

**HISTORIC PRESERVATION COMMISSION
APPLICATION CHECK LIST**

Item # 1 Type of Application: Check all that apply.

Item # 2 Applicant/Property information to include: Owner name, Address and phone number.

Item #3 National Historic Register (NHR) Contributor

Yes _____ No _____

This is for building or sites that are on the NHR.

Item # 4 Description of proposed work. (Use second page if necessary)

Item # 5. Material that need to be submitted with application:

Approved paint samples are available to view at City Hall.

Approved lettering fonts are provided in the Application packet.

Photos of the site and the surrounding area. If in doubt on what to supply, contact the city building inspector.

Property owner or authorized individual's signature.

***** The Historic Preservation Commission meets every 4th Tuesday of each month at Schieffelin Hall.**

**** Application and all material for said application must be submitted five (5) working days prior to regular Historic Preservation Commission Meeting to be placed on the agenda for review****

***HPC approval does not include approval for a building permit. A separate building permit must be obtained if required by the City or the 2006 International Building Code. Please contact City Hall for building permit information.**

**HISTORIC PRESERVATION COMMISSION
REVIEW APPLICATION**

Case No. _____

1. Type of Application (Check all that apply)

- _____ Rehabilitation
- _____ New Construction
- _____ Demolition
- _____ Sign
- _____ Other

2. Applicant/Property Information (Owner Name /Address)

Phone No.: _____ Parcel No. _____

Property Location: _____

Contact Person (If different from Owner) _____

Contact Phone No. _____

3. National Historic Register Contributor? Yes _____ No _____

4. Description of Work: _____

5. Materials Submitted with Application:

- _____ Plans _____ Color/Texture Sample _____ Other Samples
- _____ Photos _____ Lettering Samples _____ Other (Special)

Property Owner or Authorized Person Signature **Date:** _____

**HISTORIC PRESERVATION COMMISSION
STAFF REPORT**

Case Number: _____

_____ Application / Attachments Complete
Referred to HPC _____
Date

_____ Application / Attachments Incomplete
Returned to Applicant _____
Date

HISTORIC PRESERVATION COMMISSION ACTION

_____ Meeting Date

_____ Approved as Submitted

_____ Approved with Conditions or Requirements

_____ Denied

Remarks: _____

_____ HPC Chairman/Chairman Pro-Tem

_____ Date

HISTORIC PRESERVATION INSPECTOR REVIEW SHEET

Case Number : _____

Type of Application: _____

Applicant: _____

Business/ Address: _____

Font Style: _____ Colors _____ Construction _____

NOTES _____

Linear Footage of Building: _____

Signage Total _____

Recommended Approval _____

Not Recommended Approved _____

Additional Notes: _____

Historic Preservation Inspector

Date

TOMBSTONE

10. **TOMBSTONE**

TOMBSTONE

11. **HISTORIC**

TOMBSTONE, ARIZONA

Arizona Territory

12.  **TOMBSTONE**

Epitaph

13. **TOMBSTONE**

ALL AND BAIL

14. **Tombstone**

TOMBSTONE

8. **Tombstone**

15. **TOMBSTONE**

THEATRE

SCHEMATIC PLAN

DISTRICT BOUNDARY

