2017 Vermont Historic Preservation Grant Application

Due Monday, October 3, 2016

RECEIVED

OCT 03 2016

VT DIVISION FOR HISTORIC PRESERVATION

IMPORTANT INSTRUCTIONS:

Please refer to the 2017 Vermont Historic Preservation Grant Application Manual before completing your application. The manual contains directions to help you respond to each section below and clarifies what information is required. The manual is available online or you may request a paper copy by sending an email to debra.sayers@vermont.gov or by calling 802-828-3213.

1A. APPLICANT

Name: Brattleboro Museum and Art Center

Address: 10 Vernon St.

City: Brattleboro State: VT Zip Code:

05301

Daytime phone: 802-257-0124

Email address: building@brattleboromuseum.org

1B. PERSON AUTHORIZED TO EXECUTE CONTRACTS FOR APPLICANT

Name: Danny Lichtenfeld, Director

Address: 10 Vernon St.

City: Brattleboro State: VT Zip Code:

05301

Daytime phone: 802-257-0124

Email address: danny@brattleboromuseum.org

1C. PERSON AUTHORIZED TO ADMINISTER THE PROJECT

Name/Title: Ananda Forest, Building Manager

Address: 10 Vernon St.

City: Brattleboro State: VT Zip Code:

05301

Daytime phone: 802-257-0124, ext. 111

Email address: building@brattleboromuseum.org

1D. PROPERTY OWNER (if differe	nt from applicant)	
Name:		
Address:		
City:	State:	Zip Code:
Ownership Status: (check one) X Non-Profit		
1E. HISTORIC NAME AND LOCATI	ION	
Historic Name: Union Station		
Physical Address: 10 Vernon St., Br	rattleboro, VT	
2. GRANTEE EXPERIENCE		
2A. Has any previous rehabilitation Historic Preservation Grant? If yes, X Yes No If yes, please	please list the year ar	
The Museum received a Vermont Hi restore the original front glass and		ant in the early 1980's to
2B. Does your organization have e programs? X Yes If yes, please comment		federal or state grant
The Museum has received several Council over the years, including or received an award from the Vermo of a Historic Structure. The museum placed on the National Register of	ne for ADA compliant bont Division for Historic n was also the second	athrooms. The Museum also Preservation for Adaptive Use
2C. Does your organization use a n	nanual or automated A	ccounting system?
3. BUILDING INFORMATION		

http://www.orc.vermont.gov/Resource/Show-Resource-Table.aspx.

Preservation's Online Resource Center, available at

You can determine whether a building is listed or has been determined eligible for listing in the State or National Register by looking at the Vermont Division for Historic

3B. Original Building Type: House Barn Church Town Hall School Commercial
X Other (explain) Train station
3C. Is the building listed in the State Register of Historic Places? X Yes □ No, but determined eligible □ No
3D . Is the building listed in the National Register of Historic Places? X Yes □ No, but determined eligible □ No
CRITERION 4. PRESERVATION OF HISTORIC FEATURES For each subsection below rate the condition of building elements (excellent, good, fair, poor). Then write a short summary of the work needed to repair/restore this element including methods of repair and materials to be used. If no work is needed in any subsection, say do. Do not leave sections blank. For each section where funding is sought through this grant application, check the "Grant Funds Requested" box for that section.
4A. Roof Condition: Good
Repairs Needed: Some slates need replacement.
Grant Funds Requested
4B. Frames & Structure Condition: Excellent
Repairs Needed:
Grant Funds Requested
4C. Exterior (siding, trim, etc.) Condition: Good
Repairs Needed: Routine painting of trim will be needed in the next year or two. Areas of the exterior masonry will also need re-pointing soon.

