



Application for Historic Site or District Designation
Town of Jupiter
Department of Planning and Zoning
210 Military Trail, Jupiter, FL 33458
Phone: (561) 741-2452 ♦ Fax: (561) 744-3116

PART ONE - PROPERTY INFORMATION

Date Received: _____
Project Name: _____
Address: _____
Property Control Number: _____

Florida Master Site File # (if applicable) _____

Legal Description (attach separate sheet if necessary): _____

Future Land Use Designation: _____
Zoning Designation: _____

Existing Use of Property: _____

Proposed Use of Property: _____

PART TWO - APPLICANT INFORMATION

APPLICANT

Name: _____
Address: _____ City: _____ Zip: _____
Telephone #: _____
Fax #: _____

E-mail: _____

AGENT

Name: _____
Address: _____ City: _____ Zip: _____
Telephone #: _____
Fax #: _____
E-mail: _____

OWNER (if other than applicant)

Name: _____
Address: _____ City: _____ Zip: _____
Telephone #: _____
Fax #: _____
E-mail: _____
Applicant is: Owner _____ Lessee _____ Other _____

PART THREE – HISTORIC SITE OR DISTRICT INFORMATION

A. Type of Designation

1. Historic Site _____
2. Included in a Historic District _____ Name of District _____

B. History

1. Architect/Builder _____ Construction Date _____ Circa _____
2. Alterations Date _____ Type/Location _____
3. Additions Date _____ Type/Location _____
4. Moved Original Location _____
5. Original Use(s) _____ Present Use(s) _____

C. Description

1. Style _____ Structural System _____ Stories _____
2. Foundation _____ Foundation Materials _____
3. Roof Type _____ Roof Materials _____
4. # of Porches _____ # of Chimneys _____ Overall Condition _____

D. Historic Designation Report Format

Attached with this application is an Instructions *and Format for Completing a Historic Designation Report* document. Included in this document is a copy of Chapter 27, Article X., Division 35., Section 27-1675.9 of the Town Code, which pertains to historic resource designation procedures. The criteria for designation [Section 27-1675.9(2)] are

specific and should help in preparing a designation report. Designation reports should be submitted on 8 ½ “ x 11” paper. Do *not* include original documents, submit copies only.

PART FOUR – REQUIRED SIGNATURE INFORMATION

My signature on this document affirms that I understand and will comply with the provisions and regulations of the Code of the Town of Jupiter, Florida. I further certify that all the information contained in this application and documentation submitted herewith is true to the best of my knowledge and belief. Further, I understand that the application, attachments and review fees become part of the official records of the Town of Jupiter and are not returnable.

Signature(s) of applicant(s) **Date**

Signature of agent **Date**

Signature(s) of property owner(s)* **Date**

PLEASE PROVIDE THREE (3) COPIES OF THIS APPLICATION, THE DESIGNATION REPORT, AND ALL SUPPORTING INFORMATION IN COLLATED SETS.

A \$180.00 APPLICATION FEE MUST BE INCLUDED WITH A HISTORIC SITE OR DISTRICT DESIGNATION APPLICATION. IN ADDITION, A \$1,800.00 ESCROW ACCOUNT FEE IS REQUIRED WITH THIS APPLICATION. THE ESCROW FEE COVERS THE COST OF HAVING THE APPLICATION REVIEWED BY THE TOWN’S HISTORIC PRESERVATION CONSULTANT AND ANY ADVERTISING AND MAILING COSTS.

If you have any questions regarding this form or the attached preservation provisions of the Town’s Historic Resources ordinance, please contact David Kemp, Principal Planner at (561) 741-2452.

K:\Staff\WP51\Historic Resources\Applicationforms\HistoricDesignationApplication.doc

* **REQUIRED if statement of authority is not attached with application.**