

PROJECT NAME: _



CITY OF SOMERVILLE, MASSACHUSETTS COMMUNITY PRESERVATION COMMITTEE FY15 ELIGIBILITY DETERMINATION FORM

Submit an electronic copy (fillable PDF available at www.somervillema.gov/CPA) no later than 5pm on Friday, September 26, 2014 to: Emily Monea, emonea@somervillema.gov. Early applications are encouraged.

PROJECT LOCATION	DN:						
APPLICATION NA	ME / ORGANIZATION:						
CONTACT PERSO	N:						
Mailing Address	SS:						
PHONE:			Open	Recreational	Historic	Comm	nunity
EMAIL:			Space	Land	Resources	(bler	
Please indicate (X) all categories that apply to this project (minimum of one) in the chart. For more detailed information on these categories, refer to the "Community Preservation Act Funding Allowable Uses" chart on p. 6 of the application		Acquisition				project	s only)
		Creation					
		Preservation					
packet.		Support					
PROPERTY OWN Legal Property C	NERSHIP: Owner of Record (if applicable):	Rehabilitation/ Restoration					
Is the resource in a Local Historic District and/or listed on the State Register of Historic Places? (you can check designation at mhc-macris.net) Has the Somerville Historic Preservation Commission made a determination that the resource is significant?						Yes	No
Has the Somervi	lle Historic Preservation Commission	made a determina	tion that th	ne resource is si	gnificant?	Yes	No
PROJECT SUMI	MARY:						
For CPC Use:	Date Received	Date Reviewed		Date App	Date Applicant Notified		
	Eligible Not Eligible	More Information	Needed				
Comments:							



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REVITALIZATION PLAN



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