

| | |
|-------------------|-------|
| CPC USE ONLY: | |
| Application # | _____ |
| Qualifies: | _____ |
| Does not qualify: | _____ |

INITIAL ELIGIBILITY PROJECT APPLICATION FORM

DUE BY DECEMBER 4, 2020

**TOWN OF NEEDHAM
COMMUNITY PRESERVATION COMMITTEE**

www.needhamma.gov/CPC

Email Applications to:

Carys Lustig and Kristen Wright:

clustig@needhamma.gov & kwright@needhamma.gov

- | | |
|--|---|
| <p>1. Applicant:</p> | <p>Submission Date:</p> |
| <p>2. Applicant's Address, Phone Number and Email:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Contact Name:</p> | <p>3. Purpose: <i>(Please select all that apply)</i></p> <p><input type="radio"/> Open Space</p> <p><input type="radio"/> Community Housing</p> <p><input type="radio"/> Historic Preservation</p> <p><input type="radio"/> Recreation</p> |
| <p>4. Project Name:</p> | |
| <p>5. Project Location/Address/Ownership (Control):</p> | |
| <p>6. Amount Requested:</p> | <p>\$</p> |
| <p>7. Estimated Total Project Cost (If Different):</p> | <p>\$</p> |
| <p>8. Critical Dates: (If Applicable)</p> | |

- continued -

| |
|-------------------------|
| CPC USE ONLY: |
| Application # _____ |
| Qualifies: _____ |
| Does not qualify: _____ |

Project Name:

9. Project Summary: In 100 words or less provide a brief summary of the project:

10. Community Need: In 100 words or less provide a brief statement of the need for and the benefits to the community.

Note: This application enables the Community Preservation Committee to review the request to assess eligibility. You shall be notified by January 1 of your eligibility. If eligible you will be requested to supply additional information by February 1.