

Belmont Historical Society
2016 David R. Johnson Preservation Award
Nomination Form

Please complete as much as possible.

Name of Nominee: _____

Address & Phone of Nominee: _____

Nominee is – (Check)

- | | | |
|--|---|---|
| <input type="checkbox"/> Property Owner | <input type="checkbox"/> Contractor | <input type="checkbox"/> Architectural Firm |
| <input type="checkbox"/> Non-Profit Organization | <input type="checkbox"/> Citizen Activist | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Public Agency | <input type="checkbox"/> Historian | |

Name of Project: _____

Address of Project, if different from above: _____

Award Category: (Pick Category or Categories from list)

Preservation Project – – (Check)

- | | | |
|---|---|--|
| <input type="checkbox"/> Adaptive Reuse | <input type="checkbox"/> Commercial | <input type="checkbox"/> Institutional |
| <input type="checkbox"/> Preservation | <input type="checkbox"/> Historic Landscape | |
| <input type="checkbox"/> Residential | <input type="checkbox"/> Public Building | |

Or

Preservation Initiative – – (Check)

- | | |
|--|--|
| <input type="checkbox"/> Community Involvement | <input type="checkbox"/> Neighborhood Revitalization |
| <input type="checkbox"/> Communications/Publications | <input type="checkbox"/> Government Policy |
| <input type="checkbox"/> Education | <input type="checkbox"/> Stewardship |
| <input type="checkbox"/> Urban Planning | <input type="checkbox"/> Other _____ |

Belmont Historical Society 2016 David R. Johnson Preservation Award Nomination Form continued...

Include a brief narrative description of the Preservation Project, the Preservation Initiative or the Individual being nominated. (Additional pages may be attached.) Please include photographs or other visual information if available.

Please list major contributors to the achievement of the project, program or effort (e.g. architect, landscape architect, contractor, lender, consultant, historian, group, organization, or individual citizen). Please include contact information (address and phone number) if known.

Date Submitted: _____

Name of Nominator: _____

Nominator Email: _____

Address & Phone number of Nominator: _____

Relationship to Individual or project: _____

Please mail to Belmont Historical Society by April 15, 2016

Belmont Historical Society
P.O. Box 125
Belmont, MA 02478