



# Preservation Grant Application

## Historic Preservation Board of Gallatin County

❖ [http://www.gallatin.mt.gov/public\\_documents/gallatincomt\\_bcomm/History](http://www.gallatin.mt.gov/public_documents/gallatincomt_bcomm/History) [steph.kamerma@gallatin.mt.gov](mailto:steph.kamerma@gallatin.mt.gov) and/or [sarah.gracey@gallatin.mt.gov](mailto:sarah.gracey@gallatin.mt.gov)

**Instructions:** Fill out the form completely. Refer to the Historic Preservation Board of Gallatin County Grant Application Procedures document available at the website above for more information. If an item is not applicable, write N/A and list why it does not apply to your project. Applications must be received by March 30, 2019 to be eligible for the current grant program.

**Project Title** \_\_\_\_\_

Applicant Name/Organization Name: \_\_\_\_\_

Contact Individual Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Application Date: \_\_\_\_\_

Total Amount Requested \$ \_\_\_\_\_

**1. Brief Description of the Project** *Include available photos, sketches and diagrams along with this application.*

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**2. Timeline** *Projects must be completed within 12 months of start date.*

Projected Project Start Date: \_\_\_\_\_

Final Project End Date: \_\_\_\_\_

**3. Task Breakdown** *Provide a breakdown of individual project items along with their expected completion dates and projected cost.*

**Expected Completion Date**      **Item Cost**

Item 1: \_\_\_\_\_

\_\_\_\_\_

Item 2: \_\_\_\_\_

\_\_\_\_\_

Item 3: \_\_\_\_\_

\_\_\_\_\_

Item 4: \_\_\_\_\_

\_\_\_\_\_

**4. Work will be perform by:** *List the names, addresses and phone numbers for those who will be responsible to complete the work.*

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\_\_\_\_\_  
\_\_\_\_\_  
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**5. Maintenance Plan** Describe how you intend to care for and maintain the project once the grant work is completed. List the responsible parties.

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**6. Support Group/Contact** What group will provide ongoing basic maintenance of the property? Who is the contact person for the group?

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**7. Matching Support Details** List the sources of matching funds, in-kind contributions, donated labor, donated materials.

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**8. Public Access Plan** Give details of how you will make this preservation effort available for public use. Who is the contact person for a site visit?

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**9. Historic Importance** Give a brief history of the structure, site or artifact and its importance to county history. Use additional pages if desired.

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**10. Impact** Detail the use and benefits that this preservation effort will have for residents of Gallatin County.

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I certify that:

- ✓ I am a due representative of the owner.
- ✓ The funds provided by HPBGC will be used in the public interest and not for individual, business or other gain.
- ✓ The public will have access and use of the project, at least one day each year (for example by arranging tours of structures and sites).
- ✓ The HPBGC has the right to access and inspect the project at any time, discuss progress and review project modifications, if any.
- ✓ Funds will be returned to the HPBGC within 30 days after the project deadline. Receipts, time logs, or other suitable documentation will be provided showing the matching fund contribution to the project.
- ✓ Receipts will be presented to the HPBGC showing project expenditures. Grants funds in excess of the presented receipts will be returned to HPBGC within 30 days of the project deadline. Receipts time logs or other suitable documentation will be provided showing the matching fund contribution to the project.
- ✓ I agree to submit a final report stating the results of the project and including before and after photographs suitable for publication within 60 days after the final project completion deadline. I understand that failure to submit this report may disqualify the grantee from any future preservation grants.
- ✓ I agree to acknowledge HPBGC in any public information release regarding the project.
- ✓ I agree that any tangible items (e.g. structures, publications) resulting from the grant project will display a notice, label or other appropriate sign acknowledging the HPBGC participation.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**SUBSEQUENT TO WRITTEN NOTIFICATION, ALL SUCCESFUL APPLICANTS WILL BE EXPECTED TO ATTEND A GRANTS AWARD CEREMONY PRESENTED BY THE HISTORIC PRESERVATION SOCIETY OF GALLATIN COUNTY TO RECEIVE THEIR AWARD**