

## **City of Oroville**

Planning Division - Community Development Department

1735 Montgomery Street Oroville, CA 95965-4897 (530) 538-2430 FAX (530) 538-2426 www.cityoforoville.org

ΓRAKIT#:	
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## LANDMARK DESIGNATION

(Please print clearly and fill in/provide all that apply)

REQUIRED	FOR A COMPLETE	APPLICATION
{ } Completed and sig	gned Application Forms	
{ } Application Fee Pa	aid: \$1,095.00 + \$65.70	(6%  Tech Fee) = \$1,160.70
	IDENTIFICATIO	N DATA
Name of Property:		
Address:		
Construction Date:		
Builder:		
Present Ownership		
Name:	Address:	Phone #:
Form Prepared By (Applicant)		
Name:	Address:	Phone #:
LA	NDMARK DESIGNA	TION CRITERIA
Any site or improvement to a site may be designate criteria:	d as a landmark if it reta	ains its historic integrity and meets one or more of the following
{ } 1. It is designated as a California Historical La	ndmark, or it is listed or	n the National Register of Historic Places.
{ } 2. It appears on a City inventory of historic res	ources.	
{ } 3. It exemplifies or reflects elements of the Cit	y's history.	
{ } 4. It has special aesthetic or artistic qualities th	at are of historic value.	
$\{\ \}$ 5. It is identified with historic persons or with	important events in loca	ıl, State or national history.
{ } 6. It embodies distinguished architectural characteristic.	acteristics valuable for s	study of a period, style, method of construction or cultural
{ } 7. It is a valuable example of indigenous mater	rials or craftsmanship.	
	THER DESIGNATION	
In addition to the above referenced landmark design		
•	•	on is essential to the integrity of the landmark or landmark site.
{} 2. It has the potential of yielding information of	•	
{ } 3. Its integrity as a natural environment signifi		<u> </u>
	REQUIRED DOCUMI rovide the information b	
{ } 1. Explain the significance of the structure or s	· ·	
{ } 2. Describe the present appearance including a	lterations, landscaping,	and relationship to surrounds. (Include photos)
{ } 3. Document the history of the structure through	gh previous owners, uses	s, and associations. (List all sources of information)
I hereby certify that the inform	APPLICANT'S SIGnation provided in this a	NATURE pplication is, to my knowledge, true and correct.
Applicant's Signature:		Date:
	OFFICE USE	
APPROVED BY:		DATE:
{ } Credit Card #: { } Debit C		{ } Money Order { } Cash { } Check #

	ADDI	ITIONAL INFORM	ATION		
Community Development Department Department ociated with processing the app	rtment operates on a full cost	t recovery for processing	of permits. Staff will ch	arge their time and any e	xpenses