

# **Historic Preservation Fund Grant**

Fiscal Year 2020-2021

Louisiana Division of Historic Preservation Office of Cultural Development Department of Culture, Recreation and Tourism

\*All boxes must be filled out or application is incomplete\* Applications due by email June 1, 2020 by 5 PM



Project Name	Federa	Federal Tax ID	
Applicant Name		DUNS No.	
Organization	DUNS		
Address	Phone	Number	
City/State		Email	
Parish	Check if the organization is a Certified Local Government		
Zip Code			
LEGISLATIVE DISTRICT INFORMATION: http://www.legis.la.gov/legis/FindMyLegislators.aspx			
LA Senate	LA House	U.S. Congressional	

## <u>Narrative</u>

Give a detailed description of the intent of the project. Describe the methodology and expected results/deliverables and note the work experience of the applicant. The narrative should include: Project Summary, Scope of Work, Schedule, Personnel and Performance Record.

Check all that apply:

Project will expand education and public knowledge of Historic Preservation.

Project will create and/or expand access to digital resources related to Historic Preservation.

Project will assist in getting properties listed on the National Register of Historic Places.

Project will be completed within a year or less.

## **Budget Information**

## Total Project Budget

Total Grant Amount Requested (No more than 50% of project cost)

Total Cash and In-kind Match (Must be 50 % of project cost)

Click to download budget template:

## **National Register Nominations**

Please select the type of Resource to be nominated:

Has an Eligibility Questionnaire been submitted to the LA SHPO?

YES

NO If No, please download the form using the link below and submit with application.

Click here to access Eligibility Questionnaires on NR Website: See 1: Determination of Eligibility

## **General Applicant Information**

#### YES NO

Does the applicant meet Secretary of Interior (SOI) professional qualification standards? (attach resume) https://www.nps.gov/history/local-law/arch\_stnds\_9.htm

Will the applicant ensure the project proceeds with SOI qualified staff where appropriate? (attach resume)

Does the applicant have an accounting system and auditing procedures to monitor grant spending?

Will the applicant provide a detailed line-item budget?

Is the applicant willing to follow all federal guidelines for record retention?

Is the applicant willing to comply with all ADA, ABA, and Rehab Act of 1973 regulations where applicable?

Does the applicant agree that all published documents will be the property of the National Park Service?

Detail any special qualifications, limitations, or concerns regarding this grant application:

If text scrolls, use this button to create a continuation page before printing

## Application Checklist and Instructions:

Before submitting the application, please be sure you have completed the following:

All boxes filled in

Budget form completed

Eligibility Questionnaire completed if nominating a resource

Resumes of applicant and/or contractor

## **Submission Instructions:**

#### You must email this completed .pdf form to **hpfgrantapps@crt.la.gov**. You will receive an auto-reply if it was successfuly submitted. **DO NOT PRINT AND SCAN!**

This application form is valid until June 1st at 5PM when it is due to our office.

After saving PDF form, attach any supplemental information, including budget form, eligibility questionnaire with photos, and resumes to send. File size must be less than 10MG to be accepted by email. You may send supplemental information in a seperate email to reduce file size.

By signing this application, you agree to adhere to all regulations in OMB 2 CFR 200, found here: https://www.govinfo.gov/app/details/CFR-2014-title2-vol1/CFR-2014-title2-vol1/CFR-2014-title2-vol1-sec200-318

Signature

Date

## TYPE NAME IN SIGNATURE BOX!

Typing your name in the signature box below will be considered an electronic signature.