

LOWELL HISTORIC BOARD



APPLICATION
for
HISTORIC PERMIT
or
CERTIFICATE OF NONAPPLICABILITY

ANDOVER STREET, BELVIDERE HILL, ROGERS FORT HILL PARK, SOUTH COMMON, TYLER PARK,
WANNALANCIT STREET, WASHINGTON SQUARE, & WILDER STREET NEIGHBORHOOD DISTRICTS

I. **ADDRESS** _____
NAME OF BUSINESS OR PROPERTY _____

II. **APPLICANT** _____ PHONE # _____
ADDRESS _____ ZIP CODE _____

PROPERTY OWNER _____ PHONE # _____
ADDRESS _____ ZIP CODE _____

ARCHITECT *(if applicable)* _____ PHONE # _____
ADDRESS _____ ZIP CODE _____

CONTRACTOR *(if applicable)* _____ PHONE # _____
ADDRESS _____ ZIP CODE _____

III. **DESCRIPTION OF PROPOSED WORK** *(This description provides the basis for the official notice and subsequent decision, and must clearly represent the entirety of the project. Use additional pages if necessary.)*

IV. **DOES THE PROPOSED WORK REQUIRE OTHER PERMITS OR APPROVALS** *(other than a building permit)? IF YES, INDICATE:* _____

V. **ESTIMATED COST OF PROPOSED WORK** _____ **ESTIMATED COMPLETION DATE** _____

VI. **DOCUMENTATION SUBMITTED** (*Incomplete applications will be returned*)

- | | |
|---|---|
| <input type="checkbox"/> PHOTOGRAPHS (<i>with labels</i>) | <input type="checkbox"/> BLOCK PLAN |
| <input type="checkbox"/> SHOP DRAWINGS, SKETCHES | <input type="checkbox"/> SITE PLAN |
| <input type="checkbox"/> MFGR's. LITERATURE, SPECS. | <input type="checkbox"/> MATERIAL/COLOR SAMPLES |
| <input type="checkbox"/> BUILDING PLANS, ELEVATIONS, SECTIONS | |

VII. **ARE YOU SEEKING/UTILIZING FINANCIAL ASSISTANCE/INCENTIVES FROM SOURCES OTHER THAN CONVENTIONAL FINANCING?** YES NO

- IF YES, WHICH? CITY OF LOWELL REVENUE BONDS
 TAX CREDITS/DEPRECIATION
 LDFC
 OTHER _____

VIII. **AUTHORIZATION** (*Both signatures required*)

I hereby certify under penalties of perjury that I am the owner or record of the property for which this application is being filed and as such, I am familiar with the work proposed to be carried out on my property.

I hereby give permission for this application to be filed with the full understanding that certain restrictions may be placed on the property relative to the approval of the proposed work.

PROPERTY OWNER _____ DATE _____
(If property is a condominium or cooperative, the chairman must sign)

APPLICANT _____ DATE _____

FEE SCHEDULE	
MAJOR DEVELOPMENT	1/2 OF 1% OF TOTAL PROJECT COST (Never less than \$50 with a cap of \$2,000)
NON-PROFIT ORGANIZATIONS 50% of above but never less than minimum noted above	

PLEASE MAKE CHECKS PAYABLE TO "CITY OF LOWELL"

SUBMIT APPLICATIONS IN PERSON OR BY MAIL TO:

LOWELL HISTORIC BOARD
J.F.K. CIVIC CENTER
50 ARCAND DRIVE
LOWELL, MA 01852
978-446-7200
978-970-4262 FAX
sstowell@lowellma.gov
<http://www.historiclowell.net>

<p>FOR OFFICIAL USE ONLY:</p> <p>APPLICATION# _____ DATE RECEIVED _____</p> <p>FEE PAID _____ HEARING DATE _____</p> <p>ALTERATIONS: MAJOR <input type="checkbox"/> NONAPPLICABILITY <input type="checkbox"/> MINOR <input type="checkbox"/></p>
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