

HISTORIC PRESERVATION CERTIFICATION APPLICATION
PART 2 - DESCRIPTION OF REHABILITATION

Instructions: This page must bear the applicant's original signature and must be dated. The National Park Service certification decision is based on the descriptions in this application form. In the event of any discrepancy between the application form and other, supplementary material submitted with it (such as architectural plans, drawings and specifications), the application form takes precedence. A copy of this form will be provided to the Internal Revenue Service.

NPS Project Number

42319

1. Property Name The Grimm-Schultz FarmsteadStreet 35180 Old K-10 HighwayCity Volland or Alma County Wabaunsee State KS Zip 66401Name of Historic District The Grimm-Schultz Farmstead☐ Listed individually in the National Register of Historic Places; date of listing _____☐ Located in a Registered Historic District; name of district _____☒ Part 1 - Evaluation of Significance submitted? _____Date submitted 3-13-2020

Date of certification _____

2. Project Data

Date of building 1875-1950Estimated rehabilitation costs (QRE) \$199,000Number of buildings in project 8Floor area before / after rehabilitation 1,848 / 1,848 sq ftStart date (estimated) 03/14/2020Use(s) before / after rehabilitation resident / commerceCompletion date (estimated) 03/31/2025Number of housing units before / after rehabilitation 8 / 2Number of phases in project 13Number of low-moderate income housing units before / after rehabilitation 1 / 2

3. Project Contact (if different from applicant)

Name Jason Droge, Rehab/Const MgrCompany Footprint Construction

Street _____ City _____ State _____

Zip _____ Telephone _____ Email Address _____

4. Applicant

I hereby attest that the information I have provided is, to the best of my knowledge, correct. I further attest that [check one or both boxes, as applicable]:

☒ I am the owner of the above-described property within the meaning of "owner" set forth in 36 CFR § 67.2 (2011), and/or☐ If I am not the fee simple owner of the above described property, the fee simple owner is aware of the action I am taking relative to this application and has no objection, as noted in a written statement from the owner, a copy of which (i) either is attached to this application form and incorporated herein, or has been previously submitted, and (ii) meets the requirements of 36 CFR § 67.3(a)(1) (2011).

For purposes of this attestation, the singular shall include the plural wherever appropriate. I understand that knowing and willful falsification of factual representations in this application may subject me to fines and imprisonment under 18 U.S.C. § 1001, which, under certain circumstances, provides for imprisonment of up to 8 years.

Name Laurie J. HamiltonSignature (Sign in ink) [Signature] Date 03/19/2020Applicant Entity Hamilton Family Real Estate Services SSN _____ or TIN _____Street _____ City _____ State KS

Zip _____ Telephone _____ Email Address _____

☐ Applicant, SSN, or TIN has changed since previously submitted application.

NPS Official Use Only

The National Park Service has reviewed the Historic Preservation Certification Application - Part 2 for the above-named property and has determined that:

☐ the rehabilitation described herein is consistent with the historic character of the property and, where applicable, with the district in which it is located and that the project meets the Secretary of the Interior's Standards for Rehabilitation. This letter is a preliminary determination only, since a formal certification of rehabilitation can be issued only to the owner of a "certified historic structure" after rehabilitation work is complete.☒ the rehabilitation or proposed rehabilitation will meet the Secretary of the Interior's Standards for Rehabilitation if the attached conditions are met.☐ the rehabilitation described herein is not consistent with the historic character of the property or the district in which it is located and that the project does not meet the Secretary of the Interior's Standards for Rehabilitation.

Date

11/20/2020
☒ NPS conditions or comments attached

National Park Service Authorized Signature (Sign in ink)

[Signature]
Angela C Shearer

RECORDS RETENTION - PERMANENT. Transfer all permanent records to NARA 15 years after closure. (NPS Records Schedule, Resource Management and Lands (Item 1.A.2) (N1-79-08-1)).

**HISTORIC PRESERVATION CERTIFICATION APPLICATION
NATIONAL PARK SERVICE
CONDITIONS**

Property Name The Grimm Farmstead Project Number 42319
Property Address 35180 Old K-10 Highway, Alma KS 66401 Wabaunsee County

The rehabilitation of this property as described in the Historic Preservation Certification Application will meet the Secretary of the Interior's Standards for Rehabilitation provided that the following condition(s) is/are met:

1. Masonry Condition

Repointing mortar must match the color, texture, strength, joint width and joint profile of the existing historic masonry. Specifications and repointing samples should be reviewed and approved by the SHPO before proceeding with this work. Overall and close-up photographs of the masonry before and after repointing must be submitted with the Request for Certification of Completed Work (Part 3 or Phase Advisory).

