the grant request amount, date of application, and its current status.

Grant Project Name	Granting Entity	Grant Program	Grant Request Amount	Date of Application	Current Status
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6. Proposed Project Team*

Please list those persons who will be directly involved with the administration of the grant should this application be successful. This should include the Project Contact listed and all other individuals who will have a role in the execution of the grant project. Please list below the individuals' names, roles for the project or titles within the applicant organization, and contact information. The curricula vitae/resumes of the proposed project team are to be uploaded in the Support Materials section of this application.

Key Project Person	Project Role or Title	Email	Phone Number and Extension

7. Applicant staffing and hours*

Select the option that best describes your organization.

- Organization is open at least 40 hours per week and has at least one paid staff member in a management position
- o Organization has some paid staff but they are not full-time
- o Organization is open part-time and has volunteer staff

B - Project Information

1. Project Type*

Select the project type for which grant funds are requested. If you are unsure of which type to select, please refer to the definition beneath each project type. If the incorrect project type is selected for the proposed scope of work, the application will be declared ineligible. Projects involving Development activities must apply for Special Category grant funding.

Survey Project

Projects which identify, document and evaluate historic or archaeological resources individually or within historic or archaeological districts or areas being investigated for the potential of becoming historic districts or zones, or updating previous surveys.

o Planning Project

Planning projects necessary to guide the long term preservation of historic resources or a historic district, including preparation of historic structure reports, condition assessments, architectural drawings and construction documents, predictive modeling, preparation of preservation or management plans, and design or preservation guidelines. Planning activities on historic Religious Properties shall be limited to building exterior envelope and structural elements of the building, excluding accessibility upgrades.

National Register Nominations Project

Projects that prepare a nomination to the National Register of Historic Places for an individual Historic Property or a nomination for a historic or archaeological district or a

thematic or multiple resource group nomination. The resource(s) or proposed district must have been determined eligible for the National Register of Historic Places by the Division prior to applying for the grant. Preparation of National Historic Landmark designation nominations shall not be allowable for Small Matching grant funding.

Heritage Education Project

Projects aimed at increasing public understanding and awareness of the history of Florida and the importance of its historical and archaeological resources and their preservation, either in general or for specific sites, properties or collections. This may include proposals such as walking tours brochures, education material for school children, interpretive signage, videos illustrating historic preservation principles, small educational exhibits, preservation of historical records through digitization and educational apps related to the history of Florida and/or its historical and archaeological resources. Exhibits must not be permanently affixed to the building.

Historical Marker Project

Projects which assist with the acquisition of state markers for which texts (monolingual or bilingual) have been approved by the State Historical Marker Council prior to applying for the grant.

2. Project Title and Location Information*

The title should reflect the name of the property, site, area and/or the goals of the proposed project. The title should be consistent with previous applications/awards. (For example, Pensacola Maritime Heritage Trail, Archaeological Survey of Deering Estate, etc.)

2.1.	Project Title*
2.2.	Name of Property (if applicable)
2.3.	Street Address (primary location where the proposed project will be carried out)
2.4.	City (location of the proposed project)*
2.5.	Primary County (location of the proposed project)*
Describe th secluded? (Context of Resource (Maximum characters 500) * the physical context of the resource(s). Some questions to consider include: Is the property or in an urban environment? What sort of resources are nearby? Where is the property in this toric districts or Main Street program areas?

C – Historical Significance

1.	Histo	rical	Design	ation*
	111910	nicai	DUSIE	iauvii

Indicate the type of historical designation currently held by the historic resource(s) that are the subject of the project, if any. For properties or sites that have been listed in the National Register or are contributing properties or sites within a National Register District, provide the date that the property, site or district was listed. Should you have questions regarding the National Register status of a property or site, contact the Division's National Register Staff at 1.800.847.7278 or 850.245.6300.

Till Type	of Historical Designa	ntion*	
•	Individual National R	Register Listing(s)	
	National Register Dis	strict - Contributing Resou	rces
	National Historic Lar	ndmark Designation	
•	Individual Local Des	ignation	
•	Local Designated Dis	strict - Contributing Resou	rces
•	No Historical Design	ation	
	roperty Name	Date Designated	٦
<u>_</u>	Toperty Name	Date Designated	
rical Sigr	nificance		
	ain the historic signifi	cance for the property, si roject (Maximum charac	te, information or resource(s) t ters 1500)*
2.1. Expl	ain the historic signifi		
2.1. Expl	ain the historic signifi		
2.1. Explis the subj	ain the historic signifi ject of the proposed p projects associated wit	roject (Maximum charac	