Grant Funds Requested
4D. Interior (plaster, trim, rooms etc.) Condition: Excellent
Repairs Needed: Some routine painting needed
Grant Funds Requested
4E. Windows & Doors Condition: Excellent Repairs Needed: Some routine painting will be needed soon
Grant Funds Requested 4F. Foundation (masonry)
Condition: Good
Repairs Needed:
Some re-pointing needed
Grant Funds Requested
4G. Special Features (steeples, cupolas, porches, etc.) Condition: Good
Repairs Needed: Flagpole needs painting and sealing soon
Grant Funds Requested

4H. Site (drainage, roads, sidewalks, etc.; conditions that cause damage to the building) Condition:

Poor

Repairs Needed: Areas of front walkway and handicapped access ramp are badly cracked due to age and will soon become hazardous if not repaired and/or replaced. This work is especially important because the historic entrance is how the public is able to access the Museum. Without these much-needed repairs, this historic landmark and cultural center will not be safe to visit.

X Grant Funds Requested

CRITERION 5: LONG TERM USE

5A. <u>Briefly</u> describe the building and give a <u>short</u> summary of the building's history. What was the original use of the building and what is the building's current use?

Union Station opened in 1916 and became southeastern Vermont's gateway to the world. Troops embarking for both World Wars departed and returned through its doors. The station fell into disuse and disrepair in the 1960's and was slated for demolition until a group of concerned citizens rallied and lobbied for its preservation. After vigorous fund raising, civic lobbying and a lot of sweat, historic Union Station reopened in 1972 as the Brattleboro Museum and Art Center. Since that time, the Museum has continued to grow, becoming a regional cultural beacon attracting over 15,000 visitors every year.

5B. Describe any substantial work that has been performed on the building in the last five years:

New walls, ceilings and lights were added to the Main Gallery to restore and enhance the original features of what was once the train station's grand main entrance and lobby. Extensive portions of the exterior walls were recently re-pointed. A section of the parking lot was recently repurposed and landscaped as a sculpture garden which is open to the public year round and at no charge.

5C. What is the planned use of the building following this project? If the building is rehabilitated, will it have a new use? Describe changes that will be made to the building in order to accommodate this new use. Will these changes impact historic features?
The museum will continue in its current use as an art exhibition space and center for cultural events.
5D. Describe any additional work that needs to be done following the completion of this project. Do you have a plan for routine maintenance and long-term preservation of the building?
The Museum has an annual budget of approximately \$8000 for routine maintenance. Funding will be sought in the near future (3-5 years) to continue exterior re-pointing and roof repair.
CRITERION 6: PUBLIC BENEFIT
6A. Is the building open to and/or used by the public? X Yes \text{No} If yes, please describe:
The Museum is open 6 days a week from 11-5 year round and hosts over 15,000 visitors a year. There are also at least 50 evening events annually.
If no, please describe any plans for public use:

6B. Describe the public benefit of this project. Is the building easily visible from public places? Is it important to the history of the community or an important local symbol or landmark?

The Museum stands at the main intersection in Brattleboro, as a much a part of the local landscape as the surrounding mountains that were quarried to provide fieldstone blocks for its walls. As Union Station, the building helped bring Brattleboro into the 20th century as a grand and beautiful doorway to the world for commerce and travel. Celebrating its 100th birthday this year, the building, in its newer incarnation as the Brattleboro Museum and Art Center, is now a portal into the 21st century, enhancing and celebrating Brattleboro's current role as a center for tourism and the arts. In order to continue effectively and safely in this vital civic role, it is imperative for the Museum to replace large sections of its crumbling front walkways and badly cracked handicapped access ramp.

6C. Does the community support the project? Are other organizations involved in the project?

Community support has been the hallmark of the Museum ever since local groups rallied in the early 1970's to prevent Union Station from being demolished and replaced by a parking lot. Since that time, the Museum has been generously supported by local donations and volunteers, local artists, and a community that regularly attends its many exhibits and events.

CRITERION 7: BUDGET

7A. Summarize items from Section 4 that will be funded through this grant request. **Please only include items for which you are seeking grant funding through this program.** You may add more lines if necessary.

