

<p style="text-align: center;">DEPARTMENT OF HEALTH AND HUMAN SERVICES</p> <p style="text-align: center;">Health Resources and Services Administration</p> <p>OTHER REQUIREMENTS FOR SITES</p>	FOR HRSA USE ONLY			
	Grantee Name			
	Grant Number		Application Tracking #	
	Project #		Project Type	
	Project Title			
1. Site Control and Federal Interest				
Identify current status of property (If 'Leased', please check one checkbox below)				
<input type="checkbox"/> Owned <input type="checkbox"/> Leased				
2. Cultural Resource and Historic Preservation Considerations (For Alteration/Renovation (A/R) projects ONLY)				
2a. Is the project facility 50 years or older?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
2b. Does the overall proposed project include 1. any renovation/modification to the exterior of the facility (including 2. ground disturbance activities (including installation of permanent access ramps, utility work, installation of curb cuts, fencing, and parking)?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>		
2c. Does the project involve renovation to a facility or site that is historically, culturally, or architecturally significant?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
2d. Is the site located on current or historic Native American, Alaskan Native, Native Hawaiian, or equivalent, culturally significant land?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Landlord Letter of Consent				
Please include maximum of one attachment along with this application				