TOWN OF BOXBOROUGH
COMMUNITY PRESERVATION COMMITTEE: PRELIMINARY APPLICATION

APPLICANT:

Name:_____ Address: _____

Email: _____ Phone: _____

Board/Committee: _____

PROJECT:

Project Title: _____

Estimated Total CPA Funds Requested: _____

Estimated Total Project Cost: _____

PROJECT SUMMARY:

PROJECT PURPOSE: (Check all that apply)

- ☐ Open Space
- ☐ Recreation
- ☐ Community Housing
- ☐ Historic Resources

COMMUNITY BENEFIT: Indicate how this project will benefit the community.

OTHER INFORMATION:

Does the project need approval from another Board or Committee?

If yes, please specify: _____

Has the project been endorsed by any Board, Committee, or Commission?

If yes, please specify: _____

When completed, please submit this form to the Town Planner, Town Hall, 29 Middle Road, Boxborough, MA 01719.
For funding in FY17, Preliminary Applications should be received no later than **24th September 2015**.

For CPC Use: Received _____ CPC Reference: _____