Introduction

Project Type
- ○ Acquisition
- ○ Renovation
- ○ New Construction
- ⦿ This question has not been answered yet

Project Title ?

[   ]

> Include the facility name and project type. Do not repeat the applicant name. Example: "Sun Theatre Education Wing: Renovation Phase 1"

Project Synopsis ?   (up to 140 characters)

[   ]

> Briefly summarize the project narrative. Indicate how you will use grant funds, the major work items involved and the end product. Your synopsis will be published if your project is recommended for funding.

Project Location

Street Address

[   ]

City   Zip Code

[   ]   [   ]

County

[▼]

Florida House District Number

[   ]

Florida Senate District Number

[   ]

> Provide the physical address of the proposed facility.

Is this a multiphase project? ?
- ○ Yes
- ○ No
- ⦿ This question has not been answered yet

> Projects that have requested or will request more than 1 grant from the state over a 5 year period are considered multiphase. See Guidelines: Number of Applications per Project for details.

How many phases are planned?

[   ]

> See Guidelines: Number of Application per Project or Help: Phase Numbering for information on phase numbering.

What phase number is this application?

[   ]

What was your Total Support and Revenue for the last completed fiscal year?

$ [   ]

> Include the amount reported by a review, audit, or detailed operating budget. You will need to provide documentation of this number in your application package. See Guidelines: Total Support and Revenue for details.

Project Documents

Preliminary design & development documents are....
- ⭘ Complete (required for eligibility)
- ⭘ Not complete
- ◉ This question has not been answered yet

Construction documents are...
- ⭘ Complete
- ⭘ Not Complete
- ◉ This question has not been answered yet

Construction permits are...
- ⭘ In hand
- ⭘ Applied for
- ⭘ Neither in hand nor applied for
- ◉ This question has not been answered yet

Project Land and Building

Are you leasing the project land or building? ⍰
- ⭘ No
- ⭘ Yes, the land *and* the building
- ⭘ Yes, the building
- ⭘ Yes, the land
- ◉ This question has not been answered yet

> If leasing, the owner(s) must be:
> · a not-forprofit, taxexempt Florida corporation
> · a public entity governed by a municipality or county, or
> · the State of Florida.

Who currently owns the land?

[   ]

How many years will remain on the land lease as of July 1, of the award year?

[   ] years

> You must provide documentation of unrestricted use of the land or of intent to sell (for acquisitions). See Guidelines: Unrestricted Use of Land and/or Building for details.

> There must be at least 10 years left on the lease for the application to be eligible.

Who currently owns the building

[   ]

How many years will remain on the building lease as of July 1 of the award year?

[   ] years

> You must provide documentation of unrestricted use of the building or of intent to sell (for acquisitions). See Guidelines: Unrestricted Use of Land and/or Building for details.

> There must be at least 10 years left on the lease for the application to be eligible.

How old is the building in years? ⍰

[   ] years

> If the building is more than 50 years old, you must get the project plans approved by the Bureau of Historic Preservation. See Guidelines: Current Architectural Plans for information.

Proposal Budget & Matching Funds (up to 25 points)

Budget Overview

Proposal Budget Summary (?)

Request Amount: $ [   ]

Confirmed Matching Funds : $ [   ]

Project Cost: $ [   ]

Enter the request amount or matching funds for this proposal only. See Guidelines: Matching Funds for details on required match. Round amounts to the nearest dollar.

Project cost will be automatically calculated as the sum of request amount and confirmed matching funds.

Are you requesting REDI match reduction? (?)

○ Yes
○ No
◉ This question has not been answered yet

Applicants in Rural Economic Development Initiative counties or communities may be eligible for a reduction in match. See Guidelines: REDI Waiver for more information.

What other state dollars will go into the project? (?)

Source	Amount	actions
[ ]	$ [0]	add row

Identify the source and amount of any in-kind contributions, pledges, or cash from the State of Florida that will be used for the project. Remember: no state dollars from any source may be used as match.

Have you requested or received funding from the Division of Historical Resources for this project? (?)

○ Yes
○ No
◉ This question has not been answered yet

Proposal Budget Details

Proposal Expense Details (?)

List your estimated expenses and how they will be paid (from match, the grant, or both). Only include expenses that specifically related to the project. Expenses may include an actual amount to be paid or the value of an in-kind contribution. See Help: Proposal Budget Terms for expense category descriptions and columns. Round amounts to the nearest dollar.

