

APPLICATION FOR LANDMARK DESIGNATION
Longmont Historic Preservation Commission

Property

Name(if any) _____

Address _____

Legal description _____

Year of construction_____ Source of information _____

Builder _____

Architect _____

Original Owner _____

Applicant

Name(s) _____

Address _____

Phone / fax _____

Owners (list all owners)

Submittal requirements

___ One good quality black and white or color photograph of the predominate facade of the building or property as it looks today

___ Statement addressing the attached standards for landmark designation

___ Statement of any significant alterations to the property and any future plans for the property

Consent to designation

I, the undersigned, as owner of the property described on this application for landmark designation, do hereby give my consent to the designation of the above as a designated landmark in the City of Longmont.

Signature _____ date _____