Scituate Community Preservation Committee Funding Request Form

D.F.	ATE and YEAR of Application:
APPLICANT INFORMATION	
Project Sponsor or Organization:	
Contact Name & Address:	
Telephone Number:	Email:
PROJECT INFORMATION	
CPA CATEGORY (check all that apply):	
OPEN SPACE	RECREATION
☐ HISTORIC PRESERVATION	☐ COMMUNITY HOUSING
NAME OF PROJECT:	
BRIEF DESCRIPTION OF PROIECT:	
,	
Attach additional pages includ	ding summary, budget, estimated timeline and justification of need.
Project Location or Address:	
1 Toject Location of Address.	Include map, photo and other imagery for ALL category projects.
If Open Space or Community Housing:	
Assessor's Map Page, Block & Lot Number:	
Number of acres in parcel:	
Current Zoning Classification:	
Assessed Value:	
	Title Abstract Date:
Number of housing units proposed:	

PERMITS AND APPROVALS			
What permits and appro	vals are required? Have	they been obtained	or have you filed forthem?
Name of Permit	Filed? (Y/N)	Filed (Date)	Obtained (Date)
-			at were the outcomes of e included in the application or
			11.1
			ll these be provided?
Notes: What non-financial supp			ll these be provided?
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Proposed Funding

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 expect to hear a decision?

OTHER COMMENTS			
Provide any other for funding.	information you thi	ink the CPC should be awa	re of in evaluating your request
and conditions a		ements of this Application	uthorized, agrees to the terms on and agrees to be bound
Date:	Sign	nature:	
FOR COMMUNITY PRESER	RVATION COMMITTEE USE		
This request recei	ved by Scituate CPC	on	
Copies provided to	o CPC Members on _		
Additional inform	ation required:		
Committee Vote	•		
Votes:	Yes / No	Votes: Y/N/Abstain	Date
Recommend to		, ,	
Town Meeting			
Other:			
Other:			