

# Special Category Grant Application

## A - Organization Information

<Display applicant information *read only*>

- a. Applicant Name (org or individual)
- b. FEID
- c. Phone number (with extension if applicable)
- d. Principal Address
- e. Mailing Address
- f. Website
- g. Org Type (e.g. nonprofit, school board, etc.)
- h. Org Category (e.g. public library, SOE, etc.)
- i. County
- j. UEI number

### 1. Designated Project Contact\*

The project contact is the applicant organization's primary contact for the application review process. In addition to being available to answer questions from Division staff regarding the proposed project and application, the project contact is usually the individual who will be administering the project, if it is funded.

<Select from Organization Contacts>

First & Last Name

Phone Number + Extension

Email Address

### 2. Authorized Official\*

Provide the name and contact information for the person authorized to sign contracts on behalf of the organization. This is often an Executive Director, President, board member, city manager, county administrator, etc.

<Select from Organization Contacts>

First & Last Name

Phone Number + Extension

Email Address

### 3. Applicant Grant Experience and History\*

**3.1. Has the applicant received previous grant assistance within the past five years from any source?\***

- Yes
- No

**3.2. If yes, for the most recent grants (up to 20), specify the year of the grant award, grant number, grant project name, the granting entity, the grant award amount, and its current status. Make sure to include any grants awarded by the Division or other State grants.**

Year	Grant No.	Grant Project Name	Granting Entity	Grant Amount	Open/Closed
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**3.3. Has the applicant organization applied for additional grant assistance from other State or Federal funding sources, including from other divisions of the Department of State, for the same Scope of Work activities within the same fiscal year?\***

- Yes
- No

**3.4. If yes, for each application specify the grant project name, the granting entity, the grant program, the grant request amount, date of application, and its current status.**

Grant Project Name	Granting Entity	Grant Program	Grant Request Amount	Date of Application	Current Status

**4. Proposed Project Team\***

Please list those persons who will be directly involved with the administration of the grant should this application be successful. This should include the Project Contact listed and all other individuals who will have a role in the execution of the grant project. Please list below the individuals' names, roles for the project or titles within the applicant organization, and contact information. The curricula vitae/resumes of the proposed project team are to be uploaded in the Support Materials section of this application.

Key Project Person	Project Role or Title	Email	Phone Number and Extension
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**5. Applicant staffing and hours\***

Select the option that best describes your organization.

- Organization is open at least 40 hours per week and has at least one paid staff member in a management position
- Organization has some paid staff but they are not full-time
- Organization is open part-time and has volunteer staff

## **B - Project Information**

### **1. Project Type\***

Select the project type for which grant funds are requested. If you are unsure of which type to select, please refer to the definition beneath each project type. If the incorrect project type is selected for the proposed scope of work, the application will be declared ineligible.

- **Development Projects**  
Development activities with the mission of Preservation, Restoration, Rehabilitation or Reconstruction of historic properties regularly open to the public, and site-specific planning required for these activities such as structural or condition assessment reports. Activities for historic cemeteries shall be limited to work on stabilizing, cleaning and repairing historic gravemarkers and other funerary items, repairing historic fences or structures within the cemetery, and installing minimal security lighting. Activities on religious properties are limited to building exterior envelope and structural elements of the building, excluding accessibility upgrades.
- **Archaeological Research Projects**  
Archaeological Research projects, for Phase I, Phase II, and limited Phase III terrestrial and underwater fieldwork, analyses of findings and write-up, or to conduct collection research at established federal, state or public institutions. A well-defined, clear and concise research design that meets the Preservation Standards must be submitted for review by the Division at the time of application
- **Museum Exhibit Projects**  
Museum exhibit projects for Florida history museums, including: research of exhibit content, exhibit design, fabrication and installation. Exhibits must be permanently affixed to the building. Organizations must be a governmental or non-profit Florida history museum established permanently in Florida, promoting and encouraging knowledge and appreciation of Florida history through the collection, presentation, exhibition, and interpretation of artifacts and other historical items related to Florida. The mission of the museum must relate directly to the history of Florida.
- **Acquisition Projects**  
Acquisition of a single historic property or archaeological site, or group of such, in which all the resources have the same owner. For archaeological sites, an exception to the single owner provision may be made if the archaeological site extends on land that is contiguous, but owned by different property owners.

