## **IDENTIFICATION OF PROPERTIES FOR** POTENTIAL HISTORIC SIGNIFICANCE

Please complete and submit this form along with your building permit application for demolition to the Santa Clara County Building Inspection Office.

### 1. Property location:\_\_\_\_\_

Street Address

City/State

Zip Code

Assessor Parcel No. (APN)

6. Is the proposed demolition related to a land development application (i.e. Grading, Special Permit, ASA) already submitted, or to be submitted, to the County? □ Yes □ No

3. If yes, include land development application file number:

### 4. Santa Clara County [Residential Unit] Property Record:

All applicants are required to submit a property appraisal record to document the age of the property. Obtain a copy from the Assessor's Office on the 3<sup>rd</sup> floor of the East Wing, 70 West Hedding Street. If obtained by a representative of the property owner, said representative must present written permission by the owner allowing the Assessor's Office to release the property appraisal record.

#### 5. Is the property 50 years or older? Yes No

Please note that the 50-year age reference is a discretionary guideline: there are circumstances where a property less than 50 years old may be potentially significant and applicants may be required to submit supplemental documentation.

If yes, applicants are required to submit:

- Part II of the Identification of Properties for Potential Historic Significance form; and a.
- b. Photographs of each elevation of the subject property and any related outbuildings and/or associated features.
  - C. Date of construction (based upon submitted property record):

d. Has this property received any historic designation(s)? Yes No

If yes, check the boxes that apply and attach the nomination form or documentation related to its listing. California Historical Landmark 

- National Register of Historic Places
- Santa Clara County Heritage Resources Inventory
- California Register of Historical Resources

# 8. Signature:

By signing this application, I hereby acknowledge that the information contained herein, or subsequently submitted, is true and correct to my knowledge.

Signature of property owner or representative

Print name of property owner or representative

Date

Date

State Point of Historic Interest

**Historical Zoning District** 

For Internal Use Only: Plan Check No.