



**FY22 CPA FUNDING APPLICATION**

**DUE: NO LATER THAN 11:59 PM, FIRST TUESDAY OF SEPTEMBER**

**Please make sure all questions are answered and requested information is provided.  
Applications missing information will not be accepted.**

**SECTION 1: APPLICANT INFORMATION**

APPLICANT NAME/ORGANIZATION	
CO-APPLICANT (if applicable)	
PROJECT CONTACT PERSON & TITLE	
MAILING ADDRESS	
PHONE	
EMAIL	
DATE	

**SECTION 2: PROJECT INFORMATION**

PROJECT NAME	
PROJECT ADDRESS	
ASSESSOR'S PARCEL ID	

Interested Municipal Party or Community Organizations (if any): \_\_\_\_\_

Will this project be independent or is it part of another existing project? Please explain:

\_\_\_\_\_

Brief Project Description:

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

### SECTION 3: SITE INFORMATION

Lot Size (Sq Ft): \_\_\_\_\_ Zoning District(s): \_\_\_\_\_ Ward: \_\_\_\_\_

Do you have site control? *(Please attach deed, Purchase and Sales Agreement, or option to purchase)*

\_\_\_\_\_ Yes      \_\_\_\_\_ No

***Note: All Community Preservation Fund Applicants are required to submit evidence of site ownership with the application. FOR ALL PROJECTS ON CITY OWNED PROPERTY the "Applicant" must be City Department which has Care, Custody and Control of the property.***

If the applicant is not the property owner, does the applicant have written consent of the property owner to submit an application? Please attach evidence of owner consent.

\_\_\_\_\_ Yes      \_\_\_\_\_ No

*If "No", this application will not be accepted.*

Are there any restrictions or easements that apply to the property?

\_\_\_\_\_ Yes      \_\_\_\_\_ No

If applicable, please identify any interested parties whose approval may be needed. Letters of approval must be attached.

Please submit the FEASIBILITY CHECKLIST to identify environmental conditions, zoning relief, or other regulatory approvals that may need to be obtained as part of this project.

### Historic Preservation Projects:

Please let us know why this property or asset is of historical significance

\_\_\_\_\_

Please attach evidence that the property is listed on the state register of historical places or that it has been determined by the Malden Historic Commission as being significant to the history, archeology, architecture, or culture of Malden.

**SECTION 4: FOR HOUSING APPLICANTS ONLY** (All other applicants proceed to Section 5.)

<b>DEVELOPER</b>	
<b>DEVELOPER CONTACT</b>	
<b>DEVELOPER MAILING ADDRESS</b>	
<b>DEVELOPER PHONE</b>	
<b>DEVELOPER EMAIL</b>	

**TYPE OF HOUSING (CHECK ALL THAT APPLY AND PROVIDE # OF UNITS)**

<b>HOUSING TARGET CLASS</b>	<b>HOUSING TARGET</b>	<b># OF UNITS</b>
<b>Homeownership</b>	Single Family	
	Condominium	
	Cooperative	
	Other (Please Explain)	
<b>Rental</b>	Individual/Family	
	Group Home/Congregate	
	Other (Please Explain)	
<b>Targeted Population</b>	Individual/Family	
	Special Needs/Identify Needs	
	Elderly	
	Homeless	
	At Risk of Homelessness	
	Other (Please Explain)	

Are there (or will there be) children under the age of seven living on the premises? \_\_\_ Yes \_\_\_ No

Will the project temporarily or permanently displace or require the relocation of existing tenants?

\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe any outreach efforts and/or notifications to residents to date:

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**SECTION 5: PROJECT SCOPE**

Provide a detailed description of the steps or tasks that the project entails. *Note: CPA funds may only be used for eligible tasks. Please indicate if another funding source is anticipated to pay for ineligible portions of the project.*

**SECTION 6: BUDGET SUMMARY**

**In addition to this Budget Summary**, please also include with this application a complete, itemized budget for the full project labeled "Narrative Section 5 - Budget Detail" which includes all project expenses, revenue sources, and in-kind contributions.

**NOTE: CPA FUNDING FOR ANY CATEGORY REQUIRES COMPLIANCE WITH MASSACHUSETTS PROCUREMENT REGULATIONS** under direction of Malden's Office of Procurement.

\*\*Please attach at least two estimates (preferably 3) on vendor letterhead or a detailed description of how the proposed budget was determined.\*\*

Total Project Cost	CPA Funds Requested	Cost Share Amount	Cost Share Percent
\$	\$	\$	%

<b>Budget Categories</b> <i>Please add any relevant category that is missing for your project, or use "N/A" for any category not applicable to your project</i>	<b>CPA FUNDS</b>	<b>OTHER FUNDS</b> (Cost Share)	<b>TOTAL</b>
Personnel			
Equipment			
Supplies			
Soft Costs/Contractual			
Acquisition			
<b>Construction</b>			
New Construction			
Alteration/Addition			
Restoration/Remodel			
Other			
<b>Total</b>			

"Soft Costs" include design, professional services, permitting fees, closing costs, legal, etc.  
"Equipment" is generally defined as an item with a useful life expectancy of more than one year.  
"Supplies" are defined as an item with a useful life of less than one year.

**Budget Cost Sharing** – Identify the amount of cost sharing for this project. Sources include private, federal, state, or local government, or any other sources. If more space is needed, add additional page.

**Application will not be accepted without Letters of Commitment attached for funds listed as “secured”.**

Source/Organization	Secured Y/N	Amount	Type (cash, in-kind, etc.) and Status if not secured

**Maintenance Budget** (if necessary) –Reminder: **CPC cannot fund the maintenance costs for any CPC projects.** CPC prioritizes projects with no maintenance required. Please identify the source of maintenance funding, if required.

SOURCE:				
Year 1	Year 2	Year 3	Year 4	Year 5
\$	\$	\$	\$	\$

**SECTION 7: SIGNATURES**

<b>TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL INFORMATION IN THIS APPLICATION IS TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE INDIVIDUAL OR GOVERNING BODY OF THE APPLICANT.</b>	
Applicant Signature	Date Signed
Applicant First Name	Applicant Last Name
Applicant Title/Organization	
Property Owner Signature (if different)	Date Signed
Property Owner First Name	Property Owner Last Name

**SECTION 8: FOR CPC USE ONLY**

Date Received	
Category	
Date Reviewed	
Date Applicant Notified of Decision	

RANKING		DECISION	
High		Recommended for Funding	
Medium		Denied with Invitation to Resubmit for Future Funding Cycle	
Low		Denied for Funding	