Photographs documenting that the conditions have been met must be submitted with the Request for Certification of Completed Work.

Any substantive change in the work as described in the application should be brought to the attention of the State Historic Preservation Office and the National Park Service in writing, using the Amendment/Advisory Determination form, prior to execution to ensure that the proposed project continues to meet the Standards.

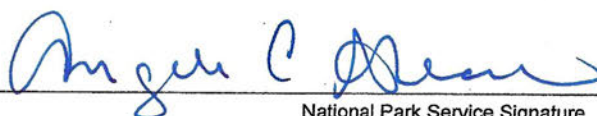
7-28-20
Date



State Historic Preservation Office Signature

The National Park Service has determined that this project will meet the Secretary of the Interior Standards for Rehabilitation if the condition(s) listed above are met.

11/20/2020
Date



National Park Service Signature

**HISTORIC PRESERVATION CERTIFICATION APPLICATION
NATIONAL PARK SERVICE
COMMENTS**

Property Name Grimm-Schultz Farmstead Project Number 42319

Property Address 35180 OldK10 Hwy, Alma, KS

These comments respond to the Historic Preservation Certification Application –

☐ Part 1 ☒ Part 2 ☐ Part 3 ☐ Amendment

This Part 2 conditional approval is based on the additional information and clarification of the phasing the applicant provided via e-mail on 10/22/2020. Please be advised that this approval does not extend to work not described in the written application. Any changes to the scope of work or new work should be submitted as an amendment through the KS SHPO to the NPS for review and approval to ensure conformance with the Standards. In order to receive a phase advisory determination, rehabilitation work must be completed to evaluate that the work meets the Standards and no additional work is anticipated within the space or building. Only at the very completion of the entire project is a Request for Certification of Completed Work (Part 3) submitted through the KS SHPO.

The National Park Service has reviewed and approved the submitted application noted above.

November 20, 2020

Date



Angela Shearer, National Park Service

Assurances

Applicants hereby agree and acknowledge that, if they are awarded funds:

- (1) they will conduct their operations in accordance with Title VI and VII of the Civil Rights Act of 1964, as amended, the Rehabilitation Act of 1973, as amended; the Kansas Act Against Discrimination; and the Americans with Disabilities Act of 1990, which bar discrimination against any employee, applicant for employment, or any person participating in any sponsored program on the basis of race, creed, color, national origin, religion, sex, age, or physical or mental disability, and require compensation for employment at no less than minimum wage requirements, and will provide safe and sanitary working conditions.
- (2) they will not engage in project activities or expend grant funds until (a) **they have been notified** that the application was approved, (b) a **grant agreement has been signed** by the applicant and the executive director of the Kansas Historical Society (KSHS), and (c) they have attended an **HTF grant administration orientation**.
- (3) applicants will include in all promotions, publicity, advertising, and in any printed material the following credit line: **"This property has benefited from a Heritage Trust Fund grant from the Kansas Historical Society."**
- (4) they will assist and participate in educational programs, sponsored by the KSHS, regarding the preservation of the property, if requested.
- (5) they **have sufficient funds** to match the Heritage Trust Fund grant and will **pay all project costs as they come due then seek reimbursement** by the KSHS upon completion of approved budget line items.
- (6) they will **follow the guidelines** established by the KSHS, the HTF Project Agreement, and the *Heritage Trust Fund Grant Manual*.
- (7) they will **obtain KSHS approval** of the final "Scope of Work" or working drawings and specifications **before** the project is advertised for bidding or construction activities are initiated.
- (8) they will receive approval from the KSHS **before** changing the costs of the project, scope of work, or methods of accomplishing the project work.
- (9) they will **not enter into a construction contract(s)** for the project or undertake other activities until the **conditions of the HTF grant program have been met**.
- (10) they will provide and maintain competent and adequate architectural and engineering observation and inspection as required at the construction site to ensure that the completed work conforms to the approved plans and specifications.
- (11) the filing of this **application has been approved by the legally authorized governing body** of the applicant, if applicable.
- (12) the facts, figures, and information contained in this application, including all attachments, are true and correct.
- (13) all components of the grant application, including attachments, are included and **no additional or missing materials will be submitted after the stated application deadline**.

Signature of Property Owner or Legally Authorized Representative

Date

Printed Name and Title of Signatory

