

MNHS Grants Office Scope of Work Form

The MNHS Grants Office Scope of Work Form must be completed for **all construction projects** involving a historic property and other projects at the discretion of MNHS staff. The form presents a detailed description of proposed construction work for each item and/or architectural feature in a manner that allows MNHS Grants Office staff to review the proposed project in accordance with the Secretary of the Interior's Standards for the Treatment of Historic Properties and National Park Service Preservation Briefs. These documents can be found online at the National Park Service website <u>here</u> and <u>here</u>.

MNHS Grants Office staff will review the entire project, including any work on the historic property. Include all major work items on the Scope of Work Form, including those that will not be funded by MNHS grant funds.

*All Scope of Work Form fields have space limitations. Please be concise with information. All work must be described in the Scope of Work Form.

Adobe Reader is required to fill out form – <u>Download Free Copy</u>.

Sample Filled-Out Scope of Work Form Item

PROPERTY NAME: Anytown's Amazing Building

PROPERTY ADDRESS: 123 Main Street, Anytown, Minnesota

DATE: February 1, 2019

Item No: 1	FEATURE: 2nd	d Story Windows CONST. DAT	E: 1912 & later	Funding Source(s):	GRANT OTHER	Budget Item No.: 9.		
Describe e	XISTING FEATU	IRE AND ITS CONDITION						
Windows are wood double hung windows. Windows are painted and in fair condition. Glazing putty is in poor condition, paint is peeling. Small areas of rot on bottom sash and sills of many windows. Two window sills have extensive rot.								
DESCRIBE WORK AND IMPACT ON EXISTING FEATURE Windows will be repaired. Old glazing putty and broken panes will be removed. Areas of limited rot will be repaired with epoxy specially formulated for wood repair. Windows will be scraped, sanded and primed and painted. Two sills will require replacement. Replacement material will match existing in size, shape and material. Aluminum storms will be removed, and replaced with new wood storm windows – manufacturer's details are attached.								
Photos: 4-	6 DF	RAWING SHEET NO.: 2	Add'L Docu	MENTATION: \mathbf{W}	indow Specs, E	poxy Specs		
	PDATES AFTER ROJECT IS COMPLETED Photos: 2-4 Three sills required replacement, unlike the two that were mentioned in this number. See Drawing Sheet No. 2.							

*Instructions on next page.

A. ITEM NO.

Provide consecutive numbers for each work item.

B. FEATURE

Identify the architectural feature impacted by the work.

C. CONST. DATE

Give the approximate date of construction for the existing feature.

D. FUNDING SOURCE(S)

Indicate whether the work item is funded by grant or other source.

Item No: A.	Feature: B. Const. Date: C.	Funding Source(s): D.		BUDGET Item No.: E.				
	Describe existing feature and its condition F .							
	DESCRIBE WORK AND IMPACT ON EXISTING FEATURE G.							
	Photos: Drawing Sheet No.: Add'L Documentation: H. I. J.							
	ES AFTER CT IS COMPLETED	к.						

E. BUDGET ITEM NO.

Place budget item number here that corresponds to the itemized budget in the grant application, if applicable.

F. DESCRIBE EXISTING FEATURE AND ITS CONDITION

Describe the existing feature's current physical condition. Include the number of features and how historic fabric will be impacted by the construction project. This section should describe the existing feature without reference to a separate planning document. Do NOT write "see Conditions Assessment" in this section.

G. DESCRIBE WORK AND IMPACT ON EXISTING FEATURE

Explain how the proposed construction will impact the existing feature. Demonstrate how the Secretary of the Interior's Standards for the Treatment of Historic Properties will be met when doing work, include any guidance from Preservation Briefs that will be followed.

Н. Рнотоз

Photographs of the existing condition of each work item are required. Please include close-ups and context photos. Include J. ADD'L DOCUMENTATION historic photos, if available. Note photo number of described feature here.

I. DRAWING SHEET NO.

Note drawing sheet number of described feature here, if applicable.

Note the name of the additional documentation here if applicable.

K. UPDATES AFTER PROJECT IS COMPLETED

Once the MNHS grant-funded project is completed, use this space to update each Item to reflect the documents submitted in the Final Report. This is for MNHS grant-funded projects only.

Supporting Documentation Tips (H. I. & J.):

- Supporting Documentation can be attached to the Scope of Work Form or uploaded separately to the Grants Portal.
- Group each category of documentation into one document. For example, all photos into one PDF.
- Use a file name that describes the document's content (Ex. documenttype date; ConditionsAssessment_2_2019).
- Any Construction Documents are supplementary • to the MNHS Grants Office Scope of Work Form.





FOR OFFICE USE ONLY
Grantee:
Grant No.:
Attachment:

PROPERTY NAME:

PROPERTY ADDRESS:

NRHP LISTING NO.:

Item No:	Feature:	Const. E	Const. Date:		GRANT OTHER	Budget Item No.:			
DESCRIBE EXISTING FEATURE AND ITS CONDITION									
DESCRIBE WORK AND IMPACT ON EXISTING FEATURE									
Photos:	Dr	RAWING SHEET NO.:	Add'l Docume	ENTATION:					
Updates A Project is	After 5 Completed								

Item No:	Feature:	Const. [Date:	Funding Source(s):	GRANT OTHER	Budget Item No.:			
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Updates A Project is	AFTER 5 Completed								



FOR OFFICE USE ONLY Grantee:__ Grant No.: Attachment:

PROPERTY NAME:

Property Address:				NRHP LISTING NO.:			
Item No:	Feature:	Const. E	Const. Date:		GRANT GRANT	Budget Item No.:	
Describe e	EXISTING FEATU	RE AND ITS CONDITION					
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FOR OFFICE USE ONLY Grantee:__ Grant No.: Attachment:

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