### **2. Project Title and Location Information\***

The title should reflect the name of the property, site, area, museum or exhibit, and the goals of the proposed project. The title should be consistent with previous applications/awards. (For example, Smith House Rehabilitation, South Mill Archaeological Excavation, etc.)

#### **2.1. Project Title\***

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#### **2.2. Name of Property (if applicable)**

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#### **2.3. Street Address (primary location where the proposed project will be carried out)**

2.4. City (location of the proposed project)\*

2.5. Primary County (location of the proposed project)\*

**3. Physical Context of Resource (Maximum characters 500) \***

Describe the physical context of the resource(s). Some questions to consider include: Is the property secluded? Or in an urban environment? What resources are nearby? Where is the property in relation to historic districts or Main Street program areas?

**C – Historical Significance**

**1. Historical Designation**

Indicate the type of historical designation currently held by the historic resource(s) that are the subject of the project, if any. For properties or sites that have been listed in the National Register or are contributing properties or sites within a National Register District, provide the date that the property, site or district was listed. Should you have questions regarding the National Register status of a property or site, contact the Division's National Register Staff at 1.800.847.7278 or 850.245.6300.

**1.1. Type of Historical Designation\***

- Individual National Register Listing(s)
- National Register District - Contributing Resources
- National Historic Landmark Designation
- Individual Local Designation
- Local Designated District - Contributing Resources
- No Historical Designation

**1.2. Historical Designation details.**

Provide the name of the property, site or district (as it is listed in the National Register) and the date of designation or listing.

Property Name	Date Designated

**2. Historical Significance**

**2.1. Explain the historic significance of the property, site or resource(s) that is the subject of the proposed project (Maximum characters 1500).\***

**2.2. For Historic Structures and Archaeological Sites, enter the Florida Master Site File (FMSF) Number (ex. 8ES1234). For Multiple site forms, just separate with a semicolon (;). If no FMSF form exists, applicants may be required to complete one as part of the requirements in a grant award agreement.**

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**2.3. For Historic Property, Indicate Year of the Original Construction (enter Year only)**

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**2.4. For Historic Property, Date(s) and Description of Major Alterations (Maximum characters 300)**

**2.5. Indicate Current Use of Historic Property and Proposed Use (Maximum characters 300)**

**2.6. For Archaeological Sites, provide the Cultural Affiliation of the Site and Dates of Use or Occupation (Maximum characters 300)**

## **D. - Project Specifics**

**1. Scope of Work (Maximum characters 5000)\***

In the space provided below, briefly describe the scope of work for the project for which funding is requested. List the work items that will be completed during the grant period using the funds requested and the required match.

**2. Tentative Project Timeline (remember this is a 24 month grant period)\***

Please specify the start and end month and year below; indicate all major elements of the project for which funding assistance is requested, the anticipated time required to complete each element, and the planned sequence of these activities. Grants, if awarded, will begin July 1 of the year funds are appropriated. **Projects should be completed within 24 months.**

Work Item	Starting Date	Ending Date

**3. Development Projects\***

**3.1. Provide the estimated total square footage of the structure (the house or building, for example): \***

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**3.2. Provide measurable quantities for each work item listed in the Scope of Work (square footage, linear footage, unit counts, etc.):\***

For example: square footage of floors to be refinished or walls to be repainted, linear footage of trim to be replaced, etc. If an element is not measurable in square feet, provide quantities (example: replace 15 door knobs):

**3.3. Will you be hiring or contracting with a historic preservation architect or an engineer (as necessary) to assist with the restoration work? If so, make sure to include those services in your scope of work and budget.\***

NOTE: Professional architectural and engineering services are REQUIRED unless otherwise approved by the Division.

- Yes
- No

**3.4 If a historic preservation architect is not included in your scope of work and budget, explain why. (Maximum characters 500)**

**4. Archaeological Research Projects\***

**4.1. What is the size of the archaeological site(s) to be investigated? Alternatively, what is the estimated quantity of artifacts projected to be analyzed? (Maximum characters 500)\***  
Please specify in # number of acres or artifacts.

