



CITY OF GRAND HAVEN
HISTORIC CONSERVATION DISTRICT COMMISSION
519 Washington Avenue
Grand Haven, MI 49417

HISTORIC LANDMARK DESIGNATION APPLICATION

1. Property Address:

2. Description of property (Historic or Common Building Name) or features to be preserved—*attach extra pages or documentation if needed*

3. Year Built: _____ Age: _____

4. Owner(s) Name and Address:

Name: _____

Address: _____

Email: _____ Phone: (____) _____

5. Is this property located in a historic district? _____ *See attached map*

If yes, which one? *Downtown, East End, Highland Park, Northwest, Riverfront, Southwest*

6. Reason for Designation—*check all that apply; attach extra pages or documentation if needed*

Exemplifies specific elements of an architectural style or period as follows:

Is an example of the work of an architect or builder who is recognized for expertise nationally, statewide, regionally, or locally as follows:

Demonstrates superior craftsmanship or high artistic value as follows:

Represents an innovation in construction, materials or design as follows:

Local Landmark Designation Application

Page 2

Represents the Grand Haven area as follows:

Represents a style particularly associated with the environment of a group of people in an era of history as follows:

Represents a pattern or grouping of elements representing at least one of the above criteria as follows:

Has undergone significant historic remodel as follows:

Is the site of a historic event that had an effect upon society as follows:

Exemplifies cultural, political, economic or social heritage of the community as follows:

Represents an association with a notable person or the work of the following notable person:

Represents a typical ethnic example/association with the following group:

Represents a unique example of an event in Grand Haven's history as follows:

Enhances a sense of identity of the community as follows:

Is an established and familiar natural setting or visual feature of the community as follows:

7. Has the site or property been listed on the State or National Register of Historic Places?

Yes No

Local Landmark Designation Application

Page 3

CURRENT OWNER(S) SIGNATURE:

All owners of property must sign.

The undersigned owner(s) hereby grant(s) permission for the property located at _____ to be considered for local individual historic landmark designation. The owner(s) further agree to accept the honorable local landmark designation plaque and agree to display said plaque on structure referenced above to be visual from the street side. For consistency, the preferred placement of the plaque is to the left of the front door as you look from the street, if possible. To receive a plaque, the owner agrees to pay half the cost of that plaque if approved (current price of plaque is approximately \$110; your cost would be \$55). Checks may be made payable to the City of Grand Haven.

Dated this _____ day of _____, 20_____

Owner Name (please print)

X _____
Owner Signature

Owner Name (please print)

X _____
Owner Signature