	2.4. For Archaeological Sites, provide the Cultural Affiliation of the Site and Dates of Us or Occupation (Maximum characters 300)
- Pro	ject Specifics
1.	Professional Services All grantees are required to use the services of qualified professionals in order to carry out the sco of work of their projects (exception Historical Marker projects).
	1.1 Will you be hiring professional services (architectural and engineering services, archaeological services, an educational consultant, or historic preservation consultant services with grant or match funds for this project? If so, make sure to include those services in your scope of work and budget.* O Yes
	o No
	 1.2 Will the professional services of existing staff be used instead of contracting those services Yes No
	 1.3 If no services are to be hired and no staff services will be utilized for this purpose, will professional services be paid for outside of the grant project (i.e with funds other than gran and match funds)?* Yes No
	1.4 If no professionals are projected to be hired, explain why. (Maximum characters 500)*
In re	Scope of Work (Maximum characters 5000)* the space provided below, briefly describe the scope of work for the project for which funding is quested. List the work items that will be completed during the grant period using the funds requested the required match.

3.	Tentative	Proi	ect "	Timeline	(remembe	r this is a	1 1 2	month	grant	neriod)*
•	1 Cii tati v C	1 1 V.J	···					111011111	SIGHT	periou,

Please specify the start and end month and year below; indicate all major elements of the project for which funding assistance is requested, the anticipated time required to complete each element, and the planned sequence of these activities. Grants, if awarded, will begin July 1 of the year funds are appropriated. **Projects should be completed within 12 months.**

Work Item	Starting Date	Ending Date

Prov	Newly Recorded Sites* ide an estimate of the number of Florida Master Site Forms that will be produced by they for newly recorded sites.
(Not arch	Florida Master Site File Updates* e: Surveys that record or update site file forms for more than 10 historic properties or aeological sites must produce paper Florida Master Site Forms and also submit the site using the electronic forms provided by the Florida Master Site File.)
4.4.	Enter the acreage of the area to be surveyed.*
inve	For archaeological survey projects, what is the size of the archaeological site(s) to stigated? Alternatively, what is the estimated quantity of artifacts projected to be yzed? (Maximum characters 500)*

4.6. Local Protection*

Indicate the level(s) of local protection currently afforded the project historic property or site and upload a copy of the local protection documents in the Support Materials section of this application.

Local Protection Level(s)*
Local Ordinance Design Review
Preservation or Conservation Easement
Protective/Restrictive Covenant
Maintenance Agreement/Long Term Lease
Other
• None
5. Planning Projects* 5.1. How will the product(s) be made available to others in the community? (Maximum
characters 500)*
5.2. Local Ductostion*
5.2. Local Protection* Indicate the level(s) of local protection currently afforded the project historic property or site and upload a copy of the local protection documents in the Support Materials section of this application.
Local Protection Level(s)*
 Local Ordinance Design Review
Preservation or Conservation Easement
Protective/Restrictive Covenant
Maintenance Agreement/Long Term Lease
Other
None
5. National Register Nomination Projects*

6.1. Has the Division of Historical Resources, Bureau of Historic Preservation, Survey and Registration Section determined the resource(s) or proposed district to be eligible for the

National Register of Historic Places?*
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	Historic Preservation, Survey and Registration Section <i>must</i> be provided in the Materials section of this application. Should you have questions regarding the Nation
Register s	status of a property or site, contact the Division's National Register Staff at
	7.7278 or 850.245.6300 Yes
	No
6.2. Will	a Multiple Property Cover nomination be produced?*
0	Yes No
O	110
	uss whether the proposed project entails individual or district nominations m characters 500)*
(I D., . 4 4 4
	l Protection*
	he level(s) of local protection currently afforded the project historic property or site copy of the local protection documents in the Support Materials section of this
applicatio	1,
Local Pro	
	otection Level(s)*
	Local Ordinance Design Review
	Local Ordinance Design Review
	Local Ordinance Design Review Preservation or Conservation Easement
	Local Ordinance Design Review Preservation or Conservation Easement Protective/Restrictive Covenant
	Local Ordinance Design Review Preservation or Conservation Easement Protective/Restrictive Covenant Maintenance Agreement/Long Term Lease
	Local Ordinance Design Review Preservation or Conservation Easement Protective/Restrictive Covenant Maintenance Agreement/Long Term Lease Other
	Local Ordinance Design Review Preservation or Conservation Easement Protective/Restrictive Covenant Maintenance Agreement/Long Term Lease
storical Ma	Local Ordinance Design Review Preservation or Conservation Easement Protective/Restrictive Covenant Maintenance Agreement/Long Term Lease Other
	Local Ordinance Design Review Preservation or Conservation Easement Protective/Restrictive Covenant Maintenance Agreement/Long Term Lease Other None rkers Projects*
7.1. Has	Local Ordinance Design Review Preservation or Conservation Easement Protective/Restrictive Covenant Maintenance Agreement/Long Term Lease Other None rkers Projects* the Historical Marker Council approved the text for the Historical Marker?*
7.1. Has Evidence	Local Ordinance Design Review Preservation or Conservation Easement Protective/Restrictive Covenant Maintenance Agreement/Long Term Lease Other None rkers Projects*
7.1. Has Evidence	Local Ordinance Design Review Preservation or Conservation Easement Protective/Restrictive Covenant Maintenance Agreement/Long Term Lease Other None rkers Projects* the Historical Marker Council approved the text for the Historical Marker?* of review and approval by the Historical Marker Council must be provided in the

