

Historic Building Restoration Permit Application

Applicant Information

Full Name

Organization (if any)

Address

Phone

Email

Building Information

Building Name

Building Address

Year Built

Historic Designation

Listing Number (if applicable)

Project Details

Scope of Restoration Work

Materials & Methods Planned

Reason for Restoration

Expected Timeline

Architect/Contractor Name (if applicable)

Additional Information

Attachments (drawings, plans, photos, etc.)

Choose File

No file selected