

Middlesex Canal Association Inc.

Application #CFF-C-0091

Primary Contact: Mr. J. Jeremiah Breen

Phone: (978) 688-4322

Email: jj@middlesexcanal.org

## **Applicant Profile**

Applicant Type Organization

**Legal Name** Middlesex Canal Association Inc.

**Date of 501(c)3 incorporation** 03/05/1964

Address 71 Faulkner Street

Billerica, Massachusetts 01862

**UNITED STATES** 

**Telephone** (978) 670-2740

**Primary Contact** Mr. J. Jeremiah Breen

president

Phone: (978) 688-4322

Email: jj@middlesexcanal.org

Applicant Status Organization - Non-Profit

Applicant InstitutionHistorical SocietyApplicant DisciplineMultidisciplinaryFEIN / TAX ID51-0176731

**DUNS Number** 000000000

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### **Project Overview**

Is this grant application for a Capital (CAP) Grant only OR both a Capital (CAP) Grant and a Systems Replacement Plan (SRP) Grant?

Capital Grant (CAP)

#### Name of Executive Director (or equivalent):

J. Jeremiah Breen

#### Title:

president

#### Email:

jbreen5@verizon.net

#### Telephone:

9786884322

How many years has this Executive Director (or equivalent) been serving?

9

#### **Organization Website:**

www.middlesexcanal.org

#### Type of Organization:

501c3 Cultural Organization

#### Name of Subject Facility:

Middlesex Canal Visitor Center/Museum

#### Street Address of Subject Facility:

71 Faulkner Street

#### City of Subject Facility:

Billerica

#### State of Subject Facility:

MA

#### Postal Code of Subject Facility:

01862

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What is the square footage of the municipal facility?

What percent of the municipally-owned building is dedicated to arts and cultural purposes?

Please indicate the age of the municipal building:

#### Project type:

New Construction/Expansion

#### Indicate the approximate stage your project is in:

In construction/implementation

#### In a few brief sentences, provide a summary of your project.

Adaptive reuse of a 150-year-old wool cloth storehouse at 2 Old Elm Street, Billerica MA 01862, as a visitor center/museum. The new visitor center will replace the existing, rented, 4,400 sq. ft. visitor center at 71 Faulkner Street, Billerica.

#### **Total Project Costs:**

\$2,00,000.

#### **Grant Request:**

\$200,000.

Has your organization ever applied to the Cultural Facilities Fund?

Yes

Has your organization previously received a Cultural Facilities Fund grant?

Nο

If "YES", has your organization fully drawn down the grant funds or declined the grant in whole or in part?

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# Organization Information

Total operating expenses for your organization's most recently completed fiscal year:

(Municipalities and colleges/universities: Please provide operating expenses for the cultural facility only.)

Number of full-time equivalents (FTEs) employed at your organization:

Provide a brief summary of the organization, its programs, and services.

List any planning, capital, or preservation grants received for this facility from the Commonwealth of Massachusetts within the past 10 years.

Briefly interpret your organization's recent financial history, including any financial challenges. If your audits, review, or 990 are not up to date, please explain the circumstances.

What are the start and end dates of your most recent strategic plan?

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### **Facility Information**

Type of facility:

If "other", explain:

Is the building currently listed in the National Register of Historic Places?

What is the square footage of the facility or site that is the subject of this proposal?

Do you have maintenance staff on payroll?

If not, who is charged with maintenance?

Type of ownership of the facility:

If "other", explain:

### If you own the facility

If the organization is carrying debt, what is the term of debt financing?

What is the current outstanding principal balance of the debt?

Who is listed as the owner on the title?

Be sure to provide a copy of the lease when uploading your required materials.

What is the term (start and end dates) of your current lease?

If your lease is expiring within the next 2 years, please make the case for investment.

What are the owner's responsibilities for building maintenance and repair, as stated in the lease?

What are your responsibilities for building maintenance and repair, as stated in the lease?

If none of the above apply, briefly explain:

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## **Project Information**

Briefly summarize the facility project that is the subject of this application.

Briefly describe your existing facility, if different.

Describe the challenge or opportunity that led to the development of the proposed facilities project:

<u>For Municipalities</u>: Please describe how 50% or more of the facility has programming for arts, humanities, or interpretive sciences.

