



Planning and Building Agency
 Planning Division
 20 Civic Center Plaza
 P.O. Box 1988 (M-20)
 Santa Ana, CA 92702
 (714) 647-5804
 www.santa-ana.org

HISTORIC RESOURCES COMMISSION REVIEW APPLICATION

HISTORIC PROPERTY INFORMATION

Property Address: _____
 Historic Property Name: _____
 Assessor's Parcel No.: _____
 Current Use: _____ Residential _____ Commercial/Professional _____ Industrial _____ Other
 Proposed Use (if different from above): _____
 Year Built: _____ Architectural Style: _____

LEGAL OWNER INFORMATION

Legal Owner Name: _____
 Legal Owner Address: _____

 Phone No.: () _____ () _____ Fax: () _____
 Contact Name (if different from Owner): _____
 Phone No.: () _____ () _____ Fax: () _____

PROPOSED PROJECT

DEMOLITION * RELOCATION ALTERATION/NEW CONSTRUCTION
 OTHER _____

If demolition is proposed, describe the replacement project planned (if any): _____

Describe in detail the project request (e.g., any exterior alteration, remodeling, restoration, demolition, or other work proposed): _____

Describe why the proposed modification to the structure is needed: _____

*** Note: If the demolition is part of a development project, there will be no issuance of a demolition permit until the applicant has received site plan review approval.**

UNDERSTANDING AND AFFIDAVIT

I CERTIFY under penalty of perjury, that the statements and answers contained herein and any other information herewith submitted as part of this application are in all respects true and correct to the best of my knowledge and belief.

Applicant Signature _____ Date _____

Legal Owner Signature _____ Date _____

NOTE: An agent may sign for the property owner if a certificate of notarized power of attorney is filed with this application.

(To be Completed by Staff)

Santa Ana Register No.: _____
National Register: Yes _____ No _____

Accepted By: _____
Date Accepted: _____
HRC No.: _____
Historic Category: _____