



HISTORIC PRESERVATION RESTORATION GRANT APPLICATION INSTRUCTIONS

The following information **MUST** be submitted for the Historic Preservation Restoration Grant application packet to be reviewed. The applicant should check each item below to indicate that all required information is understood. **IF ALL OF THE INFORMATION IS NOT SUBMITTED THE APPLICATION WILL BE RETURNED TO SENDER FOR COMPLETION.** The corrected application may be resubmitted if delivered to the AHPP office or postmarked by the deadline. The original application **plus three** additional copies and one set of color photographs must be delivered to the AHPP office or postmarked by the deadline. **No faxed, e-mailed, or incomplete applications will be accepted.**

Application Packet Format

The HPRG application packet should be organized using the following format, with sections numbered accordingly:

1. **Cover Sheet:** Two-page document available from AHPP, containing basic information on applicant and proposed project. Includes space for a brief (2-3 sentence) summary of the project.
2. **Detailed Project Description:** Drawings and narrative explaining how the project is to be accomplished, what materials will be used, and timeline for project. Narrative should include specific explanation of what project components will be funded by the grant.
3. **Color Photographs of Property:** Color prints of north, south, east, and west elevations of the building, along with close-up color prints of any work that is to be funded with the grant. Label and mount photos to additional sheets of paper. **FAILURE TO SEND COLOR PRINTS WILL RESULT IN AUTOMATIC DISQUALIFICATION FOR THE APPLICATION. SCANNED OR DIGITAL IMAGES, BLACK AND WHITE PRINTS, POLOROID, OR SLIDES WILL NOT BE ACCEPTED.**
4. **Detailed Project Budget:** A line-item project budget, including material costs, labor, and architect/consultant fees. A detailed estimate written by the architect is acceptable. Budget should also specify which items are to be grant-funded.
5. **Letter of Agreement for Easement:** If applicant applies for funds to restore a property on which AHPP does not hold an easement, the application must include a letter from the

property owner stating that he/she has read the section of this booklet entitled “Conservation Easements” and understands that no grant funds will be released until a Deed of Conservation Easement has been conveyed to AHPP and filed with the circuit or county clerk.

- 6. Letters of Commitment and Support:** Letters from project stakeholders (clients, local government officials, donors) demonstrating community and/or financial support for the project.

Mail or deliver completed applications to: AHPP Grants Program, 323 Center Street, 1500 Tower Bldg., Little Rock, AR 72201.

If applicant is subject to income tax, these grants are considered taxable income and must be reported to the IRS.

Historic Preservation Restoration grants will be awarded annually. Grants will be selected by a Grants Review Committee based on threats to the property or possibility of imminent loss, historic significance of the property, impact of the project on community preservation, and other general criteria.

NOTE: SUCCESSFUL APPLICANTS WILL BE REQUIRED TO ATTEND A GRANT ADMINISTRATION WORKSHOP IN LITTLE ROCK AT A TIME AND LOCATION SPECIFIED BY THE AHPP. ATTENDANCE IS MANDATORY FOR THE SUCCESSFUL GRANT APPLICATION AND/OR THE PROJECT CONTACT. FAILURE TO ATTEND WILL RESULT IN LOSS OF GRANT FUNDS.



**HISTORIC PRESERVATION RESTORATION GRANT
COVER SHEET**

1. GRANT OPTION YOU ARE APPLYING FOR: Option 1 _____ Option 2 _____
(Check only one. See Grant Manual.)

2. PROPERTY INFORMATION:

Historic Name (if known) _____

Address of property: _____

City: _____ County: _____ Zip: _____

3. REGISTER STATUS: Check one.

Arkansas Register _____ National Register _____

4. BUILDING DATA:

Date of construction: _____

Type of construction: _____

5. PROJECT DESCRIPTION (Use space provided):

6. PROJECT COST:

Short title and cost of Phase 1: _____

Short title and cost of Phase 2: _____

Short title and cost of Phase 3: _____

Short title and cost of Phase 4: _____

Total Project Cost: _____

7. AMOUNT REQUESTED FROM AHPP: _____

8. AMOUNT OF CASH MATCH (Provided by Applicant):

(Minimum 50% of Amount Requested. See line 7.) _____

9. PROJECT CONTACT:

Name: _____

Address: _____

City: _____

Daytime Telephone Number: _____

Architect/Consultant (if applicable):

Name: _____

Firm: _____

Address: _____

City, State, Zip: _____

Telephone: _____

E-mail Address: _____

The Applicant, by signing below, agrees to comply fully with all current grant guidelines, including the following: 1) acceptance of a grant of \$10,000 or greater requires the donation of a conservation easement on the historic property receiving the grant; 2) the applicant for an Option 1 grant agrees to complete a National Register nomination for the property receiving the grant; 3) applicant agrees to provide a 50% cash match of the requested amount. Please read the Historic Preservation Restoration grant manual for additional guidelines.

10. APPLICANT (PROPERTY OWNER):

Name: _____

Signature: _____ Date: _____

Address: _____

City: _____

Daytime Telephone Number: _____

FAXED, E-MAILED, OR INCOMPLETE APPLICATIONS WILL NOT ACCEPTED.

REQUIRED SUPPLEMENTAL GRANT INFORMATION

You must provide the following information pertaining to the city, county, and district in which the structure or property that you are applying for funding resides. Submit this form along with your grant application. Please contact your county clerk's office at your local county courthouse if you do not know who your local government officials are.

Applicant's name _____

Applicant's address _____

Your city/county _____

Your mayor _____

Your county judge _____

*Your state senator _____

*Your state representative _____

*Please note some cities have multiple districts, please list the **one** applicable official.