

TOWN OF ODESSA

Application for Certificate of Historic Appropriateness

Applicant/Property Owner: _____ Date: _____
Name: _____ Telephone: _____
Address: _____

Property Location:
Street Address: _____
Parcel Number: _____
Historic Register Identification Number: _____

Please attach a photograph

Permitted Use Being Requested:

Proprietor, if other than property owner; description of use, location within structure, location of parking (shown on site plan), drawing and placement of signage (including measurements)

FOR TOWN USE ONLY:

Meeting Date : _____
Historic Recommendation: _____

X _____ Date: _____
Chairperson Signature