<u>For colleges or universities:</u> Please describe how this facility provides service and open access to the community and general public outside of the regular educational mission.

Please indicate whether the project includes any of the following: *(check all that apply)* 

Please confirm whether you are applying for the Capital (CAP) Grant or both the Capital (CAP) Grant and System Replacement Plan (SRP) Grant.

If you have already been a recipient of a Cultural Facilities Fund Capital grant, please describe how this project is distinct from the previously funded project:

If you have already been a recipient of a Cultural Facilities Fund Feasibility & Technical Assistance Grant, please describe how the planning has informed the capital project:

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## Threshold Criteria #1 - Statutory - Community Impact

Describe the community need for this project:

Describe the tourism impact of your organization.

Describe the financial need for this grant:

Describe local support for the project (In terms of your organization and/or programming.):

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# Threshold Criteria #2 - Financial Capacity

Describe your ability to raise the funds required to complete the project.

What percentage of matching funds are committed at the time of this application submission? (All grants require a 1:1 match.)

What percentage of the total project costs are committed?

Does your organization have dedicated capital replacement cash reserves?

Please describe how you fund the ongoing your capital maintenance and replacement costs of your facility:

If you are expanding a current facility, building a new facility, and/or increasing programming, describe how you will financially support the new venture.

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## Capital Project Planning

Is the building or site you are making capital improvements to currently offering cultural programming?

Have you recently had a comprehensive capital needs assessment (for all your properties) done inhouse or by a third-party qualified professional?

Describe how you identify capital maintenance needs and what your process is for addressing these needs.

Are you either expanding the square footage of programable/usable space in your current space or planning a new construction project?

If yes, do you have a business plan for this expansion?

### For New Construction or Expansions

If you are building a new facility or expanding square footage in your current space, describe the evidence of 'market demand' that justifies the expansion of square footage and/or new construction.

If expanding, please describe what planning and preparation your organization has undertaken to address the impact the expansion will have on staffing and operations. (There is an opportunity to address how you will financially support this expansion in the financial section of this application).

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## **Transformative Impact**

Describe the transformative impact of your project. Include a description of the urban or village center in which your project is located and to what extent your project will improve the appearance of the immediately surrounding area.

Describe how your project creates opportunities for additional private investment in the surrounding area due to vacancies, blight, or underutilized properties and what opportunities for additional private investment exist in the vicinity of your project.

Identify neighborhood, public, and/or private partners who will participate in your efforts to spur transformative impact and identify any specific private or public investment in the surrounding area.

Provide a statement regarding the opportunity for this project to attract an increased number of visitors to the facility and area.

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## Implementation

Describe how the project will be ready to proceed by June 2022. Be specific about any preparation that supports your implementation timeline (e.g., financial readiness, contracts, design plans, project planning).

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Implementation - Key Project Team Members	
Organization	
Title	
Describe this person's role in the project and provide a brief	summary of their relevant experience:
If a third party, are they currently under contract?	
Name #2	
Organization	
Title	
Describe this person's role in the project and provide a brief	summary of their relevant experience:
If a third party, are they currently under contract?	
Name #3	
Organization	
Title	
Describe this person's role in the project and provide a brief	summary of their relevant experience:
If a third party, are they currently under contract?	
Name #4	
Organization	
Title	

If a third party, are they currently under contract?

Describe this person's role in the project and provide a brief summary of their relevant experience:

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Email: jj@middlesexcanal.org Name #5 Organization Title Describe this person's role in the project and provide a brief summary of their relevant experience: If a third party, are they currently under contract? Name #6 Organization Title Describe this person's role in the project and provide a brief summary of their relevant experience: If a third party, are they currently under contract? Name #7 Organization **Title** Describe this person's role in the project and provide a brief summary of their relevant experience: If a third party, are they currently under contract? Name #8 Organization

**Title** 

Describe this person's role in the project and provide a brief summary of their relevant experience:

If a third party, are they currently under contract?

Be sure to include the following in your Required Materials:

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• Provide a timeline for implementation, detailing what happens when. Please provide as an attachment in table format.

• Provide a clear project budget with the status of "sources" and "uses" of funds,

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## Systems Replacement Plan Project Planning

Describe why this capital needs assessment is the next logical step in the overall facilities planning process for your organization.

If you recently completed a building condition, accessibility, or energy-efficiency assessment, please provide the details of these assessments.

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