WORK DESCRIPTION IN PRIORITY ORDER

1. Remove damaged portions of the handicapped access ramp and replace with new concrete.

Estimated Cost: \$1453

- 2. Remove badly cracked sections of front walkway with new concrete Estimated Cost: \$2453
 - 3. Repair mildly cracked portions of front walkway with high strength two part patching compound
 Estimated Cost: \$335

TOTAL ESTIMATED GRANT PROJECT COST: \$4241

7B. GRANT REQUEST

REMINDER: the maximum grant amount you may request is \$20,000.00

GRANT AMOUNT REQUESTED: \$2120

7C. MATCHING AMOUNT SUMMARY

List all sources of matching funding below. Matching funds that equal your grant request must be in-hand at the time of application. You may add more lines if necessary.

SOURCE: Commitment from museum donor

AMOUNT: \$2121

TOTAL AMOUNT OF MATCHING FUNDING: \$2121

(Should match grant request)

7D. SOURCES OF ADDITIONAL FUNDS

Tell us about any sources of additional funds in addition to matching funds that will be used to pay for work prior to reimbursement. Indicate whether these funds are in hand or must still be raised. You may add more lines if necessary.

Museum capital reserves, in hand.

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Could your organization accept a partial award to successfully complete a phase of this project? \square Yes X No

Describe what funds are necessary to support each discrete portion of the project.

7F. ADDITIONAL BUDGET COMMENTS

CRITERION 8: ACCESSIBILITY FOR PERSONS WITH DISABILITIES

8A. Is the building handicapped accessible? X Yes No If yes, please describe:

The museum has handicapped parking as well as a wheelchair access ramp (for which the Museum is seeking funding to repair in this grant proposal).

With the exception of one small gallery, the public galleries and event spaces and restrooms are all ADA-compliant.

If no, please describe any plans to make it accessible.

CRITERION 9: DESIGNATED DOWNTOWNS AND	VILLAGE	CENTERS
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9A. Is your building in a Designated Downtown or Village Center under the Downtown Development Act?
X Yes No
10. REQUIRED ATTACHMENTS The following attachments are required parts of the grant application. See Grant Manual for a full description of each item. Check off the boxes to make sure you have included all the required attachments. Incomplete applications will not be considered.
 X Project Estimate(s) X Location Map X Sketch Map X Proof of non-profit status [IRS 501 (c)(3) certification] (for non-profit, tax-exempt organizations) X CD of .jpg images ☐ (OPTIONAL) Preservation Plans, Reports, Evaluations, or Maintenance Plans of the building
11. LEGISLATORS Please list your State Senators and Representatives
Sen. Becca Balint Rep. Mollie S. Burke Rep. Valerie A. Stuart Rep. Tristan Toleno
12. CERTIFICATION:
A. If you are submitting your application via email you MUST check the box below to certify your application.
☐ I am submitting this Application digitally. I am applying for a 2017 Historic Preservation Grant and am authorized to submit this application on behalf of the Applicant. I certify that the information presented in this Application is complete and

accurate and I am authorizing the Division for Historic Preservation to accept the submittal for review and potential award. I understand that upon submission to the State, I relinquish sole rights to ownership or control over the photographs and digital images I am submitting and that the photographs shall become the property of the State upon receipt by the State.

B. If you are submitting a paper copy of the application you MUST sign and enter the date in the box below.

By signing this application, I certify I am applying for a 2017 Historic Preservation Grant and am authorized to submit this application on behalf of the Applicant. I certify that the information presented in this Application is complete and accurate and I am authorizing the Division for Historic Preservation to accept the submittal for review and potential award. I understand that upon submission to the State, I relinquish sole rights to ownership or control over the photographs and digital images I am submitting and that the photographs shall become the property of the State upon receipt by the State.

APPLICANT NAME: **Danny Lichtenfeld**

SIGNATURE:

DATE: (mm/dd/yyyy) 09/30/2016

Applications are to be submitted via e-mail to <u>accd.hpgrants@vermont.gov</u> by midnight October 3, 2016.

If you are unable to submit your application via e-mail you may submit a paper copy to the address below. Applications must be postmarked or hand-delivered by 4:30 on October 3, 2016.

Vermont Division for Historic Preservation
Attention: Caitlin Corkins
One National Life Drive
Davis Building, 6th Floor
Montpelier, VT 05620-0501

Thank you for applying to the Vermont Division for Historic Preservation's Historic Preservation Grant Program!