**4.2. Will you be hiring or contracting with professional archaeological services?\***

- Yes
- No

**4.3. If no professionals are projected to be hired, or are not included in your scope of work and budget, explain why. (Maximum characters 500)**

**4.4 Briefly describe the research design for the proposed project including some of the proposed research questions that this project will attempt to answer. A well-defined, clear and concise research design that meets the Preservation Standards must be uploaded to the support materials section of this application (Maximum characters 1000)\***

**4.5 Describe the proposed methodology for answering those questions (Maximum characters 1000)\***

**4.6 Describe your proposed curation plan for archaeological specimens and records (Maximum characters 500)\*** Note that any collections acquired from state lands are the property of the State of Florida.

**4.7 Are human remains known or expected to be present on sites or areas to be investigated? Please describe. (Maximum characters 500)**

**5. Museum Exhibit Projects\***

**5.1. Explain why this exhibit is important for raising awareness of Florida History. (Maximum characters 1000)\***

**5.2. Collections (Maximum characters 1500)\***

Describe how artifacts will be used and what conservation measures will be implemented. If objects are to be loaned from other institutions, please upload letters of confirmation from the lending institutions in the Support Materials section of this application.

**5.3. Statement of Objectives/Methods (Maximum characters 1000)\***

Describe how the exhibit will be produced and what methods will be used to achieve your project goals.



**5.4. Will you be hiring or contracting with professional museum exhibit/historian services?\***

- Yes
- No

**5.5. If no professionals are projected to be hired, or are not included in your scope of work and budget, explain why. (Maximum characters 500)**

**6. Acquisition Projects\***

**6.1. Full Purchase Price of Historic Property (executed option or purchase agreement)\***

\_\_\_\_\_

**6.2. State the Appraised Value of the building/structure or the Appraised Value of the footprint of the archaeological site\***

\_\_\_\_\_

**6.3. Second Appraisal (if property is valued over \$500,000)**

\_\_\_\_\_

**7. Does the proposed project entail a partnership with any other local entity?\***

- Yes
- No

**7.1. If yes, describe their participation to date and anticipated further participation in this project.**

**8. Need for Project (Maximum characters 1500)\***

Discuss the need for the proposed project or activity, as it relates to the preservation of the history of Florida and/or its historical and archaeological resources, including any immediate threats to the historical property/ies, historic resources or materials, archaeological sites or historical information that is the subject of the proposed project. This may also refer to the need to update the out-dated

information and/or design of a museum exhibit. Documentation material, such as newspaper articles, are to be uploaded in the Support Materials section of this application.

## E. – Budget and Match

### 1. Rural Economic Development Initiative (REDI) Reduction of Match Requirements\*

Applicants with projects located in counties or communities that have been designated as a rural community in accordance with Section 288.0656 and 288.06561, Florida Statutes, may request a may request a reduction of match to 25% of the requested amount. (State agencies, state colleges, and state universities are not eligible for a REDI match reduction, regardless of project location.)

#### 1.1. Are you requesting a reduction? Is my project in a REDI Community?

- Yes
- No

#### 1.2. Are you a state agency, state college or state university?

- Yes
- No

## 2. Project Budget and Match\*

### 2.1 Grant Funds and Match\*

List the work items with their associated estimated expenses and how they will be paid (from match, the grant or both). Only include expenses that are specifically related to the project. If professional services are to be paid with grant or match funds, include those costs as a **separate** item in the budget. Refer to the program Guidelines for examples of non-allowable expenses (available at <https://dos.myflorida.com/historical/grants> ). Expenses may include an actual amount to be paid or the value of an in-kind contribution.

Special Category grants require a 50% match unless reduced as per the program Guidelines.

Organizations applying for projects located within REDI Communities are eligible for a match reduction (to 25% of the grant amount request); exception: applicants that are agencies of state, state colleges and state universities are not eligible for the REDI match reduction.

Round amounts to the nearest dollar. Rows must have a value in Grant Funds, Cash Match or In-Kind Match. If all three columns are 0 or blank, the row will not be saved.

The amount of grant funds requested in this application will be the total in the “Grant Funds” column. The total amount of the “Cash Match” column must equal or exceed 25% of the total combined match (cash and in-kind).

