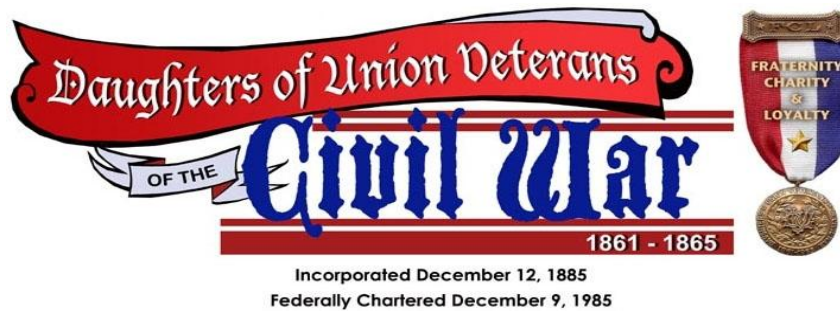




HISTORIC PRESERVATION APPLICATION

APPLICANT INFORMATION (Department, Tent, or Detached Tent):

Name: _____

City, State, Zip: _____

NAME OF THE INDIVIDUAL MOST FAMILIAR WITH THE PROPOSED PROJECT:

Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Email Address: _____

TITLE OF PROJECT: _____

PLEASE COMPLETE THE FOLLOWING:

1. Has your Department, Tent or Detached Tent applied for a monetary award during the past three years?

☐ yes ☐ no

2. Have you received a DUVCW Historic Preservation monetary award during the past three years?

☐ yes ☐ no

3. What is the maximum amount you are requesting for your project not to exceed \$300?

The Daughters of Union Veterans of the Civil War, 1861-1865 reserve any and all rights to publicize details of this project including but not limited to electronic and print media. August 2026

4. Type of Memorial (check all that are applicable):

☐ Monument ☐ w/Sculpture ☐ w/Sculpture ☐ w/cannon ☐ Cannon stand alone
☐ Historical Marker ☐ Plaque ☐ Flagpole ☐ Bench ☐ Other ☐ (GAR Building, etc.)

Physical Details:

☐ Concrete ☐ Stone ☐ Marble ☐ Metal ☐ Bronze ☐ Limestone ☐ Sandstone
☐ Other (Plastic, etc.)

Restoration/Cleaning Products to be Used:

☐ D/2 ☐ Orvus ☐ Stone Restore CT ☐ Stone Restore PS (Polished Stone) ☐ Citra-Shield
☐ Other

PLEASE COMPLETE THE FOLLOWING:

- ❖ In 300 words or less, please describe your Historic Preservation project and the need for it.

- ❖ In 300 words or less, please describe how the project will benefit the community where it is located and the mission/objects of the Daughters of Union Veterans of the Civil War, 1861-1865.

- ❖ In 300 words or less, please provide a strategic plan and budget for completion of the project and a proposed completion date.

- ❖ Please provide any available photos regarding your proposed project.
- ❖ A final report detailing the results of this project will be required upon its completion.

DO NOT WRITE BELOW THIS LINE: For Committee Use Only

Date Proposed Project Received: _____ By whom: _____

Distributed to Committee Member: _____ Date: _____

Distributed to Committee Member: _____ Date: _____

Monetary Award Granted: _____ Yes _____ No

Amount Granted: _____

Date: _____

HISTORIC PRESERVATION COMMITTEE MEMBERS:

_____ Chairman

_____ Member

_____ Member