1. **Pre-Development or Development:**

 Pre-Development/Pre-Construction – Feasibility Report, Study, Technical Assistance, or Historic Structures Report (HSR)

 Pre-Development/Construction – Rehabilitation/Preservation Plan and/or Implementation

 Development/Construction – Rehabilitation/Restoration Work

1. If the proposed project is a feasibility study or other property-specific report, please answer the following questions:
   1. Is the Applicant aware that the property must be listed or considered eligible for listing on the National Register of Historic Places before the grant can be released?  Yes  No
   2. National Register of Historic Places (NR) Status:

Listed; date of listing: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pending/In-progress

1. **Property Data:**
2. Historic Property Name: Date of Construction:

Property Street Address:

Property Legal Description:

1. Please indicate the legal owner(s) of the property and/or areas listed in a)

*(Indicate selection with an “X”)*:

 Federal owner; please specify agency:

 State; please specify agency:

 County; please specify department/division:

 City; please specify department/division:

 Private multi-owners (see #4)

 Private single owner (see #4)

1. **Property Owner Information:**

Name: Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: Email:

Company/Firm:

Mailing Address:

City: State: Zip code:

*(If more than one, use ‘Continuation Sheet’ and check box* *)*

1. **For projects located within established NHL boundaries only**, the applicant ***has*** provided the following information with this application:  Yes  No

* Photographs of all exterior elevations with views
* Photographs of all major rooms and project rooms
* Any other relevant information to enable a thorough project review

1. **For all Pre-Development and Development projects**, the applicant has provided photographs of all exterior elevations with views?  Yes  No
2. **For Development projects only**, applicant agrees to track the number of visitors at this resource during the current calendar year.  Examples of when visitors should be counted include visitors who attend events, conduct business, and tour of the building or related facilities.  Yes  No
3. **For Development projects only**, applicant agrees to track the number of events held at this resource during the current calendar year.    Yes  No
4. If your proposed project is forTechnical Assistance (TA), please answer the following questions:

*(Defined as “the development of skills or the provision of knowledge of the background, meaning, operation, or implications of some aspect of historic preservation (Historic Preservation Fund Grants Manual Glossary-23).”*

1. Does your organization have in-house expertise to pursue the above?  Yes  No

If ‘Yes’, please explain:

10. Please describe your project. If necessary, please use a ‘Continuation Sheet’ and check box .

**\*Please select Project type  Pre-Development  Development**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_