

PETITION NUMBER _____ - _____ - _____
(FOR OFFICIAL USE ONLY)

DATE RECEIVED BY CITY AUDITOR AND CLERK: _____



Historic Preservation

Historic Designation Application Packet

(Buildings, Sites and Districts)

for the

NAME OF RESOURCE

located at

ADDRESS



Historic Designation Application Package

INFORMATION

Historic Designation Approval Process:

- 1. Pre-Application Meeting:** Applicants are encouraged to attend a pre-application meeting with the Planning and Development Division staff to review the process and answer any questions the applicant may have. To request a pre-application meeting, please call Dr. Clifford Smith, Senior Planner, of the Planning and Development Division at (941) 954-4195.
- 2. Application for Designation:** The Historic Preservation Board normally meets the second Tuesday of every month at 3:00 pm. In order to be placed on a particular agenda, a complete application along with all required attachments must be filed in the Office of the City Auditor and Clerk twenty-eight (28) days prior to the meeting for which the request is to be scheduled. No Historic Preservation Designation application will be accepted until deemed complete by the Office of the City Auditor and Clerk and the Planning and Development Division.
- 3. Technical Review:** Planning and Development Division staff will review the application as set forth in Section VI-806 of the Land Development Regulations and may request additional information from the applicant. If additional information is requested, the applicant must submit the required number of complete, revised applications to the Office of the City Auditor and Clerk. Following its review of the application, the staff will submit a report to the Historic Preservation Board.
- 4. Historic Preservation Board Action:** If, after consideration of the application and the criteria for designation, as set forth in Section VI-806 of the Land Development Regulations, at a public hearing the Historic Preservation Board votes to recommend in favor of the proposed designation, and the Board's action will be considered by the City Commission. If the Board votes against the proposed designation, the decision of the Board in this regard will be final.
- 5. City Commission Action:** After the recommendation of the Historic Preservation Board, a designation ordinance will be prepared and scheduled for public hearing before the City Commission. A public hearing will be held to consider adoption of the proposed ordinance followed by City Commission action on the proposed ordinance.



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For Designated Exterior Elements:

Please note that after a structure or site has been historically designated, all completed applications for building permits which affect the exterior of the structure or the site will be referred by the Building Division to the Historic Preservation Board for consideration of the application and criteria for the issuance of a Certificate of Appropriateness as set forth in Section IV-808 of the Land Development Regulations. Please see Section IV-801 of the Land Development Regulations for a complete description of this process.

For Designated Interior Elements:

Please note that after any interior element of a structure has been historically designated, all completed applications for building permits which affect the interior of the structure or the site will be referred by the Building Division to the Historic Preservation Staff for consideration of the application and criteria for the issuance of a Certificate of Appropriateness as set forth in Section IV-808 of the Land Development Regulations.

Attachments:

- Historic Designation Application Form
- Historic Designation - Submission Requirements Checklist
- Special Power of Attorney Affidavit Forms

Further Information:

For Further information please contact Dr. Clifford Smith, Senior Planner, at 954-4195. Sample designation reports are available at the City Planning and Development Division.

Reference books, historic period maps, and aerials are available at the Sarasota County History Center, 6062 Porter Way, Sarasota, FL (941) 861-5000. Research hours are Monday through Thursday 10:00 a.m. to 4:00 p.m. and Saturday 9:00 a.m. to 1:00 p.m. except holiday weekends.



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Historical Research Report:

The historical section of the designation report should include an explanation of the general historical context of the neighborhood and City during the period of significance and a specific description of the history of the structure during the same period of time including information on the occupants, owners and any significant events. If one of the criteria submitted for historic designation has to do with the history of the structure, justification for the application of this criterion shall also be addressed in this section of the report.

The architectural section of the report should include a statement of the structure's architectural style and justification for this determination. Also, an architectural description of the structure is required beginning with a summary paragraph that creates a rough "sketch" of the building and its site, followed by a more detailed description.

In the detailed description portion give a complete description of the building in a logical sequence. For instance, start from the ground up or describe each building elevation separately. Indicate the presence of specific features, such as porches, windows, doors and chimneys, by type, location, number, material, and condition. Include a description of important exterior decorative elements such as door surrounds, or architectural details, and significant interior features such as stairways, flooring and beams.

In the summary paragraph describe the general characteristics of the structure including its overall shape and arrangement of interior spaces, the number of stories, the construction materials, roof shape and structural system.

I HEREBY CERTIFY THAT THE INFORMATION STATED IN THE ATTACHED APPLICATION FOR HISTORIC DESIGNATION IS TRUE AND CORRECT.

Name (please print)

Signature

For use by the Office of the City Auditor and Clerk

Received

By: _____

Date: _____

Project

Address: _____

Application Number: _____



Historic Designation Application

PLEASE PRINT OR TYPE

1. Property Address and Legal Description of the Site

Address: _____

Legal Description:

2. Identify all exterior resources which are to be designated (i.e. house, garage, utility building, fountain, wall, etc.)

3. Identify all interior resources which are to be designated (Check "None" if applicable)

NONE



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4. **Period of Significance:** (Enter the dates for one or more periods of time when the property attained the significance which qualifies it for local designation. The period of significance is the length of time when a property was associated with important events, activities or persons, or attained the characteristics which qualify it for historic designation. This period generally begins with the date when significant events began giving the property its historic significance; this is often the date of construction (for example, the "Boom Times-1920-1927" or "Settlement Era 1865-1919")
-

5. **Historical and Architectural Information:** (Information about the Architect, the Builder, Year of Construction, Architectural Style and Construction Materials.)

