HISTORIC PRESERVATION APPLICATION
City of Clifton

THIS APPLICATION IS IN COMPLIANCE WITH CLIFTON CITY ORDINANCE NUMBER 143. THIS APPLICATION MUST BE FILLED OUT IF YOU ARE PERFORMING ANY CONSTRUCTION, MAJOR ALTERATION, REHABILITATION, MOVING, DEMOLITION, OR ALTERING THE EXTERIOR OF A BUILDING IN ANY WAY INSIDE THE BOUNDARIES OF THE HISTORIC DISTRICT. THE REASON FOR THIS APPLICATION IS TO PRESERVE THE HISTORIC SITES AND STRUCTURES OF THE TOWN OF CLIFTON. THE REQUIREMENTS OF THE DISTRICT ARE DESIGNED TO PROTECT AND PRESERVE HISTORIC AND/OR ARCHITECTURAL VALUE; CREATE AN AESTHETIC ATMOSPHERE; STRENGTHEN THE ECONOMY; AND PROTECT AND ENHANCE THE TOWN'S ATTRACTIONS TO TOURIST AND VISITORS. IT IS IMPERATIVE THAT YOU AND THE COMMISSION USE COMMON SENSE IN PRESERVING THIS AREA.

UPON RECEIVING AN APPLICATION FROM YOU, THE HISTORIC ZONING COMMISSION SHALL, WITHIN THIRTY (30) DAYS, ISSUE TO THE APPLICANT A LETTER STATING ITS APPROVAL WITH OR WITHOUT ATTACHED CONDITIONS, OR ITS DISAPPROVAL WITH GROUNDS STATED IN WRITING.

1. IDENTITY OF PROPERTY:_____

2. NAME OF OWNER:_____

3. ADDRESS OF PROPERTY (STREET):_____

4. CITY:_____COUNTY:_____STATE_____ZIP CODE:_____

5. TYPE OF ALTERATION TO PROPERTY REQUESTED: (circle one or each)
   - ☐ CONSTRUCTION
   - ☐ MAJOR ALTERATION
   - ☐ REHABILITATION
   - ☐ MOVING OR DEMOLITION

6. DATE YOU PLAN TO START:_____

7. EXPECTED COMPLETION DATE:_____

8. DESCRIPTION OF PROPOSED PROJECT (attach notes to this application if necessary):

_____

_____

9. CURRENT PHOTO OF BUILDING AND AREA WHERE WORK WILL BE DONE: (please attach)

10. DRAWING OF PROJECT (PROFESSIONAL OR HAND DRAWN): (please attach)