

**MASSACHUSETTS HISTORICAL COMMISSION
STATE HISTORIC REHABILITATION TAX CREDIT PROGRAM
HISTORIC PRESERVATION CERTIFICATION APPLICATION
PART 2 – DESCRIPTION OF REHABILITATION**

Property Name

Property Address

Project Number: _____

1. Name of property: _____
Address of property: Street _____
City _____ State MA Zip _____
Has a Part 1 – Evaluation of Significance been submitted for this property? yes no
If yes, date Part 1 submitted: _____ Date of certification: _____

2. Project contact:
Name _____
Street _____ City _____
State _____ Zip _____ Daytime Telephone Number _____

3. Owner:
Name _____ Signature _____ Date _____
Organization _____
Social Security or Taxpayer Identification Number _____
Street _____ City _____
State _____ Zip _____ Daytime Telephone Number _____

4. Data on building and rehabilitation project:
Date building constructed: _____ Total number of housing units before rehabilitation: _____
Type of construction: _____ Number that are affordable: _____
Use(s) before rehabilitation: _____ Total number of housing units after rehabilitation: _____
Proposed use(s) after rehabilitation: _____ Number that are affordable: _____
Estimated cost of cert. rehab. expend.: _____ Floor area before rehabilitation: _____
Estimated cost of total project: _____ Floor area after rehabilitation: _____
This application covers phase number ___ of ___ phases Completion date (est.): _____
Project/phase start date (est.): _____

Please also attach a budget summary which details and provides the total certified rehabilitation expenditures within the overall project cost. Please also submit a budget summary detailing and totaling the entire project costs, both certified rehabilitation expenditures and other expenditures.

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5. Public support for project (please attach letters of support):

- National Trust for Historic Preservation
- State Preservation Organization (PreservatiON MASS)
- Local Historical Commission / Local Historic District Commission
- Other:
 - _____
 - _____

6. Other sources of funding:

Please describe the extent of financial hardship for the project _____

Please describe the importance of state assistance for successful project completion _____

Please list additional funding sources (public and/or private) _____

Please list the comparative per capita income average for the city or town _____

Please attach a pro forma indicating the project's sources of funding, total project costs, and any funding gaps.

7. Compliance with Executive Orders, planning initiatives:

Please list any Executive Orders with which the project complies (e.g. Executive Order 215, Executive Order 452):

- _____
- _____
- _____
- _____

Please list any local, state, or regional preservation, revitalization/development plans, or other planning initiatives with which the project is consistent:

- _____
- _____
- _____
- _____

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8. Is the property under threat of loss (please check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Deferred maintenance; ___ years | <input type="checkbox"/> Demolition imminent without tax credit |
| <input type="checkbox"/> Water penetration (please rate mild or major) | <input type="checkbox"/> Property has been vacant; years vacant: _____ |
| <input type="checkbox"/> Structural failure (please rate mild or major) | |
| <input type="checkbox"/> Other (please describe): _____ | |
- _____

9. Please list any particular preservation and restoration work or any specialized craftsmanship to be executed as part of the project (e.g. terra cotta restoration, masonry repointing, window rehabilitation, etc.): _____

Please also list any creative or innovative solutions to difficult preservation issues: _____

10. If you propose to replace windows, please submit a conditions assessment documenting the percentage of loss or deterioration.

11. Readiness to proceed:

- Please attach a project timeline which includes a site preparation start date or a construction date, dates on which financing (public or private) will be/has been secured, and an estimated completion date.

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13. DETAILED DESCRIPTION OF REHABILITATION/PRESERVATION WORK – Includes site work, new construction, alterations, etc. Complete below (please attach additional sheets when necessary).

<p>Number 1. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 2. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 3. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 4. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>

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<p>Number 5. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 6. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 7. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 8. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>

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<p>Number 9. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 10. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 11. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 12. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>

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<p>Number 13. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 14. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 15. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 16. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>

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<p>Number 17. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 18. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 19. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>
<p>Number 20. Architectural feature _____ Approximate date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no. _____</p>	<p>Describe work and impact on existing feature:</p>