



# Application for Historic Potential Special Review

DO NOT WRITE HERE - FOR OFFICE USE ONLY  
 Received by: Staff: \_\_\_\_\_ Date: \_\_\_\_\_  
 APN: \_\_\_\_\_ Zone: \_\_\_\_\_  
 HDL Flag:  Yes  No  
 Designated (Landmark):  Yes  No  
 Historic District:  No  Yes, Name: \_\_\_\_\_  
 Survey (1991):  No  Yes, on integrity list  
                    Yes, but not on integrity list  
 Year of Construction: \_\_\_\_\_, Source: \_\_\_\_\_

The following application is required for any proposal for an alteration or demolition of a potential (undesignated) historic resource (CMC Section 15.40.110). After the application is filed, City staff will notify the applicant of any recommended conditions concerning appropriate measures to retain historic, architectural, cultural, or aesthetic qualities, if any. The property owner will be asked to sign an affidavit to either agree or not agree with the conditions. If the owner signs to not agreeing with the conditions, the proposal will be scheduled for a public hearing with the Historic Preservation Commission. If the owner signs agreeing with the conditions, permits may be issued without a public hearing if, within 10 days of the signed affidavit, no appeals are filed requesting a public hearing by the Historic Preservation Commission.

REQUEST FOR:     Alteration                       Demolition

\_\_\_\_\_  
 Property Address/ Location

\_\_\_\_\_  
 Existing/Previous Land Use

\_\_\_\_\_  
 Applicant's Name (if different than owner)

\_\_\_\_\_  
 E-mail address

(\_\_\_\_\_)\_\_\_\_\_  
 Phone Number

\_\_\_\_\_  
 Mailing Address                      City, State

\_\_\_\_\_  
 Zip Code

(\_\_\_\_\_)\_\_\_\_\_  
 FAX Number

Proposal : \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

The following are attached:

- Plot Plan. required of all applications.
- Elevation drawings
- Photographs
- Aerial photographs
- Sample/brochures providing information on proposed modifications
- Other \_\_\_\_\_
- Other \_\_\_\_\_
- Other \_\_\_\_\_

**Property Owner's Certification** (if property owner's name does not match County Assessor records, attach a copy of the **Grant Deed** as proof of ownership)

I hereby certify that I am the record owner(s) of the property stated above. By signing below, I further authorize the submittal of this application.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 E-mail address

(\_\_\_\_\_)\_\_\_\_\_  
 Phone Number

\_\_\_\_\_  
 Mailing Address                      City, State

\_\_\_\_\_  
 Zip Code

(\_\_\_\_\_)\_\_\_\_\_  
 FAX Number