



NEW BEDFORD COMMUNITY PRESERVATION COMMITTEE

STEP I

COMMUNITY PRESERVATION ACT ELIGIBILITY DETERMINATION FORM FY23

Eligibility Determination Form Deadline:

SEPTEMBER 29, 2022 by NOON

NO LATE SUBMISSIONS WILL BE ACCEPTED.

IMPORTANT! Please download and save pdf file before you begin to ensure work is saved.

Applicants must email a PDF of the form to CPA@newbedford-ma.gov *no later than noon on Thursday, September 29, 2022*. Applicants will receive a confirmation email once staff has recorded the submission. If you do not receive an email, please contact the Community Preservation Act Coordinator at (508)979-1488.

COMMUNITY PRESERVATION COMMITTEE
Department of City Planning
City Hall Room 303 | 133 William Street
(508)979-1488 cpa@newbedford-ma.gov

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CITY OF NEW BEDFORD
COMMUNITY PRESERVATION ACT FY23
Eligibility Determination Form

The purpose of Step I is to ensure all projects applying for Community Preservation Act funding meet the basic requirements of the CPA legislation. This form must be reviewed and approved by the Community Preservation Committee before the applicant submits a STEP II Project Application.

Please review the **ENTIRE** application packet before beginning the process. Submit an electronic copy (fillable PDF available at www.newbedford-ma.gov/planning/community-preservation/) no later than **NOON, Thursday, September 29, 2022** to CPA@newbedford-ma.gov. Early submissions are encouraged. All applicants will be notified of their project eligibility determination. If your project is deemed eligible for Community Preservation Funds, you will be invited to submit a full application.

The CPC requires the City of New Bedford be the **LEAD applicant** on all projects proposed on City property. A letter from the relevant city department confirming this role must be submitted with this form to be reviewed for eligibility.

PROJECT APPLICANT				
PROJECT TITLE				
PROJECT LOCATION				
APPLICANT ORGANIZATION NAME			Applicant is (check one): <input type="checkbox"/> city board or department <input type="checkbox"/> non-profit <input type="checkbox"/> private group/ individual Co-applicant is (check one): <input type="checkbox"/> city board or department <input type="checkbox"/> non-profit <input type="checkbox"/> private group/ individual	
CO-APPLICANT NAME <small>(If applicable)</small>				
CONTACT PERSON				
MAILING ADDRESS				
TELEPHONE NUMBER		EMAIL		

PROPERTY OWNERSHIP			
LEGAL PROPERTY OWNER OF RECORD			
IS THE OWNER THE APPLICANT?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
IF NO, DOES THE APPLICANT HAVE SITE CONTROL OR WRITTEN CONSENT FROM OWNER TO SUBMIT AN APPLICATION?	<input type="checkbox"/> YES	ATTACH DOCUMENTATION (REQUIRED)	
	<input type="checkbox"/> NO	PROJECT WILL BE DEEMED INELIGIBLE	

NOTE: For non-city properties, projects may require the filing of a restriction on the property at the Registry of Deeds.

CPA ALLOWABLE USES			
<i>(Please refer to the CPA Allowable Uses Chart included in the application instructions for more information)</i>			
Check the funding category/categories for your project. Projects may be eligible under more than one category.			
<input type="checkbox"/> OPEN SPACE	<input type="checkbox"/> HISTORIC RESOURCE	<input type="checkbox"/> RECREATION	<input type="checkbox"/> COMMUNITY HOUSING

PROJECT FUNDING

ESTIMATED TOTAL BUDGET FOR PROJECT	\$ _____	ESTIMATED CPA FUNDING REQUEST	\$ _____
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HISTORIC RESOURCE PROJECTS ONLY

IS THE RESOURCE IN A LOCAL HISTORIC DISTRICT AND/OR LISTED ON THE STATE REGISTER OF HISTORIC PLACES? YOU CAN CHECK DESIGNATION AT http://mhc-macris.net/	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF NO, HAS THE NEW BEDFORD HISTORICAL COMMISSION MADE A DETERMINATION THAT THE RESOURCE IS SIGNIFICANT?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

PROJECT DESCRIPTION

*Please provide a **brief** description of the proposed project; how the project addresses an FY23 CPA Plan need, priority, and/or goal; and how the project meets the category definition(s) on the CPA Allowable Uses Chart. Organization programs or history is not necessary for this step.*

(500-word count maximum- do not use less than 10pt font)

FOR CPC USE ONLY:

Date Eligibility Form Received: _____

Date of Review by CPC: _____

Date of Applicant Notification: _____

Additional information is requested to make the Determination:
 Yes No

The project described here was found by the CPC to be:
 Eligible Not Eligible