

TOWN OF BRISTOL

GRANT SUMMARY DOCUMENT

(To be authorized by the Selectboard prior to completion or submission of the grant application.)

Funding Agency Name: VT Historic Preservation Grant Program

Address: 1 National Life Dr.
Deane C Davis Bldg. 6th FL
Montpelier, VT 05620-0501

Date Application Due: 10 / 02 / 23

Explanation of what grant funds will be used for: Holley Hall has two major projects that need attention—Brick repair and Stained-glass window frame repair.

Application Amount: Up to \$20,000

Description of Matching or Other Funds to be Used: Capital Buildings Reserve Fund 50/50 match

Name of Grant Applicant: Meredith McFarland

SUMMARY OF GRANT AWARD

(To be completed by Treasurer’s Office)

Date authorized by Selectboard: _____

Fund # (Assigned by Treasurer’s Office after receipt of grant award letter): _____

Grant Award Date: ____/____/____

Grant Number issued by Funding Agency: _____

CFDA if applicable: _____

Grant Period: ____/____/____ to ____/____/____

Grant Award Amount: \$_____