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	d or have you filed forthem?
Name of Permit	Filed? (Y/N)	Filed (Date)	Obtained (Date)
łave you met with any o	ther Town Boards or co	mmittees? If so, wh	nat were the outcomes of
<u> </u>	f support from other Boards (and committees should b	be included in the application or
upplied at a later date.)			
Historical Commission	- approved		
Notes:			
Notes:			
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What non-financial supp	ort and services are ned	essary, and how wi	
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Proposed Funding

Total Project Cost	CPC Funds Requested	Sources of Funds other than CPA	Amount	Funding Secured? (Y/N)*
\$900,000	\$ 900,000		\$	
			\$	
			\$	
			\$	
			\$	

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		* If the	request is still outstan	ding, when do you e.	xpect to hear a decision?
OTHER COMMENTS					
for funding. This is arguably o	er information you to one of the most signi- resouce for historic, or	ficant, unj	protected historical	assets in the Tow	ing your request on of Scituate. It could
and conditions	w, the Applicant ro and all other requ ng is granted for t	ıirement	s of this Applicat	. •	
Date: 09-23-19	Si	ignature [.]	Douglas J. Smith	1	
	ERVATION COMMITTEE US				
	eived by Scituate CI				
Copies provided	to CPC Members or	n			
• •	nation required:				
Committee Vote	•				
Votes:	Yes / No		Votes: Y/N/Abstain	Date	
Recommend to					
Town Meeting					
Other:					