

APPLICATION FOR CALVERT COUNTY HISTORIC DISTRICT DESIGNATION ¹

Name of Applicant: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Location: Election District: _____ Community: _____

Tax Map #: _____ Parcel/Lot #: _____ Tax ID #: _____

Adjoining Road(s): _____

Area: Acres: _____

Metes and Bounds Description(s): Attach to application

Survey Plat or Tax Map Extract: Attach to application

Owner of Record: _____ Deed Reference: _____

County Zoning District: _____ Land Use: _____

Adjoining Property Owners (including those across roads) ²: _____

Significant of Site (Describe significant elements of cultural, social, economic, political or architectural history, or other bases for requesting designation) ²: _____

Other Remarks: _____

Attachments ³: _____

Signature of Applicant: _____

Concurrence of Owner(s): _____

¹ As provided by the Calvert County Ordinance for the Designation and Preservation of Historic Districts, adopted June 21, 1983 by Resolution 25-83.

² May be attached.

³ Such as photos, deeds, historical documents, plats, etc.

