**CERTIFIED LOCAL GOVERNMENT FY16 GRANT APPLICATION**

1. **APPLICANT**

A. **County**

|  |
| --- |
|  |

B. **Address**

|  |
| --- |
|  |

**City** **State Zip code**

|  |  |  |
| --- | --- | --- |
|  |  |  |

C. **Contact Person for Grant**

|  |
| --- |
|  |

D. **Telephone Number for Contact Person**

|  |
| --- |
|  |

E. **Email Address for Contact Person**

|  |
| --- |
|  |

F. **Grant Amount Requested**

|  |
| --- |
| $ |

H. **Total Project Cost**

|  |
| --- |
| $ |

**II. PROJECT SUMMARY** *(Use only the space provided – description section follows)*

**III. GRANT CATEGORY** *(check those that are appropriate)*

A. Survey & Inventory

* Reconnaissance Level
* Intensive Level

B. National Register Nominations

C. Preservation Planning

D. Educational and Interpretive Programs

E. Special Projects

**IV. PROJECT DESCRIPTION** *(Use only the space provided)*

***Organize your description in the following order (see instructions for more info):***

1. ***Introduction (includes local government goals & objectives)***
2. ***Statement of Need***
3. ***Project Description***

***d. Project Scope of Work/Objectives***

**IV. PROJECT DESCRIPTION** *(Continued)*

#### V. Schedule for Project Completion

List each proposed grant activity separately estimating the start and completion dates. This should be a complete listing of all potential activities associated with the grant including. Final projects must be turned in by Thursday, August 30, 2017. A start date and completion date are not sufficient for the Schedule of Project Completion.

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| --- | --- | --- |
| WORK TO BE ACCOMPLISHED | **Estimated Starting Date** | **Estimated Completion Date** |
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### VI. PROJECT BUDGET

## **ELEMENT/OBJECT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Salaries*(Include each position- volunteer or staff – and attach hourly wage justification if needed)* | *Federal Dollars* *(CLG grant requested)* | *Hard Match* *(Local government cash match)* | *Soft Match* *(Donated goods and services)* | *Total* |
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| --- | --- | --- | --- | --- |
| Indirect %(*\*Include justification for indirect %)* |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Total Element/Object:* |  |  |  |  |

**GOODS & SERVICES**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Contract Services | *Federal Dollars* *(CLG grant requested)* | *Hard Match* *(Local government cash match)* | *Soft Match* *(Donated goods and services)* | *Total* |
|  |  |  |  |  |
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| --- | --- | --- | --- | --- |
| Materials/Supplies/Equipment |  |  |  |  |
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| --- | --- | --- | --- | --- |
| Travel |  |  |  |  |
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| --- | --- | --- | --- | --- |
| Other |  |  |  |  |
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|  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Total Goods & Services:* |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | *Federal Dollars* | *Hard Match* | *Soft Match* | *Total Project Cost* |
| Total Funding Request |  |  |  |  |

*\*The local government share must equal at least 40% of the total project cost. The 40% can be made up of a combination of hard and soft match.*

**U.S. DEPARTMENT OF THE INTERIOR**

**ASSURANCE OF COMPLIANCE**

**(Title VI, Civil Rights Act of 1964)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Application-Recipient (hereinafter called “Applicant-Recipient”)

**HEREBY AGREES THAT IT** will comply with Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and all requirements imposed by or pursuant to the Department of the Interior Regulation (43 CFR 17) issued pursuant to that title, to the end that, in accordance with Title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color or national origin be excluded from participation in, be denied the benefits of or be otherwise subjected to discrimination under any program or activity for which the Applicant-Recipient receives financial assistance from Hawaii State Historic Preservation Division and

Hereby Gives Assurance That It will immediately take any measures to effectuate this agreement.

If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant-Recipient by the Hawaii State historic Preservation Division. This assurance obligates the Applicant-Recipient, or in the case of any transfer of such property, any transferee for the period during which the real property or structure is used for a purpose involving the provisions of similar services or benefits. If any personal property is so provided, this assurance obligates the Applicant-Recipient for the period during which it retains ownership or possession of the property. In all other cases, this assurance obligates the Applicant-Recipient for the period during which the Federal financial assistance is extended to it by Hawaii State Historic Preservation Division.

THIS ASSURANCE is given in condition of and for the purpose of obtaining any and all Federal grants, loans, contracts, property discounts or other Federal financial assistance extended after the date hereof to the Applicant-Recipient by the bureau or office, including installment payments after such date on account of arrangements for Federal financial assistance which were approved before such date. The Applicant-Recipient recognizes and agrees that such Federal financial assistance will be extended in reliance on the representations and agreements made in this assurance, and that the United States shall reserve the right to seek judicial enforcement of this assurance. This assurance is binding on the Applicant-Recipient, its successors, transferees and assignees, and the person or persons whose signatures appear below are authorized to sign this assurance on behalf of the Applicant-Recipient.

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Dated Applicant-Recipient

By\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County Mayor

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant-Recipient’s Mailing Address