

County of San Diego, Planning & Development Services HISTORIC DESIGNATION / MILLS ACT APPLICATION HISTORIC SITE BOARD

	PDS	MA
DATE:		
OWNER INFORM	IATION (Print or Type)	
Mailing Address: Phone No.: e-mail address:	Work:	Home:
	_	
TYPE OF REVIEW	W REQUESTED (Please	check all applicable boxes)
	New Mills Act Contract Mills Act Contract Cancell	☐ Mills Act Contract Non-renewal ation ☐ Historic Designation
PROPERTY LOC	ATION	
Property Address: City, Community,	Devel Leasting	
Assessor's Parcel		
APPLICANT INFO	ORMATION (If Different	than Owner [Print or Type])
Applicant:		
Mailing Address:		
Phone No.:	Work:	Home:
e-mail address:		

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OTHER APPLICANT(S) / OWNER(S): If applying for a Historic District, provide owner information for all structures in the proposed district.

Property Owner:			
Mailing Address:			
Phone No.:	Work:	Home:	
e-mail address:			
Property Address:			
Property Owner:			
Mailing Address:			
Phone No.:	Work:	Home:	
e-mail address:			
Property Address:			
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Property Owner:			
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Property Owner:			
Mailing Address:			
Phone No.:	Work:	Home:	
e-mail address:			
Property Address:			
Proporty Owner			
Property Owner: Mailing Address:			
Phone No.:	Work:	Home:	
e-mail address:	V V OTIV.	i iome.	
Property Address:			

Existing Zoning:		
Existing General Plan Land Use:		
Historical Resource Designation Type: (Local, State, National)		
Date of Designation:		
Located in a Historic District? NO □	YES □	District Name:
Historic Site Name(s):		
Current Site Name(s):		
Trinomial Designation:		
Primary Number Designation:		
	ıps, site	plans, sketches, chain of title, and photos
[provide attachment if necessary])		

DETAILED FLOOR PLANS, EXTERIOR AND INTERIOR ELEVATIONS (Of significant structures [provide attachment if necessary])				
CATEGORY APPLIED FOR (Check as appropriate	te)			
Structural / Architectural Historic Location Historic District	Archaeological Historic Landscape			

STATEMENT OF SITE IMPORTANCE (Expand in an attachment if necessary)	

REHABILITATION / MAINTENANCE PLAN (Complete only if applying for the Mills Act)

Please list work completed / to be done, the Year in which the work was / will be done, the Type of Work (maintenance, rehabilitation, new construction, etc.), and the Estimated Cost of the work.

	Year	Type of Work	Work / Task	Estimated Cost
1.				
2.				
3.				
4.				
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