

Maryland Historical Trust Historic Preservation Non-Capital Grant: Intent to Apply

INSTRUCTIONS

- All questions with a red asterisk (*) require answers.
- Please use plain text. Content will not retain formatting such as bold, italics, or bullets.
- When you have completed your application, click **Submit**. You will be given a final opportunity to review your Intent to Apply. If you have included all the required fields and materials, you will be able to click **Submit**.
- You must submit your Intent to Apply form no later than 11:59 p.m. on October 15, 2025.

HOW TO

- Spell-check: misspelled words will be underlined by a red error indicator line. Right click the word to see spelling suggestions.
- Save a draft: A draft of your Intent to Apply is saved automatically while you work. You can see the saved status displayed in a blue box at the bottom left of your screen. You may also click **Next** to continue the Intent to Apply, which will also save your work. It is highly recommended to type your answers in MS Word and then copy and paste the answers into the online form.

Completing an Intent to Apply form does not in any way commit your organization to completing a full application.

Once your Intent to Apply form is received, the full application will be released to the online account used to submit the Intent to Apply form.

We strongly recommend adding at least one additional collaborator to your Intent to Apply form.

This will provide MHT an additional contact in the event that we are unable to reach the original grant project contact. Add collaborators by navigating to the "Applicant Information" area of the form as seen above and select "Manage applicants". Follow the on-screen prompts to add an additional applicant and set their permissions.

Applicant Information

Federal Tax ID*

(Also known as the Employer Identification Number or EIN). This is generally a 9-digit number, e.g. 52-1234567.

Applicant Organization***Address*****Website****Primary Project Contact Person**

Specify project contacts here. Using the “Add new” button to the right of the contacts table, insert contact information for your Primary Project Contact. **The Primary Project Contact is the person who will receive all correspondence, notifications and reminders regarding the grant.**

Primary Project Contact**Primary Contact's Role on the Project****Project Description****County where the project will take place***

If multi-county project please list all counties. If state wide project, please say so.

Project Title (10 Word Limit)***What type of project are you requesting funding for?*****Project Description (300 Word Limit)***

Briefly describe your project, including what your end results and products will be.

Project Budget

When typing in dollar amounts, only enter numbers - **do not use the dollar sign or decimal point. Round to the nearest dollar.**

Non-Capital grant funds requested*

Anticipated Cash Match*

In-Kind Match

Anticipated Total Match

Anticipated Other Project Costs

These are costs above and beyond the grant amount and the required match listed above.

Anticipated Total Project Cost