DATE and YEAR of Application:					
APPLICANT INFORMATION					
Project Sponsor or Organization:					
Telephone Number:	Email:				
PROJECT INFORMATION					
CPA CATEGORY (check all that apply):					
OPEN SPACE	RECREATION				
HISTORIC PRESERVATION	COMMUNITY HOUSING				
NAME OF PROJECT:					
NAME OF PROJECT:					
NAME OF PROJECT:					
NAME OF PROJECT:					
NAME OF PROJECT: BRIEF DESCRIPTION OF PROJECT: <i>Attach additional pages inclu</i>	ding summary, budget, estimated timeline and justification of need				
NAME OF PROJECT:	ding summary, budget, estimated timeline and justification of need				
NAME OF PROJECT: BRIEF DESCRIPTION OF PROJECT: <i>Attach additional pages inclu</i>	ding summary, budget, estimated timeline and justification of need				
NAME OF PROJECT: BRIEF DESCRIPTION OF PROJECT: Attach additional pages inclu Project Location or Address: If Open Space or Community Housing:	ding summary, budget, estimated timeline and justification of need				
NAME OF PROJECT: BRIEF DESCRIPTION OF PROJECT: <i>Attach additional pages inclu</i> Project Location or Address: <i>If Open Space or Community Housing:</i> Assessor's Map Page, Block & Lot Number: _	ding summary, budget, estimated timeline and justification of need Include map, photo and other imagery for ALL category project				
NAME OF PROJECT: BRIEF DESCRIPTION OF PROJECT: Attach additional pages inclu Project Location or Address: If Open Space or Community Housing: Assessor's Map Page, Block & Lot Number: _ Number of acres in parcel:	Include map, photo and other imagery for ALL category project.				
NAME OF PROJECT: BRIEF DESCRIPTION OF PROJECT: Attach additional pages inclu Project Location or Address: If Open Space or Community Housing: Assessor's Map Page, Block & Lot Number: _ Number of acres in parcel: Current Zoning Classification:	ding summary, budget, estimated timeline and justification of need Include map, photo and other imagery for ALL category project				
NAME OF PROJECT: BRIEF DESCRIPTION OF PROJECT: Attach additional pages inclu Project Location or Address: If Open Space or Community Housing: Assessor's Map Page, Block & Lot Number: _ Number of acres in parcel: Current Zoning Classification: Assessed Value:	Include map, photo and other imagery for ALL category project.				

Summarize how this request benefits the Town of Scituate and meets the goals of the Community Preservation Act.

PERMITS AND APPROVALS

What permits and approvals are required? Have they been obtained or have you filed for them?

Name of Permit	Filed? (Y/N)	Filed (Date)	Obtained (Date)

Have you met with any other Town Boards or committees? If so, what were the outcomes of those meetings? (*Letters of support from other Boards and committees should be included in the application or supplied at a later date.*)

Notes: _____

What non-financial support and services are necessary, and how will these be provided?

FUNDING

Describe the proposed funding for this project. Identify other sources you are seeking funds from, and whether those funds are secured. Identify any funds you or your organizations are willing to provide.

Scituate CPC Funding Request Form

Total Project Cost	CPC Funds Requested	Sources of Funds other than CPA	Amount	Funding Secured? (Y/N)*
\$	\$		\$	
·			\$	
		\$		
			\$	
			\$	
	·	* If the request is still outstanding,	when do you ex	pect to hear a decision?
OTHER COMMENTS				
Provide any othe	er information you th	ink the CPC should be aware o	of in evaluatii	ng your request
for funding.	5			05 1
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		presents he/she is duly auth rements of this Application a		
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