Historic Preservation/Archeology Pre-Submittal Checklist for Development Applications

Project Name:		Applicant's Name:			
Application Type:		Project Number (if applicable):			
ntact/Agent: Phone/Fax:					
E-mail Address:	ail Address: Associated/Previous Project Numbers:				
 man-made landscape features, Provide chain of title information Provide a list and location of an theproperty. 	on the p on on th y known	roper e proj n histo	ty. perty to oric res	ructural remains, such as foundations or at least 1900. sources or cemeteries on or adjacent to	
To be completed by Historic Preservation Section staff.					
Required Information	Yes	No	N/A	Requirement for this Applicant	
Photographs of all structures or structuralremains				If checked Yes or N/A, no further informationneeded.	
Chain of title				If checked Yes or N/A, no further informationneeded.	
List of known historic resources andcemeteries				If checked Yes or N/A, no further informationneeded.	
Additional Information Required:	·				
Historic Preservation Staff Sign	ature	Date	·		
Historic Preservation Staff Nam	e (print	ed)			

Historic Preservation Staff Phone and E-mail