#	Work Item	Grant Funds	Cash Match	In-Kind Match	Total
	Totals:	\$0.00	\$0.00	\$0.00	\$0.00

**Grant Funds Requested:** \_\_\_\_\_

**Total Match Amount:** \_\_\_\_\_

**Total Project Budget:** \_\_\_\_\_

**2.2. Additional Budget Information/Clarification**

Use this space to provide additional detail or information about the proposal budget as needed. For example, where the relationship between items in the budget and the objectives of the proposed project may not be obvious, provide clarification regarding the necessity for or contribution of those work items to the successful completion of the project.

**3. Completed Project Activities.**

Provide a summary of the project-related activities completed at the time of application submittal. Such activities may include architectural studies or plans, preservation planning activities, archaeological research accomplished such as research design that meets the Preservation Standards or previous excavation or site assessment work or museum exhibit research and design. Should they have already been completed, your printed architectural project schematics or construction documents or your museum exhibit research and design schematics must be uploaded in the Support Materials section of this application. You cannot be reimbursed for any work that is completed before the grant period begins.

Activity Description	Date Completed	Cost/Value	Delete

**4. Operating Forecast (Maximum characters 500)\***

Describe source(s) of funding for necessary maintenance, program support and/or additional expenses warranted to sustain the proposed project after the grant period.

**F – Property Information**

Special Category Grant Application (Form DHR002), Effective 07/2024  
Chapter 1A-39.001. Florida Administrative Code

## **1. Property Ownership.\***

Enter name of the Property Owner and choose the appropriate owner type. If applicant is not the owner of the property, the applicant must secure Property Owner concurrence. The applicant shall provide a letter from the Property Owner that documents that the applicant has the permission of the Property Owner of record to conduct the proposed project on the owner's property, that the Property Owner is in concurrence with this application for grant funding, and for Development projects, that the property owner agrees to sign and record a Restrictive Covenant on the property. This letter shall be uploaded in the Support Materials section of this application. If the property for which grant funding is requested is leased by the Applicant Organization, the lease agreement must be dated, signed and submitted at the time of the application submission, with the required Owner Concurrence Letter attachment to the application.

### **1.1. Does your organization own the property?\***

- Yes
- No

### **1.2. Property Owner\***

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### **1.3. Type of Ownership\***

- Non-profit Organization
- Private Individual or For-Profit Entity  
Note: Properties owned by private individuals or for-profit entities are not eligible for grant funding with the exception of Acquisition projects and site-specific Archaeological Research projects being undertaken by an eligible applicant organization. For Acquisition projects in which the current owner is a private individual or a for-profit entity, the owner must provide a signed commitment to donate or sell the property to the applicant. Donation or sale must occur during the grant period.
- Governmental Agency

## **2. Religious Affiliation**

### **2.1 Is the Property Owner a religious institution or affiliated with a religious institution?**

- Yes
- No
- Not Applicable

## **G –Protection and Impact**

### **1. Local Protection\***

Indicate the level(s) of local protection currently afforded the project historic property or site and upload a copy of the local protection documents in the Support Materials section of this application.

**1.1. Local Protection Level(s)\***

- Local Ordinance Design Review
- Preservation or Conservation Easement
- Protective/Restrictive Covenant
- Maintenance Agreement/Long Term Lease
- Other
- None

**2. Annual Visitation\***

**2.1. What is the estimated or anticipated Annual Visitation for the project property or site?\***

\_\_\_\_\_

**2.2. What is the basis of these estimates? (Maximum characters 200)\***

**3. Anticipated Economic Impact (Maximum characters 1500)\***

Explain the direct economic impact this project will have on the surrounding community. Include any information regarding number of jobs it will provide, if known.

**4. Benefit to Underrepresented Communities (Maximum characters 1500)\***

Describe any direct benefit the project will have on underrepresented communities, such as minority groups and/or people with disabilities. Include any alterations to the site that will make the site more accessible to the public. If project includes media content, describe accessibility methods to be used (e.g. voice over, closed captioning, etc.)

**5. Educational Benefits and Public Awareness (Maximum characters 1500)\***

Explain how the proposed project will educate the public on issues related to historic preservation, Florida history and/or heritage preservation or lead to future education of the public.

**H –Support Materials**

**1. Non-Profit Status\***

Provide documentation of the applicant’s active status as a Florida non-profit corporation with the Division of Corporations, Florida Department of State, which can be obtained at: <http://www.sunbiz.org> by searching the corporate name.

