



Santa Barbara County Historic Landmarks Advisory Commission

NOMINATION FORM FOR DESIGNATION OF:

HISTORIC LANDMARK **OR** **PLACE OF HISTORIC MERIT**

(Please read the instructions before preparing form, and use continuation pages as necessary.)

1. Address and Assessor's Parcel Number(s) of site:
2. Current owner's name, address, and telephone number:
3. Name of property:
4. Property's historical name and name of original owner:
5. Type of resource (check one): [] building; [] other structure; [] site or feature; [] cultural landscape; [] object; [] other
6. Date of construction or age:
7. Architect and architectural style:
8. Physical description of the nominated property:
9. Physical alterations to the nominated property and its current historical and architectural integrity:

10. Description of current setting, including but not limited to associated historic cultural features such as vegetation, walls, roads, as applicable:
11. Provide a brief history of the nominated property and discuss its historical importance (include references and use continuation pages if needed):
12. Discuss why the nominated property meets one or more of the eligibility criteria established by the County Code of Ordinances, Chapter 18A, Section 18A-3. (Consult the County Landmark Information Sheet and use continuation pages if needed):
13. Summarize the case for the designation of this property as a <input type="checkbox"/> Landmark or <input type="checkbox"/> Place of Historic Merit:
14. <input type="checkbox"/> Published map with the property location marked.
15. <input type="checkbox"/> Map or survey of the property boundaries (Assessor's Parcel Map is acceptable). Include the boundaries of those portions or elements that are proposed to be designated.
16. Number and description of photographs enclosed. Where feasible, provide views of those features that make the property worthy, as well as views of the current neighborhood setting.
17. Name, address, telephone number, and email address of person or entity submitting this nomination:
18. <input type="checkbox"/> I believe that the statements made herein are true and complete. (Authorized signature of individual or entity representative submitting this nomination)
19. Date of nomination:
FOR COMMISSION USE ONLY <input type="checkbox"/> Signature <input type="checkbox"/> References <input type="checkbox"/> Photographs <input type="checkbox"/> Maps <input type="checkbox"/> Owner's Name <input type="checkbox"/> Complete <input type="checkbox"/> Peer Review
Name(s) of Reviewer(s):