Heritag	e Education Projects*			
	w many minutes/pages is the page: "3 page brochures, 30 min		ite, etc."	
8.2. Ho	w many copies of the product(s) will be produce	ed?*	
	plain how the project/product ts should be distributed free of c		ited. (Maximum cl	naracters 5
_ (oposed project entail a partne Yes No	ship with any oth	ner local entity?*	
,				

10. Need for Project (Maximum characters 1500)*

Discuss the need for the proposed project or activity, as it relates to the preservation of the history of Florida and/or its historical and archaeological resources, including any immediate threats to the historical property/ies, historic resources or materials, archaeological sites or historical information that is the subject of the proposed project. Documentation material, such as newspaper articles, are to be uploaded in the Support Materials section of this application.

E – Budget and Match

1. Rural Economic Development Initiative (REDI) Waiver of Match Requirements*

Applicants with projects located in counties or communities that have been designated as a rural community in accordance with Section 288.0656 and 288.06561, Florida Statutes, may request a waiver of matching requirements. (Waivers are not available for Historical Marker Project types. State agencies, state colleges, and state universities are not eligible for a REDI match waiver, regardless of project location.)

1.1 Are you requesting a waiver? <u>Is my project in a REDI Community?</u>

- o Yes
- o No

1.2. Are you a state agency, state college, or state university?

- o Yes
- o No

2. Project Budget and Match*

2.1. Grant Funds and Match*

List the work items with their associated estimated expenses and how they will be paid (from match, the grant or both). Only include expenses that are specifically related to the project. If professional services are to be paid with grant or match funds, include those costs as a **separate** item in the budget. Refer to the program Guidelines for examples of non-allowable expenses (available atdos.myflorida.com/historical/grants). Expenses may include an actual amount to be paid or the value of an in-kind contribution.

Small Matching grants require a 100% (i.e., 1:1) match unless exempted by the program guidelines. Applicant Organizations that are Florida Certified Local Government (CLG), or Florida-based, Accredited Main Street communities, and projects for National Register of Historic Places Nominations are not required to provide a match. Applicant Organizations applying for projects located in REDI areas are not required to provide a match (exception: Historical Marker Projects and applicants that are agencies of state, state colleges and state universities are not eligible for the REDI match waiver).

Round amounts to the nearest dollar. Rows must have a value in Grant Funds, Cash Match or In-Kind Match. If all three columns are 0 or blank, the row will not be saved.

The amount of grant funds requested in this application will be the total in the "Grant Funds" column. The total amount of the "Cash Match" column must equal or exceed 25% of the total combined match (cash and in-kind).

#	Work Item	Grant Funds	Cash Match	In-Kind Match	Total
	Totals:	\$0.00	\$0.00	\$0.00	\$0.00

	Totals:	\$0.00	\$0.00	\$0	0.00	\$0.00
Tot	ant Funds Requested: tal Match Amount: oject Total Budget:		·			
2.2	. Additional Budget Informa	tion/Clarific	ation			
exa may iter	e this space to provide additional mple, where the relationship be you not be obvious, provide clarifying to the successful completion ompleted Project Activities.	etween items ication regard of the project	in the budget ling the neces t.	and the object sity for or con	ives of the propartition of the	oosed projec se work mittal. Such
arch	vities may include architectural aeological research accomplish grant period begins.					
	Activity Descr	ription		Date Completed	Cost/Value	Delete
	Operating Forecast. (Maximus cribe source(s) of funding for n		ŕ	gram support a	and/or additions	ıl expenses

F-Property Information

1. Property Ownership (for site-specific projects).

Enter name of the Property Owner and choose the appropriate owner type. If applicant is not the owner of the property, the applicant must secure Property Owner concurrence. The applicant shall provide a letter from the Property Owner that documents that the applicant has the permission of the Property Owner of record to conduct the proposed project on the owner's property and that the Property Owner is in concurrence with this application for grant funding. This letter shall be uploaded in the Support Materials section of this application. If the property for which grant funding is requested is leased by the Applicant Organization, the lease agreement must be dated, signed and submitted at the time of the application submission, with the required Owner Concurrence Letter attachment to the application.