Architect (if known):	
Source:	
Builder (if known):	
Source:	
Year of Construction:	
Source:	

<u>MATERIALS</u>	
Foundation:	
Structural System:	
Walls (exterior):	
Walls (interior):	
Chimney, Number:	<input type="checkbox"/> None
Roof Type/Materials:	
Window Type/Materials:	



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6. Current and Historical Use (Select the historic use which occurred during the period of significance noted in Question #4)

Current Use: (e.g. residential, office, garage)	
Historical Use:	
Is the structure altered?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes: DESCRIBE:	
If yes: When?	
By whom?	
Source of Information:	
Was the structure moved?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes: DESCRIBE:	
If so: When?	
By Whom?	
Source of Information:	
Have additions been made to the structure?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes: DESCRIBE:	
If so: When?	
By Whom?	



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7. **Proposed Name of Structure:** Select the name which best reflects the property's historical importance or the name that was commonly used for the property during the period of significance indicated in Question #4. Properties may be named for persons, events, characteristics, functions, or historic associations. If a property is significant for more than one person, choose the most prominent. If the persons are equally important, include as many names as appropriate. A property may be named for both the husband and wife who owned it.

Why was this name selected?



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8. To be historically designated a resource must possess integrity and qualify in at least one of the categories set forth below.

A structure, district, or site must possess integrity of location, design, setting, material, workmanship and association to be considered for historic designation. The ability of the resource to convey its historical significance with its physical appearance is one way integrity may be measured. In addition to having integrity, the resource must meet at least one of the criteria listed below. The applicant should refer to National Register Bulletin 15 "How to Apply the National Register Criteria for Evaluation", on file in the Planning & Development Division when completing this section.

Please check all categories that apply below.

Historic Structure NOT Applicable

- Exemplifies or reflects the broad cultural, political, economic or social history of the City of Sarasota, Sarasota County, the State of Florida, the United States of America; or,
- Is associated with events which have made a significant contribution to the broad patterns of our local, state or national history; or
- Is associated with the life of a person who played a significant role in State, Local or National History; or
- Embodies distinctive visible characteristics of an architectural style/period, or method of construction; or
- Represents the work of designer/builder whose work has been generally acknowledged; or
- Is a reconstructed building accurately executed in a suitable manner as part of a master restoration plan and no other building or association has survived.

Historic District NOT Applicable

- Represents a significant entity whose components may lack individual distinction; or
- Represents a geographically defined area which contains structures, sites, objects, and spaces linked historically through location, design, setting, materials, workmanship, feeling and association; or
- Represents a geographically defined entity whose individual structural components collectively convey a sense of time and place in history (which may relate to one or more periods in history).



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Signature Page

Property Owner(s):			
Property Owner Mailing Address:			
City, State:		Zip Code:	
Phone:		Fax:	
E-Mail Address:			

(Property Owners must complete a Special Power of Attorney form to allow someone to act on their behalf)

Representative:			
Representative Mailing Address:			
City, State:		Zip Code:	
Phone:		Fax:	
E-Mail Address:			

Owner's Signature(s):		Date:	
Representative's Signature(s):		Date:	



Historic Designation Application Package

SPECIAL POWER OF ATTORNEY AFFIDAVIT (NOT CORPORATION)

STATE OF FLORIDA
COUNTY OF SARASOTA

This _____ day of _____
I, _____ of _____
the owner contract purchaser of _____
(describe zoning lot(s) by address and tax PIN number and attach legal description) make, constitute,
and appoint _____
of _____ (insert address), my true and lawful attorney-in-fact,
and in my name, place and stead giving unto said _____
full power and authority to do and perform all acts and make all representations necessary, without any
limitations whatsoever, to make application for said Historic Designation Application.

The right, powers, and authority of said attorney-in-fact herein granted shall commence and be in full
force and effect on this _____ day of _____, _____ and shall remain in full force and effect
thereafter until actual notice, be certified mail, return receipt requested is received by the City of
Sarasota Planning & Development Division stating that the terms of this power have been revoked or
modified.

Signature - Owner/Contract Purchaser (circle one)

Print Name: _____

STATE OF FLORIDA
COUNTY OF SARASOTA

The foregoing Special Power of Attorney Affidavit was acknowledged before me this _____ day
of _____, _____, by _____ who is personally known to me
or has produced _____ as identification.

Notary Public
State of Florida at Large

My commission expires: _____



Historic Designation Application Package

SPECIAL POWER OF ATTORNEY AFFIDAVIT (CORPORATION)

**STATE OF FLORIDA
COUNTY OF SARASOTA**

This _____ day of _____, _____, I, _____ as
_____ (title of officer) of _____ (name of corporation),
a _____ (state of incorporation) corporation, on behalf of the corporation as
the owner contract purchaser of _____ (describe zoning lot(s)
by address and tax PIN number and attach legal description) make, constitute, and appoint
_____ of _____ (insert
address), my true and lawful attorney-in-fact, and in my name, place and stead giving unto said
_____ full power and authority to do and
perform all acts and make all representations necessary, without any limitations whatsoever, to make
application for said Historic Designation Application.

The right, powers, and authority of said attorney-in-fact herein granted shall commence and be in full
force and effect on this _____ day of _____, _____ and shall remain in full force and effect
thereafter until actual notice, be certified mail, return receipt requested is received by the City of
Sarasota Planning & Development Division stating that the terms of this power have been revoked or
modified.

Name of Corporation

By: _____
(Signature)

Print Name: _____

Title: _____

**STATE OF FLORIDA
COUNTY OF SARASOTA**

The foregoing Special Power of Attorney Affidavit was acknowledged before me this _____ day of
_____, _____, by _____ (title of officer) of
_____ (name of corporation), on behalf of the corporation. He/she is
personally known to me or has produced _____ as identification.

Notary Public
State of Florida at Large

My commission expires: _____