



APPLICATION FOR HISTORIC DISTRICT DESIGNATION
 Community and Economic Development Department
 100 N. Appleton St. PH: 920-832-6468
 Appleton, WI 54911 FAX: 920-832-5994

Stamp date received

PROPERTY OWNER		APPLICANT (owner's agent)	
Name		Name	
Mailing Address		Mailing Address	
Phone	Fax	Phone	Fax
E-mail		E-mail	

PROPERTY INFORMATION	
Property Tax # (31-0-0000-00)	
Site Address/Location	
Legal Description of Land (may be attached as separate sheet)	
Number of Structures that contribute to the District	Current Zoning
Number of Structures that do not contribute to the District	Historic District Name
Current Uses	Proposed Uses

ATTACH NARRATIVE STATEMENT OF SIGNIFICANCE TO SUPPORT THE REQUEST AND CHECK ONE OR MORE BOXES

***Please attach a location map of the district boundary in question and a narrative statement of significance to support the request.**

Criteria 1: That are identified with important events or exemplify or reflect the broad cultural, political, economic or social history of the nation, state or community; or

Criteria 2: Are identified with historic personages in national, state or local history; or

Criteria 3: Embody the distinguishing characteristics of an architectural type or specimen inherently valuable for a study of a period, style, method of construction, or of indigenous materials or craftsmanship, or that represents a significant and distinguishable entity whose components lack individual distinction; or

Criteria 4: Are representative of the notable work of a master builder, designer or architect who influenced his age; or

Criteria 5: Have yielded, or may be likely to yield, information important to prehistory or history.

Date	Owner/Agent Signature (Agents must provide written proof of authorization)

OFFICE USE ONLY	
FILE # _____ Application Complete _____ / ____ / ____	Date Filed ____ / ____ / ____
<i>Reasonable accommodations for persons with disabilities will be made upon request and if feasible. 2/2020</i>	