## THE HISTORIC PRESERVATION FOUNDATION OF NORTH CAROLINA, INC. dba PRESERVATION NORTH CAROLINA

## PROPERTY CHANGE REQUEST APPLICATION

Please note that all relevant supporting materials need to be included in order for the requested change(s) to be reviewed.

Date:							
To determine the impact to the historic building and/or site placement of the requested change(s), include the following items with this application as necessary:							
Drawings to Scale:  Elevation Drawings:  Photographs:  Site Plan:  Survey:  Other:							
Owner Name(s):			Applicant (i	f different from	owner):		
Address: City: Telephone: (home/cell)	ST:	Zip:	Address: City: Telephone: Email:	(home/cell) (business)	ST:	Zip:	
Property Location:							
EXISTING CONDITIONS:							
Current Use:							
Description of Property/Str	ucture:						

Please note date of construction and send photographs showing the present state of the property.

PROPOSED ACTION (select all that apply)  Major Alterations/Rehabilitation:   Major Maintenance/Repair:   Minor Change:   New Addition/Construction:   Painting:   Restoration:   Signage:   Other:
Describe in detail the work to be undertaken including materials to be used:
Signature of Applicant(s):

Please send to:
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P.O. Box 27644
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Fax: 919-832-1651