



## Community Preservation Act Funding Eligibility Form

Adam Baacke  
Chairman

Submit 10 copies of the application and attachments.

The following form is made for the City of Lowell Community Preservation Committee to ensure that proposed projects meet eligibility requirements pursuant to Section 5.2 of the Massachusetts Community Preservation Act. This form must be submitted and approved prior to the acceptance of your application. Please visit the City of Lowell Community Preservation Committee website (<https://www.lowellma.gov/1532/Community-Preservation-Committee>) for the meeting schedule and filing deadlines.

Project Title: \_\_\_\_\_

Project Address: \_\_\_\_\_

Applicant Name/Organization: \_\_\_\_\_

Project Budget:

Estimate Total Project Budget: \$ \_\_\_\_\_

Estimated CPA Funds Requested: \$ \_\_\_\_\_

Estimated Funding from Alternative Sources: \$ \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Do you own the subject property? Yes: \_\_\_\_ No: \_\_\_\_

If no, do you have permission from the current owner to use the property? Yes: \_\_\_\_ No: \_\_\_\_

Will you be utilizing CPA funds to acquire the property? Yes: \_\_\_\_ No: \_\_\_\_

Do you have experience completing similar projects? Yes: \_\_\_\_ No: \_\_\_\_

If no, are you working with an architect, engineer, or contractor? Yes: \_\_\_\_ No: \_\_\_\_

If yes, who? \_\_\_\_\_

Have you contacted a relevant City Department for input? Yes: \_\_\_ No: \_\_\_

If yes, which Department? \_\_\_\_\_

CPA Program Area (Check all that Apply):

Historic Preservation: \_\_\_ Open Space: \_\_\_ Recreation: \_\_\_ Community Housing: \_\_\_

Project Purpose (Check all that Apply):

Acquire: \_\_\_ Create: \_\_\_ Preserve: \_\_\_ Support: \_\_\_ Rehab/Restore: \_\_\_

Other: \_\_\_\_\_

Project Summary (Provide a brief description of project):

Please make sure you have carefully reviewed the eligibility requirements for Community Preservation Act projects as outlined in the City of Lowell Community Preservation Plan. You may attach any additional information pertinent to this project that may assist in determining eligibility. Forms can be submitted to Dylan Ricker by email at [DRicker@lowellma.gov](mailto:DRicker@lowellma.gov) or at 375 Merrimack Street, Room 51, Lowell, MA 01852.

**For CPC Use:** Eligible: \_\_\_ Not Eligible: \_\_\_ Date: \_\_\_\_\_ Reviewer: \_\_\_\_\_