

TOWN OF SHARON COMMUNITY PRESERVATION COMMITTEE

PROJECT SUBMISSION FORM

Submitter_____ Submission Date_____

Group or Committee Affiliation (if any)_____

Submitter's address, phone number, and email_____

Project Name_____

Project Description_____

Costs:

Fiscal Year	Total Project Cost	CPC Funds Requested	Other Funding Sources (Amount and Source)
1			
2			
3			
4			
5			
Total			

Under which of the following uses does the project fall?

☐ Historic ☐ Open Space ☐ Housing ☐ Recreation

On separate attachments, please explain how this project meets the General Criteria and Category-Specific Criteria for CPC projects.

Does this project fall within the jurisdiction or interest of other Town boards, committees, or departments? If so, please list the boards, committees, or departments, whether applications or presentations have been made, and what input or recommendations have been given.

For Community Preservation Committee Use:

Form received on_____ Project presented to CPC on_____

Reviewed by_____ Determination_____