Choose file:	Upload file
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**2. Florida Substitute W-9 Form)\***

Available at DFS website <https://flvendor.myfloridacfo.com>. Note that this is a state form, NOT your Federal W-9.

Choose file:	Upload file
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**3. Documentation of Confirmed Match\***

Consult the program Guidelines for suitable documentation evidencing match ([FLheritage.com/grants/](http://FLheritage.com/grants/))

Choose file:	Upload file
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**4. Letters of Support\***

Additional letters may be submitted directly to the Division but must be received one month prior to the public meeting where the applications will be reviewed and scored.

Choose file:	Upload file
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**5. Photographs\***

Photographs are used to further inform Panelists and should relate to the proposed project, depicting the associated property, site, resources, or collection in its current state, and the context the resource(s) exists within. Historical images are also welcome.

Choose file:	Upload file
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**6. Representative Image\***

Upload a single representative image of the property or project to be used in the application review meeting that conveys the theme or purpose of the proposed project. For projects directed at historic properties or sites, this should be a recent image of the front of the building or site.

Choose file:	Upload file
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**7. Proposed Project Team Supporting Documentation\***

Provide curricula vitae/resumes of the proposed project team as listed in Section A.4 of the application.

Choose file:	Upload file
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**8. Architectural Drawings/Design Documents (for Development Projects only, if available)**

If completed, the Applicant Organization shall provide architectural project schematics, construction documents, or conditions reports.

Choose file:	Upload file
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**9. Appraisal(s) and Purchase Documents (for Acquisition Projects only)\***

If your appraisal values the property at more than \$500,000, submit a second appraisal with the first, together with all required purchase documents, as one file.

Choose file:	Upload file
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**10. Archaeological Supporting Documents (for Archaeological Research Projects only)\***

A Research Design that meets the Preservation Standards is required at the time of application for all Archaeological Research projects. Additionally, provide copies of previous archaeological site reports or surveys of the property that is the subject of the proposed project, or reports of previous analyses of the material projected to be researched from the Florida Master Site File and other known resources. Curricula vitae for the principal investigator and other key personnel, if known, must also be provided. If the principal investigator has not yet been selected, a list of tasks or projected responsibilities must be submitted in place of the curriculum vitae.

Choose file:	Upload file
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**11. Exhibit Supporting Documents (for Museum Exhibit Projects only)\***

Include curricula vitae for all key project research and exhibit development personnel, if known. Provide planning or design documents, if available. If objects are to be loaned from other institutions/individuals or the exhibit is designed to travel, include letters of confirmation/commitment.

Choose file:	Upload file
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**12. Documentation of Need\***

Choose file:	Upload file
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**13. Local Protection\***

Provide copies of any documents that provide local protection of the project site as identified in question G.1.1.

Choose file:	Upload file
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**14. Owner Concurrence Letter\***

Provide a letter that documents that the applicant has the permission of the owner of record (if the Property Owner is not the applicant) to conduct the proposed project on the owner's property, that the owner is in concurrence with this application for grant funding, and documentation that the owner is a non-profit organization or agency of government. If the property for which grant funding is requested is leased by the Applicant Organization, the lease agreement must be dated, signed and submitted at the time of the application submission, with the required Owner Concurrence Letter. Note that, for other than Acquisition or site-specific Archaeological Research projects being undertaken by an eligible applicant, the owner must be a Non-profit Organization or agency of government.

Choose file:	Upload file
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## 15. Optional Materials

Applicants may attach materials not specifically requested by the Division that support the application. Examples may include copies of National Register nominations, conditions assessments, newspaper articles or other documents that reflect the historical significance of the resource, highlight its historic characteristics, its public use and so on.

### Title

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### File

To add a support material enter a title and optional description. Then select a file and click the Upload File button.

Choose file:	Upload file
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### Description (optional)

Additional details about the support materials that may be helpful to staff or panelists.

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## I –Review and Submit

### 1. Review and Submit\*

I hereby certify that I am authorized to submit this application on behalf of \_\_\_\_\_ and that all information indicated is true and accurate. I acknowledge that my electronic signature below shall have the same legal effect as my written signature. I am aware that making false statement or representation to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S., punishable as provided for by ss. 775.082, 775.083, and 775.084.

#### 1.1 Signature (enter first and last name)\*

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