1.	1.	Does	vour	organ	ization	own	the	pro	perty	? *
			,							

- o Yes
- o No
- Not Applicable

1.2. Property Owner

1.3. Type of Ownership

- o Non-profit Organization
- Private Individual or For-Profit Entity
 Note: Properties owned by private individuals or for-profit entities are not eligible for grant funding with the exception of site-specific archaeological projects that entail fieldwork being undertaken by an eligible applicant organization.
- o Governmental Agency

2. Religious Affiliation

2.1 Is the Property Owner a religious institution or affiliated with a religious institution?*

- o Yes
- o No
- Not Applicable

G –Impact

1. Annual Visitation*

1.1. What is the estimated or anticipated Annual Visitation for the project property or site?*

For education products, please list the estimated annual distribution, downloads or web hits.

1.2. What is the basis of these estimates? (Maximum characters 200)*

Explain the d	d Economic Impact frect economic impact egarding number of jo	t this project will	have on the surrou	nding community. In	clude any
Describe any groups and/or	Underrepresented C direct benefit the proj people with disabiliti g. voice over, closed o	ect will have on uies. If project incl	ınderrepresented co	ommunities, such as 1	
	al Dama f ika J.D. 119	*	aximum characte	*	vation,
Explain how	the proposed project vy and/or heritage pres	-			
Explain how	the proposed project v	-			
Explain how Florida histor	the proposed project v y and/or heritage pres	-			
Explain how Florida histor Ipport Mat 1. Non-Profi Provide docu	erials Estatus* mentation of the applins, Florida Department	cant's active state			

Upload file

Choose file:

3. Documentation of Confirmed Match*

Consult the program Guidelines for suitable documentation evidencing match (FLheritage.com/grants/)

Choose file:	Upload file

4. Letters of Support

Additional letters may be submitted directly to the Division but must be received one month prior to the public meeting where the applications will be reviewed and scored.

Choose file:	U-	pload file

5. Photographs*

Photographs are used to further inform Panelists and should relate to the proposed project, depicting the associated property, site, resources, or collection in its current state. Historical images are also welcome.

Choose file:	Upload file

6. Representative Image*

Upload a single representative image of the property or project to be used in the application review meeting that conveys the theme or purpose of the proposed project. For projects directed at historic properties or sites, this should be a recent image of the front of the building or site.

Choose file: Upload file

7. Proposed Project Team Support Documents*

Provide the curricula vitae/resumes of the proposed project team as listed in Section A.6 of the application.

Choose file:	U	pload file

8. Florida Historical Marker Council Support Documents (for Historical Marker Projects only)*

C1 C1	TT 1 1 C1
Choose file:	Upload file

9. National Register Eligibility Determination Documents (for National Register Nomination Projects only)*

Submit evidence of review and determination of eligibility by the Division of Historical Resources, Bureau of Historic Preservation, Survey and Registration Section. They can be contacted at NationalRegister@dos.myflorida.com or 850.245.6333. Please allow approximately two weeks for processing your request for a review to be complete.

Choose file:	Upload file
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10. Documentation of Need*

Choose file:	Upload file

11. Local Protection (for Survey, Planning and National Register Nominations Projects only

Provide copies of any documents that provide local protection of the project site)*

Choose file:	Upload file

12. Owner Concurrence Letter (for site-specific projects only)*

Provide a letter that documents that the applicant has the permission of the owner of record (if the Property Owner is not the applicant) to conduct the proposed project on the owner's property, that the owner is in concurrence with this application for grant funding, and documentation that the owner is a non-profit organization or agency of government. If the property for which grant funding is requested is leased by the Applicant Organization, the lease agreement must be dated, signed and submitted at the time of the application submission, with the required Owner Concurrence Letter. Note that, for other than site-specific

Choose	e file:	Uplo	oad file	
	ptional Materials cants may attach ma	aterials not specifica	ally requested by	the Division that support the application.
	Title			
	File To add a support i Upload File button		and optional des	cription. Then select a file and click the
	Choose file:		Upload file	7
I –Review ar	nd Submit			
1. Re	view and Submit*			
and the shall be represented as	hereby certify that I nat all information in have the same legal	ndicated is true and effect as my writter artment of State con	accurate. I acknon signature. I am astitutes a third de	wledge that my electronic signature below aware that making false statement or egree felony as provided for in s. 817.155,
1.1	Signature (enter	first and last nam	e)*	