



TOWN OF GRAFTON
 GRAFTON MEMORIAL MUNICIPAL CENTER
 30 PROVIDENCE ROAD
 GRAFTON, MASSACHUSETTS 01519

COMMUNITY PRESERVATION COMMITTEE
Application for Community Preservation Funding
 (Application Cover Page)

APPLICANT

DATE: _____

NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

SITE INFORMATION

PROJECT NAME: _____

FULL ADDRESS: _____

ASSESSOR'S MAP _____ LOT# _____

PROPERTY OWNER'S NAME: _____

Deed recorded in the Worcester District Registry of Deeds in Book: n/a Page : n/a

CPA CATEGORY (circle all that apply)

Open Space Historic Preservation Recreation Community Housing

Total Project Cost _____ CPA Funding Request _____

Project Summary (a detailed description will be required with your supporting information) _____

Project Budget:

Fiscal Year	Total Project Cost	CPA Funds Requested	Other Funding Sources
2008			
2009			
2010			
2011			
2012			
Total			

For Community Preservation Committee Use:

Received on: _____ Reviewed on: _____

Approved: _____ Town Meeting on: _____

Sunset Date: _____