CCCHP Grant Program



STATEMENT OF INTENT

	Grant Cycle Year(s)interested in applying		
Applicant Organization:			
Organization Type: ☐ Governation	ment 🗖 Religious (Organization 🛛 5	501(c) Non-profit Corporation
City:	County:		
Project Contact:		Title:	
Daytime Phone:		Email:	
Historic Property Name:			Year Built:
Property Owner Name and Ad	ldress:		
Project Address:			
City:	County:		ZIP:
Parcel:	Is the property	listed on the Nati	ional Register of Historic Places: \Box Yes \Box No

Significance of the property:

Project Type: □ Rehabilitation/Construction □ Planning/Construction □ Architectural/Engineering Study/Construction

Project Synopsis (Brief):



STATEMENT OF INTENT CONT.

Applicant Organization: _____

Intended cultural center programming for the space:

Is there currently any community support for this project and intended cultural center programming? \Box Yes \Box No

If yes, please describe the support below. If no, please describe how you will engage the community in the future.

□ If the organization is a 501(c) corporation, attach the Articles of Incorporation.