



History Colorado

State Historical Fund Award Conditions

I understand all cash match must be readily available and in-hand in a bank account prior to the state executing the grant agreement. (See Program Guidebook pg 6)

I understand my organization will enter into a grant agreement with the State of Colorado. My organization will be responsible for meeting the terms of the grant agreement, and cannot “pass through” fiscal or project responsibility to another organization.

I understand that State grant agreements contain non-negotiable terms, and it is my responsibility to review the grant templates prior to going under award.

I understand that my organization will work in partnership with the State Historical Fund to meet the Secretary of the Interior’s Standards. I will comply with review expectations and refrain from carrying out work until I have the approval of my State Historical Fund Resource Specialist to proceed. For survey projects, I will adhere to the current Colorado Cultural Resource Manual. (See Program Guidebook pgs 5 and 37)

I understand property restrictions may apply to my project based on the project type and amount of cumulative State Historical Fund funds previously received for work on the building. (See Program Guidebook pg 6 and 35)

I understand that my organization is solely responsible for determining if my cash match resources are eligible for use with State Historical Fund grant programs.

I understand State funds will only pay for work taking place within the State grant agreement period.

I understand the reported expenses must be associated with one of the task items in the Grant Agreement Exhibit B: Budget and reported as such. I am not allowed to collapse task items expenses under one category. (See Program Guidebook 36 and 39)

I understand project cost savings will be shared with the State Historical Fund based on the grant request/cash match ratio. (See Program Guidebook pg 36)

I understand my organization must comply with the state regulations that requires my organization to carry Workers’ Compensation, Employer’s Liability, General Liability, and Automobile Insurance, if applicable. (See Program Guidebook pg 45)

I understand my organization cannot/will not employ or contract any unauthorized immigrants. (See Program Guidebook pg 46)

I understand I am required to provide documentation of grant administration and indirect expenditures with time sheets and rates, and clear calculations. (See Program Guidebook pg 38)

I understand my organization cannot use state funds or cash match in a manner that may result in an actual or perceived conflict of interest. (See Program Guidebook pg 44)

Award Conditions v12-2021