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NEVADA HISTORIC PRESERVATION FUND (HPF) THROUGH THE NATIONAL PARK SERVICE (NPS)

HPF SUBGRANTEE APPLICATION FOR 2015

APPLICATION COVER

Page 1 of 4 (Note: Do not edit this form, use only the space provided.)

Is Applicant: Representing owner(s)? CLG Does Applicant have: County/City Affiliation Church Affiliation

Applicant Organization: _____

Project Title: _____

Project Description (brief):

Program Areas (please mark all that apply—**ONLY 1 APPLICATION PER PROJECT**):

Planning:

- The development, design and implementation of local historic preservation or cultural resource management plans at a regional or local level. Development of historic contexts, ordinances, regulations, standards, and/or guidelines that support regional or local plan goals.

Survey and Inventory:

- Survey: “Activity directly pertinent to the location, identification, and evaluation of historic and archeological resources” (Historic Preservation Fund Grants Manual 6-14).
- Inventory: Activity directly pertinent to the development and maintenance of data on historic resources.

National Register Nomination:

- Preparation of National Register and National Historic Landmark (NHL) Nominations to expand “the national list of districts, sites, buildings, structures and objects significant in American history, architecture, archaeology, engineering, or culture, maintained by the Secretary of the Interior (SOI) under authority of Section 101(a)(1)(A) of the Act” (Historic Preservation Fund Grants Manual Glossary-13).

Documentation (HABS/HAER/HALS)

- Preparation of either Historic American Building Survey (HABS), Historic American Engineering Record (HAER), or Historic American Landscape Survey (HALS).

Pre-Development/Construction and Development/Construction:

- Pre-Development: “The historical, architectural, and/or archeological research necessary to properly document proposed construction work on a historic structure or site performed prior to the commencement of development” (Historic Preservation Fund Grants Manual Glossary -16).
- Development: “A project which has for its purpose the protection, rehabilitation, restoration, or reconstruction of a historic property” (Historic Preservation Fund Grants Manual Glossary -6).

Public Education:

- Increase overall public awareness of technical preservation methods and techniques.
- Promote relationships with the public and private sectors to achieve preservation objectives.
- Preservation planning, local preservation ordinances and design review guidelines.

Project Budget Summary:

A. Requested Federal Share: \$ _____

B. Non-Federal Share: \$ _____

 B.1 Cash \$ _____

 B.2 In-Kind \$ _____

C. Grand Total: \$ _____

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1. Has the **Applicant** and **Property Owner** read the Secretary of the Interior's "Standards (SOI) Yes No and Guidelines for the Treatment of Historic Properties" as it relates to preservation, rehabilitation, restoration, and reconstruction work? (http://www.cr.nps.gov/local-law/arch_stnds_8_2.htm)

2. Does the Applicant acknowledge that any project supported by HPF or Matching Share Yes No must meet the Secretary of Interior's Standards (SOI) for the Treatment of Historic Properties and SHPO's Architectural Standards and Guidelines?"

3. Is Applicant willing to hire minority personnel/owned businesses to perform project or a business certified as a Minority Business Enterprise? Yes No

4. Is Applicant a member of a minority group? Yes, please specify: _____ No

5. Will the project be compliant with current ADA regulations? Yes No

6. Will Applicant proceed with the project if federal funding is not received? Yes No

7. Is this project an emergency? Yes No
 - a. If 'Yes' to Item 8), please explain the severity of the emergency: _____

8. How much time will Applicant need to complete the project? _____

9. Is the applicant aware that if funded, project meetings with the SHPO will be required before a funding agreement is drawn up? Yes No

10. Will a portion or the entire project be contracted out? Yes No
 - If 'Yes', please indicate the procurement method(s) to be used for the project:

<input type="checkbox"/> Small purchase procedures	<input type="checkbox"/> Competitive sealed bids
<input type="checkbox"/> Competitive negotiation	<input type="checkbox"/> Noncompetitive negotiation

11. Does the Applicant acknowledge that any grant award will be subject to acquiring qualified professionals who meet NPS professional qualification standards and State review before project work begins? Yes No

12. Does the Applicant have a consultant for the project? Yes No
 - If 'Yes', please list contact information for each and include **resume/vitae** with this application.
 - Name: _____ Title: _____
 - Phone: _____ Email: _____
 - Company/Firm: _____
 - Mailing Address: _____
 - City: _____ State: _____ Zip code: _____

(Note: If more than 1, please use 'Continuation Sheet' and check box)

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If 'Yes' to Item 12), please explain consultant/project personnel selection process noting the historic resources they have dealt with: _____

If 'Yes' to Item 12), please list projects, noting historic buildings: _____

Is the consultant/project personnel familiar with the Secretary of the Interior's Standards (SOI) Yes No for the Treatment of Historic Buildings? (e.g., Rehabilitation, Preservation, Restoration, and Reconstruction)?

Does the consultant/project personnel meet the Secretary of the Interior's (SOI) 'Professional Yes No Qualification Standards' in one of the following: Architecture, Architectural History, History, or Archaeology? (Circle all that apply)

13. Please include a list of the final products to be completed with the subgrant (i.e., surveys, reports, architectural plans, videos, brochures, etc.,): _____

14. Does the subgrantee agree to submit to the SHPO a minimum of one physical and two digital final copies of the product produced as a result of research or any other work funded in whole Yes No or in part by the HPF grant?

Applicant Organization – _____

Applicant's EIN: _____

Mailing Address: _____ Dept/Agency: _____

City: _____ County: _____ ZIP: _____

Authorized Signatory: _____ Title: _____

Dept/Agency: _____ Daytime Phone: _____

Project Contact: _____ Title: _____

Mailing Address (If different from above) _____

Daytime Phone: _____ Fax: _____

Email: _____ Application Approval Entities: _____

Proposed Start Date: _____ Proposed End Date: _____

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Page 4 of 4 (Note: Do not edit this form, use only the space provided.)

In addition to filling out pages 1 thru 4 of this subgrantee application cover pages, please include the following items:

- a. Affidavit for Matching Funds Form;
- b. Certifications Regarding Debarment, Suspension, and Other Responsibility Matters Form;
- c. Civil Rights Assurance Form;
- d. Budget Form (or equivalent); and
- e. Program Area (PA) Form(s) (as it applies to your proposed project(s)).

**I HAVE READ THE 2015 HPF SUBGRANTEE APPLICATION
MANUAL***

***PLEASE NOTE—IF THIS PAGE IS NOT SIGNED, THE APPLICATION IS CONSIDERED
INCOMPLETE AND CANNOT MOVE FORWARD IN THE FUNDING PROCESS.***

I HAVE READ AND COMPLETED THIS **HPF SUBGRANTEE APPLICATION FOR FY 2015** AND CERTIFY
THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Applicant's authorized signature:

Name (please print): _____

Title: _____

Date: _____