

DARE COUNTY TOURISM BOARD NATURAL CULTURAL HISTORIC FUND PROJECT APPLICATION

J. W.	Name and title of person making application:	
	Local Government name:	
	Non Profit entity name:	
	If non-profit entity, you must enclose a copy of the written confirmation issued by U.S. Internal Revenue Service conferring non-profit status under Section 501 of the U.Sernal Revenue Code.	
Prin	cipal place of business:	
Add	ress:	
Pho	ne number:	
1.	Project Name and Location:	
2.	Amount of Grant Requested:	
serv	liminary architectural, engineering, surveying and other forms of professional vices, inkind services (ex. Administrative salaries of public employees) and any local, e or federal tax are not applicable.	
	Total Project Cost:	
	Amount the Applying Entity is Contributing (if any):	
3.	Project Timeline (starting date and duration):	
4.	Name of Property Owner and Mortgage-holders (if any):	

Explain in detail how the proposed project meets the short/long term ma applying municipality/organization (attach recent master plan approved body).	
7. Project timetable (starting date and duration):	
Project justification as relates to impact of tourism in Dare County estimated return of investment for project funding):	(include an
9. Other information that may be helpful in considering the project (a material as appropriate).	attach additional
DATE SIGNATURE	