	Expense Category	Expense Detail	State	Cash Match	In-Kind Match	actions
1.	Land Acquisition ▼	[ ]	$ [0]	$ [0]	$ [0]	add row

Proposal Income (Match) Details (?)

List your confirmed matching funds (resources presently available to designate to the project). Include cash on hand, irrevocable pledges, and in-kind or donated services and materials. See Help: Proposal Budget Terms for descriptions of income categories and columns. Round amounts to the nearest dollar.

	Income Category	Income Detail	Cash Match	In-Kind Match	actions
1.	Federal Government ▼	[ ]	$ [0]	$ [0]	add row

Matching Funds

Matching Funds Statement (?)   (up to 3300 characters)

[   ]

Describe the availability of your matching funds. See Guidelines: Matching Funds for specific match requirements.

Match Summary (?)

Cash on Hand: $ [   ] 0.0% of budgeted match

Expenditures: $ [   ] 0.0% of budgeted match

Irrevocable Pledges: $ [   ] 0.0% of budgeted match

Documented In-Kind: $ [   ] 0.0% of budgeted match

Total: $ [   ] 0.0% of budgeted match

Summarize your match by type. The total should match the total reported in your proposal budget and should be greater than or equal to the match required. See Guidelines: Types of Match for more information.

How many donors are supporting the project?

[   ]

What is the smallest contribution received for the project?

$ [   ]

What is the largest contribution received for the project?

$ [   ]

What is the population size of the community?

[   ]

Donor Profile: Description of Donors (?)   (up to 1650 characters)

[   ]

Describe your donors (individual, local artist guild, parent teacher association, etc.). Additional donor information (including names) may be provided at your discretion. All information provided will become a part of public record. The Division must provide this information to the public on request.

Donor Profile: Percentage of Community Support (?)   (up to 1650 characters)

[   ]

What percentage of the community supports your project? You may wish to group like donors (individual, organizations, corporations, government, etc.)

Are these matching funds being used to match (?) any other Department of State grants?

○ Yes
○ No (required for eligibility)
◉ This question has not been answered yet

You are not allowed to use the same dollars to match more than one Department of State grant.

Scope of Work (up to 15 points)

Project Description (?)   (up to 3300 characters)

Describe your project in detail. Indicate how grant funds and match will be spent. Provide a time line of when grant funds and match will be expended. Discuss any grants applied for or received from the Division of Historical Resources for the grant period.

Project Description (?)   (up to 6600 characters)

Describe your project in detail. Indicate how grant funds and match will be spent. Describe how this phase fits into the overall project. Provide a time line for both the current phase (this proposal) and the overall project. Discuss any grants applied for or received from the

Current Phases or Activity (?)   (up to 1655 characters)

Describe any phases or activity of this project that will occur in the year (July 1 – June 30) before the grant period begins. Include the estimated schedule for completion, amount of the grant (if applicable), how much match has been expended (if applicable), and how the other phase(s) relate to the current application. Discuss grants applied for or received from the Division of Historical Resources for this period.

Prior Phases or Activity (?)   (up to 1655 characters)

Describe any phases of this project that are completed or will be complete by June 30 of this year. Be sure to include the completion date of each phase. Discuss grants applied for or received from the Division of Historical Resources for this period.

Need for Project & Operating Forecast (up to 30 points)

Need for Project ⑦   (up to 3300 characters)

> Describe your need for the project (or portion of the project on which grant funds will be spent). Discuss need for additional space (performance, exhibition, office, work, or storage) and your history of organization growth. Discuss increased square footage or increased utility. Reference long term construction or renovation needs documented in a long-range plan.

Operating Forecast Detail ⑦   (up to 3300 characters)

> Describe how the space will be used and the related costs. Incorporate budgetary figures where appropriate. You may reference a budget spreadsheet (provided as support material) or incorporate the revenue and expense figures into the narrative. Consider both staffing and programming needs. Include:
> - New staff that will be needed
> - Programs that will be added, expanded or improved
> - Additional expenses to the organization
> - New revenue sources that will be used to offset the added expense

Fiscal Stability ⑦   (up to 1655 characters)

> Provide a statement on your sustained fiscal stability. Explain all deficits, losses, or negative trends. Explain how causes for concern will be overcome. Consider in your response whether your organization's financial record shows increasing fund balance deficits or unrestricted operating deficits.

Changes in Operation

Changes in Operation Expenses

Provide a summary of how your operating expenses will change after the project is completed.

