



**CITY OF FALL RIVER**  
**APPLICATION FOR**  
**COMMUNITY PRESERVATION ELIGIBILITY**

**Date:** \_\_\_\_\_

**Project Title:** \_\_\_\_\_

**Name of Applicant:** \_\_\_\_\_

**Name of Organization:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**CPA Category** (circle all that apply):

**Open Space**

**Historic Preservation**

**Recreation**

**Community Housing**

**CPA Funding Requested:** \$ \_\_\_\_\_

**Total Project Cost:** \$ \_\_\_\_\_

**Project Description:** Please provide a brief project description below. Include a brief description of how your project accomplishes the goals of the CPA and include an estimated budget. Please include supporting materials as necessary.

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**NOTE:** This application enables the CPC to review the request to ensure eligibility and offer guidance. If eligible, an Application for Funding must be completed.