



APPLICATION FOR WORK IN HISTORIC DISTRICTS AND ON HISTORIC DESIGNATED PROPERTIES

The City of Newark
Landmarks and Historic
Preservation Commission
(NLHPC)

Div. of City Planning
920 Broad St., Rm. #112
Newark, NJ 07102

No work to the exterior of a historic site, or in a historic district, that will change its appearance and is visible from a public street, may proceed until approval of such work is obtained from the Newark Landmarks and Historic Preservation Commission, even if no other approvals are required. This application will not be deemed complete until it is so certified by the Landmarks and Historic Preservation Commission. An application consists of an application form and the materials necessary to describe the project fully.

Please print or type all items. If not applicable, mark N/A. The form continues on back.

Do not write in shaded area; staff use only.

Telephone numbers:
973-733-6204

NLHPC DOCKET# _____ DATE RECV'D _____ STAFF _____
 LANDMARK HISTORIC DISTRICT

ACTION: APPROVED DENIED OTHER CONDITIONS: _____

Certificate of No Effect _____

Certificate of Appropriateness _____

CHAIRMAN _____ date _____

SECRETARY _____ date _____

PROPERTY
LOCATION
WHERE WORK IS
TO OCCUR

PROPERTY ADDRESS (as listed on the Tax Assessor's records) _____ POSTAL ADDRESS _____

NEAREST INTERSECTIONS _____ BLOCK/LOT _____ HISTORIC DISTRICT _____

OWNER

NAME _____ TELEPHONE _____ E-MAIL ADDRESS _____

STREET ADDRESS _____ CITY, STATE _____ ZIP _____ FAX _____

PERSON FILING
APPLICATION IF
NOT THE OWNER

NAME & TITLE _____ TELEPHONE _____ FAX _____

STREET ADDRESS _____ ZIP _____ E-MAIL ADDRESS _____

TYPE OF
STRUCTURE

- detached house manufacturing/loft building public/institutional building apartment house
- row house office/retail building civil engineering work park/landscape/statue
- commercial

DESCRIPTION OF PROPOSED WORK

Provide a detailed, narrative description of the proposed scope of work (construction, alteration, repair, restoration, etc.); including current photographs of project site and surrounding areas, architectural renderings/drawings describing the work, specifications listing materials to be used, material samples, and any other documentation required by the Commission in order to make an informed decision as to the appropriateness of the proposed work.

ESTIMATED COST OF PROJECT

\$ _____ Is the project grant, state, or federally funded? Y or N

CONTRACTOR (IF APPLICABLE)

NAME & TITLE TELEPHONE

STREET ADDRESS CITY, STATE ZIP E-MAIL ADDRESS

ARCHITECT/ENGINEER (IF APPLICABLE)

NAME & TITLE TELEPHONE

STREET ADDRESS CITY, STATE ZIP E-MAIL ADDRESS

ATTORNEY (IF APPLICABLE)

NAME & TITLE TELEPHONE

STREET ADDRESS CITY, STATE ZIP E-MAIL ADDRESS

OWNER'S CERTIFICATION

I am the owner of the above-listed property. I am familiar with the work proposed to be carried out on my property and give my permission for this application to be filed. The information entered is correct and complete to the best of my knowledge.

SIGNATURE DATE

NAME (TYPED OR PRINTED)