	Description	Fiscal Year ending 2013	Fiscal year ending 2014	Fiscal Year ending 2015	Fiscal Year ending 2016	actions
1.		$ 0	$ 0	$ 0	$ 0	add row

Changes in Operation Income

Provide a summary of how your operating income will change after the project is completed.

	Description	Fiscal Year ending 2013	Fiscal year ending 2014	Fiscal Year ending 2015	Fiscal Year ending 2016	actions
1.		$ 0	$ 0	$ 0	$ 0	add row

Project Impact (up to 30 points)

Community Impact of Project ⑦   (up to 3300 characters)

Financial Impact of Project ⑦   (up to 3300 characters)

Environmental Impact of Project ⑦   (up to 3300 characters)

Project Team

Organization Staff ?   (up to 1655 characters)

[text area]

List the organization staff dedicated to the completion of the project or phase and their project related responsibilities.

Project Team ?   (up to 1655 characters)

[text area]

List the project team including the names and addresses of the architect, engineer, design consultants, and general contractor. If the project does not require an architect, then list the person who will be responsible for the construction, renovation, or acquisition. A project team must be named to be considered for funding.

Project Architect/Engineer

Honorific [▼]   First Name *   Last Name *

Address *

City *   State * [▼]   Zip Code *

Project Contractor

Honorific [▼]   First Name *   Last Name *

Address *

City *   State * [▼]   Zip Code *

Project Officials & Contact

Official with authority to contract for the Property Owner

Honorific [▼]   First Name *   Last Name *

Title   Phone *

Official with authority to contract for the Applicant

Honorific [▼]   First Name *   Last Name *

Title   Phone *

Typically the executive director or a board member

Chief Financial Officer for the Applicant

Honorific [▼]   First Name *   Last Name *

Title   Phone *

Grant Contact

Honorific [▼]   First Name *   Last Name *

Title   Phone *

Email

Select a person from your organization to serve as the primary contact for the application and grant. The contact should be able to answer direct questions about the application, provide update information or materials (if requested) and complete required reports. The contact may be different from the authorizing official who is typically the executive director or a board member.

Provide a direct email address and phone number (if possible). Note: under Florida law, email addresses are public record. The grant contact email address will be available to the public on request.

Attachments & Support Materials

I will send 16 packets containing:

- ☐ 1. **Matching Funds** Documentation
- ☐ 2. Documentation of **Unrestricted Use**
- ☐ 3. Documentation of **Total Support and Revenue**
- ☐ 4. 8.5 x 11 inch reduction of current **Architectural Plans**
- ☐ 5. **REDI Letter** requesting reduction of match
- ☐ 6. Documentation of **Local Support**
- ☐ 7. Optional **Support Materials**

Your application package must include 16 collated packets with one marked original. See Guidelines: Attachments and Support Materials for additional details and requirements.

My application package will also include:

- ☐ 1 copy of my IRS 501(c)(3) or 501(c)(4) determination letter (required)

- ☐ 1 copy of a letter from the Bureau of Historic Preservation approving my plans for the project building (optional)

Projects where the building is 50 years old or older must submit a letter from BHP approving the project plans. If you do not include your letter in your application package, you may submit it if you are awarded the grant.

Optional Support Materials (?)   (up to 3300 characters)

List any optional support materials you are sending. Be sure to number each item and note whether it is an audio/visual materials. This list should match the coversheet that you include in your application package. See Help: support materials tips for ideas.

Review and Submit

Errors

Your application has the following errors. You may not submit the application until all errors have been fixed.

Page 1
- Please provide a [sample error](#)
- Your [sample error](#) is over the character limit
- Please provide a [sample error](#)

Page 2
- Your [sample error](#) is over the character limit
- Please provide a [sample error](#)
- Your [sample error](#) is over the character limit
- Please provide a [sample error](#)

Page 6
- Your [sample error](#) is over the character limit

Review

[review your application](#)

> Follow the link to see your full application. We recommend that you print it and review on paper before submitting.

Certify and Submit

By submitting this application I am assuring that:
- I am the authorized official or a delegated representative of the applicant,
- the project contacts and officials certify that the information contained within this application and attachments is true and correct to the best of their knowledge,
- the project for which the application is made will comply with the Americans for Disabilities Act of 1990, and that
- should a grant be awarded, the organization will comply with all rules and requirements for administration of the grant.

> Your application still has errors! You may not submit until all errors are cleared.

☐ I have read the certification and am ready to submit the application.

Submit Application